include demographic data, maternal reproductive history, source of referral, level of education, and contraceptive method uptake. Three data abstractors were trained and supervised by a fellow from Columbia University. Stata was used for data cleaning and analysis.

Findings: Over half (56%) of new clients accepted a LARC method. The mean age among LARC acceptors was 27.7 +6.7 and the mean parity was 4.9 +2.8. Implants, both Implanon and Jadelle, were the most commonly accepted method of LARC, while injectable contraception (DMPA) was the most commonly used short-acting method. Maternal parity of three and above was significantly associated with uptake of a LARC (p<0.01) method compared to a short-acting method. Village of residence, age, and educational level were not significantly associated with LARC uptake.

Interpretation: Women encounter multiple challenges during conflict and displacement, including limited availability and access to reproductive health services. When available, use of contraceptives, notably LARCs, is high among women of reproductive age in conflict settings like North Kivu, DRC. Attention to partnership with the Ministry of Health and building the clinical skills of midlevel health providers are critical to ensuring access to a range of contraceptive methods and reproductive services for women during conflict and displacement.

Source of Funding: Save the Children.

Abstract #: 1.012_WOM

Nutritional Status of Schoolchildren in the Amazon Rainforest Interior of Multi-ethnic Suriname: the Influence of Age, Sex and Ethnicity

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Background: Adequate nutrition is critical for normal development during childhood. The nutritional status of schoolchildren living in the interior Suriname, South America, is of growing concern to the Medical Mission Primary Health Care Suriname (MM), that provides health care in this region. This study aims to evaluate the nutritional status of these schoolchildren.

Methods: MM 2015 interior schoolscreening data on height, weight and demographics of all schoolchildren aged 4-14 years was used in this cross-sectional retrospective study. Malnutrition was defined as BMI <-2SD and stunting as height-for-age z-score <-2SD. Potential determinants of malnutrition and stunting: age, sex and ethnicity, were assessed using logistic regression analysis.

Findings: Of 3.863 schoolchildren, 51% were young (4-8 years), 49% older (9-14 years), 50% male, and 82.6%, 15.3% and 2.1% were of Maroon, Amerindian, and mixed ethnicity respectively. 5.4% of the schoolchildren were malnourished and 9.2% were stunted, including 1.6% who were severely stunted (<-3SD). In

multivariable analysis, younger age (OR 1.8; 95% CI 1.4-2.4) and Maroon children (OR=2.2; 95% CI 1.3-3.8 compared to Amerindians) were more often malnourished, sex was not of influence. Boys (OR=1.7; 95% CI 1.4-2.2), older children (OR 1.4; 95% CI 1.1-1.8) and Amerindians (OR=2.4; 95% CI 1.8-3.0 compared to Maroons) were more often stunted.

Interpretation: 5.4% of Suriname's interior schoolchildren are malnourished and 9.2% are stunted. Younger and Maroon children were more often malnourished, whereas older children, boys and Amerindians were more often stunted. Future studies are needed to determine causes of malnutrition and stunting and may support adaptation of MM schoolchildren nutrition programs.

Source of Funding: None.

Abstract #: 1.013_WOM

Understanding the Relationship between Violence against Women-related Laws and Perceptions of Intimate Partner Violence among Women in Brazil

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Background: In March 2015, Brazil passed anti-femicide legislation to criminalize gender-motivated killings of women and stiffen existing penalties for perpetrators of violence against women (VAW). It is important to understand the impact of such laws on individual and community attitudes, perceptions, and experiences of intimate partner violence (IPV), a common form of VAW. The aim of this study was to examine community perceptions and individual experiences of intimate partner violence (IPV) - one form of violence against women (VAW) - from the perspectives of women.

Methods: An original in-depth interview (ISI) guide was developed for qualitative data collection among users of the public health system in Santo André, Brazil. Eligible participants included who were 18 years or older, identified as women, and resided in the Santo André municipality. 30 IDIs were conducted among women seeking health services in three public health posts; women were asked about individual and community experiences of IPV, satisfaction with health care services and opinions of VAW legislation. Data were coded and inductive thematic analysis conducted using MAXQDA 12.

Findings: Preliminary analyses were conducted to assess the willingness of women to receive IPV screening and intervention in healthcare settings in Santo André, Brazil. Women cited daily news on VAW reinforcing that it is a major issue; several shared personal experiences of IPV and VAW. Most were familiar with the Maria da Penha law (2006) though few believed it was effective or comprehensive. No women recalled the anti-femicide law (2015) or knew of the local Secretariat for Women's Policies. There were mixed feelings about the health sector and how it might best support women experiencing IPV.

Interpretation: Despite easy identification of IPV and VAW as important social problems, women were mixed on the role that