

Changes to the THBS Eligibility Screener

Form Approved:
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Transgender HIV Behavioral Survey ~~(PILOT)~~: Eligibility Screener

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AUTO1 Survey Version: THBS-Pilot Version MM/DD/YYYY

AUTO2 Date of Interview: ___/___/____ ~~—~~ **AUTO3** Time Begin ___:___ AM PM
(M M / D D / Y Y Y Y)

AUTO3 Time eligibility screener began: ___:___:___ [Military time HH:MM:SS]

INT1. **Interviewer ID** ___

INT2. **City** ___

INT3. **Survey ID** _____

INT4. **Field Site ID** _____

INT5. **Interviewer:** Is the participant a seed?

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

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

IF RESPONDENT IS A SEED (INT5=1) skip to E2;

ES1. Which of the following describes how you know the person who gave you this coupon?
You can choose more than one answer.

[GIVE RESPONDENT FLASHCARD A. READ CHOICES, Check all that apply.]

- A friend 1
- A sex partner, girlfriend/boyfriend, husband/wife..... 2
- A relative or family member..... 3
- A co-worker..... 4
- A person you use drugs with..... 5
- A person you buy drugs from..... 6
- A person you share needles with..... 7
- An acquaintance (that is, a person you know,
but do not consider friend) 8
- You don't know the person/just met them (a stranger)...9
- Refused to answer.....R

Age Assessment

ES2. What is your date of birth?

[Refused = .R, Don't know = .D] / /
(M M / D D / Y Y Y Y)

If ES2 is (.R, .D) skip to the Eligibility section;

AUTO4 AGE: ES2 - AUTO2/365.25

If AGE < 15 skip to the Eligibility section;

ES3. So, you are [AGE] years old. Is that correct?

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

IF ES3 = 0 go back to the Age Assessment section;

Previous Participant Assessment

ES4. During 2008, did you already complete any part of the health survey that ***[Insert Project Name]*** is conducting? It could have been here or at another location.

- No..... 0
- Yes..... 1
- Refused to answer..... .R
- Don't know..... .D

Ethnic Assessment

ES5. Do you consider yourself to be Hispanic or Latino?

- No..... 0
- Yes..... 1
- Refused to answer..... .R
- Don't know..... .D

If ES5 in (0, .R, .D) skip to ES7;

ES6. What best describes your Hispanic or Latino ancestry?

[Read choices, Check all that apply.]

- Mexican..... 1
- Puerto Rican..... 2
- Cuban..... 3
- Dominican..... 4
- Some other Hispanic or Latino ancestry..... 5
- (Specify other ancestry: _____)***
- Refused to answer..... .R
- Don't know..... .D

Racial Assessment

ES7. Which racial group or groups do you consider yourself to be in? You may choose more than one option.

[GIVE RESPONDENT FLASHCARD B. READ CHOICES, Check all that apply.]

- American Indian or Alaska Native..... 1
- Asian 2
- Black or African American 3
- Native Hawaiian or Other Pacific Islander..... 4
- White 5
- Refused to answer..... .R
- Don't know..... .D

Residency Assessment

ES8. What county do you currently live in? _____

(Responses in computer program will include all eligible counties from participating MSA)

Other..... 88
(Specify other county: _____)

If ES8 = 88 (or other county) skip to the Gender Assessment Section;

ES9. How long have you been living in [**say project area**]?
_____ Months ___— [**Interviewer: If response is in months, enter 0 below and then enter the number of months in the next screen.**]

Years ___—
_____: _____ [**Refused = .R, Don't know =.D**]

Months: _____

Gender Assessment

ES10. What was your physical sex assigned at birth?
[Check only one]

- Male..... 1
- Female..... 2
- Intersex..... 3
- Refused to answer..... .R
- Don't know..... .D

ES11. Do you consider yourself to be male, female, or transgender?
[Check only one]

- Male..... 1
- Female 2
- Transgender 3
- Other 4
- (Specify other gender: _____)**
- Refused to answer..... .R
- Don't know..... .D

***If ES7 is (2, 3, .R, .D) then skip to Auto5-
If ES7 is (1) and ES8 is (2, 3) then skip to ES10***

ES12. In the past 12 months, have you ever lived as a woman? By living as a woman, I mean dressing and presenting yourself as a woman.

No 0
 Yes 1
 Refused to answer..... .R
 Don't know..... .D

Network Size Assessment

~~SAY: I would like to ask you about some people you know personally. By “know personally”, I mean they know you and you know them.~~

~~ES10. About how many people do you know personally who were born male but identify, live, act, or consider themselves to be a woman and who are 15 years of age, live in [project area], and who you've seen in the past 30 days?~~

~~INTERVIEWER: USE FLASHCARD A~~

~~[Refused= .R, Don't Know= .D] _____~~

~~If ES10 is (0, .R, or .D) and ES8 is (1) and ES9 is (0, .R, .D) then skip to INT6~~

~~If ES10 is (0, .R, or .D) and ES8 is (1) and ES9 is (1) then skip to INT7~~

~~If ES10 is (0, .R, or .D) and ES8 is (2, 3) then skip to INT7~~

~~ES10a. Of these [insert number from ES10] persons that you have seen in the past 30 days how many are Latino or Hispanic?~~

~~[Refused= .R, Don't Know= .D] _____~~

~~SAY: What is the race of these [insert number from ES10] persons that you have seen in the past 30 days? That is how many are:~~

~~ES10b. African American or Black;: [Refused= .R, Don't Know= .D] _____~~

~~ES10c. American Indian or Alaska Native: [Refused= .R, Don't Know=.D] _____~~

~~ES10d. Asian: [Refused= .R, Don't Know= .D] _____~~

~~ES10e. Native Hawaiian or Other Pacific Islander: [Refused= .R, Don't Know= .D] _____~~

ES10f. _____ White: [*Refused*= .R, *Don't Know*= .D] _____

If ES8 is (1) and ES9 is (1) then skip to INT7

If ES8 is (2, 3) then skip to INT7

Interviewer Assessment

INT6 **Interviewer:** Does this person meet the protocol definition of transgender?

- _____ No..... 0
- _____ Yes, identifies or has a feminine presentation.... 1
- _____ Yes, other reason..... 2

(Specify _____)

Ability to Participate Assessment

INT7. **Interviewer:** Is this person alert and able to complete the health survey in English or Spanish?

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

If INT7 =1 skip to the Eligibility section;

INT7a. **Interviewer:** Why is this person unable to participate in the health survey?

- Language Barrier 1
(Specify language barrier: _____)
- Not alert 2
- Other..... 3
(Specify other reason: _____)

Eligibility

AUTO5 ELIGIBLE = (calculated using the following eligibility logic)

Eligibility Logic:

Age: *AGE >= 15 years*

Not a previous participant: *ES4 = No or 0*

Residence: *ES8 ne 88, Refused or Don't know*

Gender: *ES10 = Male and (ES11 = Female or Transgender
or ES11=Male AND ES12=Yes)*

Can take English or Spanish survey: *INT7=Yes*

AUTO6 Time Eligibility Screener Ended _____:_____:_____ AM PM: _____:_____:_____
[\[Military time HH:MM:SS\]](#)

Not Eligible

If Participant NOT ELIGIBLE for THBS

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

Interviewer: End Interview.

Eligible

If Participant IS ELIGIBLE for THBS

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

In the survey, the term “transgender” is used broadly to refer to persons who identify, live, or present as a gender other than the one associated with their physical sex at birth. The purpose of the survey is to learn more about risks for HIV among transgender persons. Let me tell you more about it.

Consent

Interviewer: Conduct the local IRB-approved consent process

CONSENTA. Do you agree to take part in the survey?
No..... 0
Yes..... 1

If CONSENTA = 0: Thank the respondent for doing the eligibility screener;

CONSENTB. Do you agree to HIV counseling and testing?
No..... 0
Yes..... 1

If CONSENTB=0: This pop-up box should appear Interviewer: You have documented that the person DID NOT consent to HIV counseling and testing. If this is not correct, please arrow back and re-enter the consent for HIV testing.

If CONSENTB = 0 skip to the Core Questionnaire;

CONSENTC. Do you agree to having other lab tests (if offered)?
No.....0
Yes..... 1
Does not apply..... 8

CONSENTD. Do you agree to storing a blood sample for future testing?
No..... 0
Yes..... 1
Does not apply..... 8