

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

Attachment 3d Clinic Survey

Public reporting burden of this collection of information is estimated to average 40 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, Project Clearance Officer, 1600 Clifton Road, MS D-24, Atlanta, GA 30333, ATTN: OMB PRA (0920-XXXX). Do not send the completed form to this address.

General programming notes (additional programming notes are located throughout the questionnaire):

- 1) Every question should require a response to move forward in the application unless otherwise noted.
- 2) Use the following values: .D = 8, .R = 7, NA = 6.
- 3) Add a questionnaire type variable (one for the standard version and one for the short version).
- 4) For all “other-specify” variables in “check all that apply” questions, use the “other” variable name (which should end in “O”) and add an “S” on the end. If the variable name becomes too long, then drop the letter immediately preceding the consecutive letter at the end of the **main part** of the variable name. For example, if the “other” variable is named “**KINDG_9O**”(where *KIND* is the stem variable name and *G* denotes the lettered response option) the “specify” variable should be named “**KING_9OS**”
- 5) Programming notes are not included in the application; they are merely there to help with coding.
- 6) Interviewer instructions and inconsistency checks are notes for the interviewers, but may also include coding instructions.
- 7) Code book should have a brief description of the variable. This includes all calculated variables.
- 8) Calculate version number using variable name VERSION.
- 9) Calculate data collection cycle using variable name CYCYR. CYCYR = 2011.
- 10) For all date variables also create an automatic variable that is a copy of the date variable. For example, if the variable for date was called DATE, then the automatic variable would look like: a. variable name: TXFORM, b. type of date: String Expression, c. numeric calculation/string expression: DATE
- 11) Label module sections in the code book. Use the Table of Contents for guidance.
- 12) Calculate the time to conduct an interview from D1 to C13a or C13b.
- 13) Do not include the Response Cards and calendars in the program.
- 14) Distinguish between English and Spanish versions of the questionnaires (note this is different than the language variable used in the short questionnaire).

PRELIMINARY INFORMATION

Interviewer instructions: Enter Preliminary Information prior to interview.

I1. **Participant ID [PARID]:**
Site ID [SITEID] _____
Facility ID [FACILID] _____
Respondent ID [INDID] _____

Programming note:
Site ID, Facility ID, and Respondent ID all must be 4 digits with leading 0s. [PARID] is a 12 digit calculated variable based on [SITEID] + [FACILID] + [INDID]

I2. **Interviewer ID:** _____
[INTID]

Programming note for I2: Range 0-999

I2a. **Handheld and computer device ID:** _____
[DEVICEID]

Programming note for I2a: Range 0-999

I3. **Interview setting: [CHECK ONLY ONE.] [INTSET]**

Outpatient health facility.....	<input type="checkbox"/>	1
Inpatient health facility.....	<input type="checkbox"/>	2
Community-based organization.....	<input type="checkbox"/>	3
Private home.....	<input type="checkbox"/>	4
Public venue (i.e., coffee shop, library).....	<input type="checkbox"/>	5
Other (Specify: _____).....	<input type="checkbox"/>	6 [INTSETOS]

I4. **Interview date:** ____/____/____
[IDATE] (M M/ D D / Y Y Y Y)

Programming notes for I4: Automatically calculate.

I5. **Time questionnaire began:** ____:____ AM PM
[STDEMO] Hour Minute

Programming notes for I5: Automatically calculate.

DEMOGRAPHICS

SAY: “I’d like to thank you for taking part in this interview. Remember that all the information you give me will be kept secure to the extent permitted by law and your name won’t be recorded anywhere in this survey. The answers to some questions may seem obvious to you, but I need to ask you all of the questions.”

Programming note for Say box before D1: Use the word “computer” instead of “paper.”

D1. What is the highest level of education you completed? **[DON’T READ CHOICES. CHECK ONLY ONE.] [EDUC]**

- Never attended school..... 1
- Grades 1 through 8..... 2
- Grades 9 through 11..... 3
- Grade 12 or GED..... 4
- Some college, associate’s degree, or technical degree..... 5
- Bachelor’s degree..... 6
- Any post–graduate studies..... 7
- Refused to answer..... 77
- Don’t know..... 88

D2. What language are you most comfortable using with your family and friends? **[DON’T READ CHOICES. CHECK ONLY ONE.] [PRIM_LAN]**

- English..... 1
- Spanish..... 2
- French..... 3
- Chinese..... 4
- German..... 5
- Tagalog..... 6
- Vietnamese..... 7
- Italian..... 8

Korean..... 9
 Russian..... 10
 Polish..... 11
 Other (*Specify: _____*)..... 12 **[PRIM_LAO] [PRI_LAOS]**
 Refused to answer..... 77
 Don't know..... 88

D3. Do you think of yourself as: **[READ CHOICES EXCEPT "Other." CHECK ONLY ONE.]**
[SEXOR8]

Homosexual, gay, or lesbian..... 1
 Heterosexual or straight..... 2
 Bisexual..... 3
 Other (*Specify: _____*)..... 4 **[OTSEXOR] [SEXORIO8]**
 Refused to answer..... 7
 Don't know..... 8

SAY: "Now I'm going to ask you some questions about the **past 12 months**. That is from last year (**DATE WITH PREVIOUS YEAR**) to now (**INTERVIEW DATE**)."

Programming note for Say box before D4: The program should enter the appropriate dates. EXAMPLE: If IDATE is 11/11/2011 then the program should read "That is from last year, 11/11/2010 to now 11/11/2011."

Interviewer instructions: Show respondent calendar.

	During the past 12 months , have you:	No ⁽⁰⁾	Yes ⁽¹⁾	Refused ⁽⁷⁾	Don't know ⁽⁸⁾
D4a.	...lived on the street? [HOMEL_9A]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
D4b.	...lived in a shelter? [HOMEL_9B]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
D4c.	...lived in a Single Room Occupancy (SRO) hotel? [HOMEL_9C]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
D4d.	...lived in a car? [HOMEL_9D]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8

D5. During the **past 12 months**, have you been arrested and put in jail, detention, or prison for longer than 24 hours? *[JAIL]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

D6. During the **past 12 months**, have you had any kind of health insurance or health coverage? This includes Medicaid and Medicare. *[HTHINS_9]*

- No..... 0  Skip to D14
- Yes..... 1
- Refused to answer..... 7  Skip to D14
- Don't know..... 8

D6a. During the **past 12 months**, what were all the kinds of health insurance or health coverage you had? *[DON'T READ CHOICES. CHECK ALL THAT APPLY.] [KINDI_9]*


- Private health insurance..... 1 *[KINDI_A9]*
- Medicaid..... 2 *[KINDI_B9]*
- Medicare..... 3 *[KINDI_C9]*
- Ryan White..... 4 *[KINDI_D9]*
- Tricare or CHAMPUS..... 5 *[KINDI_E9]*
- Veterans Administration coverage..... 6 *[KINDI_F9]*
- Other 1 (*Specify:* _____)..... 7 *[KIND_G90] [KIN_G90S]*
- Other 2 (*Specify:* _____)..... 8 *[KIND_H90]*
- Other 3 (*Specify:* _____)..... 9 *[KIND_I90]*
- Other 4 (*Specify:* _____)..... 10 *[KIND_J90]*
- Refused to answer..... 77
- Don't know..... 88

D6b. During the **past 12 months**, was there a time that you didn't have any health insurance or health coverage? *[INS12_9]*

- No..... 0

Yes..... 1
 Refused to answer..... 7
 Don't know..... 8

D7. During the **past 12 months**, where did most of your money or financial support come from? *[DON'T READ CHOICES. CHECK ONLY ONE.] [SRC_IN_9]*

Salary or wages..... 1
 Savings or investments..... 2
 Pension or retirement fund..... 3
 Supplemental Security Income (SSI) or Social Security
 Disability Insurance (SSDI)..... 4
 Other public assistance ("welfare")..... 5
 Family, partner, or friend(s)..... 6
 Illegal or possibly illegal activities..... 7
 No income or financial support..... 8  *Skip to Say box before A1*
 Other (*Specify:* _____) 9 *[SOIN_90]*
 Refused to answer..... 77
 Don't know..... 88

Programming note for Say box before D8 and D8a: use the previous calendar year. EXAMPLE: If interview date is 12-01-11, ask about 2010; if interview date is 12-01-12, ask about 2011.

SAY: "Now I would like to ask you some questions about **2010 (2011)**. That is January 1st, 2010 (2011) to December 31st, 2010 (2011)."

Interviewer instructions: Show respondent calendar.

D81. In **2010 (2011)**, what was your combined **monthly** or **yearly** household income from all sources before taxes? When I say "combined household income," I mean the total amount of money from all people living in the household. *[DON'T READ CHOICES.]*

Interviewer instructions: Show Response Card A.

SAY: “Please take a look at this card and tell me the letter that corresponds to either your monthly or yearly household income before taxes.”

Monthly Income [MTHLY_IN]

- a. \$0 to \$417
- b. \$418 to \$833
- c. \$834 to \$1250
- d. \$1251 to \$1667
- e. \$1668 to \$2500
- f. \$2501 to \$3333
- g. \$3334 to \$4167
- h. \$4168 to \$6250
- i. \$6251 or more
- 77 Refused to answer
- 88 Don't know

Yearly Income [YRLY_IN]

- a. \$0 to \$4,999
- b. \$5,000 to \$9,999
- c. \$10,000 to \$14,999
- d. \$15,000 to \$19,999
- e. \$20,000 to \$29,999
- f. \$30,000 to \$39,999
- g. \$40,000 to \$49,999
- h. \$50,000 to \$74,999
- i. \$75,000 or more
- 77 Refused to answer
- 88 Don't know

Programming note for D11: Consult with Nova how to code this question.

D8a. Including you, how many people depended on this income in **2010 (2011)**? [DEPND_IN]

___ ___ [77 = Refused to answer, 88 = Don't know]

Inconsistency check: D8a must be ≥ 1 and < 50 .

ACCESS TO CARE

HIV Testing and Care Experiences

SAY: “Now I’m going to ask you some questions about getting tested for HIV.”

A1. What month and year did you **first** test positive for HIV? Tell me when you got your result, not when you got your test. **[POS1S_9]**

__ / __ __
(M M / Y Y Y Y)

[Month: 77 = Refused to answer, 88= Don’t know;
Year: 7777 = Refused to answer, 8888 = Don’t know]

Inconsistency check: A1 (date first tested positive for HIV) cannot be earlier than D2 (respondent’s date of birth). If A1 is earlier than March 1985, confirm response.

Programming note for inconsistency check after A1: If A1 is earlier than 03/1985, display note to the interviewer: “The date entered is earlier than 03/1985 (date of first FDA-approved HIV test). Confirm date of HIV test.” Program should move forward regardless of date. Allow a “??” response for month response.

Interviewer instructions: If A1 is “Refused to answer,” “Don’t know,” or the month is unknown (??), skip to A6.

Interviewer instructions: If A1 (date first tested positive for HIV) is 5 years or less than April 30, 2011, go to A2; otherwise skip to A6.

A2. When you tested positive in __ __ / __ __ __ __ [INSERT DATE FROM A1], at what type of facility were you tested? [DON’T READ CHOICES. CHECK ONLY ONE.] **[TESLOC_9]**

- Private doctor’s office..... 1
- Primary care clinic or community health center..... 2
- Health department..... 3
- Labor/delivery setting..... 4
- OBGYN or family planning clinic..... 5
- Emergency room..... 6
- Inpatient hospital (**not** labor/delivery or emergency room)... 7

HIV counseling and testing site.....	<input type="checkbox"/>	8
STD clinic.....	<input type="checkbox"/>	9
HIV/AIDS infectious disease clinic.....	<input type="checkbox"/>	10
Mobile test site.....	<input type="checkbox"/>	11
Correctional facility.....	<input type="checkbox"/>	12
Blood donation facility.....	<input type="checkbox"/>	13
Substance abuse treatment center.....	<input type="checkbox"/>	14
Insurance or employee clinic.....	<input type="checkbox"/>	15
Military or VA facility.....	<input type="checkbox"/>	16
Other (<i>Specify:</i> _____)	<input type="checkbox"/>	17 [TESL9_OS]
Refused to answer.....	<input type="checkbox"/>	77
Don't know.....	<input type="checkbox"/>	88

Inconsistency check: Confirm response if A2 (testing location) is “labor/delivery setting” or “OBGYN or family planning clinic” and ES7 (sex at birth) is “male”.

Programming note for A2: Insert date in question. If A2 is “labor/delivery setting” or “OBGYN or family planning clinic” and ES7 (sex at birth) is “male,” display the following message: “Respondent said he was first tested in a labor/delivery setting or OBGYN or family planning clinic. Confirm response.” Allow the program to advance.

A2a. When you tested positive in ___ / ___ / ___ [INSERT DATE FROM A1], what was the main reason you were tested? [DON'T READ CHOICES. CHECK ONLY ONE.] [MRTEST_9]

Concerned about exposure through sexual contact.....	<input type="checkbox"/>	1
Concerned about exposure through IDU.....	<input type="checkbox"/>	2
Part of STD screening or due to STD diagnosis.....	<input type="checkbox"/>	3
Due to other illness (not STD).....	<input type="checkbox"/>	4
Due to pregnancy.....	<input type="checkbox"/>	5
Personal initiative to routinely test.....	<input type="checkbox"/>	6
Provider recommendation as part of routine care.....	<input type="checkbox"/>	7
Health department partner notification (PCRS).....	<input type="checkbox"/>	8
Before blood donation.....	<input type="checkbox"/>	9

- Needle stick follow-up or occupational exposure..... 10
- Requirement (military, court order, or insurance)..... 11
- Other (*Specify:* _____) 12 **[MRTE_90S]**
- Refused to answer..... 77
- Don't know..... 88

Programming note for A2a: Insert date from A1 in question.

Inconsistency check: A2a (main reason tested) cannot be “due to pregnancy” if ES7 (sex at birth) is “male”.

Programming note for inconsistency check after A2a: If ES7 is “male” and response to A2a is “due to pregnancy”, display note to interviewer: “Main reason tested cannot be due to pregnancy if respondent was born male.” Do not allow the program to advance.

- A3. **After** you tested positive in ___/___/___ **[INSERT DATE FROM A1]**, did someone from the health department or a health care provider offer to tell or help you tell your sex or drug use partners that they may have been exposed to HIV? **[PARTNO_9]**
- No..... 0 → *Skip to Say box before A5*
 - Yes..... 1
 - Not applicable..... 6 } *Skip to Say box before A5*
 - Refused to answer..... 7
 - Don't know..... 8

- A3a. Before you tested positive in ___/___/___ **[INSERT DATE FROM A1]**, were you ever contacted by the health department or a health care provider to tell you that you may have been exposed to HIV through your sex or drug use partners? **[PARTNO_CON]**
- No..... 0 → *Skip to Say box before A5*
 - Yes..... 1
 - Not applicable..... 6 } *Skip to Say box before A5*
 - Refused to answer..... 7
 - Don't know..... 8

- A3b. Is there anyone you know who needs an HIV test? **[HIV_KNOW]**
- No..... 0 → *Skip to Say box before A5*

..... Yes..... 1
 Not applicable..... 6
 Refused to answer..... 7
 Don't know..... 8

} Skip to Say box before A5

A3c. Do you have any sex or drug use partners now who need to be notified? **[PART_NOTIFY]**

..... No..... 0 → Skip to Say box before A5
 Yes..... 1
 Not applicable..... 6
 Refused to answer..... 7
 Don't know..... 8

} Skip to Say box before A5

Programming note for A3: Insert date from A1 in question.

SAY: “Now I’m going to ask you about HIV medical care. When I say ‘HIV medical care,’ I mean physical exams, prescriptions for HIV medicines, or lab tests such as HIV viral load and CD4 testing.”

A4. Since testing positive for HIV, what month and year did you **first** visit a doctor, nurse, or other health care worker for HIV medical care? **[CARE_9]**

 /
 (M M / Y Y Y Y)

[Month: 77 = Refused to answer, 88= Don't know;
 Year: 7777 = Refused to answer, 8888 = Don't know]

Inconsistency check: Confirm response if A4 (date first went to provider for HIV care) is earlier than the A1 (date first tested positive for HIV).

Programming note for inconsistency check after A4: If A4 is earlier than A1, display note to interviewer: “The date entered is earlier than the date first tested positive for HIV care. Go back to previous question to confirm the date.” Allow the program to advance.

Interviewer instructions: If A4 (date first went to provider for HIV care) is > 3 months after A1 (date first tested positive for HIV), go to A5; otherwise, skip to A6. If A4 is “Refused to answer,” “Don’t know,” or an unknown month (??), skip to A6.

A5. What was the main reason you didn't go to a doctor, nurse, or other health care worker for HIV medical care **within 3 months** of testing positive for HIV? *[DON'T READ CHOICES. CHECK ONLY ONE.] [MRNOCA_9]*

- Felt good..... 1
- Initial CD4 count and viral load were good..... 2
- Didn't believe test result..... 3
- Didn't want to think about being HIV positive..... 4
- Didn't have enough money or health insurance..... 5
- Had other responsibilities such as child care or work..... 6
- Experienced homelessness..... 7
- Was drinking or using drugs..... 8
- Felt sick..... 9
- Forgot to go..... 10
- Missed appointment(s)..... 11
- Moved or out of town..... 12
- Unable to get transportation..... 13
- Facility is inconvenient (location, facility hours, wait-time). 14
- Didn't know where to go..... 15
- Couldn't find the right HIV health care provider..... 16
- Unable to get earlier appointment..... 17
- Unaware of recommendation to enter care within 3 months. 18
- Other (*Specify:* _____) 19 *[MRNO_90S]*
- Refused to answer..... 77
- Don't know..... 88

A6. Apart from your visit today, when was your **most recent** visit to a doctor, nurse, or other health care worker for HIV medical care? Please tell me the month and year. *[LASCA_9]*

____/____
(M M / Y Y Y Y)

*[Month: 77 = Refused to answer, 88= Don't know;
Year: 7777 = Refused to answer, 8888 = Don't know]*

Inconsistency check: A6 (date of most recent visit to a provider for HIV care) cannot be earlier than A4 (date first visit to a provider for HIV care) or later than I4 (interview date).

Programming note for A6: Allow a “??” for month response.

Interviewer instructions: If A6 (date of most recent visit to a provider for HIV care) is > 6 months prior to I4 (interview date), go to A6a; otherwise, skip to Say box before A7. If A6 is “Refused to answer,” “Don’t know,” or an unknown month (??), skip to Say box before A7.

A6a. What was the main reason you didn’t visit a doctor, nurse, or other health care worker for HIV medical care during the **past 6 months**? [DON’T READ CHOICES. CHECK ONLY ONE. SHOW CALENDAR.] [MRNOC_10]

- Felt good..... 1
- CD4 count and viral load were good..... 2
- Didn’t believe test result..... 3
- Didn’t want to think about being HIV positive..... 4
- Didn’t have enough money or health insurance..... 5
- Had other responsibilities such as child care or work..... 6
- Experienced homelessness..... 7
- Was drinking or using drugs..... 8
- Felt sick..... 9
- Forgot to go..... 10
- Missed appointment(s)..... 11
- Moved or out of town..... 12
- Unable to get transportation..... 13
- Facility is inconvenient (location, facility hours, wait-time). 14
- Didn’t know where to go..... 15
- Couldn’t find the right HIV health care provider..... 16
- Unable to get earlier appointment..... 17
- Other (Specify: _____)..... 18 [MRN_100S]
- Refused to answer..... 77
- Don’t know..... 88

Interviewer instructions: If participant was diagnosed with HIV infection in past three months, ask question A6b. If not, skip to say box before A7.

SAY: “You indicated you were recently diagnosed with HIV infection .”

A6b. What is the main reason that you came to visit a doctor, nurse, or other health care worker for HIV medical care **soon after** testing positive for HIV? **[DON'T READ CHOICES. CHECK ONLY ONE.]**

- Wanted to get on treatment for HIV infection..... 1
- Facility was convenient..... 2
- I felt sick and needed care..... 3
- Aware of the recommendations to get care within 3 months 4
- Had assistance (case manager, peer navigator)..... 5
- Other (*Specify:* _____) 6
- Refused to answer..... 77
- Don't know..... 88

Sources of Care

SAY: “Now I’m going to ask you about the places where you get HIV medical care. If you don’t remember everything, that’s okay. Tell me what you remember.”

A7. During the **past 12 months**, was there one usual place, like a doctor’s office or clinic, where you went for most of your HIV medical care? *[PLCARE_9]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don’t know..... 8



Skip to instructions before A9

A8. What was the main reason you didn’t have a usual place to get HIV medical care during the **past 12 months**? *[READ CHOICES. CHECK ONLY ONE.] [UC_RS_10]*

- Couldn’t afford a usual source of HIV care..... 1
- Didn’t know where to find a usual source of HIV care..... 2
- Couldn’t get regular appointments anywhere..... 3
- It wasn’t available in the area..... 4
- Didn’t think it was necessary..... 5
- Thought it was necessary, but never tried to get a usual source of care..... 6
- Other (*Specify: _____*) 7 *[UC_R100S]*
- Refused to answer..... 77
- Don’t know..... 88

Interviewer instructions: If ES7 (birth gender) and ES8 (self-identified gender) are “female,” go to A9; otherwise, skip to A10.

A9. During the **past 12 months**, have you received HIV care at an OBGYN or gynecological clinic? *[GYNECARE]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7

Don't know..... 8

A10. During the **past 12 months**, did you get HIV medical care while in jail, detention, or prison? **[JAIL_CAR]**

No..... 0

Yes..... 1

Refused to answer..... 7

Don't know..... 8

Participant indicated he/she has not been in jail, detention, or prison in last 12 months...

9

A11. During the **past 12 months**, has anyone tried to help you see a health care provider to get HIV medical care? **[GET_CARE]**

No..... 0

→ Skip to A15

Yes..... 1

Refused to answer..... 7

} Skip to A15

Don't know..... 8

A11a. Who was that person or persons? **[CHOOSE ALL THAT APPLY.] [PERSON_CAR]**

A counselor..... 1

A social worker..... 2

A case manager or other professional..... 3

A family member or friend..... 4

Other (**Specify:** _____) 5 **[PERSONCAR_11OS]**

Refused to answer..... 7

Don't know..... 8

A12. During the **past 12 months**, has anyone tried to help you keep regular appointments with a health care provider to take care of your HIV infection? **[APPT_KEEP]**

- No..... 0  Skip to A16
- Yes..... 1
- Refused to answer..... 7  Skip to A16
- Don't know..... 8

A12a. Who was that person or persons? **[CHOOSE ALL THAT APPLY.]**
[PERSON_KEEP]

- A counselor..... 1
- A social worker..... 2
- A case manager or other professional..... 3
- A family member or friend..... 4
- Other (*Specify:* _____) 5 **[PERSONKEEP_11OS]**
- Refused to answer..... 7
- Don't know..... 8

SAY: “Now I’m going to ask you about general medical care. When I say, ‘general medical care,’ I mean care for any sort of medical problem.”

A13. During the **past 12 months**, was there one usual place, like a doctor’s office or clinic, where you went for most of your general medical care? **[OCAREL_9]**

- No..... 0
- Yes..... 1
- Refused to answer..... 7 
- Don't know..... 8

A14. During the **past 12 months**, how many times did you go to an emergency room or urgent care center for HIV medical care? *[ERU_VI_9]*

___ ___ *[77 = Refused to answer, 88 = Don't know]*

Inconsistency check: A14 (number of times the respondent visited the emergency room or urgent care center for HIV care) must be ≤ 76 .

A15. During the **past 12 months**, how many times were you admitted to a hospital because of an HIV-related illness? (Please don't include visits that were made only to the emergency room.) *[HOSP]*

___ ___ *[77 = Refused to answer, 88 = Don't know] If answer is 00, skip to A17.*

A16. During the **past 12 months**, how many total days did you spend in a hospital because of an HIV-related illness? *[HOSPDAY]*

___ ___ *[77 = Refused to answer, 88 = Don't know]*

A17. During the **past 12 months**, were you enrolled in an inpatient mental health facility? *[ADMENH_9]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

A18. During the **past 12 months**, were you enrolled in an inpatient drug or alcohol treatment facility? *[ADDRAL_9]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

Met and Unmet Needs

SAY: “Now I’m going to ask about services you used or needed during the **past 12 months**. Remember, the past 12 months is last year (**DATE WITH PREVIOUS YEAR**) to now (**INTERVIEW DATE**).”

Programming note for Say box before met and unmet need questions: The program should enter the appropriate dates. **EXAMPLE:** If IDATE is 11/11/2011 then the program should read “That is from last year, 11/11/2010 to now 11/11/2011.”

Interviewer instructions: Show Response Card B. If response to A19a is “No,” “Refused to answer,” or “Don’t know,” go to A19b; otherwise, skip to A20a. If response to A19b is “Yes,” go to A19c; otherwise, skip to A20a. Follow the same pattern for A19–A35.

	During the past 12 months, did you get:	IF “NO” IN A19a–A35a ASK: During the past 12 months, have you needed:	IF “YES” IN A19b–A35b ASK: What was the <u>main reason</u> you haven’t been able to get this service during the past 12 months?	
	CODE: No = 0, Yes = 1, Refused to answer = 7, Don’t know = 8	CODE: No = 0, Yes = 1, Refused to answer = 7, Don’t know = 8	CODE: SEE CODE LIST BELOW FOR RESPONSES. [DON’T READ CHOICES. CHECK ONLY ONE.]	
A19.	HIV case management services	a. [_____] [HIVC12_9]	b. [_____] [HIVCMS_9]	c. [_____] [HIVCRS_9] Other (Specify:_____) [HIVC_9OS]
A20.	Counseling about how to prevent the spread of HIV	a. [_____] [HIVE12_9]	b. [_____] [HIVEDU_9]	c. [_____] [HIVERS_9] Other (Specify:_____) [HIVE_9OS]

Interviewer instructions: If applicable, use the state program name for ADAP when asking A22 (medicine through ADAP).

		During the past 12 months, did you get:	IF "NO" IN A19a–A35a ASK: During the past 12 months, have you needed:	IF "YES" IN A19b–A35b ASK: What was the <u>main reason</u> you haven't been able to get this service during the past 12 months?
		CODE: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8	CODE: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8	CODE: SEE CODE LIST BELOW FOR RESPONSES. [DON'T READ CHOICES. CHECK ONLY ONE.]
A21.	Medicine through the AIDS Drug Assistance Program (ADAP)	a. [] [GET_ADAP]	b. [] [NED_ADAP]	c. [] [RS_ADAP] Other (Specify: _____) [RS_A_9OS]
A22.	Professional help remembering to take your HIV medicines on time or correctly	a. [] [ASS12_9]	b. [] [ASS_9]	c. [] [ASSRS_9] Other (Specify: _____) [ASSR_9OS]
A23.	HIV peer group support	a. [] [GET_GRP]	b. [] [NED_GRP]	c. [] [RS_GRP] Other (Specify: _____) [RS_G_9OS]
A24.	Dental care	a. [] [DENS12_9]	b. [] [DENSER_9]	c. [] [DENSRS_9] Other (Specify: _____) [DENS_9OS]
A25.	Mental health services	a. [] [MENC12_9]	b. [] [MENCON_9]	c. [] [MENCRS_9] Other (Specify: _____) [MENC_9OS]
A26.	Drug or alcohol counseling or treatment	a. [] [GET_SUBU]	b. [] [NED_SUBU]	c. [] [RS_SUBU] Other (Specify: _____) [RS_U_9OS]

		During the past 12 months, did you get:	IF “NO” IN A19a–A35a ASK: During the past 12 months, have you needed:	IF “YES” IN A19b–A35b ASK: What was the <u>main reason</u> you haven’t been able to get this service during the past 12 months?
		CODE: No = 0, Yes = 1, Refused to answer = 7, Don’t know = 8	CODE: No = 0, Yes = 1, Refused to answer = 7, Don’t know = 8	CODE: SEE CODE LIST BELOW FOR RESPONSES. [DON’T READ CHOICES. CHECK ONLY ONE.]
A27.	Public benefits including Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI)	a. [] [GET_SSDI]	b. [] [NED_SSDI]	c. [] [RS_SSDI] Other (Specify: _____) [RS_S_9OS]
A28.	Domestic violence services	a. [] [GET_DOMS]	b. [] [NED_DOMS]	c. [] [RS_DOMS] Other (Specify: _____) [RS_D_9OS]
A29.	Shelter or housing services	a. [] [SHLT12_9]	b. [] [SHLTER_9]	c. [] [SHLTRS_9] Other (Specify: _____) [SHLT_9OS]
A30.	Meal or food services	a. [] [MLSF12_9]	b. [] [MLSFOD_9]	c. [] [MLSFRS_9] Other (Specify: _____) [MLSF_9OS]
A31.	Home health services	a. [] [HHS12_9]	b. [] [HHSASS_9]	c. [] [HHSARS_9] Other (Specify: _____) [HHS12_9OS]
A32.	Transportation assistance	a. [] [TRAS12_9]	b. [] [TRASAS_9]	c. [] [TRASRS_9] Other (Specify: _____) [TRAS_9OS]

		During the past 12 months, did you get:	<i>IF “NO” IN A19a–A35a ASK:</i> During the past 12 months, have you needed:	<i>IF “YES” IN A19b–A35b ASK:</i> What was the <u>main reason</u> you haven’t been able to get this service during the past 12 months?
		CODE: <i>No = 0, Yes = 1, Refused to answer = 7, Don’t know = 8</i>	CODE: <i>No = 0, Yes = 1, Refused to answer = 7, Don’t know = 8</i>	CODE: <i>SEE CODE LIST BELOW FOR RESPONSES. [DON’T READ CHOICES. CHECK ONLY ONE.]</i>
A33.	Childcare services	a. [_____] <i>[CHLD12_9]</i>	b. [_____] <i>[CHLDCR_9]</i>	c. [_____] <i>[CHLDRS_9]</i> Other (Specify: _____) <i>[CHLD_9OS]</i>
A34.	Interpreter services	a. [_____] <i>[GET_INTS]</i>	b. [_____] <i>[NED_INTS]</i>	c. [_____] <i>[RS_INTS]</i> Other (Specify: _____) <i>[RS_I_9OS]</i>

		<p>During the past 12 months, did you get:</p> <p>CODE: <i>No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</i></p>	<p><i>IF "NO" IN A19a–A35a ASK:</i> During the past 12 months, have you needed:</p> <p>CODE: <i>No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</i></p>	<p><i>IF "YES" IN A19b–A35b ASK:</i> What was the <u>main reason</u> you haven't been able to get this service during the past 12 months?</p> <p>CODE: SEE CODE LIST BELOW FOR RESPONSES. [<i>DON'T READ CHOICES. CHECK ONLY ONE.</i>]</p>
A35.	Other HIV-related services	<p>a. [_____] <i>[OTHSP_91]</i> <i>If "Yes," then ask:</i> Other 1 <i>(Specify:_____)</i> <i>[OTHSP_91]</i> Other 2 <i>(Specify:_____)</i> <i>[OTHSP_92]</i> Other 3 <i>(Specify:_____)</i> <i>[OTHSP_93]</i> Other 4 <i>(Specify:_____)</i> <i>[OTHSP_94]</i></p>	<p>b. [_____] <i>[OTHSE_91]</i> <i>If "Yes," then ask:</i> Other 1 <i>(Specify:_____)</i> <i>[OTHSE_91]</i> Other 2 <i>(Specify:_____)</i> <i>[OTHSE_92]</i> Other 3 <i>(Specify:_____)</i> <i>[OTHSE_93]</i> Other 4 <i>(Specify:_____)</i> <i>[OTHSE_94]</i></p>	<p>Other 1 ca. [_____] <i>[OTHSR1_9]</i> Other 1 <i>(Specify:_____)</i> <i>[O112_9OS]</i> Other 2 cb. [_____] <i>[OTHSR2_9]</i> Other 2 <i>(Specify:_____)</i> <i>[O212_9OS]</i> Other 3 cc. [_____] <i>[OTHSR3_9]</i> Other 3 <i>(Specify:_____)</i> <i>[O312_9OS]</i> Other 4 cd. [_____] <i>[OTHSR4_9]</i> Other 4 <i>(Specify:_____)</i> <i>[O412_9OS]</i></p>

Code list for A19c–A35c	
1	Didn't know where to go or whom to call
2	In process of getting the service
3	Waiting list is too long
4	Service isn't available
5	Not eligible or denied services

- 6 Transportation problems
- 7 Service hours are inconvenient
- 8 Service costs too much/lack of insurance
- 9 Language barrier
- 10 Too sick to get service
- 11 Psychological barrier
- 12 Other (Specify:_____)
- 77 Refused to answer
- 88 Don't know

HIV TREATMENT AND ADHERENCE

SAY: “Now I’m going to ask some questions about medicines that you are taking for your HIV. These medicines are called antiretrovirals, also known as ART or HAART.”

- T1. Have you **ever** taken any antiretroviral medicines for your HIV? **[ANTIRE_9]**
- | | | | |
|------------------------|--------------------------|---|---------------|
| No..... | <input type="checkbox"/> | 0 | |
| Yes..... | <input type="checkbox"/> | 1 | → Skip to T3 |
| Refused to answer..... | <input type="checkbox"/> | 7 | } Skip to T19 |
| Don’t know..... | <input type="checkbox"/> | 8 | |

- T2. What is the main reason you have **never** taken any antiretroviral medicines? **[DON’T READ RESPONSES. CHECK ONLY ONE.] [NANTRE_9]**

- | | | |
|---|--------------------------|----------------------|
| Doctor advised to delay treatment..... | <input type="checkbox"/> | 1 |
| Participant believed he/she didn’t need medications because felt healthy or believed HIV laboratory results were good.... | <input type="checkbox"/> | 2 |
| Due to side effects of medication..... | <input type="checkbox"/> | 3 |
| Felt depressed or overwhelmed..... | <input type="checkbox"/> | 4 |
| Didn’t want to think about being HIV positive..... | <input type="checkbox"/> | 5 |
| Worried about ability to adhere..... | <input type="checkbox"/> | 6 |
| Drinking or using drugs..... | <input type="checkbox"/> | 7 |
| Money or insurance issues..... | <input type="checkbox"/> | 8 |
| Homeless..... | <input type="checkbox"/> | 9 |
| Taking alternative or complementary medicines..... | <input type="checkbox"/> | 10 |
| Other (<i>Specify:</i> _____)..... | <input type="checkbox"/> | 11 [NANT_90S] |
| Refused to answer..... | <input type="checkbox"/> | 77 |
| Don’t know..... | <input type="checkbox"/> | 88 |

Interviewer instructions: Skip to the Sexual Behavior section.

- T3. When was the first time you **ever** took any antiretroviral medicines for your HIV? Please tell me the month and year. **[FSTMY_9]**

___/___-___

(M M / Y Y Y Y)

[Month: 77 = Refused to answer, 88= Don't know;
Year: 7777 = Refused to answer, 8888 = Don't know]

Inconsistency checks: Confirm response if T3 (date first time took ART) is earlier than A4 (date first went to a provider for HIV care). Confirm response if T3 is earlier than A1 (date tested positive for HIV). T3 cannot be later than I4 (interview date).

Programming note for T3: If T3 is earlier than A4, display note to interviewer: "Date entered is earlier than the date first went to a provider for HIV care. Confirm response." Allow program to advance. Accept "??" for month field. If T3 is earlier than A1, display a message to the interviewer saying, "Date entered is earlier than date first tested positive for HIV. Confirm response." Allow the program to advance.

SAY: "Now I'm going to ask you about antiretroviral medicines you are currently taking—ones you are taking now."

T4. Are you **currently** taking any antiretroviral medicines for your HIV? **[CURME_9]**

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

→ Skip to Say box before T6

T4a. What is the main reason you aren't **currently** taking any antiretroviral medicines?

[DON'T READ RESPONSES. CHECK ONLY ONE.] [NMANT8_9]

- Doctor advised to delay or stop treatment..... 1
- Participant believed he/she didn't need medications because felt health or believed HIV laboratory results were good 2
- Due to side effects of medications..... 3
- Felt depressed or overwhelmed..... 4
- Didn't want to think about being HIV positive..... 5
- Worried about ability to adhere..... 6
- Drinking or using drugs..... 7
- Money or insurance issues..... 8
- Homeless..... 9
- Taking alternative or complementary medicines..... 10

Other (<i>Specify:</i> _____).....	<input type="checkbox"/>	11 [NMA8_9OS]
Refused to answer.....	<input type="checkbox"/>	77
Don't know.....	<input type="checkbox"/>	88

Interviewer instructions: Skip to T14.

SAY: “Now I’m going to ask you some questions about the antiretrovirals you are **currently** taking. I’m going to show you a card with HIV medicines on them. If you are taking any combination medicines, please tell me the name of the combination, not the separate name of each medicine in the combination. Don’t worry about telling me that you don’t take all your medicine. And please remember, none of this information will be shared with your doctor, nurse, or other health care worker.” **[SHOW MEDICATION RESPONSE CARD 1 and 2.]**

T5.	<p>a. Are you currently taking [INSERT DRUG NAME SHOW RESPOND-ENT HIV PRESCRIPTION DRUG CARD]?</p> <p>CODES: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</p> <p><i>If "Yes," go to T6b; otherwise, skip to next drug.</i></p>	<p>b. How many pills, spoonfuls, or injections are you supposed to take of [INSERT DRUG NAME] each time you take it?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>c. How many times per day are you supposed to take [INSERT DRUG NAME]?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>d. Yesterday, how many times did you miss taking a dose or a set of pills, spoonfuls, or injections of [INSERT DRUG NAME]? If you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>e. The day before yesterday, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>f. Three days ago, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>
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Interviewer instructions: Only ask about combination treatments previously identified in T4a (ever taken combination treatments).

Nucleoside Analogue Combinations (Combination Treatments)						
Combivir (AZT+3TC)	<u> </u> [COMBCUR]	<u> </u> [COMBET_9]	<u> </u> [COMBDY_9]	<u> </u> [CBMIS1_9]	<u> </u> [CBMIS2_9]	<u> </u> [CBMIS3_9]
Trizivir (AZT+3TC+ABC)	<u> </u> [TRIZCUR]	<u> </u> [TRIZET_9]	<u> </u> [TRIZDY_9]	<u> </u> [TZMIS1_9]	<u> </u> [TZMIS2_9]	<u> </u> [TZMIS3_9]
Epzicom (3TC+ABC)	<u> </u> [EPZICUR]	<u> </u> [EPZIET_9]	<u> </u> [EPZIDY_9]	<u> </u> [EPMIS1_9]	<u> </u> [EPMIS2_9]	<u> </u> [EPMIS3_9]

T5.	<p>a. Are you currently taking [INSERT DRUG NAME SHOW RESPOND-ENT HIV PRESCRIPTION DRUG CARD]?</p> <p>CODES: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</p> <p><i>If "Yes," go to T6b; otherwise, skip to next drug.</i></p>	<p>b. How many pills, spoonfuls, or injections are you supposed to take of [INSERT DRUG NAME] each time you take it?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>c. How many times per day are you supposed to take [INSERT DRUG NAME]?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>d. Yesterday, how many times did you miss taking a dose or a set of pills, spoonfuls, or injections of [INSERT DRUG NAME]? If you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>e. The day before yesterday, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>f. Three days ago, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>
Truvada (FTC+TDF)	[TRUVCUR]	[TRUVET_9]	[TRUVDY_9]	[TRMIS1_9]	[TRMIS2_9]	[TRMIS3_9]
Atripla (EFV/FTC/TDF)	[ATRIPLA]	[ATRTIM_9]	[ATRDAY_9]	[ATMIS1_9]	[ATMIS2_9]	[ATMIS3_9]
Interviewer instructions: Only ask about NRTI medicines previously identified in T4b (ever taken NRTI).						
Nucleoside/ Nucleotide Analogue Reverse Transcriptase Inhibitors (NRTI), also known as 'Nukes'						

T5.	<p>a. Are you currently taking [INSERT DRUG NAME SHOW RESPOND-ENT HIV PRESCRIPTION DRUG CARD]?</p> <p>CODES: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</p> <p><i>If "Yes," go to T6b; otherwise, skip to next drug.</i></p>	<p>b. How many pills, spoonfuls, or injections are you supposed to take of [INSERT DRUG NAME] each time you take it?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>c. How many times per day are you supposed to take [INSERT DRUG NAME]?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>d. Yesterday, how many times did you miss taking a dose or a set of pills, spoonfuls, or injections of [INSERT DRUG NAME]? If you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>e. The day before yesterday, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>f. Three days ago, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>
Epivir (lamivudine, 3TC)	[LAMICUR]	[LAMIET_9]	[LAMIDY_9]	[LAMIS1_9]	[LAMIS2_9]	[LAMIS3_9]
Videx EC (didanosine, ddI EC)	[DAECCUR]	[DAECET_9]	[DAECDY_9]	[DAMIS1_9]	[DAMIS2_9]	[DAMIS3_9]
Videx (didanosine, ddI)	[DIDACUR]	[DIDAET_9]	[DIDADY_9]	[DIMIS1_9]	[DIMIS2_9]	[DIMIS3_9]
Emtriva (emtricitabine, FTC)	[EMTRCUR]	[EMTRET_9]	[EMTRDY_9]	[EMMIS1_9]	[EMMIS2_9]	[EMMIS3_9]
Viread (tenofovir, TDF)	[TENOCUR]	[TENOET_9]	[TENODY_9]	[TEMIS1_9]	[TEMIS2_9]	[TEMIS3_9]
Hivid (zalcitabine ddC)	[ZALCCUR]	[ZALCET_9]	[ZALCDY_9]	[ZAMIS1_9]	[ZAMIS2_9]	[ZAMIS3_9]

T5.	<p>a. Are you currently taking [INSERT DRUG NAME SHOW RESPOND-ENT HIV PRESCRIPTION DRUG CARD]?</p> <p>CODES: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</p> <p><i>If "Yes," go to T6b; otherwise, skip to next drug.</i></p>	<p>b. How many pills, spoonfuls, or injections are you supposed to take of [INSERT DRUG NAME] each time you take it?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>c. How many times per day are you supposed to take [INSERT DRUG NAME]?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>d. Yesterday, how many times did you miss taking a dose or a set of pills, spoonfuls, or injections of [INSERT DRUG NAME]? If you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>e. The day before yesterday, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>f. Three days ago, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>
Zerit (stavudine, d4T)	_____ [STAVCUR]	_____ [STAVET_9]	_____ [STAVDY_9]	_____ [STMIS1_9]	_____ [STMIS2_9]	_____ [STMIS3_9]
Retrovir (zidovudine, AZT, ZDV)	_____ [ZIDOCUR]	_____ [ZIDOET_9]	_____ [ZIDODY_9]	_____ [ZIMIS1_9]	_____ [ZIMIS2_9]	_____ [ZIMIS3_9]
Ziagen (abacavir, ABC)	_____ [ABACACUR]	_____ [ABACET_9]	_____ [ABACDY_9]	_____ [ABMIS1_9]	_____ [ABMIS2_9]	_____ [ABMIS3_9]
Interviewer instructions: Only ask about PI medicines previously identified in T4c (ever taken PI).						
Protease Inhibitors (PI)						
Agenerase (amprenavir, APV)	_____ [AMPRCUR]	_____ [AMPRET_9]	_____ [AMPRDY_9]	_____ [AMMIS1_9]	_____ [AMMIS2_9]	_____ [AMMIS3_9]
Invirase (saquinavir hard gel, SQV)	_____ [SACQCUR]	_____ [SACQT_9]	_____ [SACQDY_9]	_____ [SAMIS1_9]	_____ [SAMIS2_9]	_____ [SAMIS3_9]

T5.	<p>a. Are you currently taking [INSERT DRUG NAME SHOW RESPOND-ENT HIV PRESCRIPTION DRUG CARD]?</p> <p>CODES: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</p> <p><i>If "Yes," go to T6b; otherwise, skip to next drug.</i></p>	<p>b. How many pills, spoonfuls, or injections are you supposed to take of [INSERT DRUG NAME] each time you take it?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>c. How many times per day are you supposed to take [INSERT DRUG NAME]?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>d. Yesterday, how many times did you miss taking a dose or a set of pills, spoonfuls, or injections of [INSERT DRUG NAME]? If you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>e. The day before yesterday, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>f. Three days ago, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>
Kaletra (lopinavir/ritonavir, LPVr)	[LOPICUR]	[LOPIT_9]	[LOPIDY_9]	[LOMIS1_9]	[LOMIS2_9]	[LOMIS3_9]
Crixivan (indinavir, IDV)	[INDICUR]	[INDIET_9]	[INDIDY_9]	[INMIS1_9]	[INMIS2_9]	[INMIS3_9]
Lexiva (fosamprenavir, FPV)	[FUSACUR]	[FUSAET_9]	[FUSADY_9]	[FOMIS1_9]	[FOMIS2_9]	[FOMIS3_9]
Reyataz (atazanavir, ATV)	[ATAZCUR]	[ATAZET_9]	[ATAZDY_9]	[ATZIS1_9]	[ATZIS2_9]	[ATZIS3_9]
Fortovase (saquinavir soft gel, SQV)	[SAC2CUR]	[SAC2T_9]	[SAC2DY_9]	[SQMIS1_9]	[SQMIS2_9]	[SQMIS3_9]
Norvir (ritonavir, RTV)	[RITOCUR]	[RITOET_9]	[RITODY_9]	[RIMIS1_9]	[RIMIS2_9]	[RIMIS3_9]

T5.	<p>a. Are you currently taking [INSERT DRUG NAME SHOW RESPOND-ENT HIV PRESCRIPTION DRUG CARD]?</p> <p>CODES: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</p> <p><i>If "Yes," go to T6b; otherwise, skip to next drug.</i></p>	<p>b. How many pills, spoonfuls, or injections are you supposed to take of [INSERT DRUG NAME] each time you take it?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>c. How many times per day are you supposed to take [INSERT DRUG NAME]?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>d. Yesterday, how many times did you miss taking a dose or a set of pills, spoonfuls, or injections of [INSERT DRUG NAME]? If you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>e. The day before yesterday, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>f. Three days ago, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>
Viracept (nelfinavir, NFV)	_____ [NELFCUR]	_____ [NELFET_9]	_____ [NELFDY_9]	_____ [NEMIS1_9]	_____ [NEMIS2_9]	_____ [NEMIS3_9]
Aptivus (tipranavir, TPV)	_____ [TIPRCUR]	_____ [TIPRET_9]	_____ [TIPRDY_9]	_____ [TIMIS1_9]	_____ [TIMIS2_9]	_____ [TIMIS3_9]
Prezista (darunavir, DRV)	_____ [PREZCUR]	_____ [PREZET_9]	_____ [PREZDY_9]	_____ [PRMIS1_9]	_____ [PRMIS2_9]	_____ [PRMIS3_9]
Interviewer instructions: Only ask about NNRTI medicines previously identified in T4d (ever taken NRTI).						
Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTI), also known as 'Non-nukes'						

T5.	<p>a. Are you currently taking [INSERT DRUG NAME SHOW RESPOND-ENT HIV PRESCRIPTION DRUG CARD]?</p> <p>CODES: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</p> <p><i>If "Yes," go to T6b; otherwise, skip to next drug.</i></p>	<p>b. How many pills, spoonfuls, or injections are you supposed to take of [INSERT DRUG NAME] each time you take it?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>c. How many times per day are you supposed to take [INSERT DRUG NAME]?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>d. Yesterday, how many times did you miss taking a dose or a set of pills, spoonfuls, or injections of [INSERT DRUG NAME]? If you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>e. The day before yesterday, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>f. Three days ago, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>
Rescriptor (delavirdine, DLV)	<u> </u> [DELACUR]	<u> </u> [DELAET_9]	<u> </u> [DELADY_9]	<u> </u> [DEMIS1_9]	<u> </u> [DEMIS2_9]	<u> </u> [DEMIS3_9]
Viramune (nevirapine, NVP)	<u> </u> [NEVICUR]	<u> </u> [NEVIET_9]	<u> </u> [NEVIDY_9]	<u> </u> [NEVIS1_9]	<u> </u> [NEVIS2_9]	<u> </u> [NEVIS3_9]
Sustiva (efavirenz, EFV)	<u> </u> [EFAVCUR]	<u> </u> [EFAVET_9]	<u> </u> [EFAVDY_9]	<u> </u> [EFMIS1_9]	<u> </u> [EFMIS2_9]	<u> </u> [EFMIS3_9]
Intelence (etravirine ETV)	<u> </u> [TMC]	<u> </u> [TMCTIM_9]	<u> </u> [TMCDAY_9]	<u> </u> [TMMIS1_9]	<u> </u> [TMMIS2_9]	<u> </u> [TMMIS3_9]
Interviewer instructions: Only ask about Entry/Fusion Inhibitors previously identified in T4e (ever taken Entry/Fusion Inhibitors).						
Entry/Fusion Inhibitors						

T5.	<p>a. Are you currently taking [INSERT DRUG NAME SHOW RESPOND-ENT HIV PRESCRIPTION DRUG CARD]?</p> <p>CODES: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</p> <p><i>If "Yes," go to T6b; otherwise, skip to next drug.</i></p>	<p>b. How many pills, spoonfuls, or injections are you supposed to take of [INSERT DRUG NAME] each time you take it?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>c. How many times per day are you supposed to take [INSERT DRUG NAME]?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>d. Yesterday, how many times did you miss taking a dose or a set of pills, spoonfuls, or injections of [INSERT DRUG NAME]? If you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>e. The day before yesterday, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>f. Three days ago, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>
Fuzeon (enfuvirtide, T-20)	[ENFUCUR]	[ENFUET_9]	[ENFUND_9]	[ENMIS1_9]	[ENMIS2_9]	[ENMIS3_9]
Selzentry (maraviroc, MVC)	[MARAVIRO]	[MARTIM_9]	[MARDAY_9]	[MAMIS1_9]	[MAMIS2_9]	[MAMIS3_9]
Interviewer instructions: Only ask about Integrase Inhibitors previously identified in T4f (ever taken Integrase Inhibitors).						
Integrase Inhibitors						
Isentress, (raltegravir, RAL)	[RALTEGRA]	[RALTIM_9]	[RALDAY_9]	[RAMIS1_9]	[RAMIS2_9]	[RAMIS3_9]
Interviewer instructions: Only ask about other ART medicines previously identified in T4h (ever taken other ART medicines).						
Other ART Medicines						

T5.	<p>a. Are you currently taking [INSERT DRUG NAME SHOW RESPOND-ENT HIV PRESCRIPTION DRUG CARD]?</p> <p>CODES: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</p> <p><i>If "Yes," go to T6b; otherwise, skip to next drug.</i></p>	<p>b. How many pills, spoonfuls, or injections are you supposed to take of [INSERT DRUG NAME] each time you take it?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>c. How many times per day are you supposed to take [INSERT DRUG NAME]?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>d. Yesterday, how many times did you miss taking a dose or a set of pills, spoonfuls, or injections of [INSERT DRUG NAME]? If you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>e. The day before yesterday, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>f. Three days ago, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>
Other 1 (Specify: _____) [INSERT RESPONSE FROM T4G]	_____ [OTSPAYN1]	_____ [ODRET1_9]	_____ [ODTDY1_9]	_____ [ODMIS1_9]	_____ [ODMIS2_9]	_____ [ODMIS3_9]
Other 2 (Specify: _____) [INSERT RESPONSE FROM T4G]	_____ [OTSPAYN2]	_____ [ODRET2_9]	_____ [ODTDY2_9]	_____ [ODMI21_9]	_____ [ODMI22_9]	_____ [ODMS23_9]
Other 3 (Specify: _____) [INSERT RESPONSE FROM T4G]	_____ [OTSPAYN3]	_____ [ODRET3_9]	_____ [ODTDY3_9]	_____ [ODMI31_9]	_____ [ODMI32_9]	_____ [ODMI33_9]

T5.	<p>a. Are you currently taking [INSERT DRUG NAME SHOW RESPOND-ENT HIV PRESCRIPTION DRUG CARD]?</p> <p>CODES: No = 0, Yes = 1, Refused to answer = 7, Don't know = 8</p> <p><i>If "Yes," go to T6b; otherwise, skip to next drug.</i></p>	<p>b. How many pills, spoonfuls, or injections are you supposed to take of [INSERT DRUG NAME] each time you take it?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>c. How many times per day are you supposed to take [INSERT DRUG NAME]?</p> <p>CODES: Refused to answer = 77, Don't know = 88</p>	<p>d. Yesterday, how many times did you miss taking a dose or a set of pills, spoonfuls, or injections of [INSERT DRUG NAME]? If you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>e. The day before yesterday, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>	<p>f. Three days ago, how many times did you miss taking a dose or a set of these pills, spoonfuls, or injections of [INSERT DRUG NAME]? Again, if you only took part of your dose, please report this as the whole dose missed.</p> <p>CODES: Not applicable = 66, Refused to answer = 77, Don't know = 88</p>
Other 4 (Specify: _____) [INSERT RESPONSE FROM T4G]	[OTSPAYN4]	[ODRET4_9]	[ODTDY4_9]	[ODMI41_9]	[ODMI42_9]	[ODMI43_9]

Inconsistency check: The number of doses or set of pills, spoonfuls, or injections missed must be ≤ the number of times the respondent is supposed to take these pills, spoonfuls, or injections. The number of pills, spoonfuls, or injections that the respondent is supposed to take each time he or she takes them must be ≤ 35. The number of times each day the respondent is supposed to take these pills, spoonfuls, or injections must be ≤ 9. The number of times the respondent missed taking a dose or set of these pills, spoonfuls, or injections yesterday must be ≤ 9. The number of times the respondent missed taking a dose or set of these pills, spoonfuls, or injections the day before yesterday must be ≤ 9.

T6. Do any of your antiretroviral medicines have special instructions, such as “take with food” or “on an empty stomach” or “with plenty of fluids”? **[MEDINSTR]**

- No..... 0  *Skip to T9*
- Yes..... 1
- Refused to answer..... 7  *Skip to T9*
- Don't know..... 8

T7. During the **past 3 days**, how often did you follow all of those special instructions? *[SHOW CALENDAR AND RESPONSE CARD C.] [FLMDIN_9]*

- Never..... 1
- Rarely..... 2
- About half of the time..... 3
- Most of the time..... 4
- Always..... 5
- Refused to answer..... 7
- Don't know..... 8

T8. Most antiretroviral medicines need to be taken on a schedule, such as “2 times a day” or “3 times a day” or “every 8 hours.” How closely did you follow your specific schedule during the **past 3 days**? *[SHOW RESPONSE CARD C.] [MDSCHD_9]*

- Never..... 1
- Rarely..... 2
- About half of the time..... 3
- Most of the time..... 4
- Always..... 5
- Refused to answer..... 7
- Don't know..... 8

T9. When was the **last time** you missed any of your antiretroviral medicines? *[SHOW RESPONSE CARD D. CHECK ONLY ONE.] [LTMISMED]*

- Within the past **week** 1
- 1–2 **weeks** ago..... 2
- 3–4 **weeks** ago..... 3
- 1–3 **months** ago..... 4
- More than 3 **months** ago..... 5

*Skip to Say box
before T12*

- Never skip medicines..... 6
- Refused to answer..... 7
- Don't know..... 8

T10. The **last time** you missed taking your antiretroviral medicines, what were the reasons?
[DON'T READ CHOICES. CHECK ALL THAT APPLY.] [MSMDR_9]

- Problem with prescription or refill..... 1 **[MSMDR_9A]**
- Felt sick or tired..... 2 **[MSMDR_9B]**
- Change in daily routine including travel..... 3 **[MSMDR_9C]**

- Due to side effects of medications..... 4 **[MSMDR_9D]**
- Felt depressed or overwhelmed..... 5 **[MSMDR_9E]**
- Drinking or using drugs..... 6 **[MSMDR_9F]**
-
- Money or insurance issues..... 7 **[MSMDR_9G]**
-
- Homeless..... 8 **[MSMDR_9H]**
-
- Had too many pills to take..... 9 **[MSMDR_9I]**
-
- Forgot to take them (*Specify:* _____). 10 **[MSMDR_9J] [MSR_9JOS]**
- Other 1 (*Specify:* _____)..... 11 **[MSMD_9OK]**
[MSMD91OS]
- Other 2 (*Specify:* _____)..... 12 **[MSMD_9OL]**
[MSMD92OS]
- Other 3 (*Specify:* _____)..... 13 **[MSMD_9OM]**
[MSMD93OS]
- Other 4 (*Specify:* _____)..... 14 **[MSMD_9ON]**
[MSMD94OS]
- Refused to answer..... 77
- Don't know..... 88

SAY: “Now I’m going to ask you a question about the past 30 days.” [SHOW RESPONDENT CALENDAR.]

T11. During the **past 30 days**, how troubled were you by side effects from your antiretroviral medications? **[SHOW RESPONSE CARD D-1.] [TRBL_EFT]**

- Never..... 1
- Rarely..... 2
- About half of the time..... 3
- Most of the time..... 4
- Always..... 5
- Been on medications less than 30 days..... 6
- Refused to answer..... 7
- Don't know..... 8

T12. How sure are you that you will be able to take all or most of your medication as directed? **[SHOW RESPONSE CARD E. CHECK ONLY ONE.] [TK_MD_DR]**

- Not at all sure..... 0
- Somewhat sure..... 1
- Very sure..... 2
- Extremely sure..... 3
- Refused to answer..... 77
- Don't know..... 88

T12a. How sure are you that your medication will have a positive effect on your health? **[SHOW RESPONSE CARD E. CHECK ONLY ONE.] [MD_POSEF]**

- Not at all sure..... 0
- Somewhat sure..... 1
- Very sure..... 2
- Extremely sure..... 3
- Refused to answer..... 77
- Don't know..... 88

T12b. How sure are you that if you do not take your medication exactly as instructed, the HIV in your body will become resistant to HIV medications? **[SHOW RESPONSE CARD E. CHECK ONLY ONE.] [SR_HIVRS]**

- Not at all sure..... 0

- Somewhat sure..... 1
- Very sure..... 2
- Extremely sure..... 3
- Refused to answer..... 77
- Don't know..... 88

T13. To what extent do your friends or family members help you remember to take your medication? **[SHOW RESPONSE CARD I. CHECK ONLY ONE.] [MED_SUPT]**

- Not at all..... 0
- A little..... 1
- Somewhat..... 2
- A lot..... 3
- Not applicable..... 4
- Refused to answer..... 77
- Don't know..... 88

Interviewer instructions: Skip to T15.

T14. During the **past 12 months**, have you taken antiretroviral medicines? **[ATMD12_9]**

- No..... 0 Skip to Say box before S1
- Yes..... 1
- Refused to answer..... 7 Skip to Say box before S1
- Don't know..... 8

T15. During the **past 12 months**, what were the ways your antiretroviral medicines were paid for? **[DON'T READ CHOICES. CHECK ALL THAT APPLY.] [PREMD_9]**

- Private health insurance..... 1 **[PREMD_9A]**
- Medicaid 2 **[PREMD_9B]**
- Medicare..... 3 **[PREMD_9C]**
- AIDS Drug Assistance Program (ADAP)..... 4 **[PREMD_9D]**
- An AIDS service organization provided medicines..... 5 **[PREMD_9E]**
- Got medicines at a public clinic..... 6 **[PREMD_9F]**

- Clinical trial or drug study provided medicines..... 7 [PREMD_9G]
- Paid for medicines out of pocket..... 8 [PREMD_9H]
- Other 1 (Specify: _____)..... 9 [PREMO_9I] [PREM91OS]
- Other 2 (Specify: _____)..... 10 [PREMJ_9O]
[PREM92OS]
- Other 3 (Specify: _____)..... 11 [PREMK_9O]
[PREM93OS]
- Other 4 (Specify: _____)..... 12 [PREML_9O]
[PREM94OS]
- Refused to answer..... 77
- Don't know..... 88

T16. During the **past 12 months**, have you ever purposefully taken a “drug holiday” from your antiretroviral medicines that wasn’t recommended by your doctor? That is did you plan to not take any doses of one or more of your antiretroviral medicines for at least two whole days in a row? [DRGHOL_9]

- No..... 0  Skip to Say box before S1
- Yes..... 1
- Refused to answer..... 7  Skip to Say box before S1
- Don't know..... 8

T17. What was the main reason that you took a drug holiday from your antiretroviral medicines? [READ CHOICES. CHECK ONLY ONE.] [RDRHO_10]

- Medicine has side effects or makes me feel bad..... 1
- Got tired of taking medicines or needed a break..... 2
- Was using drugs or alcohol..... 3
- Was on vacation..... 4
- Felt good..... 5
- Other (Specify: _____)..... 6 [RDR_10OS]
- Refused to answer..... 77
- Don't know..... 88

SEXUAL BEHAVIOR

SAY: “Next, I’m going to ask you some questions about having sex. Your answers to these questions will be used to help educate people about how to decrease the spread of HIV. Please remember that your answers will be kept secure to the extent permitted by law and that you do not have to answer any questions that you do not want to. For these questions, ‘having sex’ means oral, vaginal, or anal sex. Oral sex means mouth on the vagina, penis, or anus; vaginal sex means penis in the vagina; and anal sex means penis in the anus. I need to ask you all the questions, even if some may not apply to your situation.”

Interviewer instructions: Refer to ES7 (sex at birth) and ES8 (self-identified gender):

- **Go to S1 (Male Respondent–Female Partner):** if ES7 and ES8 are “Male,” or if ES7 is “Intersex” and ES8 is “Male.”
- **Skip to S12 (Female Respondent–Male Partner):** if ES7 and ES8 are “Female,” or if ES7 is “Intersex” and ES8 is “Female.”
- **Skip to S21 (Transgender Respondent):** if ES7 is “Male” and ES8 is “Female,” or if ES7 is “Female” and ES8 is “Male,” or if ES8 is “Transgender.”
- **Otherwise, skip to Say box before U1.**

Programming note: If ES7 or ES8 are “Don’t know” or “Refused to answer,” skip to Say box before UI.

Male Respondent – Female Partner

S1. During the **past 12 months**, have you had oral, vaginal, or anal sex with a woman?

[M_FOVASX]

- No..... 0 → Skip to S6
- Yes..... 1
- Refused to answer..... 7 } Skip to S6
- Don't know..... 8 }

S1a. During the **past 12 months**, with how many different women have you had oral, vaginal, or anal sex? [M_FS12_9]

___ ___ ___ [7777 = Refused to answer, 8888 = Don't know]

Interviewer instructions: If S1a is "Refused to answer" or "Don't know," skip to S6.

Inconsistency check: S1a must be ≥ 1 . S1a must be < than 1,000.

SAY: "Now I'd like to ask about this/these sex partner(s) ."

Interviewer instructions: If S1a > 1, read Column 1, S2. If S1a = 1, read Column 2, S2s.

Programming note for column 1: Response must be greater than 1.

SAY: "Now I'd like to ask about these sex partners you had in the last 12 months."

Interviewer instructions: If S1a > 1, read Column 1, S2. If S1a = 1, read Column 2, S2s.

Programming note for column 1: Response must be greater than 1.

MULTIPLE FEMALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE FEMALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern

MULTIPLE FEMALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE FEMALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
S2a. Now I'd like you to think about the first time you had sex with these _____ [RESPONSE FROM S2] partners after you tested positive for HIV. Did you discuss your HIV status with none, some, or all of these women? [CHECK ONLY ONE.] [M_FCSST]	None..... <input type="checkbox"/> 1 Some..... <input type="checkbox"/> 2 All..... <input type="checkbox"/> 3 Not applicable... <input type="checkbox"/> 6 Don't know..... <input type="checkbox"/> 7 Refused..... <input type="checkbox"/> 8		S2as. Now I'd like you to think about the first time you had sex with this woman after you tested positive for HIV. Did you discuss your HIV status with her? [M_FCSST1]	<input type="checkbox"/>	
S2b. Of the _____ [RESPONSE FROM S2] partners with whom you had oral, vaginal, or anal sex, with how many did you have <u>vaginal sex</u> during the past 12 months ? By "vaginal sex," I mean you put your penis in her vagina. [M_FCSVG]	<input type="checkbox"/>	If "0," "Refused to answer," or "Don't know," skip to S2e. If S2b is "1," go to Column 2, S2cs.	S2bs. During the past 12 months , did you have <u>vaginal sex</u> with this partner? By "vaginal sex," I mean you put your penis in her vagina. [M_FCSVG1]	<input type="checkbox"/>	If "No," "Refused to answer," or "Don't know," skip to S2es.
Inconsistency check: Column 1, S2b must be ≤ S2. If not, the program should display a message saying, "Number of female partners you had vaginal sex with must be less than or equal to the number of female partners."					

MULTIPLE FEMALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE FEMALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
S2c. With how many of these _____ [RESPONSE FROM S2b] partners did you have <u>vaginal sex without a condom during the past 12 months</u> ? When I say "without a condom," I mean that you either didn't use a condom at all or that you only used a condom for part of the time during sex. [M_FCSVC]	[]	If "0," "Refused to answer," or "Don't know," skip to S2e. If S2c is "1," go to Column 2, S2ds.	S2cs. During the past 12 months , did you have <u>vaginal sex without a condom</u> with this partner? When I say "without a condom," I mean that you either didn't use a condom at all or that you only used a condom for part of the time during sex. [M_FCSVC1]	[]	If "No," "Refused to answer," or "Don't know," skip to S2es.
Inconsistency check: Column 1, S2c must be ≤ S2b. If not, the program should display a message saying, "Number of female partners you had vaginal sex without a condom must be less than or equal to the number of female partners with whom you had vaginal sex."					
SAY: "The next question is about HIV status. Remember, all of your answers are secure to the extent permitted by law and if you do not know or do not want to answer, that's okay."					
S2d. Of these _____ [RESPONSE FROM S2c] partners with whom you had vaginal sex without a condom, how many were <u>HIV positive</u> ? [M_FCVCP]	[]	If S2 is > 1, go to Column 1, S2e. If S2 = 1 go to Column 2, S2es.	S2ds. Was this partner with whom you had vaginal sex without a condom <u>HIV positive</u> ? [M_FCVCP1]	[]	

MULTIPLE FEMALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE FEMALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
Inconsistency check: Column 1, S2d must be ≤ S2c. If not, the program should display a message saying, "Number of HIV positive female partners with whom you had vaginal sex without a condom must be less than or equal to the number with whom you had vaginal sex without a condom."					
S2e. You said that you had oral, vaginal, or anal sex with _____ [RESPONSE FROM S2] female partners. Of these partners, with how many did you have <u>anal sex</u> during the past 12 months ? By "anal sex," I mean you put your penis in her anus. [M_FCSAN1]	[_____]	If "0," "Refused to answer," or "Don't know," skip to S3. If S2e is "1," go to Column 2, S2fs.	S2es. During the past 12 months , did you have <u>anal sex</u> with this female partner? By "anal sex," I mean you put your penis in her anus. [M_FCSAN1]	[_____]	If "No," "Refused to answer," or "Don't know," skip to S4.
Inconsistency check: Column 1, S2e must be ≤ S2. If not, the program should display a message saying, "Number of female partners you had anal sex with must be less than or equal to the number of female partners."					

MULTIPLE FEMALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE FEMALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
S2f. Of these _____ [RESPONSE FROM S2e] female partners, with how many did you have <u>anal sex without a condom</u> during the past 12 months ? When I say “without a condom,” I mean that you either didn't use a condom at all or that you only used a condom for part of the time during sex. [M_FCSAC]	[]	If “0,” “Refused to answer,” or “Don't know,” skip to S3. If S2f is “1,” go to Column 2, S2gs.	S2fs. During the past 12 months , did you have <u>anal sex without a condom</u> with this female partner? When I say “without a condom,” I mean that you either didn't use a condom at all or that you only used a condom for part of the time during sex. [M_FCSAC1]	[]	If “No,” “Refused to answer,” or “Don't know,” skip to S4.
Inconsistency check: Column 1, S2f must be ≤ S2e. If not, the program should display a message saying, “Number of female partners you had anal sex without a condom must be less than or equal to the number of female partners with whom you had anal sex.”					
SAY: “The next question is about HIV status. Remember, all of your answers are secure to the extent permitted by law and if you do not know or do not want to answer, that's okay.”					
S2g. Of these _____ [RESPONSE FROM S2f] female partners with whom you had anal sex without a condom, how many were <u>HIV positive</u> ? [M_FCACP]	[]		S2gs. Was this female partner with whom you had anal sex without a condom <u>HIV positive</u> ? [M_FCACP1]	[]	If S1a=1, skip to S4.

MULTIPLE FEMALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE FEMALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
Inconsistency check: Column 1, S2g must be ≤ S2f. If not, the program should display a message saying, "Number of HIV positive female partners with whom you had anal sex without a condom must be less than or equal to the number with whom you had anal sex without a condom."					

S3. Earlier you said that you had oral, vaginal, or anal sex with ___ ___ ___ [RESPONSE FROM S1a] women. During the **past 12 months**, did you have sex with any of these women in exchange for things like money, drugs, food, shelter, or transportation? [M_FXCH_9]

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

Interviewer instructions: Skip to S5.

S3a. During the **past 12 months**, did you have sex with this woman in exchange for things like money, drugs, food, shelter, or transportation? [M_FXC1_9]

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

S4. Now I would like you to think about the last time you had sex with a woman. When was the last time you had sex with a woman? Just tell me the month and year.

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

S4a. When you had sex that last time, did you have anal or vaginal sex without a condom with a woman whose HIV status you didn't know?

- No..... 0

- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

S4b. When you had sex that last time, did you have vaginal or anal sex without a condom with a woman who was HIV negative?

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

S4c. When you had sex that last time,, did you have vaginal or anal sex without a condom with a woman who was HIV positive?

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

Male Respondent – Male Partner

S5. During the **past 12 months**, have you had oral or anal sex with a man? *[M_MOASX]*

- No..... 0  *Skip to Say box before U1*
- Yes..... 1
- Refused to answer..... 7  *Skip to Say box before U1*
- Don't know..... 8

S5a. During the **past 12 months**, with how many different men have you had oral or anal sex? *[M_SX12_9]*

____ *[Refused to answer = 7777, Don't know = 8888]*

Interviewer instructions: If S5a is “Refused to answer” or “Don’t know,” skip to Say box before U1.

Inconsistency check: S5a must be ≥ 1. S5a must be < than 1,000.

SAY: “Now I’d like to ask about these partners.”

Interviewer instructions: If S5a > 1, read Column 1, S7. If S5a = 1, read Column 2, S7s.

Programming note for column 1: Response must be greater than 1.

MULTIPLE MALE PARTNERS CODES: Refused to answer = 7777, Don’t know = 8888			ONE MALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don’t know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
Inconsistency check: Column 1, S6 must be ≤ S5a. If not, the program should display a message saying, “Number of male partners must be less than or equal to the total number of male partners.”					
S6a. Now I’d like you to think about the first time you had sex with these — — — — — [RESPONSE FROM S7] partners after you tested positive for HIV. Did you discuss your HIV status with none, some, or all of these men? [CHECK ONLY ONE.] [M_MCSST]	None..... <input type="checkbox"/> 1 Some..... <input type="checkbox"/> 2 All..... <input type="checkbox"/> 3 Not applicable... <input type="checkbox"/> 6 Don’t know..... <input type="checkbox"/> 7 Refused..... <input type="checkbox"/> 8		S6as. Now I’d like you to think about the first time you had sex with this man after you tested positive for HIV. Did you discuss your HIV status with him? [M_MCSST1]	[_____]	

MULTIPLE MALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE MALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
S6b. Of these _____ [RESPONSE FROM S7] partners with whom you had oral or anal sex, with how many did you have <u>insertive anal sex</u> during the past 12 months ? By “insertive anal sex,” I mean you put your penis in his anus. [M_MCSIA]	[_____]	If “0,” “Refused to answer,” or “Don’t know,” skip to S6e. If S6b is “1,” go to Column 2, S6cs.	S6bs. During the past 12 months , did you have <u>insertive anal sex</u> with this partner? By “insertive anal sex,” I mean you put your penis in his anus. [M_MCSIA1]	[_____]	If “No,” “Refused to answer,” or “Don’t know,” skip to S6es.
Inconsistency check: Column 1, S6b must be ≤ S6. If not, the program should display a message saying, “Number of male partners you had insertive anal sex with must be less than or equal to the number of male partners.”					
S6c. With how many of these _____ [RESPONSE FROM S7b] partners did you have <u>insertive anal sex without a condom</u> ? When I say “without a condom,” I mean that you either didn’t use a condom at all or that you only used a condom for part of the time during sex. [M_MCIAC]	[_____]	If “0,” “Refused to answer,” or “Don’t know,” skip to S6e. If S6c is “1,” go to Column 2, S6ds.	S6cs. During the past 12 months , did you have <u>insertive anal sex without a condom</u> with this partner? When I say “without a condom,” I mean that you either didn’t use a condom at all or that you only used a condom for part of the time during sex. [M_MCIAC1]	[_____]	If “No,” “Refused to answer,” or “Don’t know,” skip to S6es.

MULTIPLE MALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE MALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
Inconsistency check: Column 1, S6c must be ≤ S6b. If not, the program should display a message saying, "Number of male partners with whom you had insertive anal sex without a condom must be less than or equal to the number with whom you had insertive anal sex."					
SAY: "The next question is about HIV status. Remember, all of your answers are secure to the extent permitted by law and you do not know or do not want to answer, that's okay."					
S6d. Of these _____ [RESPONSE FROM S7c] partners with whom you had insertive anal sex without a condom, how many were <u>HIV positive</u> ? [M_MCICP]	[_____]	If S6 is > 1, go to Column 1, S6e. If S6 = 1 go to Column 2, S6es.	S6ds. Was this partner with whom you had insertive anal sex without a condom <u>HIV positive</u> ? [M_MCICP1]	[_____]	.
Inconsistency check: Column 1, S6d must be ≤ S6c. If not, the program should display a message saying, "Number of HIV positive male partners with whom you had insertive anal sex without a condom must be less than or equal to the number with whom you had insertive anal sex without a condom."					
S6e. You said that you had oral or anal sex with _____ [RESPONSE FROM S7] male partners. Of these partners, with how many did you have <u>receptive anal sex</u> during the past 12 months ? By "receptive anal sex," I mean he put his penis in your anus. [M_MCSRA]	[_____]	If "0," "Refused to answer," or "Don't know," skip to S7. If S6e is "1," go to Column 2, S6fs.	S6es. During the past 12 months , did you have <u>receptive anal sex</u> with this male partner? By "receptive anal sex," I mean he put his penis in your anus. [M_MCSRA1]	[_____]	If "No," "Refused to answer," or "Don't know," skip to S8.

MULTIPLE MALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE MALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
Inconsistency check: Column 1, S6e must be ≤ S6. If not, the program should display a message saying, "Number of male partners you had receptive anal sex with must be less than or equal to the number of male partners."					
S6f. Of these _____ [RESPONSE FROM S7e] male partners, with how many did you have <u>receptive anal sex without a condom</u> during the past 12 months? When I say "without a condom," I mean that you either didn't use a condom at all or that you only used a condom for part of the time during sex. [M_MCRAC]	[_____]	If "0," "Refused to answer," or "Don't know," skip to S7. If S6f is "1," go to Column 2, S6gs.	S6fs. During the past 12 months, did you have <u>receptive anal sex without a condom</u> with this male partner? When I say "without a condom," I mean that you either didn't use a condom at all or that you only used a condom for part of the time during sex. [M_MCRAC1]	[_____]	If "No," "Refused to answer," or "Don't know," skip to S8.
Inconsistency check: Column 1, S6f must be ≤ S6e. If not, the program should display a message saying, "Number of male partners with whom you had receptive anal sex without a condom must be less than or equal to the number with whom you had receptive anal sex."					
SAY: "The next question is about HIV status. Remember, all of your answers are secure to the extent permitted by law and you do not know or do not want to answer, that's okay."					

MULTIPLE MALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE MALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
S6g. Of these _____ [RESPONSE FROM S7f] male partners with whom you had receptive anal sex without a condom, how many were <u>HIV positive</u> ? [M_MCRCP]	<input type="text"/>		S6gs. Was this male partner with whom you had receptive anal sex without a condom <u>HIV positive</u> ? [M_MCRCP1]	<input type="text"/>	If S5a=1, skip to S8.

S7. Earlier you said that you had oral or anal sex with _____ **[RESPONSE FROM S5a]** men. During the **past 12 months**, did you have sex with any of these men in exchange for things like money, drugs, food, shelter, or transportation? **[M_MXCH_9]**

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

Interviewer instructions: Skip to Say box before U1.

S8. During the **past 12 months**, did you have sex with this man in exchange for things like money, drugs, food, shelter, or transportation? **[M_MXC1_9]**

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

S8a. Now I would like you to think about the last time you had sex with a woman. When was the last time you had sex with a woman? Just tell me the month and year.

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

S8b. When you had sex that last time, did you have anal or vaginal sex without a condom with a woman whose HIV status you didn't know?

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

S8c. When you had sex that last time, did you have vaginal or anal sex without a condom with a woman who was HIV negative?

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

S8d. When you had sex that last time,, did you have vaginal or anal sex without a condom with a woman who was HIV positive?

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

Female Respondent – Male Partner

S9. During the **past 12 months**, have you had oral, vaginal, or anal sex with a man? *[F_MOVASX]*

- No..... 0  Skip to S16
- Yes..... 1
- Refused to answer..... 7  Skip to S16

Don't know..... 8

S9a. During the **past 12 months**, with how many different men have you had oral, vaginal, or anal sex? *[F_MM12_9]*

____ _ [Refused to answer = 7777, Don't know = 8888]

Interviewer instructions: If S9a is "Refused to answer" or "Don't know," skip to S9.

Inconsistency check: S9a must be ≥ 1. S9a must be < than 1,000.

SAY: "Now I'd like to ask about this/these sex partner(s)."

Interviewer instructions: IF S9a > 1, go to COLUMN 1, S10. IF S9a = 1, go to COLUMN 2, S10s.

Programming note for column 1: Response must be greater than 1.

MULTIPLE MALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE MALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
S10. You said that you had oral, vaginal, or anal sex with _____ <i>[RESPONSE FROM S9a]</i> men during the past 12 months. Of these men, how many were _____ partners? <i>[F_MCSSX]</i>	<input type="text"/>	If "0," "Refused to answer," or "Don't know," skip to S11. If S10 is "1," go to Column 2, S10as.	S10s. You told me that you had oral, vaginal, or anal sex with one man during the past 12 months. Was this man a _____ partner? <i>[F_MCSSX1]</i>	<input type="text"/>	If "No," "Refused to answer," or "Don't know," skip to S11.
Inconsistency check: Column 1, S10 must be ≤ S9a. If not, the program should display a message saying, "Number of male partners must be less than or equal to the total number of partners."					

MULTIPLE MALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE MALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
S10a. Now I'd like you to think about the first time you had sex with these _____ [RESPONSE FROM S10] partners after you tested positive for HIV. Did you discuss your HIV status with none, some, or all of these men? [F_MCSST]	None..... <input type="checkbox"/> 1 Some..... <input type="checkbox"/> 2 All..... <input type="checkbox"/> 3 Not applicable... <input type="checkbox"/> 6 Don't know..... <input type="checkbox"/> 7 Refused..... <input type="checkbox"/> 8		S10as. Now I'd like you to think about the first time you had sex with this man after you tested positive for HIV. Did you discuss your HIV status with him? [F_MCSST1]	[]	
S10b. Of these _____ [RESPONSE FROM S10] partners with whom you had oral, vaginal, or anal sex, with how many did you have <u>vaginal sex</u> during the past 12 months ? By "vaginal sex," I mean he put his penis in your vagina. [F_MCSVG]	[]	If "0," "Refused to answer," or "Don't know," skip to S10e. If S10b is "1," go to Column 2, S10cs.	S10bs. During the past 12 months , did you have <u>vaginal sex</u> with this partner? By "vaginal sex," I mean he put his penis in your vagina. [F_MCSVG1]	[]	If "No," "Refused to answer," or "Don't know," skip to S10es.
Inconsistency check: Column 1, S10b must be ≤ S10. If not, the program should display a message saying, "Number of male partners you had vaginal sex with must be less than or equal to the number of casual male partners."					

MULTIPLE MALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE MALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
S10c. With how many of these _____ [RESPONSE FROM S10b] partners did you have <u>vaginal sex without a condom</u> during the past 12 months ? When I say "without a condom," I mean that you either didn't use a condom at all or that you only used a condom for part of the time during sex. [F_MCSVC]	[]	If "0," "Refused to answer," or "Don't know," skip to S10e. If S10c is "1," go to Column 2, S10ds.	S10cs. During the past 12 months , did you have <u>vaginal sex without a condom</u> with this partner? When I say "without a condom," I mean that you either didn't use a condom at all or that you only used a condom for part of the time during sex. [F_MCSVC1]	[]	If "No," "Refused to answer," or "Don't know," skip to S10es.
Inconsistency check: Column 1, S10c must be ≤ S10b. If not, the program should display a message saying, "Number of male partners with whom you had vaginal sex without a condom must be less than or equal to the number with whom you had vaginal sex."					
SAY: "The next question is about HIV status. Remember, all of your answers are secure to the extent permitted by law and if you do not know or do not want to answer, that's okay."					
S10d. Of these _____ [RESPONSE FROM S13c] partners with whom you had vaginal sex without a condom, how many were <u>HIV positive</u> ? [F_MCVCP]	[]	If S10 is > 1, go to Column 1, S10e. If S10 = 1, go to Column 2, S10es.	S10ds. Was this partner with whom you had vaginal sex without a condom <u>HIV positive</u> ? [F_MCVCP1]	[]	

MULTIPLE MALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE MALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
Inconsistency check: Column 1, S10d must be ≤ S10c. If not, the program should display a message saying, "Number of HIV positive male partners with whom you had vaginal sex without a condom must be less than or equal to the number with whom you had vaginal sex without a condom."					
S10e. You said you had oral, vaginal, or anal sex with _____ [RESPONSE FROM S10] male partners. Of these partners, with how many did you have <u>anal sex</u> during the past 12 months ? By "anal sex," I mean he put his penis in your anus. [F_MCSAN1]	[_____]	If "0," "Refused to answer," or "Don't know," skip to S11. If S10e is "1," go to Column 2, S10fs.	S10es. During the past 12 months , did you have <u>anal sex</u> with this male partner? By "anal sex," I mean he put his penis in your anus. [F_MCSAN1]	[_____]	If "No," "Refused to answer," or "Don't know," skip to S11.
Inconsistency check: Column 1, S10e must be ≤ S10. If not, the program should display a message saying, "Number of male partners with whom you had anal sex must be less than or equal to the number of male partners."					

MULTIPLE MALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE MALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern
S10f. Of these _____ [RESPONSE FROM S13e] male partners, with how many did you have <u>anal sex without a condom</u> during the past 12 months ? When I say “without a condom,” I mean that you either didn't use a condom at all or that you only used a condom for part of the time during sex. [F_MCSAC]	[]	If “0,” “Refused to answer,” or “Don't know,” skip to S11. If S10f is “1,” go to Column 2, S10gs.	S10fs. During the past 12 months , did you have <u>anal sex without a condom</u> with this male partner? When I say “without a condom,” I mean that you either didn't use a condom at all or that you only used a condom for part of the time during sex. [F_MCSAC1]	[]	If “No,” “Refused to answer,” or “Don't know,” skip to S11.
Inconsistency check: Column 1, S10f must be ≤ S10e. If not, the program should display a message saying, “Number of male partners with whom you had anal sex without a condom must be less than or equal to the number of male partners with whom you had anal sex.”					
SAY: “The next question is about HIV status. Remember, all of your answers are secure to the extent permitted by law and if you do not know or do not want to answer, that's okay.”					
S10g. Of these _____ [RESPONSE FROM S10f] male partners with whom you had anal sex without a condom, how many were <u>HIV positive</u> ? [F_MCACP]	[]		S10gs. Was this male partner with whom you had anal sex without a condom <u>HIV positive</u> ? [F_MCACP1]	[]	If S9a=1, skip to S11a.

MULTIPLE MALE PARTNERS CODES: Refused to answer = 7777, Don't know = 8888			ONE MALE PARTNER CODES: No = 0, Yes = 1, Not applicable = 6, Refused to answer = 7, Don't know = 8		
COLUMN 1			COLUMN 2		
Question	Response	Skip Pattern	Question	Response	Skip Pattern

S11. Earlier you said that you had oral, vaginal, or anal sex with ___ ___ ___ **[RESPONSE FROM S12a]** men. During the **past 12 months**, did you have sex with any of these men in exchange for things like money, drugs, food, shelter, or transportation? **[F_MXCH_9]**

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

S11a. During the **past 12 months**, did you have sex with this man in exchange for things like money, drugs, food, shelter, or transportation? **[F_MXC1_9]**

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

S12. Now I would like you to think about the last time you had sex with a woman. When was the last time you had sex with a woman? Just tell me the month and year.

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

S12a. When you had sex that last time, did you have anal or vaginal sex without a condom with a woman whose HIV status you didn't know?

- No..... 0
- Yes..... 1
- Refused to answer..... 7

Don't know..... 9

S12b. When you had sex that last time, did you have vaginal or anal sex without a condom with a woman who was HIV negative?

No..... 0

Yes..... 1

Refused to answer..... 7

Don't know..... 9

S12c. When you had sex that last time,, did you have vaginal or anal sex without a condom with a woman who was HIV positive?

No..... 0

Yes..... 1

Refused to answer..... 7

Don't know..... 9

DRUG AND ALCOHOL USE

Alcohol Use

SAY: “Now I’m going to ask you about alcohol use.”

U1. During the **past 12 months**, how often did you drink alcohol? [*SHOW CALENDAR AND RESPONSE CARD G.*] [*ALCOHO_9*]

- Daily..... 1
- Weekly..... 2
- Monthly..... 3
- Less than monthly..... 4
- Never..... 5
- Refused to answer..... 77 } **Skip to Say box before U7**
- Don’t know..... 88

Interviewer instructions:
If S1 (male respondent had sex with a woman during the past 12 months) and S5 (male respondent had sex with a man during the past 12 months) are “No,” “Refused to answer,” or “Don’t know,” skip to Say box before U3.
If S9 (female respondent had sex with a man during the past 12 months) is “No,” “Refused to answer,” or “Don’t know,” skip to Say box before U3.

U2. During the **past 12 months**, did you drink alcohol before or during sex? [*ALCOHOL1*]

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don’t know..... 8

SAY: “Now I am going to ask you some questions about the **past 30 days**.” [*SHOW RESPONDENT CALENDAR.*]

U3. During the **past 30 days**, on how many days did you have an alcoholic drink? *[DRINK_9]*

___ ___ *[Refused to answer = 77, Don't know = 88]*

Inconsistency check: U3 (number of days had an alcoholic drink during the past 30 days) must be between 0 and 30.

Interviewer instructions: If U3 (number of days consumed alcohol during the past 30 days) is "0," "Refused to answer," or "Don't know," skip to Say box before U7.

SAY: "For the next questions, a drink of alcohol is a 12 oz beer, a 5 oz glass of wine, or a 1.5 oz shot of liquor." [SHOW ALCHOHOL RESPONSE CARD.]

U4. During the **past 30 days**, how many alcoholic drinks did you have on a typical day when you were drinking? *[NDRINK_9]*

___ ___ *[Refused to answer = 77, Don't know = 88]*

Inconsistency check: U4 (number of drinks on a typical day during the past 30 days) must be between 1 and 76.

Interviewer instructions: If ES7 (birth gender) is "Female" or "Intersex/ambiguous," skip to U6.

U5. During the **past 30 days**, on how many days did you have 5 or more alcoholic drinks in one sitting? *[DRINK5_9]*

___ ___ *[Refused to answer = 77, Don't know = 88]*

Inconsistency check: U5 (number of days had 5 or more drinks during the past 30 days) must be ≤ 30 or $\leq U3$ (number of days had a drink during the past 30 days).

Interviewer instructions: Skip to Say box before U7.

U6. During the **past 30 days**, on how many days did you have 4 or more alcoholic drinks in one sitting? *[DRINK4_9]*

___ ___ *[Refused to answer = 77, Don't know = 88]*

Inconsistency check: U6 (number of days had 4 or more drinks during the past 30 days) must be ≤ 30 or $\leq U3$ (number of days had a drink during the past 30 days).

Non-Injection Drug Use

SAY: “Now I’m going to ask you about drugs that you may have used, but didn’t inject. I will refer to these as non-injection drugs. This includes drugs like marijuana, crack, club drugs, and painkillers. Tell me about the drugs you used that were not for medical purposes. Please remember that your answers will be kept secure to the extent permitted by law and that you do not have to answer any questions that you do not want to.”

U7. During the **past 12 months**, did you use any non-injection drugs? *[ANID12_9]*

- No..... 0  *Skip to Say box before U11*
- Yes..... 1
- Refused to answer..... 7 8  *Skip to Say box before U11*
- Don’t know..... 8

SAY: “I’m going to read you a list of non-injection drugs. For each one I mention, please tell me how often you used it during the **past 12 months**. Don’t include drugs you injected or drugs that were used for medical purposes.”

Interviewer instructions: If the respondent’s drug use was sporadic during the past 12 months, ask the respondent to choose the response option that best characterizes his or her use.

	During the past 12 months, how often did you use: <i>[SHOW RESPONSE CARD G.]</i>	Daily (1)	Weekly (2)	Monthly (3)	Less than monthly (4)	Never (5)	Refused to answer (7)	Don’t Know (8)
U8a.	...methamphetamines, also called crystal meth, tina, crank, ice? <i>[CRYMTC_9]</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8b.	...other amphetamines or stimulants? <i>[AMPHET_9]</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8c.	...crack? <i>[CRACK1_9]</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8d.	...cocaine that is smoked or snorted? <i>[COCSMO_9]</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8e.	...downers, such as	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8

	During the past 12 months, how often did you use: [SHOW RESPONSE CARD G.]	Daily (1)	Weekly (2)	Monthly (3)	Less than monthly (4)	Never (5)	Refused to answer (7)	Don't Know (8)
	Valium, Ativan, or Xanax? [DOWNER_9]							
U8f.	...painkillers, such as Oxycontin, Vicodin, or Percocet? [PAINKI_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8g.	...hallucinogens, such as LSD or mushrooms? [HALLUC_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8h.	...X, also called Ecstasy? [XECT_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8i.	...Special K, also called ketamine? [SPECK_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8j.	...GHB? [GHB_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8k.	...heroin or opium that is smoked or snorted? [HEROIN_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8l.	...marijuana? [MARIJU_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8m.	...poppers, also called amyl nitrate? [POPPER_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8n.	...steroids or hormones? [STRHOR_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U8o.	...any other non-injection drug (Specify: _____)? [ONINJD_9] [ONINJ9OS]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8

Inconsistency check: If U7 (non-injection drug use) is “Yes” and all of the responses to U8a-U8o are “Never,” then the program should display a message saying, “You said that you used non-injection drugs during the past 12 months. Please tell me the name of the drug you used and how often you used it during the past 12 months.” Interviewer return to previous questions.

Interview instructions:

If S1 (male respondent had sex with a woman during the past 12 months) and S5 (male respondent had sex with a man during the

past 12 months) are “No,” “Refused to answer,” or “Don’t know,” skip to Say box before U11.

If S9 (female respondent had sex with a man during the past 12 months) is “No,” “Refused to answer,” or “Don’t know,” skip to Say box before U11.

U9. During the **past 12 months**, did you use any non-injection drugs before or during sex?
 [NID_BFSX]

- No..... 0 → Skip to Say box before U11
- Yes..... 1
- Refused to answer..... 7 } Skip to Say box before U11
- Don’t know..... 8 }

Interview instructions: If U8a is “Daily,” “Weekly,” “Monthly,” or “Less than monthly,” check the shaded box (column 1) in U10a. Follow the same pattern for b–o. If no shaded boxes (column 1) are checked in U10a–o, skip to Say box before U11.

		During the past 12 months, did you <u>use</u> : [ONLY READ QUESTIONS WHERE THE SHADED BOX (COLUMN 1) IS CHECKED.]	No (0)	Yes (1)	Refused to answer (7)	Don't Know (8)
<input type="checkbox"/>	U10a.	...methamphetamines <u>before or during sex</u> ? [CRAMT2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10b.	...other amphetamines or stimulants <u>before or during sex</u> ? [AMPHT2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10c.	...crack <u>before or during sex</u> ? [CRACK2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10d.	...cocaine that is smoked or snorted <u>before or during sex</u> ? [COCSM2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10e.	...downers, such as Valium, Ativan, or Xanax, <u>before or during sex</u> ? [DOWNE2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10f.	...painkillers, such as Oxycontin, Vicodin, or Percocet <u>before or during sex</u> ? [PAINK2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10g.	...hallucinogens, such as LSD or mushrooms <u>before or during sex</u> ? [HALLU2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10h.	...X, also called Ecstasy <u>before or during sex</u> ? [XECT2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10i.	...Special K, also called ketamine <u>before</u>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8

		or during sex? [SPECK2_9]				
<input type="checkbox"/>	U10j.	...GHB before or during sex? [GHB2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10k.	...heroin or opium that is smoked or snorted before or during sex? [HEROI2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10l.	...marijuana before or during sex? [MARIJ2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10m	...poppers, also called amyl nitrate, before or during sex? [POPPE2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10n.	...steroids or hormones before or during sex? [STRHO2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U10o.	... [RESPONSE FROM U9o] before or during sex? [ONINJ2_9]	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8

Inconsistency check: If U9 (non-injection drug use before or during sex) is “Yes” and all of the responses to U10a-U10o are “Never,” then the program should display a message saying, “You said that you used non-injection drugs before or during sex during the past 12 months. Please tell me the name of the drug you used and how often you used it before or during sex during the past 12 months.” Interviewer return to previous questions.

Injection Drug Use

SAY: “The next questions are about injection drug use. This means injecting drugs yourself or having someone else inject you. Please remember that your answers will be kept secure to the extent permitted by law and that you do not have to answer any questions that you do not want to.”

U11. During the **past 12 months**, have you shot up or injected any drugs that weren’t used for medical purposes? By shooting up, I mean anytime you might have used drugs with a needle, either by mainlining, skin popping, or muscling. [INJECT12]

- No..... 0 → Skip to Say box before P1
- Yes..... 1
- Refused to answer..... 7 } Skip to Say box before P1
- Don’t know..... 8 }

SAY: “Now I’m going to read you a list of drugs. For each drug I mention, please tell me how often you injected it during the **past 12 months**.”

Interviewer instructions: If the respondent’s drug use was sporadic during the past 12 months, ask the respondent to choose the response option that best characterizes his or her use.

	During the past 12 months, how often did you <u>inject</u> : [SHOW RESPONSE CARD G.]	Daily (1)	Weekly (2)	Monthly (3)	Less than monthly (4)	Never (5)	Refused to answer (7)	Don't Know (8)
U12a.	...heroin and cocaine together, also called speedballs? [HERCOC_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U12b.	...heroin alone? [HEROII_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U12c.	...cocaine alone? [COCAII_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U12d.	...crack? [CRACKI_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U12e.	...methamphetamines, also called crystal, meth, tina, or crank? [CRAMTI_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U12f.	...other amphetamines or stimulants? [AMPHEI_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U12g.	...Oxycontin? [OXYCON_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U12h.	...steroids or hormones? [STRHRI_9]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8
U12i.	...any other drug (Specify:_____)? [OINJDI_9][OINJD9OS]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 7	<input type="checkbox"/> 8

Inconsistency check: If U11 (injection drug use) is “Yes” and all of the responses to U12a-U12i are “Never,” then the program should display a message saying, “You said that you used injection drugs during the past 12 months. Please tell me the name of the drug you used and how often you used it during the past 12 months.” Interviewer return to previous questions.

Interview instructions:

If S1 (male respondent had sex with a woman during the past 12 months) and S5 (male respondent had sex with a man during the past 12 months) are “No,” “Refused to answer,” or “Don’t know,” skip to Say box before U15.

If S9 (female respondent had sex with a man during the past 12 months) is “No,” “Refused to answer,” or “Don’t know,” skip to Say box before U15.

- U13. During the **past 12 months**, did you inject drugs before or during sex? *[INJ_BFSX]*
- No..... 0 → Skip to Say box before U15
- Yes..... 1
- Refused to answer..... 7 } Skip to Say box before U15
- Don’t know..... 8 }

Interview instructions: If U12a is “Daily,” “Weekly,” “Monthly,” or “Less than monthly,” check the shaded box (column 1) in U14a. Follow the same pattern for b–i. If no shaded boxes are checked in U12, skip to Say box before U15.

		During the past 12 months, did you inject: <i>[ONLY READ QUESTIONS WHERE THE SHADED BOX (COLUMN 1) IS CHECKED.]</i>	No (0)	Yes (1)	Refused to answer (7)	Don’t Know (8)
<input type="checkbox"/>	U14a.	...heroin and cocaine together <u>before or during sex</u> ? <i>[HERCO2_9]</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U14b.	...heroin alone <u>before or during sex</u> ? <i>[HERI2_9]</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U14c.	...cocaine alone <u>before or during sex</u> ? <i>[COCAI2_9]</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U14d.	...crack <u>before or during sex</u> ? <i>[CRACI2_9]</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U14e.	...methamphetamines <u>before or during sex</u> ? <i>[CRAMI2_9]</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U14f.	...other amphetamines or stimulants <u>before or during sex</u> ? <i>[AMPHI2_9]</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U14g.	...Oxycontin <u>before or during sex</u> ? <i>[OXYCO2_9]</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U14h.	...steroids or hormones <u>before or during sex</u> ? <i>[STRHI2_9]</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/>	U14i.	... <i>[RESPONSE FROM U14i]</i> <u>before or during sex</u> ? <i>[OINJI2_9]</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 8

Inconsistency check: If U13 (injection drug use before or during sex) is “Yes” and all of the responses to U14a-U14i are “Never,” then the program should display a message saying, “You said that you used injection drugs before or during sex during the past 12 months. Please tell me the name of the drug you used and how often you used it before or during sex during the past 12 months.” Interviewer return to previous questions.

SAY: “Now I am going to ask you some questions about sharing needles and equipment.”

U15. When you injected during the **past 12 months**, did someone use the same needle after you used it? *[SHR_NDL]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

U16. When you injected during the **past 12 months**, did someone use the same cookers, cotton, or rinse water after you used it? *[SHR_WRKS]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

PREVENTION ACTIVITIES

SAY: “Next I’d like to ask you about HIV prevention activities.”

- P1. During the **past 12 months**, have you gotten any free condoms, not counting those given to you by a friend, relative, or sex partner? *[COND12_9]*
- | | | | |
|------------------------|----------------------------|---|---------------------------------------|
| No..... | <input type="checkbox"/> 0 | → | <i>Skip to instructions before P2</i> |
| Yes..... | <input type="checkbox"/> 1 | | |
| Refused to answer..... | <input type="checkbox"/> 7 | } | <i>Skip to instructions before P2</i> |
| Don’t know..... | <input type="checkbox"/> 8 | | |

- P1a. From what type of place or places did you get these free condoms?
[DON’T READ CHOICES. CHECK ALL THAT APPLY.] [CONFR_9]
- | | |
|--|--|
| Community-based organization..... | <input type="checkbox"/> 1 <i>[CONFR_9A]</i> |
| Family planning clinic..... | <input type="checkbox"/> 2 <i>[CONFR_9B]</i> |
| STD clinic..... | <input type="checkbox"/> 3 <i>[CONFR_9C]</i> |
| Doctor’s office or other health clinic..... | <input type="checkbox"/> 4 <i>[CONFR_9D]</i> |
| IDU outreach organization (including needle exchange)..... | <input type="checkbox"/> 5 <i>[CONFR_9E]</i> |
| Social venue (bar, club, bathhouse, gym, bookstore)..... | <input type="checkbox"/> 6 <i>[CONFR_9F]</i> |
| Special event..... | <input type="checkbox"/> 7 <i>[CONFR_9G]</i> |
| Other 1 (<i>Specify:</i> _____)..... | <input type="checkbox"/> 8 <i>[CONFR_9H] [CONF_9HO]</i> |
| | |
| Other 2 (<i>Specify:</i> _____)..... | <input type="checkbox"/> 9 <i>[CONFR_9I] [CONF_9IO]</i> |
| | |
| Other 3 (<i>Specify:</i> _____)..... | <input type="checkbox"/> 10 <i>[CONFR_9J] [CONF_9JO]</i> |
| | |
| Other 4 (<i>Specify:</i> _____)..... | <input type="checkbox"/> 11 <i>[CONFR_9K] [CONF_9KO]</i> |
| Refused to answer..... | <input type="checkbox"/> 77 |
| Don’t know..... | <input type="checkbox"/> 88 |

Interviewer instructions: If U11 (injection drug use during the past 12 months) is “Yes,” go to P2. If U11 is “No,” “Refused to answer,” or “Don’t know,” skip to P4.

P2. During the **past 12 months**, have you gotten any new sterile needles for free, not including those given to you by a friend, relative, or drug-using partner? *[STENEE_9]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

P3. During the **past 12 months**, have you gotten any new cookers, cotton, or rinse water for free, not including those given to you by a friend, relative, or drug-using partner? *[KITS_9]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

P4. During the **past 12 months**, have you discussed your personal drug and sex behaviors with an outreach worker, counselor, or prevention program worker and talked about how these behaviors could increase the risk of transmitting HIV to someone else?

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

P5. During the **past 12 months**, not including when you may have been tested for HIV, have you had a one-on-one conversation with an outreach worker, counselor, or prevention program worker about ways to protect yourself or your partners from getting HIV or other sexually transmitted diseases? *[TALKHI_9]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8


P6. During the **past 12 months**, have you had a one-on-one conversation with a doctor, nurse, or other health care worker about ways to protect yourself or your partners from getting HIV or other sexually transmitted diseases? *[PRVDRTLK]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

P7. During the **past 12 months**, have you participated in an organized session involving a small group of people to discuss ways to protect yourself or your partners from getting HIV or other sexually transmitted diseases? *[GROU12_9]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

P8. During the **past 12 months**, have you seen any public campaigns or ads that are specifically for HIV positive people about how they can stop the spread of HIV?

- No..... 0  *Skip to Say box before C1; if female skip to say box before G1*
- Yes..... 1
- Refused to answer..... 7  *G1*
- Don't know..... 8  *Skip to Say box before C1; if female skip to say box before G1*

P9. Where did you see or hear these campaigns or ads? *[READ CHOICES. CHECK ALL THAT APPLY.]*

- At a clinic..... 1
- Radio..... 2
- TV..... 3
- Buses, subway, or other public transportation..... 4
- Internet..... 5
- Other (*Specify: _____*)..... 6
- Refused to answer..... 7
- Don't know..... 8

GYNECOLOGICAL AND REPRODUCTIVE HISTORY

Interviewer instructions: If ES7 (birth gender) and ES8 (self-identified gender) are “Female,” go to Say box before G1; otherwise, skip to instructions before C1

SAY: “I’m now going to ask some questions about pelvic exams and Pap smears. A pelvic exam is a vaginal examination. A Pap smear, also called a cervical cancer test or Pap test, is a test used to check for cancer of the cervix. Often a pelvic exam and Pap smear are performed at the same time.”

G1. During the **past 12 months**, have you had a pelvic examination? *[PLV_EX_9]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don’t know..... 8

G2. During the **past 12 months**, have you had a Pap smear? *[PAP_EX_9]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don’t know..... 8

SAY: “Earlier you told me that you first tested positive for HIV on ___/___/___ *[INSERT DATE FROM A1]*. Now I would like to ask you about pregnancies you may have had since testing positive for HIV.”

Coding note: If A1 is “don’t know” or “refused to answer,” then only say, “Now I would like to ask you about pregnancies you may have had since testing positive for HIV.”

G3. Since testing positive for HIV in ___/___/___ *[INSERT DATE FROM A1]*, have you been pregnant? *[PREGPS_9]*

- No..... 0  *Skip to instructions before C1*
- Yes..... 1
- Refused to answer..... 7  *Skip to instructions before C1*

Don't know..... 8

G3a. Since testing positive for HIV in ___/___/___ [INSERT DATE FROM A1], how many times have you been pregnant? [PREG_9]

___ [777 = Refused to answer, 888 = Don't know]

Inconsistency check: G3a (number of times the respondent has been pregnant since testing positive for HIV) must be ≤ 100 .

Coding note: If A1 (date first tested positive) is "don't know" or "refused to answer," then G3a reads as follows: Since testing positive for HIV how many times have you been pregnant? [PREG_9].

G3b. Since testing positive for HIV in ___/___/___ [INSERT DATE FROM A1], have you given birth to any children? [BRTH_CLD]

No..... 0  Skip to instructions before G5
Yes..... 1
Refused to answer 7  Skip to instructions before G5
Don't know..... 8

Interviewer instructions: If response to G3a (number of times pregnant since testing positive) is "1" and G3b (gave birth) is "Yes," skip to instructions before G5.

Coding note: If A1 (date first tested positive) is "don't know" or "refused to answer," then G3b reads as follows: Since testing positive for HIV have you given birth to any children? [BRTH_CLD]

G3c. Since testing positive for HIV in ___/___/___ [INSERT DATE FROM A1], how many times have you given birth? If you gave birth to twins, please count this as one birth. [NUM_BRTH]

___ [77 = Refused to answer, 88 = Don't know]

G4. Were you pregnant during the last 12 months?

No..... 0  Skip to instructions before G5
Yes..... 1
Refused to answer 7  Skip to instructions before G5

Don't know..... 8

[Interviewer instructions: If the woman has been pregnant in the last 12 months, ask G5. If she has not been pregnant in the last 12 months, skip to Health Conditions and Preventative Therapy section.]

G5. During your most recent pregnancy in the last 12 months, did you take any antiretroviral medications prescribed by your doctor to prevent your baby from getting infected with HIV?

No..... 0
Yes..... 1
Refused to answer..... 7
Don't know..... 8

G6. Did you find out you were HIV-positive during this pregnancy?

No..... 0 → *Skip to instructions before C1*
Yes..... 1
Refused to answer..... 7 } *Skip to instructions before C1*
Don't know..... 8

G6a. Did you find out you were HIV-positive because a doctor, nurse, or healthcare provider encouraged you to have an HIV test (as part of your prenatal care)?

No..... 0
Yes..... 1
Refused to answer..... 7
Don't know..... 8

Inconsistency check: G3c (number of times the respondent has given birth since testing positive for HIV) must be ≤ 35 . G3c cannot be greater than G3.

HEALTH CONDITIONS AND PREVENTIVE THERAPY (C)

SAY: “Now I’m going to ask you some questions about CD4 tests.”

C1. Have you **ever** had a CD4 test? *[CD4_DO_9]*

- No..... 0 → *Skip to Say box before C4*
- Yes..... 1
- Refused to answer..... 7 } *Skip to Say box before C4*
- Don’t know..... 8 }

C1a. What was the month and year of your **first** CD4 count? *[CD4FM_9]*

____/____
(M M / Y Y Y Y)

*[Month: 77 = Refused to answer, 88= Don’t know;
Year: 7777 = Refused to answer, 8888 = Don’t know]*

Inconsistency check: Confirm response if C1a (date of first CD4 count) is earlier than the A4 (date of first visit to a provider for HIV care) or later than A6 (date of most recent visit to a provider for HIV care).

Programming note for C1a: Allow for “??” for month. If C1a (date of first CD4 count) is earlier than the A5 (date of first visit to a provider for HIV care), display the following confirmatory response: “Respondent said that date of first CD4 count was earlier than date first went to a HIV provider. Confirm response.” Allow program to advance. If C1a (date of first CD4 count) is later than the A6 (most recent care visit), display the following confirmatory response: “Respondent said that date of first CD4 count was later than date of most recent visit to an HIV provider. Confirm response.” Allow program to advance.

C1b. What was the result of your **first** CD4 count? *[SHOW RESPONSE CARD H.] [CD4FCT_9]*

- 0–49..... 1
- 50–99..... 2
- 100–199..... 3
- 200–349..... 4

- 350–499..... 5
- 500 or more..... 6
- Refused to answer..... 7
- Don't know..... 8

C2. What was the month and year of your **most recent** CD4 count? *[CD4MR11]*

___ ___ / ___ ___ ___ ___
 (M M / Y Y Y Y)

*[Month: 77 = Refused to answer, 88= Don't know;
 Year: 7777 = Refused to answer, 8888 = Don't know]*

Inconsistency check: Date cannot be earlier than C1a (date of first CD4 count). Date cannot be later than I4 9date of interview).

Programming note for C2: Allow for “??” for month.

C2a. What was the result of your **most recent** CD4 count?

[USE RESPONSE CARD H.] [CDMR_11]

- 0-49..... 1
- 50-99..... 2
- 100-199..... 3
- 200-349..... 4
- 350-499..... 5
- 500 or more..... 6
- Refused to answer..... 7
- Don't know..... 8

SAY: “Now I’m going to ask you about CD4 counts during the **past 12 months**. Remember, that is from last year (**DATE WITH PREVIOUS YEAR**) to now (**INTERVIEW DATE**).”

Programming note for Say box before C3: The program should enter the appropriate dates. EXAMPLE: If IDATE is 11/11/2011 then the program should read “That is from last year, 11/11/2010 to now 11/11/2011.”

C3. During the **past 12 months**, how many CD4 counts have you had? *[CD12_N_9]*

___ ___ *[77=Refused to answer, 88=Don't know]*

Inconsistency check: C3 (number of CD4 counts in the past 12 months) must be ≤ 76.

SAY: “Now I’m going to ask you some questions about HIV viral load tests. HIV viral load tests measure the amount of HIV in your blood.”

- C4. Have you **ever** had an HIV viral load test? *[VL_DO_9]*
- No..... 0 → *Skip to Say box before C7*
 - Yes..... 1
 - Refused to answer..... 7 } *Skip to Say box before C7*
 - Don’t know..... 8 }

- C5. What month and year was your **first** viral load test done? *[VL_FM_9]*

____/____
(M M / Y Y Y Y)

*[Month: 77 = Refused to answer, 88= Don’t know;
Year: 7777 = Refused to answer, 8888 = Don’t know]*

Inconsistency check: Confirm response if C5 (date of the first viral load test) is earlier than A4 (date of first visit to a provider for HIV care). Confirm response if C5 (date of the first viral load test) is later than A6 (date of most recent visit to a provider for HIV care).

Programming note for C5: Allow for “??” for month. If C5 is earlier than A4, display the following confirmatory response: “Respondent said date of first viral load test was earlier than date of first visit to a provider. Confirm response.” Allow the program to advance. If C5 is later than A6, display the following confirmatory response: “Respondent said date of first viral load test was later than date of most recent visit to a provider. Confirm response.” Allow the program to advance.

- C5a. What was the result of your **first** viral load test? *[SHOW RESPONDENT RESPONSE CARD M.] [VL_FIR_9]*

- Below the level of detection, undetectable..... 1
- Detectable but less than 5,000 viral copies/ml..... 2
- 5,000 to 100,000 viral copies/ml..... 3
- Greater than 100,000 viral copies/ml..... 4
- Refused to answer..... 7
- Don’t know..... 8

C5b. What was the month and year of your **most recent** viral load test? [VLMR_11]

___ / ___
(M M / Y Y Y Y)

[Month: 77 = Refused to answer, 88= Don't know;
Year: 7777 = Refused to answer, 8888 = Don't know]

Programming note for C5b: Allow for “??” for month.

C5c. What was the result of your **most recent** viral load test?

[USE RESPONSE CARD I.] [CDRRV_11]

- Below the level of detection, undetectable..... 1
- Detectable but less than 5,000 viral copies/ml..... 2
- 5,000 to 100,000 viral copies/ml..... 3
- Greater than 100,000 viral copies/ml..... 4
- Refused to answer..... 7
- Don't know..... 8

SAY: “Now I’m going to ask you about your viral load tests during the **past 12 months**. That is from last year (**DATE WITH PREVIOUS YEAR**) to now (**INTERVIEW DATE**).”

Programming note for Say box before C6: The program should enter the appropriate dates. EXAMPLE: If IDATE is 11/11/2011 then the program should read “That is from last year, 11/11/2010 to now 11/11/2011.”

C6. During the **past 12 months**, how many viral load tests have you had? [VL12_N_9]

___ [77=Refused to answer, 88=Don't know]

Inconsistency check: C6 (number of viral load tests) must be ≤ 76.

SAY: “Now I’m going to ask you about an AIDS-related infection. Many patients with HIV take medicines to prevent or treat these infections. One of these is called tuberculosis or TB.”

C7. Have you **ever** had a skin test (PPD) for TB? [TEST_PPD]

- No..... 0 → Skip to C8
- Yes..... 1
- Refused to answer..... 7 } Skip to C8
- Don't know..... 8

C7a. When did you have your **most recent** TB skin test? *[PPD_MY]*

____/____
(M M / Y Y Y Y)

*[Month: 77 = Refused to answer, 88= Don't know;
Year: 7777 = Refused to answer, 8888 = Don't know]*

C7b. Was your most recent skin test positive? *[PPD_POS]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

SAY: “Now I’m going to ask you about getting checked for hepatitis.”

C8. Have you been tested for hepatitis in the past 12 months?

- No..... 0
 - Yes..... 1
 - Refused to answer..... 7
 - Don't know..... 9
- } Skip to HC4

SAY: “There are vaccines or shots to prevent hepatitis. I’m going to ask you whether you’ve had these vaccines. Don’t include shots that you may have had **after** contact with someone who had Hepatitis A or B.”

C8a. Have you **ever** had a vaccine or shot to prevent hepatitis? *[HEPVAC_9]*

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 8

SAY: “Now I’m going to ask you about sexually transmitted diseases, also called STDs. Syphilis, gonorrhea, chlamydia, and genital herpes are examples of STDs.”

C9. During the **past 12 months**, have you had a test or exam to check for an STD?
[EXMSTD_9]

No.....	<input type="checkbox"/> 0	→	Skip to C11
Yes.....	<input type="checkbox"/> 1		
Refused to answer.....	<input type="checkbox"/> 7 <input type="checkbox"/>	}	Skip to C11
Don't know.....	<input type="checkbox"/> 8		

C10. In the **past 12 months**, did you have a test to check for any of the following: **[READ CHOICES.]**

	Yes (1)	No (0)	Refused (7)	Don't know (8)
a. Syphilis [SYPHIL]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Gonorrhea (“clap” or “drip”) [GONO]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Chlamydia [CHLAM]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Herpes (HSV) [HERP]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Genital warts (HPV) [GENWAR]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Interviewer instructions: Only ask C10f if response to DEMOGRAPHICS ES7 (birth gender) is “Male” and DEMOGRAPHICS ES8 (self-identified gender) is “Male,” OR if response to DEMOGRAPHICS ES7 is “Female” and DEMOGRAPHICS ES8 is “Male” or “Transgender.”

f. Non-gonococcal urethritis (NGU) [NGONOUR]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Other [OSTD1] (Specify: _____ [OSTD2])	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C11. During the **past 12 months**, has a doctor, nurse, or other health care worker told you that you had any of the following: **[READ CHOICES.]**

	No (0)	Yes (1)	Refused to answer (7)	Don't know (8)
a. Syphilis [DIASYP_9]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	No ⁽⁰⁾	Yes ⁽¹⁾	Refused to answer ⁽⁷⁾	Don't know ⁽⁸⁾
b. Gonorrhea (clap or drip) <i>[DIAGON_9]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Chlamydia <i>[DIACHL_9]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Herpes (HSV) <i>[DIAHER_9]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Genital warts (HPV) <i>[DIAGEN_9]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Any other STD (Specify: _____) <i>[OSTD3_9] [OSTD_9OS]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C12. During the **past 12 months**, have you been to a clinic for STD treatment? *[STDCLI_9]*

No..... 0

Yes..... 1

Refused to answer..... 7

Don't know..... 8

SAY: "Now I'm going to ask about vaccinations."

C13. During the **past 12 months**, did you get a vaccine or shot to protect you from seasonal flu? *[VACFL_10]*

No..... 0 → Skip to C13b

Yes..... 1

Refused to answer..... 7 } Skip to Say box at End of Interview

Don't know..... 8

C13a. Where did you get your most recent seasonal flu vaccine? *[READ CHOICES. CHECK ONLY ONE.] [LOCVA_10]*

Doctor's office..... 1

Health department clinic..... 2

Drugstore or store (i.e. CVS, Walgreens, Target)..... 3

Employer..... 4

Other (Specify: _____)..... 5 *[LOC_100S]*

Refused to answer..... 7

Don't know..... 8

Interviewer Instructions: Skip to Say box at End of Interview.

C13b. What was the main reason you did not get a seasonal flu vaccine during the past 12 months? **[DO NOT READ CHOICES.] [C13B_FLU]**

- I could not find a place that offered the vaccine..... 1
- My provider did not offer me the vaccine..... 2
- I was concerned about side effects from the vaccine..... 3
- I was concerned about the safety of the vaccine..... 4
- I did not think I needed it..... 5
- I did not have enough insurance or money..... 6
- Other (*Specify*_____) 7 **[C13B_FOS]**
- Refused to answer..... 77
- Don't know..... 88
- Don't know..... 88

EMPLOYMENT AND PRODUCTIVITY

SAY: “Now I’m going to ask you some questions about employment and recent work experiences. ”

E1	<p>Are you currently employed?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No (<i>If No, skip to Q7</i>)</p> <p><input type="checkbox"/> Refused to answer</p> <p><input type="checkbox"/> Don't know</p>
E2	<p>About how many hours altogether did you work in the past 7 days?</p> <p><input type="text"/><input type="text"/> Number of hours (00-97)</p>

E3	<p>About how many hours does your employer expect you to work in a typical 7-day week? (If it varies, estimate the average.)</p> <p><input type="text"/><input type="text"/> Number of hours (00-97)</p>
E4	<p>How many days does your employer expect you to work in a typical 7-day week?</p> <p><input type="text"/> Number of days (0-7)</p>
E5	<p>Now please think of your work experiences over the past 4 weeks (28 days). In the spaces provided below, write the number of days you spent in each of the following work situations.</p> <p>In the past 4 weeks (28 days), how many days did you...</p> <p>Q5a. ...miss an entire work day because of problems with your physical or mental health <u>related to HIV/AIDS</u>? (Please include only days missed for your own health, not someone else's health.)</p> <p><input type="text"/><input type="text"/> Number of days (00-28)</p> <p>Q5b. ...miss an entire work day for any other reason (including vacation)?</p> <p><input type="text"/><input type="text"/> Number of days (00-28)</p> <p>Q5c. ...miss part of a work day because of problems with your physical or mental health <u>related to HIV/AIDS</u>? (Please include only days missed for your own health, not someone else's health.)</p> <p><input type="text"/><input type="text"/> Number of days (00-28)</p> <p>Q5d. ...miss part of a work day for any other reason (including vacation)?</p> <p><input type="text"/><input type="text"/> Number of days (00-28)</p> <p>Q5e. ...come in early, go home late, or work on your day off?</p> <p><input type="text"/><input type="text"/> Number of days (00-28)</p>
E6	<p>About how many hours altogether did you work in the past 4 weeks (28 days)? (See examples below)</p> <p><input type="text"/><input type="text"/><input type="text"/> Number of hours in the past 4 weeks (28 days)</p> <p>Examples for calculating Hour Worked in the Past 4 Weeks</p> <p>40 hours per week for 4 weeks = 160 hours</p> <p>35 hours per week for 4 weeks = 140 hours</p> <p>40 hours per week for 4 weeks with 2 8-hour days missed= 144 hours</p> <p>40 hours per week for 4 weeks with 3 4-hour partial days missed= 148 hours</p>

	40 hours per week for 4 weeks with 2 8-hour days missed and 3 4-hour partial days missed= 112 hours
E7	<p>Are you currently unemployed because you lost your most recent job due to HIV/AIDS?</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused to answer <input type="checkbox"/> Don't know </p>
E8	<p>When did you stop working at that job which you lost due to HIV/AIDS?</p> <p>Year <input type="text"/><input type="text"/><input type="text"/><input type="text"/> Month <input type="text"/><input type="text"/></p> <p> <input type="checkbox"/> Refused to answer <input type="checkbox"/> Don't know </p>
E9	<p>What was your <u>yearly individual income, before taxes, from the most recent year of your current job or most recent job which you lost due to HIV/AIDS?</u></p> <p><u>Yearly Income</u></p> <p> a. \$0 to \$4,999 b. \$5,000 to \$9,999 c. \$10,000 to \$14,999 d. \$15,000 to \$19,999 e. \$20,000 to \$29,999 f. \$30,000 to \$39,999 g. \$40,000 to \$49,999 h. \$50,000 to \$74,999 i. \$70,000 to \$99,999 j. \$100,000 to \$149,999 k. \$150,000 to \$199,999 l. \$200,000 to \$249,000 m. \$250,000 or above* n. Refused to answer o. Don't know </p>
E10	<p>Choose the occupation category that best describes your current or previous job <i>[If none of the categories fits you exactly, please respond with the closest category to your experience.] (Select only <u>one</u>.)</i></p> <p> <input type="checkbox"/> Executive, administrator, or senior manager (e.g., CEO, sales VP, plant manager) <input type="checkbox"/> Professional </p>

	<p>(e.g., engineer, accountant, system analyst)</p> <p><input type="checkbox"/> Technical support (e.g., lab technician, legal assistant, computer programmer)</p> <p><input type="checkbox"/> Sales (e.g., sales representative, stockbroker, retail sales)</p> <p><input type="checkbox"/> Clerical and administrative support (e.g., secretary, billing clerk, office supervisor)</p> <p><input type="checkbox"/> Service occupation (e.g., security officer, food service worker, janitor)</p> <p><input type="checkbox"/> Precision production and crafts worker (e.g., mechanic, carpenter, machinist)</p> <p><input type="checkbox"/> Operator or laborer (e.g., assembly line worker, truck driver, construction worker)</p>
<p>E1 1</p>	<p>In the past 4 weeks, how many fewer hours did you spend on unpaid household activities because of your physical or mental health problem related to HIV/AIDS? (See examples below)</p> <p><input type="checkbox"/><input type="checkbox"/> Number of hours (00-97)</p> <p>Note: Household activities don't include any paid employment. Examples of household activities are inside housework, food cooking and clean-up, household management, shopping, obtaining services, travel for household activity, direct child care and physically looking out for or helping household children and adults including providing them with transportation for their own personal needs.</p>

INTERVIEW COMPLETION

End of Interview

SAY: “Thank you again for taking part in this interview. Please remember that all the information you have given me will be kept secure to the extent permitted by law.”

Interviewer instructions:

Offer assistance with information and resources, according to local protocol.

Don't pay the respondent if the respondent already participated in the clinic-based interview during the 2011 data collection cycle OR the respondent is less than 18 years old.

Pay the respondent if the interview was partially or fully completed.

Payment Verification

E1.	Payment made: [PAYMENT]		
	No.....	<input type="checkbox"/> 0	
	Yes.....	<input type="checkbox"/> 1	➔ Skip to E2
E1a.	Why was payment not made? [PAYNMAD]		
	Participant refused payment.....	<input type="checkbox"/> 1	} Skip to E3
	Other (Specify: _____).....	<input type="checkbox"/> 2	
	[OPAY]		
E2.	Receipt signed (or initialed): [RECEIPT]		
	No.....	<input type="checkbox"/> 0	
	Yes.....	<input type="checkbox"/> 1	➔ Skip to E3
E2a.	Why was receipt not signed? [RECNS]		
	Participant refused to sign.....	<input type="checkbox"/> 1	
	Other (Specify: _____).....	<input type="checkbox"/> 2	
	[ORECEI]		

RESPONSE CARDS

RESPONSE CARD A

<u>Monthly Income</u>		<u>Yearly Income</u>	
a.	\$0 to \$417	a.	\$0 to \$4,999
b.	\$418 to \$833	b.	\$5,000 to \$9,999
c.	\$834 to \$1250	c.	\$10,000 to \$14,999
d.	\$1251 to \$1667	d.	\$15,000 to \$19,999
e.	\$1668 to \$2500	e.	\$20,000 to \$29,999
f.	\$2501 to \$3333	f.	\$30,000 to \$39,999
g.	\$3334 to \$4167	g.	\$40,000 to \$49,999
h.	\$4168 to \$6250	h.	\$50,000 to \$74,999
i.	\$6251 or more	i.	\$75,000 or more

RESPONSE CARD B

HIV case management services

Counseling about how to prevent the spread of HIV

Medicine through the AIDS Drug Assistance Program (ADAP)

Professional help remembering to take your HIV medicines on time or correctly

HIV peer group support

Dental care

Mental health services

Drug or alcohol counseling or treatment

Public benefits including Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI)

Domestic violence services

Shelter or housing services

Meal or food services

Home health services

Transportation assistance

Childcare services

Interpreter services

Other HIV-related services

RESPONSE CARD C

Never	Rarely	About half of the time	Most of the time	Always
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RESPONSE CARD D

Within the past week
1–2 weeks ago
3–4 weeks ago
1–3 months ago
More than 3 months ago
Never skip medicines

RESPONSE CARD D-1

Never
Rarely
About half of the time
Most of the time
Always
Been on medications less than 30 days

RESPONSE CARD E

Not at all sure	Somewhat sure	Very sure	Extremely sure
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
0	1	2	3

RESPONSE CARD H

0-49

50-99

100-199

200-349

350-499

500 or more

RESPONSE CARD I

Below the level of detection, undetectable

Detectable but less than 5,000 viral copies/ml

5,000 to 100,000 viral copies/m

Greater than 100,000 viral copies/ml

MEDICATION RESPONSE CARD 1

Nucleoside Analogue Combinations (Combination Treatments)

Combivir
(zidovudine/
lamivudine)



Trizivir
(abacavir/
lamivudine/
zidovudine)



Epzicom
(abacavir/
lamivudine)



Truvada
(tenofovir DF/
emtricitabine)



Atripla
(efavirenz/
emtricitabine/
tenofovir DF)



Nucleoside/Nucleotide Analogue Reverse Transcriptase Inhibitors (NRTIs or Nukes)

EpiVir
(lamivudine
or 3TC)



Videx, Videx EC
(didanosine
or ddI)



Emtriva
(emtricitabine
or FTC)



Viread
(tenofovir DF
or TDF)



Hivid *
(zalcitabine,
ddC)

* Discontinued medication



Zerit
(stavudine or d4T)



Retrovir
(zidovudine
ZDV or AZT)



Ziagen
(abacavir
or ABC)







MEDICATION RESPONSE CARD 2

Protease Inhibitors (PIs)

	<p>Invirase (saquinavir or SQV)</p> 	<p>Kaletra (lopinavir/ritonavir)</p> 	<p>Crixivan (indinavir or IDV)</p> 	<p>Lexiva (fosamprenavir or 908)</p> 	<p>Reyataz (atazanavir or ATV)</p> 
<p>Agenerase* (amprenavir, APV)</p> 					
	<p>Norvir (ritonavir or RTV)</p> 	<p>Viracept (nelfinavir or NFV)</p> 	<p>Aptivus (tipranavir or TPV)</p> 	<p>Prezista (danunavir or DRV)</p> 	
<p>Fortovase* (saquinavir soft gel capsule, SQV)</p> 					
<p>* Discontinued medications</p> 					

Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTIs or Non-Nukes)

<p>Rescriptor (delavirdine or DLV)</p> 	<p>Viramune (nevirapine or NVP)</p> 	<p>Sustiva (efavirenz or EFV)</p> 	<p>Intence (etravirine or ETV)</p> 
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Entry/Fusion Inhibitors

<p>Fuzeon (enfuvirtide or T20)</p> 	<p>Selzentry (maraviroc or MVC)</p> 
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Integrase Inhibitors

Isentress
(raltegravir or RAL)



2011 CALENDAR

January **February** **March**
Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa
 1 1 2 3 4 5 1 2 3 4 5
2 3 4 5 6 7 8 6 7 8 9 10 11 12 6 7 8 9 10 11 12
9 10 11 12 13 14 15 13 14 15 16 17 18 19 13 14 15 16 17 18 19
16 17 18 19 20 21 22 20 21 22 23 24 25 26 20 21 22 23 24 25 26
23 24 25 26 27 28 29 27 28 27 28 29 30 31
30 31

April **May** **June**
Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa
 1 2 1 2 3 4 5 6 7 1 2 3 4
3 4 5 6 7 8 9 8 9 10 11 12 13 14 5 6 7 8 9 10 11
10 11 12 13 14 15 16 15 16 17 18 19 20 21 12 13 14 15 16 17 18
17 18 19 20 21 22 23 22 23 24 25 26 27 28 19 20 21 22 23 24 25
24 25 26 27 28 29 30 29 30 31 26 27 28 29 30

July **August** **September**
Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa
 1 2 1 2 3 4 5 6 1 2 3
3 4 5 6 7 8 9 7 8 9 10 11 12 13 4 5 6 7 8 9 10
10 11 12 13 14 15 16 14 15 16 17 18 19 20 11 12 13 14 15 16 17
17 18 19 20 21 22 23 21 22 23 24 25 26 27 18 19 20 21 22 23 24
24 25 26 27 28 29 30 28 29 30 31 25 26 27 28 29 30
31

October **November** **December**
Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa
 1 1 2 3 4 5 1 2 3
2 3 4 5 6 7 8 6 7 8 9 10 11 12 4 5 6 7 8 9 10
9 10 11 12 13 14 15 13 14 15 16 17 18 19 11 12 13 14 15 16 17
16 17 18 19 20 21 22 20 21 22 23 24 25 26 18 19 20 21 22 23 24
23 24 25 26 27 28 29 27 28 29 30 25 26 27 28 29 30 31
30 31

2012 CALENDAR

January

Su Mo Tu We Th Fr Sa
1 2 3 4 5 6 7
8 9 10 11 12 13 14
15 16 17 18 19 20 21
22 23 24 25 26 27 28
29 30 31

February

Su Mo Tu We Th Fr Sa
1 2 3 4
5 6 7 8 9 10 11
12 13 14 15 16 17 18
19 20 21 22 23 24 25
26 27 28 29

March

Su Mo Tu We Th Fr Sa
1 2 3
4 5 6 7 8 9 10
11 12 13 14 15 16 17
18 19 20 21 22 23 24
25 26 27 28 29 30 31

April

Su Mo Tu We Th Fr Sa
1 2 3 4 5 6 7
8 9 10 11 12 13 14
15 16 17 18 19 20 21
22 23 24 25 26 27 28
29 30

May

Su Mo Tu We Th Fr Sa
1 2 3 4 5
6 7 8 9 10 11 12
13 14 15 16 17 18 19
20 21 22 23 24 25 26
27 28 29 30 31

June

Su Mo Tu We Th Fr Sa
1 2
3 4 5 6 7 8 9
10 11 12 13 14 15 16
17 18 19 20 21 22 23
24 25 26 27 28 29 30

July

Su Mo Tu We Th Fr Sa
1 2 3 4 5 6 7
8 9 10 11 12 13 14
15 16 17 18 19 20 21
22 23 24 25 26 27 28
29 30 31

August

Su Mo Tu We Th Fr Sa
1 2 3 4
5 6 7 8 9 10 11
12 13 14 15 16 17 18
19 20 21 22 23 24 25
26 27 28 29 30 31

September

Su Mo Tu We Th Fr Sa
1
2 3 4 5 6 7 8
9 10 11 12 13 14 15
16 17 18 19 20 21 22
23 24 25 26 27 28 29
30

October

Su Mo Tu We Th Fr Sa
1 2 3 4 5 6
7 8 9 10 11 12 13
14 15 16 17 18 19 20
21 22 23 24 25 26 27
28 29 30 31

November

Su Mo Tu We Th Fr Sa
1 2 3
4 5 6 7 8 9 10
11 12 13 14 15 16 17
18 19 20 21 22 23 24
25 26 27 28 29 30

December

Su Mo Tu We Th Fr Sa
1
2 3 4 5 6 7 8
9 10 11 12 13 14 15
16 17 18 19 20 21 22
23 24 25 26 27 28 29
30 31