

QDS Computer Assisted Personal Interview [C:\Documents and Settings\episafe\Desktop\Cop of Assessing the Accuracy of Self-Report of HIV Testing Behavior Questionnaire_2-7-2011 En CA...]

Interview Tools Help

ASSESSING THE ACCURACY OF SELF-REPORTED HIV TESTING BEHAVIOR

Public reporting burden of this collection of information is estimated to average 15 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/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attn: OMB-PRA (0920-0840)

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Select Next Question

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Interview Tools Help

IDENTIFICATION INFORMATION: [Please, enter all required identification information before beginning this section of the Interview]

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Select Next Question

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Participant ID:

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

A B C D E F G Clear

H I J K L M N Back

O P Q R S T U Alt

V W X Y Z

TJ1001

Enter Participant ID and select **Next Question**

QDS Computer Assisted Personal Interview [C:\Documents and Settings\lepisafe\Desktop\Copy of Assessing the Accuracy of Self-Report of HIV Testing Behavior Questionnaire_2-7-2011 In CA...]

INTERVIEWER: Enter Your Interview ID

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

A) KJC/001 E) TRB/005

B) SKC/002 F) INTERN1/006

C) BRY/003 G) INTERN2/007

D) KNO/004 H) INTERN3/008

Select appropriate interviewer ID

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Interview Tools Help

INTERVIEWER:

Enter Device ID:

A) 01 E) 05

B) 02 F) 06

C) 03 G) 07

D) 04 H) 08

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Select appropriate device ID

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Interview Tools Help

READ: Thank you for participating in this study. Please read and answer all questions carefully. Remember that all the answers you give will be kept private.

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Select Next Question

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Interview Tools Help

READ: Now I am going to ask you for some demographic information

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Select **Next Question**

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Interview Tools Help

What is your date of birth?

Year: << < 1985 > >>

Month: << < 5 > >>

Day: << < 12 > >>

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Enter birthday and select **Next Question**

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Interview Tools Help

What is your sex?

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

MALE

FEMALE

Select appropriate sex

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Interview Tools Help

What is your ethnicity?

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

A) Hispanic

B) Non-Hispanic

Select appropriate ethnicity

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Interview Tools Help

What is your race? (Choose all that apply)

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

A) American Indian/Alaska Native

B) Asian

C) Black/African American

D) Native Hawaiian/Other Pacific Islander

E) White

F) Other

Select appropriate race and then select **Next Question**

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Interview Tools Help

Prior to today, have you ever been tested for HIV?

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

 **NO**

 **YES**

Should survey participant answer **NO**

[See Page 8 should the participant say YES to being prior HIV test]

QDS Computer Assisted Personal Interview [C:\Documents and Settings\episafe\Desktop\Copy of Assessing the Accuracy of Self-Report of HIV Testing Behavior Questionnaire_2-7-2011 En CA...]

In the past 3 years, where have you received any of your health care?
please check all that apply

A	B	C	D	E	F	G	Clear
H	I	J	K	L	M	N	Back
O	P	Q	R	S	T	U	Alt
V	W	X	Y	Z			

Katy Health Clinic

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Enter in health care facility and select **Next Question**

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READ: Thank you for your time today. Your answers will help us better understand HIV testing.

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Select **Next Question**

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Interview Tools Help

A window will pop-up and ask you if you want to save the data. Answer "Yes" to save the data before you close the program.

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Save the file and set up for next interview

Cont'd Pg 6 SHOULD THE PARTICIPANT SAY YES TO PRIOR HIV TESTS

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Interview Tools Help

Prior to today, have you ever had a positive HIV test result?

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

NO

YES

Should the participant say **YES**

[Should the participant say **NO** to positive test results see page 10]

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Interview Tools Help

READ: Next I am going to ask you about the date of your test.
If you are not sure of the date of your test, think about the time of year that you had the test. Did you have the test close to a big event in your life, like your birthday or the beginning of a new relationship? If you still not sure, can you estimate at least the year that you got the test?

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Select **Next Question**

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Interview Tools Help

What was the month and year of the first time you ever tested positive for HIV? List when you were tested, not when you got your results.

Year: << < 2002 > >>

Month: << < 3 > >>

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Enter year and month and select **Next Question** on answer applicable

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Interview Tools Help

What was the name of the place where you got your first positive HIV test on 03/??/2002? For example, this could be the name of a health clinic, blood bank, doctor's office, or STD clinic.

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

A B C D E F G Clear

H I J K L M N Back

O P Q R S T U Alt

V W X Y Z

Katy Health Clinic

Enter clinic and then select **Next Question** or answer that is applicable

Next Question to follow should be *“Have you ever had a negative HIV test result?”*

Cont'd Pg 8 PARTICIPANT RESPONDED “NO” TO POSITIVE HIV TEST

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Interview Tools Help

Have you ever had a negative HIV test result?

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

X
NO

✓
YES

Select **Yes** OR **No** if prior testing was negative

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Interview Tools Help

READ: Next I am going to ask you about the date of your test.
If you are not sure of the date of your test, think about the time of year that you had the test. Did you have the test close to a big event in your life, like your birthday or the beginning of a new relationship? If you still not sure, can you estimate at least the year that you got the test?

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Select **Next Question**

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Interview Tools Help

What was the month and year that you got your last negative HIV test?
List when you got your test, not when you got your results.

Year: << < 2002 > >>

Month: << < 7 > >>

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Enter year and month and select **Next Question** or answer that applies

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Interview Tools Help

What was the name of the place where you got your last negative HIV test on 07/??/2002? For example, this could be the name of a health clinic, blood bank, doctor's office, or STD clinic.

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

A B C D E F G Clear

H I J K L M N Back

O P Q R S T U Alt

V W X Y Z

Katy Health Clinic

Enter facility and select **Next Question** or Select answer that applies

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Interview Tools Help

In the past 3 years, where have you received any of your health care? please check all that apply

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

A B C D E F G Clear

H I J K L M N Back

O P Q R S T U Alt

V W X Y Z

Katy Health Clinic

Enter facility and select **Next Question** or answer that applies

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READ: Thank you for your time today. Your answers will help us better understand HIV testing.

Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Select Next Question

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Don't Know

Refuse to Answer

Not Applicable

Previous Question

Next Question

Save file and set up for next interview