

Abstract O2-S5.01 Table 1 Multivariate relations of HIV risk with social capital (components) in Mumbai and Ahmedabad

Scale	Casual partners		Sex with commercial sex worker		Condom use with CSW	
	Model 1 OR (CI)	Model 2 AOR (CI)	Model 1 OR (CI)	Model 2 AOR (CI)	Model 1 OR (CI)	Model 2 AOR (CI)
<b>Mumbai</b>						
BO_community sense (low)	0.53 (0.32 to 0.86)	0.78 (NS)	0.31 (0.17 to 0.60)	0.47 (0.24 to 0.92)		
BR_participation (low)	1.97 (1.19 to 3.27)	1.90 (1.13 to 3.19)	1.60 (NS)	1.71 (NS)		
LI_personal trust in services (low)	2.33 (1.31 to 4.15)	2.39 (1.29 to 4.44)	2.45 (1.08 to 5.52)	2.84 (1.23 to 6.54)		
LI_reciprocal trusting relations with services (low)		2.18 (1.11 to 4.28)	2.96 (1.11 to 7.83)	3.10 (1.16 to 8.31)		
Married or not (ref: married)						0.16 (0.04 to 0.69)
No. of working days in a month (ref: low)						3.83 (1.31 to 11.2)
Income (ref: low)		1.67 (1.25 to 2.23)		1.84 (1.26 to 2.67)		
Income steady/fluctuating (ref: fluctuating)		1.93 (1.08 to 3.45)				
Mode of salary receipt (daily)				1.39 (1.07 to 1.82)		
<b>Ahmedabad</b>						
BO_differences in community (low)				2.34 (1.34 to 4.11)	4.65 (2.39 to 9.02)	6.71 (3.31 to 13.6)
BO_personal trust and help (low)	0.36 (0.23 to 0.57)	0.36 (0.23 to 0.58)	0.37 (0.19 to 0.72)	0.30 (0.15 to 0.62)	0.29 (0.14 to 0.61)	0.28 (0.13 to 0.64)
BO_generalized trust & help (low)	1.96 (1.34 to 2.87)	2.03 (1.36 to 3.03)	2.68 (1.59 to 4.51)	3.35 (1.88 to 5.98)	3.38 (1.83 to 6.23)	4.04 (2.14 to 7.62)
BR_generalized trust & help (low)			2.00 (1.17 to 3.42)	1.90 (1.07 to 3.37)	2.51 (1.26 to 4.99)	2.61 (1.27 to 5.37)
Living with wife or alone (ref: with wife)		1.77 (1.45 to 2.17)		2.42 (1.76 to 3.33)		2.50 (1.73 to 3.61)
Nature of job (ref: daily wage)		1.49 (1.21 to 1.82)				
No. of working days in a month (ref: low)				2.77 (1.12 to 6.88)		
Income (ref: low)				1.66 (1.14 to 2.43)		1.90 (1.22 to 2.96)
Income steady or fluctuating (ref: steady)		1.78 (1.26 to 2.51)		1.91 (1.18 to 3.10)		2.31 (1.29 to 4.14)
Mode of salary receipt (daily)				68 (0.48 to 0.96)		0.61 (0.43 to 0.88)

The table has results from the final logistic regression models. The low, medium and high category of social capital were treated as categorical categories and high social capital category for each component was selected as the reference category. Model 1: Social Capital Domains Only; Model 2: Social Capital Domains and Co-factors. Only significant associations shown here. High value of social capital measures is the reference category. BO, Bonding social capital; BR, Bridging Social Capital; LI, Linking social capital.

capital. In Ahmedabad, bonding social capital at high levels was associated with lower risk behaviour while linking social capital at high level was associated with higher risk. On the other hand, high levels of bridging social capital and components of bridging social capital were protective of HIV risk in both the cities see Abstract O2-S5.01 table 1.

**Conclusion** This study was able to explore the mediating effect of social capital on migrants' HIV risk at the domain levels. Bridging kind of social capital with the host community and migrants from other states was associated with lower HIV risk behaviour. Further research should be undertaken in different epidemiological contexts to validate the findings of this study.

**O2-S5.02 THE ASSOCIATION BETWEEN ALCOHOL USE AND HIV SEXUAL RISK BEHAVIOURS**

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**Background** This study aimed to investigate the associations between alcohol use and sexual risk behaviour in migrant men and women living in Johannesburg.

**Methods** 1465 men and 1008 women living in six hostels and five neighbouring informal settlements respectively were surveyed. Using logistic regression, the association between five measures of alcohol use (current alcohol consumption, frequency of drinking, drunk in the past week, daily alcohol consumption, drinking habit) and five sexual risk behaviours (transactional sex, inconsistent condom use, coercive sex, multiple sexual partners and concurrency) in men and women was assessed.

**Results** More men than women reported current alcohol use (42% vs 12%). Among current drinkers, 23% of men and 29% of women reported being drunk in the past week. Consistent condom use was low in both men and women (6%). More men (53%) than women (7%) reported multiple sexual partnerships. In men, frequent drinking (Adjusted OR [AOR] for upper category: 3.1, 95% CI: 1.7% to 5.5%) and being drunk in the past week (AOR: 3.3, 95% CI: 1.8% to 6.0%) were associated with coercive sex. Frequent drinking (AOR for upper category: 1.5, 95% CI: 1.1% to 2.2%) and being drunk (AOR: 2.0, 95% CI 1.4% to 3.0%) was also associated with multiple sexual partnerships. In women, frequent drinking (AOR for upper category: 3.0, 95% CI: 1.0% to 8.9%) and being drunk in the past week (AOR: 3.4, 95% CI: 1.3% to 9.4%) were experiencing coercive sex. Alcohol use did not appear to influence reported condom use.

**Conclusions** Alcohol use was associated with several high-risk sexual behaviours in both men and women. Future HIV prevention interventions should focus on the associations between alcohol, partner violence and HIV risk.

**O2-S5.03 SEX, DRUGS AND STRUCTURAL INTERVENTIONS: UNSTABLE HOUSING ASSOCIATED WITH INCREASED HIV RISK BEHAVIOUR IN A COHORT OF PEOPLE ON TREATMENT IN BRITISH COLUMBIA, CANADA**

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**Background** Unstable living conditions may increase risk for HIV exposure and transmission. This analysis examines housing as a