## **PDE0305**

## Implementation of the "First Friendly Practice for Trans-Female People" at Arzobispo Loayza National Hospital. A public-private partnership, Lima, Peru 2019

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**Background:** Trans-gender population is considered at high risk for HIV infection due to multiple factors.

AHF Peru works with trans-female population since 2013, and since 2017, has implemented a "friendly" external consultant for Transfemale patients at Arzobispo Loayza National Hospital (HNAL), with a high impact in the attention of the HIV Trans-Female population.

**Methods:** A cross-sectional, retrospective and descriptive study, evaluates the impact of this intervention in the quality of the attention of the Trans female population in Peru.

The work was executed through II phases of implementation:

Phase I: Approach of the female trans population to the friendly service considering a trans female hostess , support with diagnosis and timely linkage to HIV positive through a trans linker, provision of hormones, ensuring a comprehensive health system to 100%.

Phase II: The trans-female population of Phase I, replicated the intervention and expanded the population by adding the approach to the system, HNAL assumed 100% of the cost of the hormonal treatment.

 ${\bf Results:}~{\rm Before~the~start~of~this~project,~only~06~Trans~female~person}$  were attended in the HNAL in the period of one year.

Since the start of the implementation of consultant, there was an increase of around 3000% (182) in the number of patients. 87 (48%) were detected as reactive to HIV.

After 10 months of starting care at the "First Friendly Practice for Trans-Female People", the MoH made the purchase and delivery of hormones to the HNAL. Currently, the hormone treatment is guaranteed for free for all female transwomen.

**Conclusions:** Adapting the offer of a differentiated and friendly practice for the trans-female population, identifying their needs and values their health priorities, generates confidence and approach of female Trans population to the health system.

## PDE0306

## 'MTV Shuga': Can mass media communication HIV prevention and sexual health in adolescent girls and young women in rural South Africa?

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**Background:** Adolescent girls and young women (AGYW) in South Africa are at high risk of HIV and early pregnancy. MTV-Shuga, a mass-media edu-drama, improved some sexual health outcomes in a randomized trial amongst young people in Nigeria. We used a national free-to-air TV screening of MTV-Shuga (the "Down South" series), concurrent with the roll-out of a large scale-up of combination HIV prevention for AGYW ("DREAMS"), to test the hypothesis that massmedia edu-drama can improve the sexual health of AGYW in a rural and resource-constrained area of KwaZulu-Natal was evaluated.

**Methods:** We followed a representative population-based prospective cohort of females aged 13 to 23 (between May 2017 and September 2019). We measured the relationship between exposure to MTV-Shuga (i.e. reported seeing  $\geq 1$  of 24 episodes; able to recall any storyline) and incident HSV-2; incident pregnancy; condom use at last sex; uptake of HIV-testing and contraception; and awareness of HIV Pre-Exposure Prophylaxis (PrEP).

**Results:** Of 2184 (85.5%) eligible participants that were surveyed at baseline, 2016 (92.3%) had at least one follow-up visit. MTV-Shuga exposure at baseline was low – 308 (14.1%) reported seeing  $\geq$  1 episode and 121 (5.5%) recalled any storyline. Teenage pregnancy and incident HSV-2 were high: 9.1 (95% Cl: 9.2 to 11.4) and 15.3 (95% Cl: 13.5 to 17.3) per 100 person-years respectively. MTV-Shuga exposed AGYW were from wealthier households, urban areas, and more likely to have been received DREAMS interventions (all p < 0.001). After adjusting for these confounders, watching MTV-Shuga was associated with significantly greater awareness of PrEP (aOR = 2.06, 95% Cl: 1.57 to 2.70), contraception uptake (aOR = 2.08, 95% Cl: 1.45 to 2.98), consistent condom use (aOR = 1.84, 95% Cl: 1.24 to 2.93), and lower probability of early

