primary KI (PWIDs, bunk owners etc.) validated information collected during L1.

**Results** The study identified 3837 PWID spots in 10 states. The total size estimate for all PWIDs is 49,876 while the size of female PWIDs is 11,031 across 10 states. Oyo state had the highest number of PWIDs (all) with an estimate of 14,741, followed by Kaduna 9,232, Kano 6,859 and Gombe 6,577. However for female PWIDs, Kaduna state had the highest 3,340, followed by Oyo 2,711, Abia 1,180 and Gombe 1,028.

**Conclusion** Through this study, Nigeria can plan and implement integrated HIV/Reproductive health services, where female PWIDs are located.

**Disclosure** No significant relationships.

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**P803** ASSESSING CORRECT KNOWLEDGE AND POSITIVE ATTITUDE TOWARDS HIV/AIDS TRANSMISSION HOMELESS WOMEN IN INDIA

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**Background** Despite a significant reduction in the prevalence of HIV in India in the recent past, India’s HIV epidemic contributes significantly to the global epidemic. The homeless women are highly vulnerable to risky sexual behavior and its negative health consequences due to adverse conditions of street life. This study attempted to understand the familiarity of term HIV/AIDS, correct knowledge about the modes of transmissions, and ways of prevention.

**Methods** The study used the data that was collected from 300 homeless women both from those living in night shelter and those living outside in Delhi in 2015. A structured questionnaire was used to collect various information related to knowledge and attitude towards HIV/AIDS. Correct knowledge was assessed using 8 items, while the attitude towards HIV/AIDS assessed using 6 preventing measure related questions. The score of knowledge index varies from 0 to 8 and categorized as not heard about HIV/AIDS (0), low (1–4), average (5–6) and high (7–8). Similarly, the score of attitude index varies from 0 to 6 and categorized as not heard about HIV/AIDS (0), negative attitude (1–3) and positive attitude (4–6).

**Results** Majority of the homeless women (64%) are not familiar with the term HIV/AIDS. Of 300 homeless women, 5.3% had high knowledge, while 18% had average and 12.7% had low. Majority of the respondents were not able to report the correct answers on specific questions on HIV/AIDS transmission. Similarly, only 7% had a positive attitude and 29% had a negative attitude towards HIV/AIDS.

**Conclusion** Though there are already many organizations, Government and donors are working with the homeless women for better development and quality life in Delhi, it is equally important to address the critical issues like knowledge about risky sexual behaviour and the attitude towards prevention of HIV/AIDS as many of the homeless women often indulge in risky sexual behaviour.

**Disclosure** No significant relationships.

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**P804** BEHAVIORAL RISK FACTORS FOR SEXUALLY TRANSMITTED INFECTIONS AND HEALTH-SEEKING BEHAVIOR OF HOMELESS WOMEN IN DELHI, INDIA

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**Background** The homeless women living in street areas especially in metro cities like Delhi are the most vulnerable population groups as they don’t have privacy and also don’t have self-dignity to express their healthy sexual and reproductive health. There are no explorative studies available in the literature on sexual and reproductive health among homeless women. In this context, this research is attempting to understand the behavioral risks for STIs and health-seeking behaviour among the homeless women in Delhi.

**Methods** Primary data was collected to explore the sexual and reproductive health among the homeless women above 15 years living in Delhi in 2015. A total of 300 homeless women were interviewed on sexual and reproductive health. As this study is explorative, both quantitative and qualitative methods of data collection was used.

**Results** About one-third, homeless women had intercourse before the age of 13 years and 85% had before age of 18 years. Two-third women reported the first intercourse happened forcefully and only 12% of women used a condom at that time. About 10% of women had sex with multiple partners in the last six months. Use of a condom during sex is not common women as only 40% ever had used a condom. As reported by the respondents, sex without concern, lack of information and lack of accessibility for a contraceptive method emerge as the major reasons for not using a condom during sex. About 40% were suffered from STI at the time of the survey.

**Conclusion** This research explored the sexual behavior and condom use to avoid unwanted pregnancy as well as to avoid STI. The treatment-seeking behaviour for RTI/STI was found to be very low. The study suggests that it is necessary to make awareness of the benefits of protected sex and also condoms should be distributed frequently homeless women to have protected and healthy sexual life.

**Disclosure** No significant relationships.

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**P808** CORRELATES OF SEXUALLY TRANSMITTED INFECTIONS SYMPTOMS AMONG MALE PRISONERS IN IRAN, 2013: A NATION-WIDE SURVEY

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**Background** HIV prevalence among prisoners is over eight times higher than that of the general in Iran. Considering that sexually transmitted infections (STIs) increase the susceptibility to HIV infection, this study estimates the prevalence and correlates of STI-related symptoms among prisoners in Iran.