**Interim report**

**Date of sending out the form:**
Friday, March 15, 2019

**Contact person/applicant:**
Larisa Suturina

**Country**
Russia

**E-mail**
lsuturina@mail.ru

**Title of the granted project**
Stigma and discrimination of Siberian people living with HIV(PLHIV) by Ob&Gyn specialists and discrimination-reduction programming.

**Amount granted by the ESC (in euro)**
6400

**Initial funding (part of the grant received already) in euro:**
4800

**Final amount to be paid by ESC (in euro):**
1600

**Project number:**
P-2017-B-03

**Allocated mentor:**
Dr. Paula Baraitser

**Date project actually started:**
Monday, March 12, 2018

**Planned date of completion:**
Monday, September 16, 2019

**Have there been any problems or issues with starting or continuing this project? If so, what impact will that have on your planned completion date?**

During the study, we have faced with the problem of inconsistency of the official lists of specialists employed in the obstetric and gynecological service. The significant number (about 20%) of potential participants were counted twice due to a part-time work in another institution. It has influenced the number of recruited persons.

**Have you discussed the project status and any problems with your Mentor?**
Please provide a synopsis of your findings and data so far (max 500 words)

The objective of the project is to decrease stigma and discrimination of PLHIV by Ob&Gyn specialists in Eastern Siberian health care settings. As a first step, we have carried out an adaptation of the Questionnaire for doctors and nurses’ views on people living with HIV/AIDS (QV-PLHIV) and Comprehensive Health Staff Questionnaire (for sentinel surveillance) (CHCQ) as well as a validation of its versions for the Russian-speaking audience. On the sample of 250 medical specialists (doctors and nurses) we performed the procedures to investigate the compliance with the content validity, criteria validity, reliability and reproducibility. The results suggest that the levels of reliability of the Russian-language versions of the QV-PLHIV and CHCQ were sufficient with Kronbach's alpha estimated as 0.72 and 0.77, respectively. The high levels of validity of both methods were also confirmed by means of correlation of the results obtained using these methods. All the above has allowed us to use these methods in the study. As a second step, 305 healthcare workers (mean age 34.4 years), predominantly female (83.6%), mainly doctors (59.9%), have been interviewed. The level of awareness of a significant part of health workers regarding HIV issues was estimated as low. Up to 20% of health workers either believed HIV is curable, or were not sure about it. 12.5% were unaware of mother-to-child transmission of HIV. Up to 7.2% considered mosquitoes to be HIV carriers. Up to 4.2% suggested that HIV can be transmitted through domestic contact. Study results demonstrated that 61.9% of medical workers believe that people living with HIV (PLHIV) are irresponsible and do not care that they can infect others. Up to a quarter of health workers believe that PLHIV should be embarrassed about their status, and HIV infection is associated with immoral behavior, 9.6% support sterilization of women with HIV and 11.7% think that PLHIV should not have children. At the same time, there were significant differences between doctors and nurses: doctors, unlike nurses, most likely were disagree that PLHIV do not care about the possibility of infecting others (z = 2.9, p <0.03) and believe that they should not be ashamed of their status (z = 3 , 1, p <0.02). In general, controversial answers were given by subjects to questions reflecting their attitude towards PLHIV. On the one hand, the interviewed doctors and nurses do not refuse to help PLHIV, but, on the other hand, they rather do not want to interact with PLHIV outside of the professional context. It was also shown that health care practitioners previously trained on PLHIV care are unlikely to demonstrate negative attitudes. Thus, we can conclude that additional training of health workers can prevent stigmatization of PLHIV or, at least, reduce it's level.

Please provide a current budget on how much you have spent to date. Receipts may be requested.

As it was planned, we have spent a total amount of 4800 € to cover the expenses for the development of the study protocol, development of a database in RedCap, organization and management, and for costs associated with interviewing and statistical analysis.

Add any other information you feel we should have at this stage.

We have already created 2 educational programmes for healthcare professionals (“Standart course” and “Training for trainers”) to use in 2 random health care settings (with pre-test and post-test to estimate the efficacy of interventions). The final part of ESC grant will be used for this part of project.

Full Name
Larisa Suturina

Date
Friday, March 15, 2019

Questions? ESC Central Office: info@escrh.eu / Tel. 0032 2 582 08 52

Once received and assessed, you will be contacted regarding the final payment.

Type a question
info@escrh.eu