

**Study to Assess Hepatitis Risk**

Attachment 4

Core Questionnaire

**Core Questionnaire  
STAHR HCV Risks Assessment**

Public reporting burden of this collection of information is estimated to average 55 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: CDC Information Collections Review Office, 1600 Clifton Road, MS D-74, Atlanta, GA 30333, ATTN: PRA (XXXXXXXXX).

Qa. Computer number

— —

Qb. Staff initials / ID

— — —

Qc. Screener ID Number:

\_\_\_\_\_

Q1. Enter the Participant ID. (This should be provided by the attendant)

— — — — —

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*The survey you are about to complete will be given to you by the computer. You will enter your answers directly into the computer yourself. No one will see what you answer. A study staff will be available to answer any questions you may have, but will not see what you answer. The questions will appear on the screen while you listen to them being read to you through a pair of headphones.*

*Depending on your personal experiences, this interview could take up to thirty minutes to complete.*

*It is very important that your answers be as accurate as possible because the information we gather from you will be used to help educate others. If you are having trouble with any question, you may ask any study staff member for help.*

*Now press "Next Question" to go on.*

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*A training module will give you an idea of the different types of questions you will see during the interview, and will give you a chance to ask the staff any questions before you get started. Use the "Next Question" button to advance to the next element of the survey. Now, use the mouse to click on the "Next Question" button to begin.*

Q2. Would you like to go through the training module?

1 Yes

0 No **(Skip to instruction before A1)**

Q3. Some questions will ask you to choose an answer from a list of possible answers. These answers appear in boxes like those pictured below. Each box has a different answer written in it. When a box has your answer in it, click on that box. Try this now, by clicking "Box A" below. (Choose only one)

1 Box A

2 Box B

3 Box C

4 Box D

Q4. Another example of a question using box answers is below. Please answer the following question: What is your favorite color? (Choose only one)

1 Red

2 Blue

3 Green

4 Yellow

5 Purple

6 Pink

7 Orange

*The previous question asked you to choose just one answer. However, some questions will ask you to choose more than one answer. These are called "Check all that apply" responses. The following screen has an example of this type question.*

Q5. Please answer the following question: "Which of the following are days of the week?" After you have chosen your answers, you must click the "Next Question" button to move to the next screen. (Check all that apply)

— Monday

— December

— Saturday

— Sunday

— April

— Earth

— Thursday

Q6. Another type of question will ask you to give a number for an answer. For example, if I were to ask how many days are in a week, you would answer "7." Please try this now by clicking the box with the number "7" below. When you are done, click "Next Question" to move to the next screen.

Q7. Some number answers may be large. For example, if you wanted to answer 107, you would click the boxes with the numbers "1" then "0" then "7". Try this now, and then click "Next Question."

Q8. If you enter the wrong number and want to change your answer, click the button with the word "Clear" written in it. Try this now by entering a number below, then click the "Clear" button. When the number is erased enter another number. Then, click "Next Question."

Q9. Some questions will ask for a date. To tell us what day is today, you would click on the arrow boxes until you get to today's date. Boxes with one arrow change the day, month or year by 1. Boxes with two arrows change by larger amounts. Try this now by telling us what day is today.

1/1/2008 – 1/1/2010 = mm/dd/yyyy  
\_\_\_ / \_\_\_ / \_\_\_ \_\_\_ mm / dd / yyyy

Q10. Some questions will ask that you type in an answer. This screen will allow you to type in an answer you want. To do this you click on the letters until the answer is spelled out completely. Try this now by entering below what your favorite food is.

\_\_\_\_\_

*In some questions where you type in the answer, you may need to answer with more than one word. To put a space between words, you would click on the empty box to the right of the text alphabet. In some answers you may need to use a comma (,) or period (.) or even a number. There is a button which allows you to do this. It is the "ALT" button.*

Q11. Next to the alphabet, the space button is on the bottom and the "ALT" button is above it. Click the "ALT" button now - and the alphabet is replaced by numbers and punctuation marks. Click the "ALT" button again - and the alphabet returns. For practice, type the following: 10 Main Street, USA

\_\_\_\_\_

*Last, there may be some questions which you don't know the answer to, that you do not want to answer, or may not apply to you. There are buttons which you can click in these situations. The next screen shows you where these buttons are.*

Q12. On the right hand side of the screen near the top are the "Don't Know", "Refuse to Answer" and "Not Applicable" buttons. Try any of these buttons now by clicking on one of them.

- 
- 8 Don't Know
  - 7 Refuse to Answer
  - 9 Not Applicable

*This completes the training portion of this interview. If you have any questions please ask the study representative your questions now. If you have any questions during the interview, please call one of the study representatives to assist you.*

*Some of the questions in this survey are very sensitive or might make you feel uncomfortable. If you do not want to answer a question for any reason you may refuse to answer it.*

**A. Demographics**

A1. What is your date of birth? \_\_\_ / \_\_\_ / \_\_\_\_\_ mm / dd / yyyy  
2098 Refuse to Answer (Year)

***If AGE is not less than 18 and AGE is not greater than 30, then skip to A2.  
If AGE is less than 18 or AGE is greater than 30, then show "Please re-enter your date of birth."  
skip back to A1.***

A2. In what country were you born? (**CHOOSE ONLY ONE**)

- 0 United States (*skip to A5*)
- 1 Mexico
- 2 Other. Please specify \_\_\_\_\_
- 7 Don't Know (*skip to A5*)
- 8 Refuse to Answer (*skip to A5*)

A3. In what city in Mexico were you born? \_\_\_\_\_

A4. In what state, province or region of Mexico were you born? \_\_\_\_\_

A5. What sex do you consider yourself to be? (Choose one)

- 1 Male
- 2 Female
- 3 Transgender/Transsexual
- 88 Refuse to answer

A6. What is your sexual orientation? (Choose one)

- 1 Straight / heterosexual
- 2 Lesbian / gay / homosexual
- 3 Bisexual
- 4 None of the above
- 7 Don't Know
- 8 Refuse to Answer

A7. Were you born male or female?

- 1 Male
- 2 Female
- 8 Refuse to Answer

A8. Have you had surgery to remove or change your genitals?

- 1 Yes
- 0 No
- 8 Refuse to Answer

A9. Do you consider yourself to be Hispanic or Latino?

- 1 Yes
- 0 No (***Skip to A11***)
- 8 Refuse to Answer

A10. Which of the following best describes your ethnicity? (Check all that apply)

- Spaniard, from Spain
- Mexican
- Central American
- South American
- Puerto Rican
- Cuban
- Dominican
- Refuse to Answer

A11. How would you describe your racial background? (Check all that apply)

- Asian
- Black or African American
- American Indian or Alaska Native
- Native Hawaiian or Pacific Islander
- White
- Refuse to Answer

A12. Have you been enrolled in school anytime in the past 6 months?

- 1 Yes
- 0 No
- 8 Refuse to Answer

A13. What is the highest level of education you have completed? (Choose one)

- 1 8th grade or less
- 2 Some high school (9th to 11th grade)
- 3 High school graduate (12th grade) or GED
- 4 Some college or technical training
- 5 College graduate or higher
- 8 Refuse to Answer

A14. In the past 6 months, did you receive any money from any of the following sources? (check all that apply)

- (a) Regular job, employed with a regular salary (full or part-time)
- (b) Informal work, temporary work or odd jobs
- (c) Recycling cans, returning bottles for deposits
- (d) Panhandling
- (e) Public assistance or disability
- (f) Family or friends
- (g) Theft, robbing, or stealing
- (h) Selling needles
- (i) Selling drugs, running or touting
- (j) Running a shooting gallery
- (k) Trading sex for money
- (l) Other illegal sources of income
- (m) Other. Please specify

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— (n) Refuse to Answer

A15. Where did you get most of your money in the past 6 months? (Choose one)

- 01 Regular job, employed with a regular salary (full or part-time)
- 02 Informal work, temporary work or odd jobs
- 03 Recycling cans, returning bottles for deposits
- 04 Panhandling
- 05 Public assistance or disability
- 06 Family or friends
- 07 Theft, robbing, or stealing
- 08 Selling needles
- 09 Selling drugs, running or touting
- 10 Running a shooting gallery
- 11 Trading sex for money
- 12 Other illegal sources of income
- 13 Other. Please specify

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88 Refuse to Answer

***If A15 is not selected in A14, then show “You have chosen a main source of income that you did not choose as a source of income in the last question. Please recheck your answer or change your answer to the previous question.” skip to A14.***

A16. Which best describes your total personal income from all sources in the past 12 months?  
(Choose one)

- 01 No income
- 02 \$1 - \$9999
- 03 \$10,000 - \$19,999
- 04 \$20,000 - \$29,999
- 05 \$30,000 - \$39,999
- 06 \$40,000 - \$49,999
- 07 \$50,000 - \$59,999
- 08 \$60,000 - \$100,000

- 09 More than \$100,000
- 88 Refuse to Answer

A17. Please check any of the places where you have lived or slept for at least one week during the past 6 months. (Check all that apply)

- Your parent's house or apartment
- Your own, house, apartment (Not your parent's house)
- Your spouse's house or apartment
- Your sexual partner's (other than spouse) house or apartment
- Family house or apartment
- Friend's house or apartment
- Migrant worker's camp
- Work place
- Rented room (hotel or other rooming house)
- Car, bus, truck or other vehicle
- Abandoned Building
- Shelter, welfare residence
- Jail (prison, detention center, correctional institution)
- Halfway house or Drug treatment center
- On the Streets
- Shooting gallery
- Medical care facility (i.e., hospital, hospice, or nursing home)
- Other \_\_\_\_\_
- Refuse to Answer

A18. In the past 6 months, which place did you sleep in most of the time? (Choose ONLY one)

- 01 Your parent's house or apartment
- 02 Your own, house, apartment (Not your parent's house)
- 03 Your spouse's house or apartment
- 04 Your sexual partner's (other than spouse) house or apartment
- 05 Family house or apartment
- 06 Friend's house or apartment
- 07 Migrant worker's camp
- 08 Work place
- 09 Rented room (hotel or other rooming house)
- 10 Car, bus, truck or other vehicle
- 11 Abandoned Building
- 12 Shelter, welfare residence
- 13 Jail (prison, detention center, correctional institution)
- 14 Halfway house or Drug treatment center
- 15 On the Streets
- 16 Shooting gallery
- 17 Medical care facility (i.e., hospital, hospice, or nursing home)
- 18 Other \_\_\_\_\_
- 88 Refuse to Answer

***If A18 is not marked in A17, then show “You have chosen a place that you did not mention as having lived or slept in the past 6 months. Please recheck your answer or change your answer to the previous question.” skip to A17.***

A19. Approximately, how many people (including yourself) currently live in your household or, if homeless, the place where you stay most often?

— — people

97 Don't Know

98 Refuse to Answer

A20. In the past 6 months, on a typical day, how many hours did you spend on the streets? This includes looking for or dealing drugs, other forms of obtaining money, using drugs, and sleeping on the street.

— — hours a day

A21. Was there ever a time before you were 18 when your parent or guardian asked you to leave or threw you out of the house and you stayed away for at least one night?

1 Yes

0 No

8 Refuse to Answer

A22. As a child, did you ever live in an orphanage, a foster home, a group home, or as a ward of the state?

1 Yes

0 No

8 Refuse to Answer

A23. In the past 6 months, have you slept in a car, abandoned building, public park, canyon, beach, shelter, squatting place, or other non-dwelling for more than 7 nights in a row?

1 Yes

0 No

8 Refuse to Answer

***If car, abandon building, park, canyon, beach, shelter or squatting place are not marked in A17, then show, “You have answered that you have slept in a car, abandoned building, public park, shelter or other non dwelling more than 7 nights, but you did not check off any of these places. Please review your answer.” skip to A17.***

A24. In the past 6 months, have you thought of yourself as homeless?

- 1 Yes
- 0 No
- 8 Refuse to Answer

A25. Have you ever spent time in a jail, prison, or juvenile detention center?

- 1 Yes
- 0 No (*skip to X*)
- 8 Refuse to answer (*skip to X*)

***If jail was marked in A17, then show “In a previous question you have answered that you have spent time in a jail, prison, or detention center. Please go back and review your answer.” skip to A17.***

*These next few questions refer to any time you might have spent in jail, prison or juvenile detention center in your entire lifetime.*

A26. Jail is county detention center for persons awaiting trial or those convicted of minor crimes (petty theft, urinating in the street). How many times have you been in jail?

If you have not been in jail, please enter 0.   \_\_ \_\_

A27. Prison is under state jurisdiction for persons convicted of serious crimes. How many times have you been in prison?

If you have not been in prison, please enter 0.       \_\_ \_\_

A28. How many times have you been in a juvenile detention center?

If you have not been in a juvenile detention center, please enter 0.   \_\_ \_\_

***If A26 is equal to 0 and A27 is equal to 0 and A28 is equal to 0, then show “Previously you answered that you have been in either a jail, prison, or juvenile detention center, but then did not indicate the number of times you had been in these places. Please go back and review your answers.” skip to A17.***

A29. When were you released the last time you were in jail, prison, or juvenile detention center?

If you do not remember the exact date, please enter the approximate month and year.

\_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_      mm / dd / yyyy

*If A29 is greater than TODAY, then show “You have entered a date in the future. Please go back and review your answer.” skip to A29.*

**Inject Network**

*Now we would like to ask you some questions about your family, friends, and people that you know who might inject drugs.*

B1. How many family members do you have in San Diego who inject drugs?

- \_\_\_ \_\_\_ \_\_\_ \_\_\_ people
- 9997 Don't Know
- 9998 Refuse to Answer

B2. How many friends do you have in San Diego who inject drugs?

- \_\_\_ \_\_\_ \_\_\_ \_\_\_ people
- 9997 Don't Know
- 9998 Refuse to Answer

B3. Of these [**Response to B2**] friends in San Diego who inject drugs, how many would you say are close friends?

- \_\_\_ \_\_\_ \_\_\_ \_\_\_ people
- 9997 Don't Know
- 9998 Refuse to Answer

B4. How many acquaintances do you have in San Diego who inject drugs?

- \_\_\_ \_\_\_ \_\_\_ \_\_\_ people
- 9997 Don't Know
- 9998 Refuse to Answer

B5. How many people do you know by name or street name in San Diego who inject drugs? If you don't know the exact number, please give an estimate.

- \_\_\_ \_\_\_ \_\_\_ \_\_\_ people
- 9997 Don't Know
- 9998 Refuse to Answer

*If recruited by a method other than RDS, skip to C1.*

- B6. What is your relationship to the person who gave you the coupon? (CHOOSE ONLY ONE)
- 0 Not applicable (i.e., interviewee is a seed)
  - 1 Relative
  - 2 Sex Partner other than your Spouse
  - 3 Spouse
  - 4 Friend
  - 5 Acquaintance
  - 6 Stranger
  - 7 Other \_\_\_\_\_

- B7. Did the person who gave you the coupon pressure you to come be part of this study?
- 1 Yes
  - 0 No
  - 7 Don't Know
  - 8 Refuse to Answer

- B8. Where did you come in contact with this person when they gave you the coupon? (CHOOSE ONLY ONE)
- 01 shooting gallery
  - 02 street
  - 03 jail/prison
  - 04 drug treatment center
  - 05 store
  - 06 friend's house
  - 07 dealer
  - 08 Other \_\_\_\_\_
  - 97 Don't Know
  - 98 Refuse to Answer

- B9. How did this person know you were an injection drug user? \_\_\_\_\_

- B10. How long have you known this person?
- \_\_\_\_\_ YEARS
  - \_\_\_\_\_ MONTHS
  - \_\_\_\_\_ DAYS

- B11. How often do you talk with this person? (CHOOSE ONLY ONE)
- 1 Every Day
  - 2 4 to 6 days a week
  - 3 2 to 3 days a week

- 4 Once a week
- 5 2 to 3 days a month
- 6 Once a month or less
- 7 Never
- 8 Refuse to Answer

B12. Which of the following activities have you done with this person within the last 3 months?  
(CHECK ALL THAT APPLY)

- a.  Inject drugs
- b.  Share injection equipment
- c.  Give/get emotional support
- d.  Buy drugs
- e.  Sell drugs
- f.  Have sex
- g.  Hang out/Spend time with
- h.  Live with
- i.  Other \_\_\_\_\_
- Don't Know
- Refuse to Answer

### C. Alcohol and Non-Injection Drug Use

*The next set of questions are about drug or alcohol use. Again, please remember that everything you tell us is strictly confidential.*

C1. How often did you drink alcohol in the past 3 months? (Choose one)

By alcohol we mean wine, beer, or liquor.

- 1 Every Day
- 2 4 to 6 days a week
- 3 2 to 3 days a week
- 4 Once a week
- 5 2 to 3 days a month
- 6 Once a month or less
- 7 Never
- 8 Refuse to Answer

***If C1 is equal to 7 or C1 is equal to 8, then skip to instruction before C3.***

C2. In the past 3 months, how often did you drink five or more drinks in a single day? (Choose one)

By "a drink" we mean a 12 ounce can of beer, a glass of wine, a cocktail, or a shot of liquor.

- 1 Every Day

- 2 4 to 6 days a week
- 3 2 to 3 days a week
- 4 Once a week
- 5 2 to 3 days a month
- 6 Once a month or less
- 7 Never
- 8 Refuse to Answer

C3. Have you ever in your life sniffed, smoked, or swallowed any of the following drugs? Do not include drugs that you have injected. (Check all that apply)

- 01 Ecstasy (E, X, MDMA)
- 02 GHB (gamma hydroxybuturic acid, G, GBL)
- 03 Rohypnol (Roffies)
- 04 Special K (Ketamine, K)
- 05 Marijuana or hashish
- 06 Methamphetamines (Crystal, meth, Ice, Tina)
- 07 Amphetamine (Speed, other than meth)
- 08 Heroin
- 09 Other hallucinogens (LSD, mushrooms, Peyote, or Mescaline)
- 10 PCP (Angel Dust, wet, wicky sticks)
- 11 Poppers (Amyl Nitrate)
- 12 Powdered Cocaine
- 13 Rock or Crack Cocaine
- 14 Tranquilizers, Barbiturates or recreational use of prescription drugs to get high (Codeine, Vicodin or Hydrocodone, Percocet, Darvon, Oxycontin or Oxycodone, Demerol, Dilaudid, Valium, Librium, Seconal, Xanax)
- 15 Viagra or similar drugs (Levitra, Cialis)
- 16 None
- 77 Don't Know
- 88 Refuse to Answer

C4. You indicated that you have never in your life sniffed, smoked, or swallowed any of the previous drugs. Is this correct? (Choose one)

**List will automatically include all drugs not selected in C3.**

- 0 Yes
- 1 No, I would like to change my answer
- 7 Don't Know
- 8 Refuse to Answer

**If C4 equals to 1 skip to C3. If C3 does not equal to 1 skip C5.**

C5. In the past 3 months, how often did you sniff, smoke, or swallow Ecstasy (E, X, MDMA)? (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week

- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If C3 does not equal 2 skip C6.***

C6. In the past 3 months, how often did you sniff, smoke, or swallow GHB? (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If C3 does not equal 3 skip C7.***

C7. In the past 3 months, how often did you sniff, smoke, or swallow rohypnol (roffies)? (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If C3 does not equal 4 skip C8.***

C8. In the past 3 months, how often did you sniff, smoke, or swallow ketamine (Special K)? (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If C3 does not equal 5 skip C9.***

- C9. In the past 3 months, how often did you sniff, smoke, or swallow marijuana? (Choose one)
- 0 Never
  - 1 Less than once a week
  - 2 Once a week
  - 3 2 to 6 days a week
  - 4 Once a day, every day
  - 5 2 to 4 times a day, every day
  - 6 5 or more times a day, every day
  - 8 Refuse to Answer

***If C3 does not equal 6 skip C10.***

- C10. In the past 3 months, how often did you sniff, smoke, or swallow methamphetamine (meth, crystal, tina)? (Choose one)
- 0 Never
  - 1 Less than once a week
  - 2 Once a week
  - 3 2 to 6 days a week
  - 4 Once a day, every day
  - 5 2 to 4 times a day, every day
  - 6 5 or more times a day, every day
  - 8 Refuse to Answer

***If C3 does not equal 7 skip C11.***

- C11. In the past 3 months, how often did you sniff, smoke, or swallow amphetamine (speed)? (Choose one)
- 0 Never
  - 1 Less than once a week
  - 2 Once a week
  - 3 2 to 6 days a week
  - 4 Once a day, every day
  - 5 2 to 4 times a day, every day
  - 6 5 or more times a day, every day
  - 8 Refuse to Answer

***If C3 does not equal 8 skip C12.***

- C12. In the past 3 months, how often did you sniff, smoke, or swallow heroin? (Choose one)
- 0 Never
  - 1 Less than once a week
  - 2 Once a week

- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If C3 does not equal 9 skip C13.***

C13. In the past 3 months, how often did you sniff, smoke, or swallow hallucinogens? (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If C3 does not equal 10 skip C14.***

C14. In the past 3 months, how often did you sniff, smoke, or swallow PCP? (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If C3 does not equal 11 skip C15.***

C15. In the past 3 months, how often did you sniff, smoke, or swallow poppers (nitrites, whippets)? (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If C3 does not equal 12 skip C16.***

C16. In the past 3 months, how often did you sniff, smoke, or swallow powder cocaine? (Choose one)

- :
- 0 Never
  - 1 Less than once a week
  - 2 Once a week
  - 3 2 to 6 days a week
  - 4 Once a day, every day
  - 5 2 to 4 times a day, every day
  - 6 5 or more times a day, every day
  - 8 Refuse to Answer

***If C3 does not equal 13 skip C17.***

C17. In the past 3 months, how often did you sniff, smoke, or swallow rock or crack cocaine (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If C3 does not equal 14 skip B18.***

C18. In the past 3 months, how often did you sniff, smoke, or swallow tranquilizers (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If C3 does not equal 15 skip B19.***

C19. In the past 3 months, how often did you sniff, smoke, or swallow Viagra (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

### D. Injection Drug Use Questions

In the next set of questions we would like to ask you about your injection drug use.

D1. How old were you when you first injected drugs?

— —

98 Refuse to Answer

**If D1 is greater than AGE (A1), then show “You have entered an invalid age. Please review your answer.” skip to D1.**

D2. The first time you injected any drugs, what drugs or Combination of drugs did you inject?  
(CHOOSE ONLY ONE)

- 00 Heroin Alone
- 01 Powder cocaine alone
- 02 Heroin & cocaine (Speedball)
- 03 Crystal (Meth) Alone
- 04 Crystal (Meth) & Heroin together
- 05 Crystal (Meth) & Cocaine
- 06 Tranquilizers
- 07 Barbiturates
- 08 Other Drug Alone \_ \_ \_ \_ \_
- 09 Other Combination \_ \_ \_ \_ \_
- 10 Crack alone
- 97 Don't Know
- 98 Refuse to Answer

D2. When was the last time you injected any drugs?

\_ \_ / \_ \_ / \_ \_ \_ \_ mm / dd / yyyy

**If D2 is greater than TODAY, then show “ You have entered an invalid date. Please review your answer.” skip to D2.**

D3. So how long ago does that make it since you last injected? (Choose one)

- 1 One day or less
- 2 Between 1 day and 1 week ago
- 3 Between 1 week and 1 month ago
- 4 Between 1 month and 6 months ago
- 5 Between 7 months and 1 year ago

- 6 More than one year ago
- 7 Don't Know

***If the time period in D3 does not match the date in D2, then show, "The date you gave for your last injection does not match the time you said it has been since your last injection. Please check your answers and correct if necessary." skip to D2.***

D4. Which of the following drugs, if any, have you injected? (Check all that apply)

- Heroin and Cocaine together (Speedball)
- Heroin and amphetamine together
- Methamphetamine (Crystal, meth, Ice, Tina) by itself
- Amphetamine (Speed, other than meth) by itself
- Heroin by itself
- Cocaine by Itself
- Crack by itself
- Other. Please specify \_\_\_\_\_
- I have never injected

***If D4 does not equal 1, skip D5.***

D5. In the past 3 months, how often did you inject heroin and Cocaine together (Speedball)? (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If D4 does not equal 2, skip D6.***

D6. In the past 3 months, how often did you inject heroin and amphetamine together (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If D4 does not equal 3, skip D7.***

D7. In the past 3 months, how often did you inject methamphetamine (Crystal, meth, Ice, Tina) by itself (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If D4 does not equal 4, skip D8.***

D8. In the past 3 months, how often did you inject amphetamine (Speed, other than meth) by itself (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If D4 does not equal 5, skip D9.***

D9. In the past 3 months, how often did you inject heroin by itself (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

***If D4 does not equal 6, skip D10.***

D10. In the past 3 months, how often did you inject Cocaine by itself (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day

***If D4 does not equal 7, skip D11.***

D11. In the past 3 months, how often did you inject Crack by itself (Choose one)

- 0 Never
- 1 Less than once a week
- 2 Once a week
- 3 2 to 6 days a week
- 4 Once a day, every day
- 5 2 to 4 times a day, every day
- 6 5 or more times a day, every day
- 8 Refuse to Answer

D12. During the past 3 months, what did you inject most often? (Choose one)

- 01 Heroin and Cocaine together (Speedball)
- 02 Heroin and amphetamine together
- 03 Amphetamine (Crystal meth, Speed) by itself
- 04 Heroin alone
- 05 Cocaine by itself
- 06 Crack by itself
- 07 Other. Please specify \_\_\_\_\_
- 98 Refuse to Answer

***If D4 is not equal to 1, 2, or 5, skip D13.***

D13. In the past 3 months, what kind of heroin did you inject most often? (Choose one)

- 1 Black Tar
- 2 Brown powder
- 3 White powder
- 4 All three
- 5 Other
- 7 Don't Know
- 8 Refuse to Answer

***If D4 is not equal to 2, 3 or 4, skip D14.***

D14. In the last 3 months, what was the Color of the methamphetamine you usually injected?  
(CHOOSE ONLY ONE)

- 1 Pink
- 2 Green
- 3 Black
- 4 Yellow

- 5 Clear (ice)
- 6 Other \_\_\_\_\_
- 7 Don't Know
- 8 Refuse to Answer

D15. In a typical week that you inject drugs, how many days do you inject at least once a day?  
(Choose one)

- 1 1 day per week
- 2 2 days per week
- 3 3 days per week
- 4 4 days per week
- 5 5 days per week
- 6 6 days per week
- 7 Everyday

D16. On the days that you inject, how many times do you inject? \_\_\_

***If D16 is less than 1, then show "You must have injected at least once on the days you injected. Please review your answer." skip to D16.***

D17. Did you inject at least once a week, every week, for the last 3 months?

- 0 Yes ***(Skip to D19)***
- 1 No
- 7 Don't Know ***(Skip to D19)***
- 8 Refuse to Answer ***(Skip to D19)***

D18. For how many weeks in the past 3 months did you not inject? \_\_\_

***If 0, skip to D21.***

D19. From your answers, it looks like you have injected a total of [calculated] times in the past 3 months. Does that seem about right?

- 1 Yes Skip to D22
- 0 No

D20. If [calculated] times was not right, please enter the total number of times you think you injected in the past 3 months.

\_\_\_\_\_

***If D20 is not equal to 0, then skip to D22***

D21. You have entered 0 for the number of times you have injected in the past 3 months. Are you sure you haven't injected in the past 3 months?

- 1 Yes (***skip to F1***)
- 0 No

D22. In the last 3 months, where have you injected drugs? (CHECK ALL THAT APPLY)

- At your home
- At someone else's home
- Shooting gallery
- Construction site
- Alleyway
- Bar/Hangout
- On the street
- Vacant lot
- Park
- Freeway overpass/canyon
- Other \_\_\_\_\_
- Don't Know
- Refuse to Answer

D23. In the last 3 months, where were you most often when you injected drugs? (CHOOSE ONLY ONE)

- 00 At your home
- 01 At someone else's home
- 02 Shooting gallery
- 03 construction site
- 04 Alleyway
- 05 Bar/Hangout
- 06 On the street
- 07 Vacant lot
- 08 Park
- 08 Freeway overpass/canyon
- 09 Other \_\_\_\_\_
- 97 Don't Know
- 98 Refuse to Answer

***If answer in D23 not selected in D22, show "You indicated that you inject most in a location that you did not select as a location that you injected in in the previous 3 months. Please review your answer." Skip to D22.***

D24. In the last 3 months, who did you inject drugs with? (CHECK ALL THAT APPLY)

- Friends
- Family
- Spouse
- Sexual partner (other than your spouse)
- Acquaintance
- Drug dealer
- Strangers
- Someone from Mexico
- Alone
- Sex worker
- Your pimp
- Sex client
- Other \_\_\_\_\_
- Don't Know
- Refuse to Answer

D25. In the last 3 months, who did you inject with most often? (CHOOSE ONLY ONE)

- 01 Friends
- 02 Family
- 03 Spouse
- 04 Sexual partner (other than your spouse)
- 05 Acquaintance
- 06 Drug dealer
- 07 Strangers
- 08 Someone from Mexico
- 09 Alone
- 10 Sex worker
- 11 Your pimp
- 12 Sex client
- 13 Other \_\_\_\_\_
- 14 Don't Know
- 88 Refuse to Answer

***If response to D25, is not selected in D24, show “You indicated that you injected most with someone who you did not inject with in the last 3 months. Please review your answer.” Skip to D24.***

D26. In the last 3 months, on average how many different people did you usually inject with? (‘0’ if None)

- \_\_\_\_\_ # of persons
- 9997 Don't Know
- 9998 Refuse to Answer

If D26 is equal to 0, then show "Your answer cannot be 0 because you previously stated that you have not injected alone in the past three months. Please review the number of different people who injected with you in the past 3 months." skip to D24.

## E. Sharing works

Now we would like to ask you some questions about sharing needles, syringes, and works with other people.

If D24 is not equal to 9, skip to D2

E1. Even though you indicated you were alone every time you injected in the past 3 months, did you even once use a needle that someone else had used before you, even if the needle was bleached, or even if it was your sex partner?

- 1 Yes
- 0 No
- 8 Refuse to Answer

E2. In the last 3 months, when you injected how often did you give, rent or lend a syringe to someone else that you had already used? (CHOOSE ONLY ONE) (SYR6GIV)

- 0 Never
- 1 Sometimes
- 2 About half of the time
- 3 Often
- 4 Always
- 7 Don't Know
- 8 Refuse to Answer

E3. In the last 3 months, when you injected how often did you used a needle or syringe that you knew or suspected had been used before by someone else? (CHOOSE ONLY ONE) (USEUSED6)

- 0 Never
- 1 Sometimes
- 2 About half of the time
- 3 Often
- 4 Always
- 7 Don't Know
- 8 Refuse to Answer

If E1 or E3=0 and E2=0 skip to E8.

E4. In the past 3 months, list any person(s) that you shared a needle with even once? (Select all that apply)

- Friends
- Family
- Spouse
- Sexual partner (other than your spouse)
- Acquaintance
- Drug dealer
- Strangers
- Someone from Mexico
- Alone
- Sex worker
- Your pimp
- Sex client
- Other \_\_\_\_\_
- Don't Know
- Refuse to Answer

E5. In the past 3 months, which person did you pass on a needle to or use a needle after most often? (Choose one)

- 01 Friends
- 02 Family
- 03 Spouse
- 04 Sexual partner (other than your spouse)
- 05 Acquaintance
- 06 Drug dealer
- 07 Strangers
- 08 Someone from Mexico
- 09 Alone
- 10 Sex worker
- 11 Your pimp
- 12 Sex client
- 13 Other \_\_\_\_\_
- 14 Don't Know
- 88 Refuse to Answer

***If response to E5, is not selected in E4, show “You indicated that you shared a needle with most with someone who you did not use a needle with in the last 3 months. Please review your answer.” Skip to E4.***

E6. The following are reasons why some people use another person's needle. (Please check all that applied to you over the past 3 months.)

- There was only one needle available
- Someone else scored or paid for the drugs

- You needed help injecting
- Someone else needed help injecting
- You were injecting with people you trust (like a sex partner, lover, or friend)
- People get upset if you don't use the same needle
- Because your needle was clogged or the needle was broken or dull
- Because the needle had been cleaned
- Because you are already HIV positive
- Because you are already Hepatitis C positive
- Because the person who passed you the needle was HIV negative
- Needles got mixed up
- Because you were dope-sick or in withdrawal
- Other reason not mentioned
- Refuse to Answer

E7. Of the [calculated] times you injected in the past 3 months, how many of these injections were done with other people, even if you did not share needles?

- — — — 9997 Don't Know
- — — — 9998 Refuse to Answer

E8. Of the [calculated] times you injected in the past 3 months, how often did you inject with needles that had been used before you by somebody else, even if the needle was cleaned first? (Choose one)

- 1 Always
- 2 Almost Always
- 3 More than half the time
- 4 About half the time
- 5 Less than half the time
- 6 Rarely
- 7 Never
- 8 Refuse to Answer

***If E8 is equal to 7, then skip to E12.***

E9. In the last 3 months, when you injected with a needle that had been used by somebody else, how often did you clean it with bleach before you used it? (Choose one)

- 1 Always
- 2 Almost Always
- 3 More than half the time
- 4 About half the time
- 5 Less than half the time
- 6 Rarely
- 7 Never

E10. Of all of the times you injected with other people in the last 3 months, how often did you divide up drugs with somebody else by using a needle?

This is also called back loading, piggybacking or splitting drugs wet. (Choose one)

- 1 Always
- 2 Almost Always
- 3 More than half the time
- 4 About half the time
- 5 Less than half the time
- 6 Rarely
- 7 Never
- 8 Refuse to Answer

***If E10 is equal to 7, then skip to instruction before E12.***

E11. Of these times, how often was a brand new sterile needle used to divide up drugs?

By sterile, I mean never used before by you or anyone else. (Choose one)

- 1 Always
- 2 Almost Always
- 3 More than half the time
- 4 About half the time
- 5 Less than half the time
- 6 Rarely
- 7 Never
- 8 Refuse to Answer

*The next set of questions will be about things besides the needle that people use when they inject drugs.*

*These questions refer only to things you did from around [show 3 month date] up to today.*

E12. Of the [calculated] times you injected in the last 3 months, how often did you use a cooker with someone or after someone else used it? (Choose one)

- 1 Always
- 2 Almost Always

- 3 More than half the time
- 4 About half the time
- 5 Less than half the time
- 6 Rarely
- 7 Never
- 8 Refuse to Answer

D13. Of the [calculated] times you injected in the last 3 months, how often did you use cotton at the same time or after another person used it? (Choose one)

- 1 Always
- 2 Almost Always
- 3 More than half the time
- 4 About half the time
- 5 Less than half the time
- 6 Rarely
- 7 Never
- 8 Refuse to Answer

E14. Of the [calculated] times you injected in the last 3 months, how often did you use rinse water with or after another person drew up water or rinsed their needle in it? (Choose one)

- 1 Always
- 2 Almost Always
- 3 More than half the time
- 4 About half the time
- 5 Less than half the time
- 6 Rarely
- 7 Never
- 8 Refuse to Answer

***If E12 is equal to 7 and E13 is equal to 7 and e14 is equal to 7, then skip to instruction before E18.***

E15. Of all of the different people you injected with in the past 3 months, with how many different people did you share a cooker, cotton, or rinse water? (Choose one)

- 0 None
- 1 Almost none
- 2 Less than half
- 3 About half
- 4 More than half
- 5 Almost all
- 6 All
- 8 Refuse to Answer

E16. Who did you share a cooker, cotton, or rinse water with in the last 3 months? (check all that apply)

- Friends
- Family
- Spouse
- Sexual partner (other than your spouse)
- Acquaintance
- Drug dealer
- Strangers
- Someone from Mexico
- Alone
- Sex worker
- Your pimp
- Sex client
- Other \_\_\_\_\_
- Don't Know
- Refuse to Answer

E17. Who did you share a cooker, cotton, or rinse water with most often? (Choose one)

- 01 Friends
- 02 Family
- 03 Spouse
- 04 Sexual partner (other than your spouse)
- 05 Acquaintance
- 06 Drug dealer
- 07 Strangers
- 08 Someone from Mexico
- 09 Alone
- 10 Sex worker
- 11 Your pimp
- 12 Sex client
- 13 Other \_\_\_\_\_
- 14 Don't Know
- 88 Refuse to Answer

***If answer in E17 is not selected in E16, then show "You have selected a person that you have not specified as having shared cookers, cottons, or rinse water with in the previous question. Please review your answers." skip to E16.***

E18. In the past 3 months, have you chosen not to share needles with someone because you thought that they were infected with Hepatitis C virus? (Choose one)

- 0 No
- 1 Yes

- 2 I was not in that situation
- 3 I'm not sure what HIV is
- 7 Don't Know
- 8 Refuse to Answer

***If E18 is equal to 0 or 2 or 7 or 8, then skip to D20***

E19. How did you know their Hepatitis C status? (Choose one)

- 1 They told me
- 2 Someone else told me
- 3 I saw their Hepatitis C test results
- 4 They had been sick for a long time
- 5 They looked like they had Hepatitis C
- 6 No one told me, and I didn't see results, I just know
- 7 Other
- 77 Don't Know
- 88 Refuse to Answer

E20. In the past 3 months, have you chosen not to share needles with someone because you thought that they were infected with HIV/ the AIDS virus? (Choose one)

- 0 No
- 1 Yes
- 2 I was not in that situation
- 3 I'm not sure what Hepatitis C is
- 7 Don't Know
- 8 Refuse to Answer

***If E20 is equal to 0 or 2 or 7 or 8, then skip to E22.***

E21. How did you know their HIV status? (Choose one)

- 1 They told me
- 2 Someone else told me
- 3 I saw their HIV test results
- 4 They had been sick for a long time
- 5 They looked like they had HIV
- 6 No one told me, and I didn't see results, I just know
- 7 Other
- 77 Don't Know
- 88 Refuse to Answer

E22. Of the [calculated] times you injected in the past 3 months, how often did you inject with a new, sterile needle? (Choose one)

- 1 Always
- 2 Almost Always
- 3 More than half the time
- 4 About half the time
- 5 Less than half the time
- 6 Rarely
- 7 Never
- 8 Refuse to Answer

E23. In the past 3months, on average, after approximately how many injections did you change your syringe and needle? (CHGSYR)

- \_\_\_ \_\_\_ \_\_\_ \_\_\_ injections
- 9997 Don't Know
- 9998 Refuse to Answer

E24. In the past 3 months, when you used a syringe for injecting (shooting) drugs, from where did you get the syringe? (CHECK ALL THAT APPLY)

- a. \_\_\_ Pharmacist
- b. \_\_\_ Spouse, family member, or sex partner
- c. \_\_\_ Friend
- d. \_\_\_ Drug dealer
- e. \_\_\_ "Hit doctor"
- f. \_\_\_ Shooting gallery
- g. \_\_\_ Needle exchange program (you went yourself)
- g. \_\_\_ Someone who gets them from a needle exchange program
- h. \_\_\_ On the Street
- i. \_\_\_ Doctor/clinic/hospital/store
- j. \_\_\_ Veterinary clinic/Granjero
- k. \_\_\_ Market
- l. \_\_\_ Some other place \_\_\_\_\_
- \_\_\_ Don't Know
- \_\_\_ Refuse to Answer

E25. In the past 3 months, where did you get your syringes or needles most often? (CHOOSE ONLY ONE)

- 00 From a pharmacist
- 01 From spouse, family member, or sex partner
- 02 From a friend
- 03 From a drug dealer

- 04 From a 'hit doctor'
- 05 In a shooting gallery
- 06 From a needle/syringe exchange program
- 07 On the street
- 08 From a doctor/clinic/hospital/store
- 09 From a veterinary clinic
- 10 From a market
- 11 Some other place \_\_\_\_\_
- 97 Don't Know
- 98 Refuse to Answer

**F. Syringe Exchange Programs**

*In the next series of questions we would like to ask you about Needle or syringe exchange programs. Needle/syringe exchanges give you clean, unused needles and syringes for free and provide a safe place to deposit your used ones.*

F1. Are you aware of any needle or syringe exchange programs in your area?

- 1 Yes
- 0 No **(Skip to F4)**
- 7 Don't Know **(Skip to F4)**
- 8 Refuse to Answer **(Skip to F4)**

F2. Have you used the local needle/syringe exchange program in the past 3 months?

- 1 Yes
- 0 No **(Skip to F4)**
- 7 Don't Know **(Skip to F4)**
- 8 Refuse to Answer **(Skip to F4)**

F3. About how many of your needles or syringes did you get from the needle exchange program in the past 3 months? (CHOOSE ONLY ONE)

- 1 All or almost all
- 2 About half
- 3 Some, but not many
- 4 Very few/almost none
- 7 Don't Know
- 8 Refuse to Answer

F4. In the past 3 months, how easy or hard was it for you to get new, unused needles when you injected drugs? (CHOOSE ONLY ONE)

- 0 Never tried to get new, unused needles
- 1 Very Easy
- 2 Easy
- 3 Hard

- 4 Very Hard
- 7 Don't Know
- 8 Refuse to Answer

**If F4 is less than 3, then skip to F6.**

F5. What was the main reason it was hard to get new, unused needles? (CHOOSE ONLY ONE)

- 0 They cost too much / No money to buy them
- 1 No place to legally buy them / store won't sell to me
- 2 No local syringe exchange
- 3 Syringe exchange is inconvenient / limited locations or hours of operation
- 4 I'm worried about getting caught / arrested by police with needles
- 5 Other \_\_\_\_\_
- 7 Don't Know
- 8 Refuse to Answer

F5. In the past 3 months when you used a needle for injecting (shooting) drugs, what did you do with the needle when you were done? (CHECK ALL THAT APPLY)

- a.  Kept it to use on yourself again
- b.  Gave it to someone else
- c.  Left it where you shot up
- d.  Sold/rented it
- e.  Threw it away in the trash
- f.  Returned it to syringe exchange
- g.  Returned it to person you borrowed it from
- h.  Threw it away in a safe disposal box, Specify box: \_\_\_\_\_
- Other \_\_\_\_\_
- Don't Know
- Refuse to Answer

F6. In the past 3 months, how often did you use a new, sterile syringe or needle? By new, we mean a sterile syringe or needle that has never been used before by anyone including you. (CHOOSE ONLY ONE)

- 0 Never (**Skip to G1**)
- 1 Sometimes
- 2 About half of the time
- 3 Almost every time injected
- 4 Every time injected
- 7 Don't Know
- 8 Refuse to Answer

- F7. In the past 3months, did you acquire USED syringes in any of the following ways?
- a.  Not applicable, never acquired a used syringe
  - b.  By paying for it
  - c.  By sharing drugs with someone
  - d.  By borrowing/renting it
  - e.  By providing food/shelter to someone
  - f.  By having sex with someone
  - g.  By picking it up off the street
  - h.  Other \_\_\_\_\_
  - Don't Know
  - Refuse to Answer

## G. Abscess Questions

Now we would like to ask you about having abscesses. By abscesses we mean sores on your body that start out as a lump then open up into a sore. These sometimes appear in locations on your body where you stick a needle to inject drugs.

G1. How many abscesses have you EVER had?

- \_\_\_ abscesses  
000 zero **Skip to H1**  
997 Don't Know **Skip to H1**  
998 Refuse to Answer **Skip to H1**

G2. Where on your body have you EVER had an abscess? [CHECK ALL THAT APPLY]

- a. \_\_\_ Head (LOCABCSA)  
b. \_\_\_ Neck (LOCABCSB)  
c. \_\_\_ Arm (LOCABCSC)  
d. \_\_\_ Hand (LOCABCSD)  
e. \_\_\_ Torso (LOCABCSE)  
f. \_\_\_ Buttocks  
g. \_\_\_ Groin  
h. \_\_\_ Leg  
i. \_\_\_ Foot  
j. \_\_\_ Other \_\_\_ \_\_\_ \_\_\_ \_\_\_  
\_\_\_ Don't Know  
\_\_\_ Refuse to Answer

G3. Do you have an abscess now?

- 1 Yes  
0 No  
7 Don't Know  
8 Refuse to Answer

*The next questions ask you about the LAST TIME you had an abscess. These questions refer to the last abscess you had, not an abscess you currently have. [If current abscess is the only abscess you have had, you may respond with regard to the current abscess]*

G4. When was the LAST TIME you had an abscess? (CHOOSE ONLY ONE)

- 0 Within the last 6 months  
1 More than 6 months ago but less than or equal to 1 year ago  
2 More than 1 year ago  
7 Don't Know  
8 Refuse to Answer

G5. The LAST TIME you had an abscess, did you treat the abscess on your own?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to Answer

G6. The LAST TIME you had an abscess, did you ever use illegal drugs as a way to cope with the pain from the abscess?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to Answer

G7. The LAST TIME you had an abscess, did you visit a health care provider to treat the abscess?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to Answer

## H. Overdose

*In the next series of questions we would like to ask you about ever overdosing. By overdosing we mean taking so much drug that you stop breathing or your heart stops.*

H1. In the last 3 MONTHS, how many times have you overdosed?

- \_\_\_ \_\_\_ \_\_\_ times
- 000 zero Skip to H1
- 997 Don't Know
- 998 Refuse to Answer

H2. What drugs were you using on the day of your last overdose? (Check all that apply)

- a. \_\_\_ Heroin alone
- b. \_\_\_ Cocaine/crack alone
- c. \_\_\_ Heroin and cocaine together
- d. \_\_\_ Crystal (meth) alone
- e. \_\_\_ Crystal (meth) and heroin together
- f. \_\_\_ Crystal (meth) and cocaine together
- g. \_\_\_ Tranquilizers
- h. \_\_\_ Barbiturates
- i. \_\_\_ Other opiates \_\_\_ \_\_\_ \_\_\_ \_\_\_
- j. \_\_\_ Alcohol

- k.  Marijuana
- l.  Other drugs
- Don't Know
- Refuse to Answer

H3. Which of these drugs did you inject? (Check all that apply)

- a.  Heroin alone
- b.  Cocaine/crack alone
- c.  Heroin and cocaine together
- d.  Crystal (meth) alone
- e.  Crystal (meth) and heroin together
- f.  Crystal (meth) and cocaine together
- g.  Tranquilizers
- h.  Barbiturates
- i.  Other opiates
- j.  Alcohol
- k.  Marijuana
- l.  Other drugs
- Don't Know
- Refuse to Answer

### I. Law enforcement interactions

*The next set of questions that we would like to ask you about include your interactions with police officers. Please remember that all your answers are kept confidential, and no one will ever see your name and your answers to these questions together.*

I1. In the last 3 months have you been arrested for anything?

[When I say arrested I mean taken into custody regardless of whether or not you were held and charged]

- 1 Yes
- 0 No **Skip to I6**
- 7 Don't Know **Skip to I6**
- 8 Refuse to Answer **Skip to I6**

I2. In the last 3 MONTHS, how many times have you been arrested for carrying drugs?

- times
- 97 Don't Know
- 98 Refuse to Answer

I3. In the last 3 MONTHS, how many times have you been arrested for carrying needles or syringes that were unused/sterile?

- — times
- 97 Don't Know
- 98 Refuse to Answer

I4. In the last 3 MONTHS, how many times have you been arrested for carrying needles or syringes that were used?

- — times
- 97 Don't Know
- 98 Refuse to Answer

I5. In the last 3 MONTHS, how many times have you been arrested for having track marks when you were not carrying needles or drugs? (ARRTMARK)

- — times
- 97 Don't Know
- 98 Refuse to Answer

I6. In the last 3 MONTHS, has a police officer taken your needle(s) or syringe(s)?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to Answer

I7. How fearful are you that police are going to arrest you or interfere with your drug use? (Choose one)

- 0 Not at all Fearful
- 1 Somewhat Fearful
- 2 Very Fearful
- 7 Don't Know
- 8 Refuse to Answer

I8. In the last 3 MONTHS, has police presence caused you to hurry or rush an injection?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to Answer

I9. In the last 3 MONTHS, has police presence affected where you use drugs?

- 1 Yes
- 0 No **Skip to I11**
- 7 Don't Know **Skip to I11**
- 8 Refuse to Answer **Skip to I11**

- I10. In the last 3 MONTHS, how has police presence affected where you use drugs? [CHECK ALL THAT APPLY]
- a.  Moved Inside to Use Drugs
  - b.  Moved Outside to Use Drugs
  - c.  Changed Location of Outdoor Use (alley or neighborhood)
  - d.  Changed Location of Indoor Use
  - e.  Other
  - Don't Know
  - Refuse to Answer

- I11. In the last 3 MONTHS, has your experience with police affected your access to new needles or syringes?
- 1 Yes
  - 0 No **Skip to introduction before J1**
  - 7 Don't Know **Skip to introduction before J1**
  - 8 Refuse to Answer **Skip to introduction before J1**

- I12. In the last 3 MONTHS, how has police presence affected where you buy needles/syringes? [CHECK ALL THAT APPLY]
- Afraid to buy at pharmacy due to police pressure
  - Afraid to carry new syringe
  - Other
  - Don't Know
  - Refuse to Answer

## J. Injection Correlates

*If D26 equals 0, skip to K1.*

*Now we would like to ask you about your main injection partner. By "injection partner" we mean the person that you inject with most often.*

- J1. In the past 3 months, how often have you refused to share needles with your main injecting partner? (Choose one)
- 0 Never
  - 1 Sometimes
  - 2 Often
  - 3 Every time we inject
  - 8 Refuse to Answer
  - 9 Not Applicable

- J2. In the past 3 months, how often have you refused to share needles with other people you injected with (not your main injecting partner)? (Choose one)
- 0 Never
  - 1 Sometimes
  - 2 Often
  - 3 Every time we inject
  - 8 Refuse to Answer
  - 9 Not Applicable
- J3. Thinking about your friends who inject drugs, how many of them inject with a needle that had been used before by someone else even if it was their sex partner? (Choose one)
- 0 None of them
  - 1 Less than half of them
  - 2 About half of them
  - 3 More than half of them
  - 4 All of them
  - 5 None of my friends inject drugs
  - 8 Refuse to Answer

## **K. HCV Transmission beliefs and HCV Testing**

*In the next series of questions we would like to ask you about Hepatitis C virus and any experiences you may have had with testing for it.*

- K1. Compared to other drug users in the San Diego area, how likely do you think you are to get (infected with) HEPATITIS C? (CHOOSE ONLY ONE)
- 0 Much more likely
  - 1 A bit more likely
  - 2 About the same
  - 3 A bit less likely
  - 4 Much less likely
  - 5 Not applicable (i.e. already HCV-positive)
  - 6 I don't know what hepatitis C is
  - 8 Refuse to Answer
- K2. How likely do you think it is that you will become infected with HEPATITIS C from injecting drugs in the next 3 MONTHS? (CHOOSE ONLY ONE)
- 0 Very unlikely
  - 1 Somewhat unlikely
  - 2 Neutral, neither likely nor unlikely
  - 3 Somewhat likely
  - 4 Very likely
  - 7 Don't Know
  - 8 Refuse to Answer

- K3. Have you ever been tested for HEPATITIS C before today? (HCVTEST)
- 1 Yes **Skip to K5**
  - 0 No
  - 7 Don't Know **Skip to K5**
  - 8 Refuse to Answer **Skip to K5**

- K4. Why have you never had a HEPATITIS C test? (CHECK ALL THAT APPLY)
- a.  I didn't want to pay the cost of the test
  - b.  I never, or almost never, go to clinics or hospitals
  - c.  I don't want to know if I have hepatitis C
  - d.  I don't care if I have hepatitis C
  - e.  I don't know where to go to have a hepatitis C test
  - f.  I don't think I'm at risk for hepatitis C
  - g.  Before today, I never heard of hepatitis C
  - h.  Other \_\_\_\_\_
  - Don't Know
  - Refuse to Answer

**If K4 equal to a-h skip to K8**

- K5. Where were you tested for HEPATITIS C? (CHOOSE ONLY ONE)
- 0 As part of a research study. Specify Study \_\_\_\_\_
  - 1 Drug treatment center
  - 2 Private clinic/doctors office
  - 3 Public clinic/hospital
  - 4 Other \_\_\_\_\_
  - 7 Don't Know
  - 8 Refuse to Answer

- K6. What was your last HEPATITIS C test result? (CHOOSE ONLY ONE)
- 0 Negative
  - 1 Positive
  - 2 Never got result
  - 7 Don't Know
  - 8 Refuse to Answer

**If K6 is not equal to 1 skip to L1**

- K7. When did you first test positive for HEPATITIS C?
- \_\_\_\_ / \_\_\_\_ mm / yyyy

2097 Don't Know (Year)  
2098 Refuse to Answer (Year)

- K8. Has a doctor/ health care worker ever told you that you had Hepatitis C?
- 1 Yes  
0 No  
7 Don't Know  
8 Refuse to Answer
- K9. Has a doctor/ health care worker ever offered you treatment for Hepatitis C?
- 1 Yes  
0 No  
7 Don't Know  
8 Refuse to Answer
- K10. Have you ever taken medicines given to you by a doctor to prevent you from getting sick from Hepatitis C?
- 1 Yes  
0 No  
7 Don't Know  
8 Refuse to Answer
- K11. Are you still taking these medicines?
- 1 Yes  
0 No  
7 Don't Know  
8 Refuse to Answer
- K12. Why are you not taking these medicines? **(CHECK ALL THAT APPLY)**
- a. \_\_\_ I feel good/healthy  
b. \_\_\_ I have other medical conditions  
c. \_\_\_ I don't have insurance  
d. \_\_\_ I don't have money  
e. \_\_\_ I'm doing drugs/drinking  
f. \_\_\_ I missed my appointment  
g. \_\_\_ My doctor prescribed some pills but I refused  
h. \_\_\_ My doctor said I don't need any medicines  
i. \_\_\_ I stopped seeing my doctor/ never went back  
j. \_\_\_ I have no doctor/not in care  
k. \_\_\_ I didn't want to take pills  
l. \_\_\_ Other \_\_\_\_\_  
\_\_\_ Don't Know  
\_\_\_ Refuse to Answer

- K13. Have you known anyone personally who has Hepatitis C?
- |   |                  |  |                                      |
|---|------------------|--|--------------------------------------|
| 1 | Yes              |  |                                      |
| 0 | No               |  | <i>Skip to instruction before L1</i> |
| 7 | Don't Know       |  | <i>Skip to instruction before L1</i> |
| 8 | Refuse to Answer |  | <i>Skip to instruction before L1</i> |
- K14. How many people?
- |     |                  |
|-----|------------------|
| — — | Persons          |
| 97  | Don't Know       |
| 98  | Refuse to Answer |
- K15. How many people do you personally know who have died of Hepatitis C?
- |     |                  |
|-----|------------------|
| — — | Persons          |
| 97  | Don't Know       |
| 98  | Refuse to Answer |

## L. HIV Transmission Beliefs and HIV testing

- L1. Compared to other drug users in the San Diego area, how likely do you think you are to get (infected with) HIV/AIDS? (CHOOSE ONLY ONE)
- |   |  |
|---|--|
| 0 | Much more likely                           |
| 1 | A bit more likely                          |
| 2 | About the same                             |
| 3 | A bit less likely                          |
| 4 | Much less likely                           |
| 5 | Not applicable (i.e. already HIV-positive) |
| 8 | Refuse to Answer                           |
- L2. How likely do you think it is that you will become infected with HIV from injecting drugs in the next 3 MONTHS? (CHOOSE ONLY ONE)
- |   |                                      |
|---|--------------------------------------|
| 0 | Very unlikely                        |
| 1 | Somewhat unlikely                    |
| 2 | Neutral, neither likely nor unlikely |
| 3 | Somewhat likely                      |
| 4 | Very likely                          |
| 7 | Don't Know                           |
| 8 | Refuse to Answer                     |
- L3. How likely do you think it is that you will become infected with HIV from sex in the next 3 MONTHS? (CHOOSE ONLY ONE)
- |   |                                      |
|---|--------------------------------------|
| 0 | Very unlikely                        |
| 1 | Somewhat unlikely                    |
| 2 | Neutral, neither likely nor unlikely |
| 3 | Somewhat likely                      |
| 4 | Very likely                          |
| 7 | Don't Know                           |
| 8 | Refuse to Answer                     |

- L4. Have you ever been tested for HIV/AIDS before today?
- 1 Yes **Skip to L6**
  - 0 No
  - 7 Don't Know **Skip to L6**
  - 8 Refuse to Answer **Skip to L6**

- L5. Why have you never had an HIV test? (CHECK ALL THAT APPLY)
- a.  I didn't want to pay the cost of the test
  - b.  I never, or almost never, go to clinics or hospitals
  - c.  I don't want to know if I have HIV/AIDS
  - d.  I don't care if I have HIV/AIDS
  - e.  I don't know where to go to have an HIV test
  - f.  Other \_\_\_\_\_
  - Don't Know
  - Refuse to Answer

**If L4 is not equal to 1, then skip to J14.**

- L6. Where were you tested for HIV? (CHOOSE ONLY ONE)
- 0 As part of a research study. Specify Study \_\_\_\_\_
  - 1 Drug treatment center
  - 2 Private clinic/doctors office
  - 3 Public clinic/hospital
  - 4 HIV counseling and testing site
  - 5 at a mobile site (health department van, needle exchange, etc)
  - 6 Other \_\_\_\_\_
  - 7 Don't Know
  - 8 Refuse to Answer

- L7. What was your last HIV/AIDS test result? (CHOOSE ONLY ONE)
- 0 Negative
  - 1 Positive
  - 2 Never got result
  - 7 Don't Know
  - 8 Refuse to Answer

**If L7 is not equal to 1, then skip to L14.**

- L8. When did you first test positive for HIV? (HIVPSDA)
- \_\_\_\_ / \_\_\_\_ mm / yyyy
- 2097 Don't Know (Year)
  - 2098 Refuse to Answer (Year)

L9. Has a doctor/ health care worker ever told you that you had HIV/AIDS?

- 1 Yes
- 0 No **Skip to L14**
- 7 Don't Know **Skip to L14**
- 8 Refuse to Answer **Skip to L14**

L10. Has a doctor/ health care worker ever offered you treatment for HIV/AIDS?

- 1 Yes
- 0 No **Skip to L14**
- 7 Don't Know **Skip to L14**
- 8 Refuse to Answer **Skip to L14**

L11. Have you ever taken medicines given to you by a doctor to treat HIV/AIDS?

- 1 Yes **Skip to L14**
- 0 No
- 7 Don't Know **Skip to L14**
- 8 Refuse to Answer **Skip to L14**

J12. Are you still taking these medicines?

- 1 Yes **Skip to L14**
- 0 No
- 7 Don't Know **Skip to L14**
- 8 Refuse to Answer **Skip to L14**

J13. Why are you not taking these medicines? (CHECK ALL THAT APPLY)

- a.  I feel good/healthy
- b.  I have other medical conditions
- c.  I don't have insurance
- d.  I don't have money
- e.  I'm doing drugs/drinking
- f.  I missed my appointment
- g.  My doctor prescribed some pills but I refused
- h.  My doctor said I don't need any medicines
- i.  I stopped seeing my doctor/ never went back
- j.  I have no doctor/not in care
- k.  I didn't want to take pills
- l.  Other \_\_\_\_\_
- \_\_\_ Don't Know
- \_\_\_ Refuse to Answer

L14. Have you known anyone personally who has HIV/AIDS? (KNOWHIV)

- 1 Yes
- 0 No **Skip to instruction before M1**
- 7 Don't Know **Skip to instruction before M1**

L15. How many people do you know who have HIV or AIDS?

- \_\_\_ Persons
- 97 Don't Know
- 98 Refuse to Answer

L16. How many people do you personally know who have died of HIV/AIDS?

- \_\_\_ Persons
- 97 Don't Know
- 98 Refuse to Answer

## M. DRUG TREATMENT

Now we would like to ask you some questions about drug treatment.

M1. Have you **EVER** been in **any** kind of drug treatment programs (not including 12-step programs such as Alcoholics or Narcotics Anonymous)?

- 1 Yes
- 0 No *Skip to M6*
- 8 Refuse to Answer *Skip to M6*

L2. In the last 3 months, have you been in **any** kind of drug treatment program (not including 12-step programs such as Alcoholics or Narcotics Anonymous)?

- 1 Yes
- 0 No *Skip to M6*
- 8 Refuse to Answer *Skip to M6*

L3. In the last 3 months, in which type of drug treatment programs were you in? (**CHECK ALL THAT APPLY**) (0 = No, 1=Yes)

1 = Yes

- a. \_\_\_ Detoxification with medication
- b. \_\_\_ Detoxification without medication
- c. \_\_\_ Methadone/other medication maintenance
- d. \_\_\_ Drug-free residential treatment (therapeutic community) (Rehabilitation Center)
- e. \_\_\_ Drug-free outpatient treatment
- f. \_\_\_ Inpatient (hospital) drug treatment program
- g. \_\_\_ Other Outpatient Treatment \_\_\_\_\_
- \_\_\_ Don't Know
- \_\_\_ Refuse to Answer

M4. In the past 3 months, how many weeks were you in **any** type of drug treatment program (not including 12-step programs such as Alcoholics or Narcotics Anonymous) that were not part of another program?

- | ___ | WEEKS                    |
|-----|--------------------------|
| 97  | Don't Know (Weeks)       |
| 98  | Refuse to Answer (Weeks) |

If **TIMETRX** is greater than 14 then “The time span you entered is greater than three months. Please re-enter.” skip to **TIMETRX**.

M5. Are you currently in any kind of drug treatment program (not including 12-step programs such as Alcoholics or Narcotics Anonymous) that are not part of another program? (Choose one)

- |   |                              |
|---|------------------------------|
| 0 | No                           |
| 1 | Yes                          |
| 2 | Trying to get into treatment |
| 8 | Refuse to Answer             |

M6. In the past 3 months, have you been a part of a 12-step program that was not part of another program?

- |   |                  |
|---|------------------|
| 1 | Yes              |
| 0 | No               |
| 8 | Refuse to Answer |

M7. Where any of these treatment programs in Mexico? (**TRTMX**)

- |   |                  |
|---|------------------|
| 1 | Yes              |
| 0 | No               |
| 8 | Refuse to Answer |

M8. During the **past 3 months**, did you want to enter a drug treatment program but did not go? (**ENTRPROG**)

- |   |                  |                        |
|---|------------------|------------------------|
| 1 | Yes              |                        |
| 0 | No               | <i>Skip to NEEDTRT</i> |
| 7 | Don't Know       | <i>Skip to NEEDTRT</i> |
| 8 | Refuse to Answer | <i>Skip to NEEDTRT</i> |

M9. What were the reasons you did not go to drug treatment? (**CHECK ALL THAT APPLY**)

- a.  Fear of withdrawal
- b.  Cost/financial
- c.  Child/family related problems
- d.  Did not meet admission criteria
- e.  Dislike center
- f.  Dislike treatment regimen
- g.  Too many rules/restrictions at treatment center
- h.  Job problems (eg. getting time off from work)
- i.  Too far to travel/not nearby
- j.  Didn't know where to go
- k.  Afraid of being treated badly by the staff
- l.  Afraid of others knowing I'm in treatment
- m.  Other \_\_\_\_\_
- Don't Know
- Refuse to Answer

L10. What was the most important reason you did not go to drug treatment? (**CHOOSE ONLY ONE**)

*(NTRMOSIG)*

- 00 Fear of withdrawal
- 01 Cost/financial
- 02 Child/family related problems
- 03 Did not meet admission criteria
- 04 Dislike center
- 05 Dislike treatment regimen
- 06 Too many rules/restrictions at treatment center
- 07 Job problems (like getting time off from work)
- 08 Too far to travel/not nearby
- 09 Didn't know where to go
- 10 Afraid of being treated badly by the staff
- 11 Afraid of others knowing I'm in treatment
- 12 Other
- 97 Don't Know
- 98 Refuse to Answer

L11. To what extent would you say that you are currently in need of treatment for your drug use? (**CHOOSE ONLY ONE**) (*NEEDTRT*)

- 0 No need
- 1 Some need
- 2 Great need
- 3 Urgent need
- 7 Don't Know
- 8 Refuse to Answer

## N. SEXUAL BEHAVIOR

This next part of the interview is about sex. When we say sex we mean vaginal (penis in a woman's vagina) or anal sex (penis in a man's or woman's anus). Sex includes all types of activities, whether they were paid or unpaid, and whether you wanted to do them or not. Please remember all your responses will be kept private and that you can refuse to answer any question.

In the next section we would like to ask you about the people you had sex with in the past 3 months. We will also be asking about male and female condom use. When we talk about condom use we mean the times that a condom was put on before there was contact between the penis and vagina for vaginal sex or before there was any contact between the penis and the anus for anal sex and taken off after you or your partner pulls out.

When we ask about **male condoms** we mean **latex** or **polyurethane** condoms (or "rubbers") that go over the man's penis, but not the kind made out of animal skin (like "Lambskin"). When we ask about **female condoms** we mean a polyurethane (plastic bag-like) tube that is soft in the middle with a stiff ring on either end that is put inside of the woman's vagina or a man's anus before sex.

For the purposes of this survey we are going to divide your sex partners into **Steady** and **Non-Steady** partners.

"**Steady**" partners are people you had sex with in the past three months that you feel close to in your heart,

"**Non-Steady**" partners are all the other people you had sex with in the last three months including those you may have had sex with for drugs or money.

**Partners can be Steady or Non-Steady but not both. Each partner should only be counted once.**

In the past 3 months, have you had sex with men, women, or both? (ANYSX)

- 1 Men only *skip to N2*
- 2 Women only *skip to N1*
- 3 Both men and women
- 4 I have not had sex in the past 3 months with anyone skip to instructions before FIRSTSEX
- 88 Refuse to answer skip to instructions before FIRSTSEX

**If ANYSX equals 2 skip to instructions before N3.**

N1. In the past 3 months, what is the total number of **women** you have had vaginal or anal sex with?

0 – 9996 = range

— — — —  
9998

Refuse to Answer

M2. In the past 3 months, what is the total number of **men** you have had vaginal or anal sex with?

0 – 9996 = range

— — — —  
9998

Refuse to Answer

**If N1 is equal to 0 then skip to instructions before N31.**

**If N2 is equal to 0 then skip to instruction before O1 (next section after male partners)**

**The next questions are about all your female partners.**

N3. In the past 3 months, how many **steady female partners** have you had vaginal or anal sex with?

**0 – 9996** = range

— — — — —

9998

Refuse to Answer

N4. In the past 3 months, how many **Non-Steady female partners** have you had vaginal or anal sex with - by that we mean "non-steady" or sex-trading partners?

**0 – 9996** = range

— — — — —

9998

Refuse to Answer

**If N3 is equal to 0 and N4 not equal to 9998, then skip to instruction before N6 (sex trading).**

**If N3 is equal to 0 and N4 is equal to 9998, then skip to instruction before N31 (male questions).**

Thinking about the **closest or most important female steady sex partner that you've had in the past 3 months**, please answer the next set of questions for that ONE person

N5. Please type in up to three initials or letters that will help you remember your **closest or most important female steady sex partner**

— — —

N6. In the past 3 months, how many times did you have **vaginal** sex with [Response to E3]?

— — — — —

0000 zero

9998 Refuse to Answer

**If N6 is equal to 0000 or 9998, then skip to N8.**

N7. Of the [WVAGSEX] times you and [WINIT] had vaginal sex, how many times did you use a male or female condom?

— — — — —

9998

Refuse to Answer

**If N7 is greater than N6 then “The total number of times you used a male or female condom is greater than the total number of times you had vaginal sex. Please review your answer.” skip to N6.**

N8. In the past 3 months, how many times did you have **anal** sex with [WINIT]?

— — — — —

0000 zero

9998 Refuse to Answer

**Skip to instruction before N10**

**If N8 is equal to 0000 or 9998 then skip to N10.**

N9. Of the [WANLSEX] times that you had anal sex with [WINIT], how many times did you use a male condom or a female condom inserted into [WINIT]'s anus or butt?

— — — — —

9998

Refuse to Answer

**If N9 is greater than N6 then “The total number of times you used a male condom or female condom is greater than the total number of times you had anal sex. Please review your answer.” Skip To N6.**

**If N6 is equal to 0 and N7 is equal to 0 then “Earlier you said you had a steady female sex partner. We define a sex partner as someone you have had sex [vaginal or anal] within the past 3 months. Please review your answers.” Skip to T6.**

Now a few more questions about your closest female steady sex partner.

N10. How would you describe your relationship with [WINIT]? (Choose only one answer)

1. She is my wife
2. She is my girlfriend
3. She is just a friend
4. She is a woman I have regular sex with
5. Other \_\_\_\_\_

N11. How many years and/or months have you been with [WINIT]?

1 - 240 = (Months)

(Please answer "1 month" if you have been with this person less than 1 month)

\_\_\_\_ YEARS  
\_\_\_\_ MONTHS  
997 Don't Know (Months)  
998 Refuse to Answer (Months)

**If N11 is greater than AGEMNTHS then “You have answered that the number of years you have been together with this partner is greater than your age. Please review your answer.” Skip to N11.**

N12. What is the Hepatitis C status of [WINIT]? (Choose one)

- 1 Negative
- 2 Positive
- 7 Don't Know
- 8 Refuse to Answer

**If N12 is equal to 7, then skip to WPARTINJ.**

N13. How do you know her Hepatitis C status? (Choose one)

- 1 She told me
- 2 Someone else told me
- 3 I saw her HIV test results
- 4 I saw a prescription for HCV medication in her name
- 5 No one told me, and I didn't see results, I just know
- 8 Refuse to Answer

N14. What is the HIV status of [WINIT]? (Choose one)

- 1 Negative
- 2 Positive
- 7 Don't Know
- 8 Refuse to Answer

**If N14 is equal to 7, then skip To N17.**

N15. How do you know her HIV status? (Choose one)

- 1 She told me
- 2 Someone else told me
- 3 I saw her HIV test results
- 4 I saw a prescription for HIV medication in her name
- 5 No one told me, and I didn't see results, I just know
- 8 Refuse to Answer

M17. Has [WINIT] ever injected drugs?

- 1 Yes
- 0 No **Skip to N21**
- 7 Don't Know **Skip to N21**
- 8 Refuse to Answer **Skip to N21**

N18. In the past 3 months, have you shared a needle with [WINIT]?

- 1 Yes
- 0 No **Skip to N21**
- 8 Refuse to Answer **Skip to N21**

N20. When you share a needle with [WINIT], who usually injects first? (Choose one)

- 1 You
- 2 [WINIT]
- 3 Both equally
- 8 Refuse to Answer

N20. Who mainly decides who injects first? (Choose one)

- 1 You
- 2 [WINIT]
- 3 Both
- 4 No decision made - just injected
- 8 Refuse to Answer

N21. In the last 3 months, do you think that [WINIT] has traded sex for money drugs or something s/he needed? WTRADESX

- 1 yes
- 2 no
- 3 I'm not sure

This next set of questions is about **all your female Non-Steady and/or sex-trading partners**. By sex-trading partners we mean partners with whom you have exchanged money or drugs for sex. Think about **all female Non-Steady or sex-trading partners** you may have had in the past three months and answer the next set of questions for these people.

N22. In the past 3 months, how many times did you have **vaginal** sex with **female Non-Steady and/or sex-trading partner(s)**?

— — — —  
0000 zero  
9998 Refuse to Answer

**If N22 is equal to 9998, then skip to N24.**

N23. Of these [WVAGCS] times, how many times did you use a male or female condom?

— — — —  
9998 Refuse to Answer

**If N22 is greater than N23 then “The total number of times you used a male or female condom is greater than the total number of times you had vaginal sex. Please review your answer.” Skip to N22.**

N24. In the past 3 months, how many times did you have **anal** sex with all **female Non-Steady and/or sex-trading partner(s)**?

— — — —  
0000 zero  
9998 Refuse to Answer

**If N24 is equal to 0000 or 9998 then skip to instructions before N26.**

N25. Of these [WANLCS] times, how many times did you use a male or female condom?

— — — —  
9998 Refuse to Answer

**If N25 is greater than N24 then “The total number of times you used a male condom is greater than the total number of times you had anal sex. Please review your answer.” skip to N24.**

**If N22 is equal to 0 and N24 is equal to 0 then “You previously stated that you had &[wNon-Steady] Non-Steady female sex partners in the past 3 months but you did not indicate any type of sex with these partners in the past 3 months. Please review your answers.” skip to instruction before N22.**

**If N2 is equal to 0 then skip to instructions before O1.**

The next set of questions is about all your male partners.

**If SEX is equal to 1, then skip to instruction before N27.**

N26. In the past 3 months, how many **steady male partners** have you had vaginal or anal sex with?

— — — —  
9998 Refuse to Answer

N27. In the past 3 months, how many **steady male partners** have you had anal sex with?

— — — —  
9998 Refuse to Answer

N28. In the past 3 months, how many **Non-Steady male partners** have you had vaginal or anal sex with - by that we mean "non-steady" or sex-trading partners?

— — — —  
9998 Refuse to Answer

**If SEX is equal to 2, then skip to instruction before N30.**

N29. In the past 3 months, how many **Non-Steady male partners** have you had anal sex with - by that we mean "non-steady" or sex-trading partners?

\_\_\_\_\_

9998 Refuse to Answer

Thinking about the **closest or most important male steady sex partner that you've had in the past 3 months**, please answer the next set of questions for that ONE person.

N30. Please type in up to three initials or letters that will help you remember your **closest or most important male steady sex partner**

\_\_\_\_\_

*If N26 is equal to 9998 and is not equal to 9998 and MINIT is equal to 98, then skip to instruction before N50.*

*If N27 is equal to 9998 and is not equal to 9998 and MINIT is equal to 98, then skip to instruction before N50.*

*If N50 is equal to 9998 and is equal to 9998 and MINIT is equal to 98, then skip to instruction before O1.*

*If N27 is equal to 9998 and is equal to 9998 and MINIT is equal to 98, then skip to instruction before O1.*

*If SEX is equal to 1, then skip to MANLSEX.*

N31. In the past 3 months, how many times did you have **vaginal** sex with [MINIT]?

\_\_\_\_\_

0000 zero

**Skip to instruction before MANLSEX**

9998 Refuse to Answer

*If N31 is equal to 0000 or 9998, then skip to N33.*

N32. Of these [MVAGSEX] times, how many times did you use a male or female condom?

\_\_\_\_\_

9998 Refuse to Answer

*If N32 is greater than N31 then "The total number of times you used a male or female condom is greater than the total number of times you had vaginal sex. Please review your answer." skip to N31.*

N33. In the past 3 months, how many times did you have **anal** sex with [MINIT]?

\_\_\_\_\_

0000 zero

**Skip to instruction before MCONCEC**

9998 Refuse to Answer

*If N33 is equal to 0000 or 9998, then skip to N35..*

M34. Of these [MANLSEX] times, how many times did you use a male or female condom?

\_\_\_\_\_

9998 Refuse to Answer

*If N34 is greater than N33 then "The total number of times you used a male condom is greater than the total number of times you had anal sex. Please review your answer." skip to N33.*

*If N31 is equal to 0 and N33 is equal to 0 then "You previously stated that you had a steady male sex partner in the past 3 months but you did not indicate any type of sex with a steady male partner in the past 3 months. Please review your answers." skip to instruction before N31.*

**Now a few more questions about your closest male steady sex partner**

N35. How would you describe your relationship with [MINIT]?

1. He is my boyfriend
2. He is just a friend
3. He is someone I have regular sex with
4. Other \_\_\_\_\_
5. Don't know
6. Refuse to answer

N36. How many years and/or months have you been with [MINIT]?

(Please answer "1 month" if you have been with this person less than 1 month)

— — —	YEARS
— — —	MONTHS
997	Don't Know (Months)
998	Refuse to Answer (Months)

***If N36 is greater than AGEMNTHS then "You have answered that the number of years you have been together with this partner is greater than your age. Please review your answer." skip to N36.***

N37. What is the Hepatitis C status of [MINIT]? (Choose one)

- |   |                  |
|---|------------------|
| 1 | Negative         |
| 2 | Positive         |
| 7 | Don't Know       |
| 8 | Refuse to Answer |

***If N37 is equal to 7, then skip to N39..***

N38. How do you know his Hepatitis C status? (Choose one)

- |   |   |
|---|---|
| 1 | He told me  |
| 2 | Someone else told me                                  |
| 3 | I saw his HIV test results                            |
| 4 | I saw a prescription for HIV medication in his name   |
| 5 | No one told me, and I didn't see results, I just know |
| 8 | Refuse to Answer                                      |

N39. What is the HIV status of [MINIT]? (Choose one)

- |   |                  |
|---|------------------|
| 1 | Negative         |
| 2 | Positive         |
| 7 | Don't Know       |
| 8 | Refuse to Answer |

***If N39 is equal to 7, then skip to N41.***

N40. How do you know his HIV status? (Choose one)

- 1 He told me
- 2 Someone else told me
- 3 I saw his HIV test results
- 4 I saw a prescription for HIV medication in his name
- 5 No one told me, and I didn't see results, I just know
- 8 Refuse to Answer

N41. Has [MINIT] ever injected drugs?

- 1 Yes
- 0 No **Skip to O1**
- 7 Don't Know **Skip to O1**
- 8 Refuse to Answer **Skip to O1**

N42. In the past 3 months, have you shared a needle with [MINIT]?

- 1 Yes
- 0 No **Skip to O1**
- 8 Refuse to Answer **Skip to O1**

N43. When you share a needle, who usually injects first? (Choose one)

- 1 You
- 2 [MINIT]
- 3 Both equally
- 8 Refuse to Answer

N44. Who mainly decides who injects first? (Choose one)

- 1 You
- 2 [MINIT]
- 3 Both
- 4 No decision made - just injected
- 8 Refuse to Answer

N45. In the last 3 months, do you think that [MINIT] has traded sex for money drugs or something s/he needed? MTRADESX

- 1 yes
- 2 no
- 3 I'm not sure
- 889 Refuse to answer

**If N26 is equal to 1 or N27 is equal to 1, then skip to instruction before N50.**

This next set of questions are about **all other steady male sex partners besides [MINIT]**. Thinking about all your **other male steady sex partner(s)** please answer the next set of questions.

**If SEX is equal to 1, then skip to N48.**

N46. In the past 3 months, how many times did you have **vaginal** sex with all **other steady male sex partner(s)**?

— — — —  
0000 zero  
9998 Refuse to Answer

**If N46 is equal to 0000 or 9998, then skip to N50.**

N47. Of these [MVAGOT] times, how many times did you use a male or female condom?

— — — —  
9998 Refuse to Answer

**If N47 is greater than N46 then “The total number of times you used a male condom is greater than the total number of times you had vaginal sex. Please review your answer.” skip to N46.**

N48. In the past 3 months, how many times did you have **anal** sex with all **other steady male sex partner(s)**?

— — — —  
0000 zero  
9998 Refuse to Answer

**If N48 is equal to 0000 or 9998, then skip to N50.**

N49. Of these [MANLOT] times, how many times did you use a male or female condom?

— — — —  
9998 Refuse to Answer

**If N49 is greater than N48 then “The total number of times you used a male or female condom is greater than the total number of times you had anal sex. Please review your answer.” skip to N48.**

**If N46 is equal to 0 and N48 is equal to 0 then “You previously stated that you had more than 1 steady male sex partner in the past 3 months but you did not indicate any type of sex with other steady male partners in the past 3 months. Please review your answers.” skip to instruction before N46.**

This next set of questions is about **all your male Non-Steady and/or sex-trading partners**. By sex-trading partners we mean partners whom you have exchanged money or drugs for sex. Think about **all male Non-Steady or sex-trading partners** you may have had in the past three months and please answer the next set of questions for these people.

**If SEX is equal to 1, then skip to N52.**

N50. In the past 3 months, how many times did you have **vaginal** sex with **male Non-Steady and/or sex-trading partner(s)**?

— — — —  
0000 zero **Skip to instruction before MANLCS**  
9998 Refuse to Answer

**If N50 is equal to 0000 or 9998, then skip to N52.**

M51. Of these [MVAGCS] times, how many times did you use a male or female condom?

— — — —  
9998 Refuse to Answer

**If N51 is greater than N50 then “The total number of times you used a male or female condom is greater than the total number of times you had vaginal sex. Please review your answer.” skip to N50.**

N52. In the past 3 months, how many times did you have *anal* sex with all **male Non-Steady and/or sex-trading partner(s)**?

— — — —  
0000 zero  
9998 Refuse to Answer

***If N52 is equal to 0000 or 9998, then skip to instructions before O1.***

N53. Of these [MANLCS] times, how many times did you use a male or female condom?

— — — —  
9998 Refuse to Answer

***If N53 is greater than N52 then “The total number of times you used a male condom is greater than the total number of times you had anal sex. Please review your answer.” skip to N52.***

***If MVAGCS is equal to 0 and MANLCS is equal to 0 then “You previously stated that you had &[mNon-Steady] Non-Steady male sex partners in the past 3 months but you did not indicate any type of sex with these male partners in the past 3 months. Please review your answers.” skip to instruction before FIRSTSEX.***

## O. PAST SEXUAL HISTORY

The next set of questions will deal with your past sexual history.

O1. How old were you the first time you had sex?

- 96 Never had sex
- 97 Don't Know Skip to O2
- 98 Refuse to Answer Skip to O2

*If O1 is greater than AGE then "You have entered an age of first sex that is greater than your current age of &[age]. Please go back and review your answer." skip to O1.*

O2. Have you ever exchanged sex for money or drugs?

- 1 Yes
- 0 No **Skip to P1**
- 8 Refuse to Answer

O3. In the last 3 months, did you give someone drugs in exchange for sex?

- 1 Yes
- 0 No
- 8 Refuse to

Answer

O4. In the last 3 months, did you give someone money in exchange for sex?

- 1 Yes
- 0 No
- 8 Refuse to

Answer

O5. In the last 3 months, did you give someone food, a place to stay, or another necessity in exchange for sex?

- 1 Yes
- 0 No
- 8 Refuse to

Answer

O6. In the last 3 months, did someone give you drugs in exchange for sex?

- 1 Yes
- 0 No
- 8 Refuse to

Answer

O7. In the last 3 months, did someone give you money in exchange for sex?

- 1 Yes
- 0 No
- 8 Refuse to

Answer

O8. In the last 3 months, did someone give you food, a place to stay or another necessity in exchange for sex?

- 1 Yes
- 0 No
- 8 Refuse to

Answer

O9. In the **past 3 months**, when someone gave you something you needed in exchange for sex, what was the gender of the person(s) you had sex with? (**CHOOSE ONLY ONE**)

- 0 Male
- 1 Female
- 2 Both
- 7 Don't Know
- 8 Refuse to

Answer

O10. In the past 3 months, how often have you asked the people you exchange sex with for something (money, drugs, food, shelter etc.) to use a condom? (Choose one)

- 0 Never
- 1 Sometimes
- 2 About half the
- 3 Often
- 4 Every time we had
- 8 Refuse to Answer

time

sex

**P SEX CORRELATES**

P1. How likely do you think it is that you would get **Hepatitis C** from sex in the next year? (Choose one)

- 1 Very unlikely
- 2 Somewhat unlikely
- 3 Neutral, neither likely nor
- 4 Somewhat likely
- 5 Very likely
- 8 Refuse to Answer

unlikely

P2. How likely do you think it is that you would get **HIV** from sex in the next year? (Choose one)

- |          |   |                             |
|----------|---|-----------------------------|
|          | 1 | Very unlikely               |
|          | 2 | Somewhat unlikely           |
| unlikely | 3 | Neutral, neither likely nor |
|          | 4 | Somewhat likely             |
|          | 5 | Very likely                 |
|          | 8 | Refuse to Answer            |

For the next four questions, please tell us how much you agree or disagree with each statement dealing with the use of condoms.

P3. Condoms ruin the mood (Choose one)

- |          |   |                   |
|----------|---|-------------------|
|          | 1 | Strongly Agree    |
|          | 2 | Agree             |
| Disagree | 3 | Neither Agree nor |
|          | 4 | Disagree          |
|          | 5 | Strongly Disagree |
|          | 8 | Refuse to Answer  |

P4. Sex doesn't feel as good when I use a condom. (Choose one)

- |          |   |                   |
|----------|---|-------------------|
|          | 1 | Strongly Agree    |
|          | 2 | Agree             |
| Disagree | 3 | Neither Agree nor |
|          | 4 | Disagree          |
|          | 5 | Strongly Disagree |
|          | 8 | Refuse to Answer  |

P5. Sex with condoms doesn't feel natural. (Choose one)

- |          |   |                   |
|----------|---|-------------------|
|          | 1 | Strongly Agree    |
|          | 2 | Agree             |
| Disagree | 3 | Neither Agree nor |
|          | 4 | Disagree          |
|          | 5 | Strongly Disagree |
|          | 8 | Refuse to Answer  |

P6. Using condoms breaks up the rhythm of sex. (Choose one)

- |          |   |                   |
|----------|---|-------------------|
|          | 1 | Strongly Agree    |
|          | 2 | Agree             |
| Disagree | 3 | Neither Agree nor |
|          | 4 | Disagree          |
|          | 5 | Strongly Disagree |
|          | 8 | Refuse to Answer  |

**Q. GENERAL CORRELATES**

The following two questions deal with topics that are often difficult to talk or think about. They are questions about physical and sexual abuse that you may have experienced early in your life. When the question says child, it means when you were younger than 18.

Q1. As a child, were you ever beaten, physically attacked, or physically abused?

- |        |   |            |
|--------|---|------------|
|        | 1 | Yes        |
|        | 0 | No         |
|        | 7 | Don't Know |
| Answer | 8 | Refuse to  |

Q2. As a child, were you ever sexually attacked, raped, or sexually abused?

- |        |   |            |
|--------|---|------------|
|        | 1 | Yes        |
|        | 0 | No         |
|        | 7 | Don't Know |
| Answer | 8 | Refuse to  |

Q3. As an adult, have you ever been beaten, physically attacked, or physically abused?

- |        |   |            |
|--------|---|------------|
|        | 1 | Yes        |
|        | 0 | No         |
|        | 7 | Don't Know |
| Answer | 8 | Refuse to  |

Q4. As an adult, have you ever been sexually attacked, raped, or sexually abused?

- |        |   |            |
|--------|---|------------|
|        | 1 | Yes        |
|        | 0 | No         |
|        | 7 | Don't Know |
| Answer | 8 | Refuse to  |

For the following items, please check whether you think the statement is TRUE or FALSE. If you are not sure, but you think you know the answer, check the answer you think is correct, but if you are really not sure then check DON'T KNOW.

	Q5.	Once people get infected with hepatitis C, most will have it forever (Choose one)	1	True
			2	False
			7	Don't
Know				
	Q6.	Most people with hepatitis C can tell they are infected (Choose one)	1	True
			2	False
			7	Don't
Know				
	Q7.	You can tell by looking at a person that they have hepatitis C (Choose one)	1	True
			2	False
			7	Don't
Know				
	Q8.	Contracting hepatitis A can be more serious if a person already has hepatitis C (Choose one)	1	True
			2	False
			7	Don't
Know				
	Q9.	It is safe for a person with hepatitis C to drink alcohol (Choose one)	1	True
			2	False
			7	Don't
Know				
	Q10.	Once people get infected with HIV, they will have it forever (Choose one)	1	True
			2	False
			7	Don't
Know				
	Q11.	Most people with HIV can tell they are infected (Choose one)	1	True
			2	False
			7	Don't
Know				
	Q12.	You can tell by looking at a person that they have HIV infection (Choose one)	1	True
			2	False
			7	Don't
Know				

Q13. There are drugs that can cure a person of their HIV infection (Choose one)

- 1 True
- 2 False
- 7 Don't

Know

## R. VACCINATION HISTORY

The next set of questions will deal with your vaccination history.

R1. Vaccinations that protect people from hepatitis B started in 1982. Have you ever received shots to prevent hepatitis B?

- 1 Yes
- 0 No
- 2 I don't know what hepatitis B
- 7 Don't Know

is

***If R1 is equal to 0, then skip to R6.***

***If R1 is equal to 7 or 2, then skip to R7.***

R2. How many shots did you receive?

— —  
97 Don't Know

R3. What year did you receive the last shot of hepatitis B vaccine?

— — — — YYYY  
2097 Don't Know (Year)

***If Date(R3) is less than AGE then "The year you've given for your last shot of Hepatitis B vaccine is before your birth date. Please review your answer." skip to R3.***

R4. Please check all the people or places that advised you to get the Hepatitis B vaccine. (Check all that apply)

0 = No  
1 = Yes  
97 = Don't Know

- staff  Private Doctor
- Hospital clinic/Emergency Room
- STD clinic staff
- Free clinic/community clinic
- HIV Counselor
- Drug treatment program staff
- Needle Exchange Program staff
- Street outreach worker
- Jail/prison staff
- Research study
- Friend/Family
- Other
- Don't Know

***If (A19 is equal to 0 or A20 is equal to 0 and A21 is equal to 0) and I21EI is equal to 1 then You have checked off that you received advice to get the Hepatitis B vaccine from jail/prison staff, even though you previously answered that you have never been to jail/prison. Please review your answer." skip to A19.***

R5. Please check all the places where you got the vaccine. (Check all that apply)

0= No  
1 = Yes  
97 = Don't Know

- Private Doctor's office
- Hospital clinic/Emergency Room
- STD clinic
- Free clinic/community clinic
- HIV Counseling and testing clinic
- Drug treatment program clinic
- storefront)  Needle Exchange Program or Outreach site (van,
- Jail/prison
- Research study
- Other
- Don't Know

***If (A19 is equal to 0 or A20 is equal to 0 and A21 is equal to 0) and I21F is equal to 1 then You have checked off that got the vaccine from jail/prison, even though you previously answered that you have never been to jail/prison. Please review your answer." skip to A19.***

***If R1 is equal to 1, then skip to R8.***

R6. What are the reasons that you did not get the Hepatitis B vaccine? (Choose one)

- 1 Did not think I could get Hepatitis B
- 2 Did not know there was a vaccine
- 3 Did not know where to get vaccine
- 4 Vaccine was not available at the place I was referred
- 5 Too much trouble
- 6 Too expensive
- 7 Do not believe in shots
- 8 Other

to

R7. What was the MAIN reason for NOT getting the Hepatitis B vaccine? (Choose one)

- 1 Did not think I could get Hepatitis B
- 2 Did not know there was a vaccine
- 3 Did not know where to get vaccine
- 4 Vaccine was not available at the place I was referred
- 5 Too much trouble
- 6 Too expensive
- 7 Do not believe in shots
- 8 Other

to

R8. Vaccinations that protect people from hepatitis A started in 1995. Have you ever received shots to prevent hepatitis A?

- 1 Yes
- 0 No
- 2 I don't know what hepatitis A is
- 7 Don't Know

**If R8 is equal to 0, then skip to R13.**

**If R8 is equal to 7 or 2, then skip to instruction before R.**

R9. How many shots did you receive?

- —
- 97 Don't Know

R10. What year did you receive the last shot of hepatitis A vaccine?

- — — — YYYY
- 2097 Don't Know (Year)

R11. Please check all the people or places that advised you to get the Hepatitis A vaccine. (Check all that apply)

0 = No  
1 = Yes  
97 = Don't Know

- staff  Private Doctor
- Hospital clinic/ Emergency Room
- STD clinic staff
- Free clinic/community clinic
- HIV Counselor
- Drug treatment program staff
- Needle Exchange Program staff
- Street outreach worker
- Jail/prison staff
- Research study
- Friend/Family
- Other
- Don't Know

***If (A19 is equal to 0 or A20 is equal to 0 and A21 is equal to 0) and H22DI is equal to 1 then You have checked off the you received advice to get the Hepatitis A vaccine from jail/prison staff, even though you previously answered that you have never been to jail/prison. Please review your answer." skip to A19.***

R12. Please check all the places where you got the vaccine. (Check all that apply)

0 = No  
1 = Yes  
97 = Don't Know

- Private Doctor's office
- Hospital clinic/Emergency Room
- STD clinic
- Free clinic/community clinic
- HIV Counseling and testing clinic
- Drug treatment program clinic
- storefront)  Needle Exchange Program or Outreach site (van,
- Jail/prison
- Research study
- Other
- Don't Know

***If (A19 is equal to 0 or A20 is equal to 0 and A21 is equal to 0) and H22EH is equal to 1 then You have checked off that got the vaccine from jail/prison, even though you previously answered that you have never been to jail/prison. Please review your answer." skip to A19.***

**If R8 is equal to 1, then skip to instruction before S1.**

R13. What was the MAIN reason for NOT getting the Hepatitis A vaccine? (Choose one)

- 1 Did not think I could get Hepatitis A
- 2 Did not know there was a vaccine
- 3 Did not know where to get vaccine
- 4 Vaccine was not available at the place I was referred
- 5 Too much trouble
- 6 Too expensive
- 7 Do not believe in shots
- 8 Other

to

**S. SOCIAL SUPPORT**

S1. If you wanted to talk to someone about things that are very personal and private or if you needed some advice, is there anyone you could talk to?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to

Answer

S2. If you needed to borrow \$25 or something valuable is there anyone who would lend or give it to you?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to

Answer

S3. How many people do you know who have ever used drugs? (They may do drugs with you, with others or by themselves. They also may have used drugs in the past but do not now.)

- — people
- 97 Don't Know
- 98 Refuse to

Answer

**T. TUBERCULOSIS**

The next set of questions deal with Tuberculosis.

T1. Can people have TB in their body and not know it because they don't have any obvious symptoms to it?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to Answer

T2. Can TB be spread from person to person through the air?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to Answer

T3. Can TB be cured by taking medicines?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to Answer

T4. Do you currently have a cough?

- 1 Yes
- 0 No

*Skip to*

*TBSKINTS*

- 7 Don't Know

*Skip to*

*TBSKINTS*

- 8 Refuse to Answer

*Skip to*

*TBSKINTS*

T5. How long have you had your cough?

- 1 7 days or less
- 2 8-13 days
- 3 14-20 days
- 4 21 days or more
- 5 I'm not sure

T6. Since this cough began, have you ever seen blood in the phlegm (mucus) that you coughed up?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to Answer

T7. How many times since your cough started have you seen blood in the phlegm (mucus) that you coughed up?

---

T8. Have you ever had a skin test for TB?

1	Yes	
0	No	<i>Skip to T10</i>
7	Don't Know	<i>Skip to T10</i>
8	Refuse to Answer	<i>Skip to T10</i>

T9. What was the result of your last test? (**CHOOSE ONLY ONE**)

0	Negative
1	Positive
2	Indeterminate
7	Don't Know
8	Refuse to Answer

T10. Have you ever had a chest X-ray because a medical person thought you might have TB?

1	Yes	
0	No	<i>Skip to T12</i>
7	Don't Know	<i>Skip to T12</i>
8	Refuse to Answer	<i>Skip to T12</i>

T11. When was the last time you had a chest X-ray for TB? (**CHOOSE ONLY ONE**)

1	Within the past month
2	2-6 Months ago
3	7-12 Months ago
4	More than a year ago
5	Don't Know
6	Refuse to Answer

T12. Have you ever been told by a doctor or health care provider that you have active TB?  
This does not include having a positive skin test for TB but no symptoms.

1	Yes	
0	No	<i>Skip to T17</i>
7	Don't Know	<i>Skip to T17</i>
8	Refuse to Answer	<i>Skip to T17</i>

T13. In which CITY were you told that you have active TB? \_\_\_\_\_

T14. In which STATE were you told that you have active TB? \_\_\_\_\_

T15. In which COUNTRY were you told that you have active TB? (**CHOOSE ONLY ONE**)

0	Mexico
1	US
2	Other _____
7	Don't Know
8	Refuse to Answer

T16. When were you told that you had an active TB test?  
 \_\_\_ / \_\_\_ (mm / yyyy)  
 7 Don't Know (Year)  
 8 Refuse to Answer (Year)

T17. Have you ever taken medication for TB disease or latent (sleeping TB)?

1	Yes for TB disease	
2	Yes for latent (sleeping TB)	
0	No	<i>Skip to T1</i>
7	Don't Know	<i>Skip to T1</i>
8	Refuse to Answer	<i>Skip to T1</i>

T18. Please type in the name(s) of the drug(s) you were prescribed for tuberculosis. Don't worry about spelling. Just do your best.

---

T19. For how many months did you take TB medicines? \_\_\_ months

7	Don't Know
8	Refuse to Answer

T20. If you stopped taking your medicine sooner than your doctor asked you to, what was your reason for stopping early? **(READ OUT LIST, CHECK ALL THAT APPLY)**

- a. \_\_\_ The drugs made me feel sick
- b. \_\_\_ I did not think I needed them anymore
- c. \_\_\_ I could not afford to buy the medicine
- d. \_\_\_ My doctor told me to stop
- e. \_\_\_ I was deported back to Mexico
- f. \_\_\_ Other \_\_\_\_\_
- g. \_\_\_ Don't Know
- h. \_\_\_ Refuse to Answer

**T. STI QUESTIONS**

T1. Have you ever been diagnosed with a sexually transmitted disease by a doctor, nurse, or other medical provider?

- |   |                  |                   |
|---|------------------|-------------------|
| 1 | Yes              |                   |
| 0 | No               | <i>Skip to U1</i> |
| 7 | Don't Know       | <i>Skip to U1</i> |
| 8 | Refuse to Answer | <i>Skip to U1</i> |

T2. Which sexually transmitted disease(s) were you ever diagnosed with? (**CHECK THAT APPLY**)

- Chancroid
- Chlamydia (The Clam, Goey Stuff)
- Genital warts(HPV, Human Papalloma Virus)
- Gonorrhea (Dose, Clap, Drip)
- Granuloma inguinale (Donovanosis)
- Hepatitis B
- Herpes
- Lice (pubic lice, crabs)
- Lymphogranuloma venarium (LGV)
- Molluscum (Molluscum Contagiosum)
- MPC (Mucopurulent Cervicitis)
- NGU (Non-gonococcal urethritis)
- Syphilis
- Trichomonas
- An injury (e.g., zipper burn, spider bite)
- Other \_\_\_\_\_
- Don't Know
- Refuse to Answer

T3. How many times in your LIFETIME have you been diagnosed with a sexually transmitted disease? If you had the same type of infection two times, please count it as twice.

- 00 Zero
- 97 Don't Know
- 98 Refuse to Answer

T4. When was the last time you were diagnosed with a sexually transmitted disease?

- \_\_\_\_\_ Years
- \_\_\_\_\_ Months
- \_\_\_\_\_ Days
- 9997 Don't Know (Months)
- 9998 Refuse to Answer (Months)

T5. The last time that you were diagnosed, which sexually transmitted disease did you have?  
**(CHECK THAT APPLY)**

- Chancroid
- Chlamydia (The Clam, Gooley Stuff)
- Genital warts(HPV, Human Papilloma Virus)
- Gonorrhea (Dose, Clap, Drip)
- Granuloma inguinale (Donovanosis)
- Hepatitis B
- Herpes
- Lice (pubic lice, crabs)
- Lymphogranuloma venarium (LGV)
- Molluscum (Molluscum Contagiosum)
- MPC (Mucopurulent Cervicitis)
- NGU (Non-gonococcal urethritis)
- Syphilis
- Trichomonas
- An injury (e.g., zipper burn, spider bite)
- Other \_\_\_\_\_
- Don't Know
- Refuse to Answer

T6. Which additional sexually transmitted diseases have you been diagnosed with in the past 3 months? **(CHECK THAT APPLY)**

- Chancroid
- Chlamydia (The Clam, Gooley Stuff)
- Genital warts(HPV, Human Papilloma Virus)
- Gonorrhea (Dose, Clap, Drip)
- Granuloma inguinale (Donovanosis)
- Hepatitis B
- Herpes
- Lice (pubic lice, crabs)
- Lymphogranuloma venarium (LGV)
- Molluscum (Molluscum Contagiosum)
- MPC (Mucopurulent Cervicitis)
- NGU (Non-gonococcal urethritis)
- Syphilis
- Trichomonas
- An injury (e.g., zipper burn, spider bite)
- Other \_\_\_\_\_
- Don't Know
- Refuse to Answer

## U. HEPATITIS QUESTIONS

U1. Have you ever been diagnosed with a viral hepatitis by a doctor, nurse, or other medical provider?

- 1 Yes
- 0 No *Skip to*

*LANGUAGE*

- 7 Don't Know *Skip to*

*LANGUAGE*

- 8 Refuse to Answer *Skip to*

*LANGUAGE*

U2. Have you ever been diagnosed with hepatitis A by a doctor, nurse, or other medical provider?

- 1 Yes
- 0 No *Skip to*

*LANGUAGE*

- 7 Don't Know *Skip to*

*LANGUAGE*

- 8 Refuse to Answer *Skip to*

*LANGUAGE*

U3. Have you ever been diagnosed with hepatitis B by a doctor, nurse, or other medical provider?

- 1 Yes
- 0 No *Skip to*

*LANGUAGE*

- 7 Don't Know *Skip to*

*LANGUAGE*

- 8 Refuse to Answer *Skip to*

*LANGUAGE*

U4. Have you ever been diagnosed with hepatitis C by a doctor, nurse, or other medical provider?

- 1 Yes
- 0 No *Skip to*

*LANGUAGE*

- 7 Don't Know *Skip to*

*LANGUAGE*

- 8 Refuse to Answer *Skip to*

*LANGUAGE*

U5. When were you diagnosed with hepatitis B?

- \_\_\_ / \_\_\_ mm / yyyy
- 2097 Don't Know (Year)
- 2098 Refuse to Answer (Year)

U6. When were you diagnosed with hepatitis C?

- \_\_\_ / \_\_\_ mm / yyyy
- 2097 Don't Know (Year)
- 2098 Refuse to Answer (Year)

U7. Have you ever experienced jaundice (yellow discoloration of the eyes)?

- 1 Yes
- 0 No
- 7 Don't Know
- 8 Refuse to Answer

U8. When was the first time that your experienced jaundice (yellow discoloration of the eyes)?

- \_\_\_ \_\_\_ / \_\_\_ \_\_\_ \_\_\_ mm / yyyy  
2097 Don't Know (Year)  
2098 Refuse to Answer (Year)

*If not recruited by RDS method, skip to W.*

## V. RDS QUESTIONS

Now we would like to ask you some questions about the person that asked you to participate in this study. We will call this person, “the person who gave you the study coupon”

V1.What gender is the person who gave you the study coupon?

- 1 A male
- 2 A female
- 3 Transgender/Transexual

V2.How old do you think is the person who gave you the study coupon?

- \_\_\_ \_\_\_ years  
2097 don't know  
2098 Refuse to answer

V3.What is the ethnicity of the person who gave you the study coupon?

- 1 African American or Black
- 2 Asian or Asian American
- 3 Caucasian (white - non Hispanic)
- 4 Hispanic or Latino
- 5 Pacific Islander
- 6 Native American/American Indian/Alaskan Native
- 7 Other

V4.How long have you and the person who gave you the study coupon known each other?  
(Please choose a timeframe) (Choose one)

- 0 day(s)
- 1 week(s) SKIP TO V6
- 2 month(s) SKIP TO V7
- 3 year(s) SKIP TO V8
- 4 Never met before
- 7 Don't Know
- 8 Refuse to Answer

V5. How many days ago?  
 \_\_\_ \_\_ \_ DAYS  
 997 Don't Know (Days)  
 998 Refuse to Answer (Days)

V6. How many weeks ago?  
 \_\_\_ \_\_ \_ WEEKS  
 997 Don't Know (Weeks)  
 998 Refuse to Answer (Weeks)

V7. How many months ago?  
 \_\_\_ \_\_ \_ MONTHS  
 997 Don't Know (Months)  
 998 Refuse to Answer (Months)

V8. How many years ago?  
 \_\_\_ \_\_ \_ YEARS  
 997 Don't Know (Years)  
 998 Refuse to Answer (Years)

V9. What would you say is your current relationship with the person that you gave the study coupon? (Check all that apply)

- 01 Friend
- 02 Boyfriend/Girlfriend
- 03 Spouse
- 04 Non-Steady sex partner
- 05 Acquaintance
- 06 Stranger
- 07 Other \_\_\_\_\_
- 77 Don't know
- 88 Refuse to Answer

V10. Have you and the person that gave you the study coupon **ever** used drugs together?  
 1 Yes  
 0 No

V11. Have you and the person that gave you the study coupon **ever** injected drugs together? )  
 1 Yes

0 No

**If RDS7 is equal to 0 skip to V14.**

V12. How long ago was the **first** time you and the person who gave you the study coupon inject drugs together? (Please choose a timeframe) (Choose one)

- 0 DAY(s)
- 1 week(s) **skip to V12b**
- 2 month(s) **skip to V12c**
- 3 year(s) **skip to V12d**
- 7 Don't Know
- 8 Refuse to Answer

V12a. How many days ago?

- \_\_\_ \_\_ \_ DAYS
- 997 Don't Know (Days)
- 998 Refuse to Answer (Days)

V12b. How many weeks ago?

- \_\_\_ \_\_ \_ WEEKS
- 997 Don't Know (Weeks)
- 998 Refuse to Answer (Weeks)

V12c. How many months ago?

- \_\_\_ \_\_ \_ MONTHS
- 997 Don't Know (Months)
- 998 Refuse to Answer (Months)

V12d. How many years ago?

- \_\_\_ \_\_ \_ YEARS
- 997 Don't Know (Years)
- 998 Refuse to Answer (Years)

V13. How long ago was the **last** time you and the person who gave you the study coupon inject drugs together?

(Please choose a timeframe) (Choose one)

- 0 day(s)
- 1 week(s) **Skip to V13b**
- 2 month(s) **Skip to V13c**
- 3 year(s) **Skip to V13d**
- 7 Don't Know
- 8 Refuse to Answer

V13a. How many days ago?

- \_\_\_ \_\_ \_ DAYS
- 997 Don't Know (Days)
- 998 Refuse to Answer (Days)

V13b. How many weeks ago?  
\_\_\_ \_\_ \_\_ WEEKS  
997 Don't Know (Weeks)  
998 Refuse to Answer (Weeks)

V13c. How many months ago?  
\_\_\_ \_\_ \_\_ MONTHS  
997 Don't Know (Months)  
998 Refuse to Answer (Months)

V13d. How many years ago?  
\_\_\_ \_\_ \_\_ YEARS  
997 Don't Know (Years)  
998 Refuse to Answer (Years)

V14. Have you and the person that gave you the study coupon ever had sex?  
1 Yes  
0 No **Skip to RDS13**

V15. How long ago was the **first** time you and the person who gave you the study coupon had sex? (Please choose a timeframe) (Choose one)

- 0 day(s)
- 1 week(s) **SKIP TO V15b**
- 2 month(s) **SKIP TO V15c**
- 3 year(s) **SKIP TO V15d**
- 7 Don't Know
- 8 Refuse to Answer

V15a. How many days ago?  
\_\_\_ \_\_ \_\_ DAYS  
997 Don't Know (Days)  
998 Refuse to Answer (Days)

V15b. How many weeks ago?  
\_\_\_ \_\_ \_\_ WEEKS  
997 Don't Know (Weeks)  
998 Refuse to Answer (Weeks)

V15c. How many months ago?  
\_\_\_ \_\_ \_\_ MONTHS  
997 Don't Know (Months)  
998 Refuse to Answer (Months)

V16d. How many years ago?  
\_\_\_ \_\_ \_\_ YEARS  
997 Don't Know (Years)

998 Refuse to Answer (Years)

V17. How long ago was the last time you and the person who gave you the study coupon had sex? (Please choose a timeframe) (Choose one)

- 0 day(s)
- 1 week(s) **SKIP TO V17b**
- 2 month(s) **SKIP TO V17c**
- 3 year(s) **SKIP TO V17d**
- 7 Don't Know
- 8 Refuse to Answer

V17a. How many days ago?

\_\_\_ \_\_ \_\_ DAYS

997 Don't Know (Days)

998 Refuse to Answer (Days)

V17b. How many weeks ago?

\_\_\_ \_\_ \_\_ WEEKS

997 Don't Know (Weeks)

998 Refuse to Answer (Weeks)

V17c. How many months ago?

\_\_\_ \_\_ \_\_ MONTHS

997 Don't Know (Months)

998 Refuse to Answer (Months)

V17d. How many years ago?

\_\_\_ \_\_ \_\_ YEARS

997 Don't Know (Years)

998 Refuse to Answer (Years)

V18. Do you know the HIV status of the person who gave you the study coupon?

1 Yes

0 No **Skip to V20**

7 Don't know

V19. What is his/her status?

1 HIV positive

2 HIV negative

998 Refuse to Answer

V20. Do you know if the person who gave you the study coupon had hepatitis C virus (HCV)?

1 Yes

2 No

3 Don't know

998 Refuse to Answer

V21. How much would you say you currently trust the person who gave you the study coupon?

- 01 I don't trust him/her at all
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09 I trust him/her a lot
- 997 Don't Know
- 98 Refuse to Answer

V22. In general, how trusting are your family members?

- 01 Extremely trusting
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09 Not at all trusting
- 997 Don't Know
- 98 Refuse to Answer

V23. In general, how trusting are your friends?

- 01 Extremely trusting
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09 Not at all trusting
- 997 Don't Know
- 98 Refuse to Answer

V24. In general, how trusting are your acquaintances?

- 01 Extremely trusting
- 02

- 03
- 04
- 05
- 06
- 07
- 08
- 09 Not at all trusting
- 997 Don't Know
- 98 Refuse to Answer

V25. In general, how trusting are your sex partners?

- 01 Extremely trusting
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09 Not at all trusting
- 997 Don't Know
- 98 Refuse to Answer

V26. In general, how trusting are you with your injection partners?

- 01 Extremely trusting
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09 Not at all trusting
- 997 Don't Know
- 98 Refuse to Answer

V27. The person that gave you the study coupon only had three coupons to refer other people to this study, why do you think that this person chose to give his/her coupon to you?

OPEN

ENDED

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## W. CROSS-BORDER QUESTIONS

W1. Which of the following languages do you speak at least well enough to have a conversation? (check all that apply)

- 1 English
- 2 Spanish
- 3 Other, please specify \_\_\_\_\_
- 8 Refuse to answer

U2. How many countries have you been to in the last 10 years **other than the U.S.?** (CHOOSE ONLY ONE)

- |   |                  |                   |
|---|------------------|-------------------|
| 0 | None             | <i>Skip to U3</i> |
| 1 | 1                |                   |
| 2 | 2                |                   |
| 3 | 3                |                   |
| 4 | 4                |                   |
| 5 | 5                |                   |
| 6 | More than 5      |                   |
| 7 | Don't Know       | <i>Skip to U3</i> |
| 8 | Refuse to Answer | <i>Skip to U3</i> |

U3. Do you have friends or family who live in Mexico?

- 01 Yes, friends only
- 02 Yes, Family only
- 03 Yes, both friends and family
- 04 No
- 07 Don't know
- 08 Refuse to answer

U4. Have you ever traveled to Mexico?

- |   |                  |                      |
|---|------------------|----------------------|
| 1 | Yes              |                      |
| 0 | No               | <i>[skip to H25]</i> |
| 7 | Don't Know       | <i>[skip to H25]</i> |
| 8 | Refuse to Answer | <i>[skip to H25]</i> |

U5. Do you sometimes spend the night in Mexico?

- |   |                  |
|---|------------------|
| 1 | Yes              |
| 0 | No               |
| 7 | Don't Know       |
| 8 | Refuse to Answer |

U6. In last 3 months, how many times did you cross the border into Mexico?

- — — times
- 000 zero *Skip to U9*
- 997 Don't Know *Skip to u9*
- 998 Refuse to Answer *Skip to U9*

U7. In the last 3 months, which cities in Mexico have you traveled to?

- 01 Tijuana
- 02 Tecate
- 03 Puerto Nuevo
- 04 Rosarito
- 05 Ensenada
- 06 Other \_\_\_\_\_
- 998 Refuse to Answer

U8. In the last 3 months, did you do any of the following in the Mexico? (CHECK ALL THAT APPLY)

- a. \_\_\_ Work
- b. \_\_\_ Visit Family
- c. \_\_\_ Visit Friends
- d. \_\_\_ Vacation
- e. \_\_\_ Sell illegal drugs
- f. \_\_\_ Buy illegal drugs
- g. \_\_\_ Use illegal drugs
- i. \_\_\_ Buy sex
- j. \_\_\_ Sell sex
- k. \_\_\_ Sell blood/plasma
- l. \_\_\_ Have unprotected sex
- m. \_\_\_ Went to drug treatment
- n. \_\_\_ Went to alcohol treatment
- o. \_\_\_ Medical care
- p. \_\_\_ Transporting people
- q. \_\_\_ Transporting illegal drugs
- r. \_\_\_ Other \_\_\_\_\_
- \_\_\_ Don't Know
- \_\_\_ Refuse to Answer

U9. Overall, how many people whom you consider to be friends, family, sex partners, or injecting partners do you know who traveled to Mexico at least once in the past year?

— — — people  
997 Don't Know  
998 Refuse to

Answer

U10. Have you **ever** used drugs in Mexico (not injected)?

1 Yes  
0 No [skip to U12]  
7 Don't Know [skip to U12]  
8 Refuse to Answer [skip to U12]

U11. In the **last 3 months**, have you used drugs while in Mexico (not injected)?

1 Yes  
0 No [skip to U12]  
7 Don't Know [skip to U12]  
8 Refuse to Answer [skip to U12]

U11. In what city(s)/town(s) did you use drugs in Mexico?

- 00 Tijuana
- 01 Tecate
- 02 Puerto Nuevo
- 03 Rosarito
- 04 Ensenada
- 05 Other (specify)\_\_\_\_\_

U12. Have you ever injected drugs in Mexico?

1 Yes  
0 No [skip to U24]  
7 Don't Know [skip to U24]  
8 Refuse to Answer [skip to U24]

U13. In the **last 3 months**, have you injected drugs while in Mexico? (3MMXINJ)

1 Yes  
0 No [skip to U15]  
7 Don't Know [skip to U15]  
8 Refuse to Answer [skip to U15]

**IF EVRMXINJ is equal to 0 or 7 or 8 skip to TYPDRGMX**

U14. In what city(s)/town(s) did you inject drugs in Mexico?

- 00 Tijuana
- 01 Tecate
- 02 Puerto Nuevo
- 03 Rosarito
- 04 Ensenada
- 05 Other (specify)

U15. Have you ever injected with someone while you were in Mexico?

- 00 No [skip to U23]
- 01 Yes
- 07 DK [skip to **U23**]
- 08 Ref [skip to **U23**]

U16. Have you ever, lent or rent your syringe to someone in Mexico after you had already used it?

- 00 No [skip to U18]
- 01 Yes
- 07 DK [skip to **U18**]
- 08 Ref [skip to U18]

U17. How long has it been since you last gave, lent or rented your used syringe to someone in Mexico for their use?

- \_\_\_\_\_ Days
- \_\_\_\_\_ Months
- \_\_\_\_\_ Years
- 07 DK
- 08 Ref

U18. Thinking of **all** the times you injected with other people in Mexico, did you ever use a syringe after someone had already used it?

- 00 No [skip to U20]
- 01 Yes
- 07 DK [skip to **U20**]
- 08 Ref [skip to **U20**]

U19. How long has it been since you last used a syringe in Mexico that someone else had already used?

- \_\_\_\_\_ Days
- \_\_\_\_\_ Months
- \_\_\_\_\_ Years
- 07 DK
- 08 Ref

U20. Again, thinking of all the times you injected with other people in Mexico, did you ever share injection equipment like cookers, cotton, or water with them?

- 00 No [skip to U22]
- 01 Yes
- 07 DK [skip to U22]
- 08 Ref [skip to U22]

U21. How long has it been since you last shared injection equipment like cookers, cottons or water with someone in Mexico?

- \_\_\_\_\_ Days
- \_\_\_\_\_ Months
- \_\_\_\_\_ Years
- 07 DK
- 08 Ref

U22. Please indicate any places where you have **ever** injected drugs in Mexico? (CHECK ALL THAT APPLY)

- \_\_\_ At your home
- \_\_\_ At someone else's home
- \_\_\_ Shooting gallery
- \_\_\_ Construction site
- \_\_\_ Alleyway
- \_\_\_ Bar/Hangout
- \_\_\_ On the street
- \_\_\_ Vacant lot
- \_\_\_ Park
- \_\_\_ Other \_\_\_\_\_
- \_\_\_ Don't Know
- \_\_\_ Refuse to Answer

U23. In the last 3 months, have you used any of the following drugs while in Mexico?

- 01 Marijuana or hash
- 02 Smoked heroin by itself
- 03 Snorted/inhaled heroin by itself
- 04 Injected heroin by itself
- 05 Smoked powder cocaine
- 06 Smoked crack cocaine
- 07 Snorted/inhaled powder cocaine
- 08 Snorted/inhaled crack cocaine
- 09 Injected powder cocaine by itself
- 10 Injected crack cocaine by itself
- 11 Injected heroin and cocaine (crack or powder) together (sometimes called "speedball")

- 12 Smoked methamphetamine/crystal by itself
- 13 Snorted/inhaled methamphetamine/crystal by itself
- 14 Injected methamphetamine/crystal by itself
- 15 Injected methamphetamine and cocaine together
- 16 Injected methamphetamine and heroin together
- 17 Inhalants (like glue, gasoline)
- 18 Swallowed tranquilizers (like diazepam, valium, Ativan, Restoril)
- 19 Injected tranquilizers
- 20 Swallowed barbiturates (like Amytal, Nembutal, and Seconal)
- 21 Injected barbiturates
- 00 None - didn't use any drugs in Mexico last 3 months

U24. [If answered yes to U13] In the **last 3 months when you injected drugs in Mexico**, who did you inject drugs with? **(CHECK ALL THAT APPLY) (DRGPERSM)**

- Friends
- Family
- Spouse
- Sexual partner (other than your spouse)
- Acquaintance
- Drug dealer
- Strangers
- Someone from Mexico
- Alone
- Pimp
- Sex worker
- Sex client
- Other \_\_\_\_\_
- Don't Know
- Refuse to Answer

U25. In the last **3 months**, on average how many different people did you usually inject with in Mexico? ('0' if None)

- — — — # of persons
- 9997 Don't Know
- 9998 Refuse to

Answer

U26. Have you ever bought drugs in Mexico?

- 1 Yes
- 0 No Skip to U29
- 9 Refuse to Answer

U27. What were your reason(s) for buying drugs in Mexico?

- 01 Cheaper
- 02 Easier to get
- 03 Better quality
- 04 Better choices of drugs
- 05 I don't know any dealers or where to buy drugs in San Diego
- 06 Other\_\_\_\_\_

U28. Of all the times you bought drugs in the past 3 months, what percent of the time have you bought drugs in Mexico?

- 01 Less than 25%
- 02 25% to 49%
- 03 50% to 74%
- 04 75% or more
- 9998 Refuse to Answer

U29. Have you ever injected drugs in the US with someone who lives in Mexico?

- 1 Yes
- 0 No [skip to H25]
- 7 Don't Know [skip to
- 8 Refuse to Answer [skip to

H25]

H25]

U30. When was the last time you injected drugs in the US with someone who lives in Mexico?

- \_\_\_\_ DAYS
- \_\_\_\_ MONTHS
- \_\_\_\_ YEARS
- 997 Don't Know
- 998 Refuse to Answer

H25. Thank you for your time and your hard work. We believe that all the effort that you put into answering these questions will be helpful to others. Please let a staff member know that you are finished.

\_\_\_\_\_

***If H25 is not equal to NEGIDU then "The password you have entered is incorrect. Please re-enter the password." skip to H25.***

***If H25 is equal to NEGIDU, then skip to end of questionnaire.***

H26. Thank you for your time and hard work. The computer determined that there were data inconsistencies and you are not eligible to be in the study. Please call the attendant.

-----

***If H26 is not equal to ENDINT then Password is incorrect. Please reenter the password." skip to H26.***

***If H26 is equal to ENDINT, then skip to end of questionnaire.***

H27. Error 2. Please call a staff member.

-----

***If H27 is equal to ENDINT, then skip to end of questionnaire.***

***If H27 is equal to GOBACK then You will now resume the interview." skip to instruction before B20.***

***If H27 is not equal to ENDINT then Password is incorrect. Please reenter the password." skip to H27.***

H28. Error 1. Please call a staff member.

-----

***If H28 is equal to GOBACK then You will now resume the interview." skip to A1.***

***If H28 is not equal to ENDINT then Password is incorrect. Please reenter the password." skip to H27.***