The network formed only one component (fragmentation = 0): all SU and venues in the network were interconnected. The sexual affiliation network has a clear core-periphery structure, with a core of highly connected SU (n = 16) and venues (n = 7).

SU characteristics were generally not statistically significantly associated with the number of websites or clubs frequented, except for the following three: swinging years, group sex, and drug use.

Drug users had a significant stronger tendency to visit websites than non-drug users, and also had a strong tendency to frequent websites more than clubs.

Conclusions The analysis of sexual affiliation networks has an important added value to conventional STI epidemiology, because the last does not assess the direct relations between actors and mechanisms of clustering. Furthermore our results show that all swingers in the network were interconnected through their affiliations and therefore STI can eventually reach everyone. Interventions that focus on the prevention of drug use should be directed to visitors of websites instead of clubs.

**P4.024**

### FACTORS CONTRIBUTING TO HIV SEROCONVERSION AMONG WOMEN IN PRIMARY RELATIONSHIPS IN UGANDA - THE WOMEN’S PERSPECTIVE


B Mpairwe, Joint Clinical Research Centre, Kampala, Uganda

**Background** This study describes the existing socio-economic and behavioural factors that contributed to the risk of HIV seroconversion among women in the HC-HIV study in Uganda.

**Methods** It was a descriptive cross sectional study looking at socio-economic and behavioural factors that contributed to HIV seroconversion among women. The study used both qualitative and quantitative data collection methods.

**Results** Almost a third of these women had separated within six months to seroconversion. Twenty nine women (30.21%, n = 96) seroconverted after separating and picking on a new sexual partner within six months to seroconversion. Polygamy accounted for almost a third (31.25%) of marriages. In total (42.71%, n = 96) of the women reported having multiple sexual partners at the time of seroconversion. Twenty three women said that existing financial pressures influenced their decisions on how to get additional financial support and (75.91%, n = 23) of these women say they picked on a new sexual partner for financial support. Having more than one sexual partner, mean age 25 yrs (Standard deviation 5.02), having one sexual partner, mean age 28yrs (Standard deviation 5.60), P = 0.0043. A third of women with no education had more than one sexual partner, 57.78% for those with primary education, 30% for those with secondary education and 25% for those with tertiary education. P = 0.085. Women not employed and were housewives were 51% less likely to have multiple sexual partners (OR 0.4501449, CI 0.191103 – 1.323636, P = 0.139).

**Conclusions** There was a close relationship and inter linkage between the factors. In low income countries like Uganda, where education and economic empowerment is still low, and financial as well as cultural dependence of women on their partners is the norm, some women would rather risk seroconversion than lose their only available socio-economic security/their spouses.