triennial screening guidelines. All women undertook self-collection and the majority of women reported high perceived acceptability, safety, and accuracy of HPV self-collection. HPV 16/18 positivity was 7.6%, with 40% co-infected with HIV. Overall HIV prevalence was 16.4%, however, over 25% of women had unknown HIV status based on medical chart review.

**Conclusion** HPV self-collection was highly acceptable as part of community-based integrative reproductive health services. Despite being a traditionally underserved population, and women self-reporting being overdue for screening, over half the women were up to date on cervix screening, albeit regular screening was lacking for many. The findings from this feasibility study will inform future implementation of HPV self-collection to improve and maintain regular cervix screening services in street entrenched women.

**Disclosure** No significant relationships.

**P698 COMPREHENSIVE HEALTHCARE INTERVENTION FOR FEMALE SEX WORKERS IN ETHIOPIAN STI CLINICS: EXPERIENCE FROM MEKELLE UNIVERSITY**

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**Background** Evidence suggests that the presence of untreated sexually transmitted infections (STIs) increases the chance of HIV transmission during unprotected sex. In the Ethiopian context, many female sex workers live in poor conditions in rented slums and are not typically known or recognised by local authorities, making them unable to access health facilities.

**Methods** Data were obtained from a register of female sex workers recorded for purpose of service provision at confidential STI clinics in Mekelle and Adigrat, Ethiopia, from May 2010 to August 2015 and from May 2011 to August 2015, respectively. A simple descriptive analysis of services delivered to patients was performed.

**Results** Among the 6288 patients included in this study, the prevalence of STIs was 23.4%. Of these, 12.9% (814/6288) of patients presented with vaginal discharge, 7.9% (490/6288) with genital ulcers and 2.3% (158/6288) with lower abdominal pain (as per the WHO syndromic approach to STIs). Moreover, 180 cases of genital ulcer were tested for syphilis with the VDRL test; 36 (20%) tested positive for active infection. The HIV prevalence declined from 10% in 2010 to 1.1% in 2015. The frequency of STIs amongst repeat patients was considerably lower than that in new presentations.

**Conclusions** HIV prevalence declined from 10% in 2010 to 1.1% in 2015. Compared to new cases, the frequency of STIs among repeat clients was extremely low, suggesting that the cumulative effect of peer promotion and preventative sexual health education is effective in reducing the rates of STIs among vulnerable populations. Clinic and workplace geography, hours of clinic operation, confidentiality and peer outreach are important factors in the prevention and control of STI/HIV infection in key sex worker populations. A comprehensive clinic intervention enhances early diagnosis and treatment of STIs and increases the proportion of sex workers accessing HIV treatment services.

**Disclosure** No significant relationships.

**P699 ROLE OF MANAGEMENT IN ENHANCING EFFICIENCY OF FEMALE SEX WORKERS HIV PROGRAMS IN NIGERIA**


**Background** HIV is high among female sex workers (FSW). Community-based organizations (CBOs) staff and volunteers, deliver HIV services to FSWs. One overlooked avenue for enhancing efficiency in delivery of services is good personnel management. This study was done to understand challenges faced by CBO staff during service delivery and management practices hindering their output.

**Methods** Qualitative methods were used in this study. Staffs and volunteers from 9 CBOs in three states, Abuja, Lagos and Nasarrawa participated in the study. States were selected using convenience sampling. Journals were distributed to CBO staff to document their daily challenges for 3–6 weeks. After 6 weeks, we collected 23 journals, read entries and conducted 6 non-participant observations and 31 key informant interviews. Information from the completed journals, interviews and observations, were grouped into themes to reveal insights. Using these insights, we conducted brainstorming sessions with CBOs to generate problem-solving ideas. The most relevant ideas were tested in focus groups.

**Results** The study revealed that CBOs provide HIV services as agreed with donors. They did not solicit and implement feedback from volunteers. Instituting feedback mechanisms will make CBO personnel feel relevant and serve as an avenue for harvesting solutions to challenges in service delivery. The study showed that FSW peer session schedules change constantly and volunteers find it difficult to communicate changes to CBO staff resulting in poor supervision. Poor supervision affects the quality of services volunteers provide. Therefore, ensuring communication within CBO personnel, will improve coordination of activities and quality of HIV services delivered. Finally, while CBOs have systems in place to reward personnel, these systems were underutilized and not incentivized. If reward systems for best practices are rejuvenated, it will motivate personnel.

**Conclusion** Good personnel management can enhance FSW HIV programs. Feedback mechanisms, communication and reward systems are tools that will ensure efficient delivery of HIV prevention services.

**Disclosure** No significant relationships.

**P700 UNINTENDED PREGNANCY AMONG FEMALE SEX WORKERS IN MEKELLE CITY, NORTHERN ETHIOPIA: A CROSS-SECTIONAL STUDY**

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**Background** Unintended pregnancy is a significant public health concern in the world. Particularly, female sex workers are exposed to the risk of unintended pregnancy, abortion and