

Form Approved:
OMB No. 0920-XXXX
Expiration Date: XX/XX/XXXX

National HIV Behavioral Surveillance System: Eligibility Screener

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National HIV Behavioral Surveillance System: Eligibility Screener

AUTO1. NHBS Round ____

AUTO2. NHBS Cycle ____ (1=MSM; 2=IDU; 3=HET)

AUTO3 Date of Interview: ____/____/_____
(M M / D D / Y Y Y Y)

AUTO4. Time Begin ____:____ 1AM 2PM

INT1. **Interviewer ID** ____

INT2. **Enter City** ____

FOR NHBS-MSM, ENTER INFORMATION FOR INT3-INT9, THEN SKIP TO SAY BOX BEFORE ES1

INT3. **Interviewer:** Is this a Same Day Interview or an Other Day Appointment?
Same Day Interview..... 1 **→ Go to INT4**
Other Day Appointment..... 2 **→ Go to INT7**

Same Day Interview

INT4. **Survey ID** ____

INT5. **Venue ID** ____

INT6. **Event Number** ____ **→ Skip to Say Box before ES1**

Other Day Appointment

INT7. **Enter the Survey ID from respondent's appointment card. (If unknown, ask your field supervisor for a new Survey ID number.)**

INT8. **Enter the Venue ID number from the respondent's appointment card. (If unknown, refer to the Recruitment Events List.)**

INT9. Enter the Event Number from the respondent's appointment card. (If unknown, refer to the Recruitment Events List.)

_____ → Skip to Say Box before ES1

FOR NHBS-IDU AND NHBS-HET, ENTER INFORMATION FOR INT10-INT12

INT10. Survey ID _____

INT11. Field Site ID _____

INT12. Interviewer: Is the participant a seed?

No..... 0
Yes..... 1

FOR ALL NHBS CYCLES

SAY: I'd like to thank you again for your interest in this health survey. Remember that all information you give me will be kept private and I will not ask for your name. First, I will ask you a few questions about yourself and then the computer will determine if you have been selected to participate in the health survey.

ES1. What is your date of birth?

[Refused = 77/7777, Don't know = 99/9999] (M M / D D / Y Y Y Y)

Confirmation Message: So, you are [insert calculated age] years old. Is that correct?

If Respondent is under 18 years old:

Interviewer: Thank you for answering these questions. Unfortunately, the computer has not selected you to participate in the health survey. Thank you again for your time.

ES2. During 20xx, did you already complete at least part of the health survey that *[Insert Project Name]* is conducting? It could have been here or at another location.

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

ES3. Do you consider yourself to be Hispanic or Latino/a?

- No..... 0  *Skip to ES4*
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9  *Skip to ES4*

ES3a. What best describes your Hispanic or Latino ancestry?
[CHECK ALL THAT APPLY.]

- Mexican..... 1
- Puerto Rican..... 2
- Cuban..... 3
- Dominican..... 4
- Other (*Specify*.....)..... 5
- Refused to answer..... 7
- Don't know..... 9

ES4. Which racial group or groups do you consider yourself to be in? You may choose more than one option. *[READ CHOICES. CHECK ALL THAT APPLY.]*

- American Indian or Alaska Native..... 1
- Asian 2
- Black or African American 3
- Native Hawaiian or Other Pacific Islander..... 4
- White 5
- Some other race (*Specify*.....)..... 6
- Refused to answer..... 7

ES5. What county do you currently live in? _____
 (List of eligible counties on computer)

IF "OTHER" COUNTY CHOSEN SPECIFY, THEN SKIP TO ES6.

ES 5a. How long have you been living in [say project area]?

Months ___ ___
 Years ___ ___
 [Refused = 77, Don't know = 99]

FOR NHBS-MSM, SKIP TO ES8
FOR NHBS-IDU, SKIP TO ES9
FOR NHBS-HET, ASK ES6 - ES7b, THEN SKIP TO ES9

ES6. What zip code do you live in?
 [Refused = 77777, Don't know = 99999] _ _ _ _ _

ES7. **SHOW RESPONDENT THE MAP** (example provided at end of this document)
 Please take a look at this map. Can you point to the area where you live?

Interviewer: Enter area # _____
 (Refused= 77777, Don't know= 99999)

ES7a. IF RESPONDENT IS A SEED (INT12=1)
Interviewer: Does participant live in a Target High Risk Area?
 No 0
 Yes 1

ES7b. IF RESPONDENT IS NOT A SEED (INT12=0)
Interviewer: Does participant live in a High Risk Area?
 No 0
 Yes 1

FOR NHBS-MSM

- ES8. What was your sex at birth? [**CHECK ONLY ONE**]
- Male..... 1
 - Female..... 2
 - Intersex/ambiguous..... 3
 - Refused to answer..... 7
 - Don't know..... 9

FOR ALL NHBS CYCLES

- ES9. Do you consider yourself to be male, female, or transgender? [**CHECK ONLY ONE**]
- Male..... 1
 - Female 2
 - Transgender 3
 - Refused to answer..... 7
 - Don't know..... 9
- FOR NHBS-MSM, SKIP TO ES19;
FOR NHBS-HET, SKIP TO SAY BOX
BEFORE ES18**

FOR NHBS-IDU, ASK ES10 - ES17b, THEN SKIP TO ES19

- ES10. Have you ever in your life shot up or injected any drugs other than those prescribed for you?
By shooting up, I mean anytime you might have used drugs with a needle, either by
mainlining, skin popping, or muscling.
- No..... 0 → **Skip to ES17**
 - Yes..... 1
 - Refused to answer..... 7 } **Skip to ES17**
 - Don't know..... 9 }

ES11. When was the last time you injected any drug? That is, how many days or months or years ago did you last inject?

[Interviewer: If respondent answers today, enter "000" in # of Days field]

of Days: ___ ___ ___

of Months: ___ ___ ___

of Years: ___ ___ ___

[Refused = 777, Don't know = 999]

ES12. Which drug do you inject most often?

[READ CHOICES. CHECK ONLY ONE]

- Heroin..... 1
- Cocaine..... 2
- Speedball – Heroin and cocaine together 3
- Crack..... 4
- Crystal, meth, tina, crank, ice..... 5
- Something else (*Specify*_____)... 6
- Refused to answer..... 7
- Don't know..... 9

ES13. Where on your body do you usually inject? **[CHECK ALL THAT APPLY]**

(Have participant show ALL injection areas on body. Check for physical signs of injection)

- Fresh track marks..... 1
- Needle-sized scabs..... 2
- Abscesses..... 3
- Old track marks or scars..... 4
- Injects in covered area 5
- No physical signs..... 6

ES14. Step-by-step, tell me how you prepare your drugs.

INTERVIEWER:
Description could include:
 Mix water or lemon juice/vinegar
 Cooker /Heat drugs
 Filter
 Description OK..... 1
 Description Not OK..... 2

ES15. Step-by-step, tell me how you inject your drugs.

INTERVIEWER:
Description could include:
 Tie off and find vein (IVDU)
 Clean injection site
 Register (IVDU)
 Description OK..... 1
 Description Not OK..... 2

ES16. What type of syringe do you usually inject with?

INTERVIEWER:
Description could include:
 Syringe size (in cc's or units)
 Needle size (gauge, length)
 Cap (color, number)
(Can also ask where they usually get syringes, what they do with them after injecting, and how they know if they are new or used)
 Description OK..... 1
 Description Not OK..... 2

ES17. Have you ever used drugs that you did not inject, other than those prescribed for you?

- No..... 0 → *Skip to ES19*
- Yes..... 1
- Refused to answer..... 7 } *Skip to ES19*
- Don't know..... 9 }

ES17a. When was the last time you used any drugs that you did not inject?

[DO NOT read choices]

- Within the last month (30 days) 1
- More than a month ago but within the last year.. 2
- More than a year ago..... 3
- Refused to answer..... 7
- Don't know..... 9

ES17b. Which drug do you use most often that you do not inject?

[READ CHOICES. CHECK ONLY ONE]

- Marijuana..... 1
- Heroin 2
- Cocaine..... 3
- Crack..... 4
- Crystal, meth, tina, crank, ice..... 5
- Something else (*Specify* _____).. 6
- Refused to answer..... 7
- Don't know..... 9

FOR NHBS-HET, READ SAY BOX BELOW AND ASK ES18

SAY: The next question is about having sex. Please remember your answers will be kept private. "Having sex" means vaginal sex - penis in the vagina; or anal sex - penis in the anus (butt).

ES18. Have you had vaginal or anal sex with a *[insert "man" if respondent is female; insert "woman" if respondent is male]* in the past 12 months?

- Yes..... 1
- No..... 2
- Refused to answer..... 7
- Don't know..... 9

FOR ALL NHBS CYCLES

ES19. **Interviewer:** Is this person alert and able to complete the health survey in English or Spanish?

- No..... 0
- Yes..... 1

End 1 . If the participant IS NOT ELIGIBLE:

Thank you for answering these questions. Unfortunately, the computer has not selected you to participate in the health survey. Thank you again for your time.

➔ End Interview.

End 2. If the participant IS ELIGIBLE (Do not disclose why the participant qualifies):

SAY: Congratulations! The computer has selected you to participate in the health survey. Let me tell you about it.

➔ Proceed to Consent

CONSENT1. **Interviewer:** Indicate each activity the participant consents to.
CHECK ALL THAT APPLY.

- Taking part in the survey..... 1
- HIV counseling and testing..... 2
- Having other lab tests (if offered) 3
- Storing a blood specimen for future testing..... 4
- Declined participation..... 5

NHBS-HET MAP Example for use with Seed Eligibility screener:

