

Submission 0920-13ABP under  
0920-0840 Formative Research and Tool Development

**Attachment 2q: Paper and Pencil - HIV Prevention  
Survey Instrument**

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## **Attachment 2q: Paper and Pencil- HIV Prevention**

CASE ID\_\_\_\_\_

### **PARTICIPANT SURVEY**

We are interested in your opinions about HIV prevention. We would also like to get some additional information about you. If you're not sure, choose an answer that comes closest to what you think might be true for each question. Please remember that your answers are private. You can choose not to answer any question and can stop at any time. When you are finished with the survey, please place it in the envelope.

## Demographics

1. How old are you?  
Age \_\_\_\_\_  
a. \_\_\_\_\_ Refuse to answer
2. What is your gender?
  - a. Male
  - b. Female
  - c. Transgender or Transsexual
  - d. Other [Specify: \_\_\_\_\_] [Terminate]
  - e. Don't know [Terminate]
  - f. Refuse to answer [Terminate]
3. Are you Hispanic or Latino/a
  - a. \_\_\_ No
  - b. \_\_\_ Yes
  - c. Prefer not to answer
4. What is your race? (One or more categories may be selected)
  - a. \_\_\_ White
  - b. \_\_\_ Black or African American
  - c. \_\_\_ American Indian or Alaska Native
  - d. \_\_\_ Asian
  - e. \_\_\_ Native Hawaiian or Other Pacific Islander
  - f. Prefer not to answer
5. What is the highest grade or year of school you finished?
  - a. Never attended school or only attended kindergarten
  - b. Grades 1 through 8 (elementary)
  - c. Grades 9 through 11 (some high school)
  - d. Grade 12 or GED (high school graduate)
  - e. College 1 year to 3 years (some college or technical school)
  - f. College 4 years or more (college graduate)
  - g. Refuse to answer
6. Which best describes your total personal income during the past year?
  - a. Less than \$20,000
  - b. \$21,000 to \$30,000
  - c. \$31,000 to \$40,000
  - d. \$41,000 to \$50,000
  - e. \$51,000 or more

- f. Refuse to answer
7. Which do you consider yourself to be?
- a. Gay, lesbian, homosexual, or same gender loving
  - b. Bisexual or two spirited
  - c. Straight or heterosexual
  - d. Other [Specify: \_\_\_\_\_]
  - e. None of the above/unsure
  - f. Refuse to answer
8. What is your current relationship status? Are you...?
- a. [Single]
  - b. [Married to a man]
  - c. [Married to a woman]
  - d. [In a relationship with a man]
  - e. [In a relationship with a woman]
  - f. [Divorced or widowed]
  - g. Refuse to answer
9. In what ZIP code do you currently live? \_\_\_\_\_
10. Before being contacted for this study, had you ever heard of CDC or the Centers for Disease Control and Prevention?
- a. Yes
  - b. No
  - e. Refuse to answer

## Sources of Information

The first set of questions asks about how you may get certain kinds of information.

11. Please tell us whether you'd be interested in getting information about HIV prevention from each of the following sources. [MARK ALL THAT APPLY]

	Yes	No
a. Community health clinic	<input type="checkbox"/>	<input type="checkbox"/>
b. Doctor's office	<input type="checkbox"/>	<input type="checkbox"/>
c. Church	<input type="checkbox"/>	<input type="checkbox"/>
d. Health fair	<input type="checkbox"/>	<input type="checkbox"/>
e. Work	<input type="checkbox"/>	<input type="checkbox"/>
f. Sporting event	<input type="checkbox"/>	<input type="checkbox"/>
g. Night club	<input type="checkbox"/>	<input type="checkbox"/>
h. [Gay bookstore]	<input type="checkbox"/>	<input type="checkbox"/>
i. Coffee shop	<input type="checkbox"/>	<input type="checkbox"/>
j. Clothing store	<input type="checkbox"/>	<input type="checkbox"/>
k. Health club or gym	<input type="checkbox"/>	<input type="checkbox"/>
l. [Choirs or choruses]	<input type="checkbox"/>	<input type="checkbox"/>
m. Shopping malls	<input type="checkbox"/>	<input type="checkbox"/>
n. [Black pride events]	<input type="checkbox"/>	<input type="checkbox"/>
o. [Circuit Parties (Sizzle Miami, Houston Splash, Oasis, Datboi Spring Fling Las Vegas, Fire Island Black Out, St. At Large)]	<input type="checkbox"/>	<input type="checkbox"/>
p. [Balls]	<input type="checkbox"/>	<input type="checkbox"/>
q. [Sex shops]	<input type="checkbox"/>	<input type="checkbox"/>
r. [Bath houses]	<input type="checkbox"/>	<input type="checkbox"/>
s. [Clubs/party promoters (Men are from Mars, Wassup N ATL)]	<input type="checkbox"/>	<input type="checkbox"/>
t. [Gay newspaper]	<input type="checkbox"/>	<input type="checkbox"/>

12. Do you use the Internet?

- a. Yes.....
- b. No (Skip to **Question 16**).....

13.

15. How often do you visit the following Web sites?

	Daily	2 -5 Times a week	Once a week	2-3 Times a month	Once a month	Less than once a month	Never
a. Facebook ( <a href="http://www.facebook.com">www.facebook.com</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Myspace ( <a href="http://www.myspace.com">www.myspace.com</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. YouTube ( <a href="http://www.youtube.com">www.youtube.com</a> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. [insert]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. [insert]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. [insert]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. [insert]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. [insert]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. [insert]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. [insert]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Other: [Specify:_____]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Other: [Specify:_____]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16.

### BEHAVIORS

These next few questions are about your personal behaviors, including sexual activity. Please remember that your answers are kept private.

#### Sexual Activity

21.

25. Did you have [oral/vaginal/anal sex] with any of your [female/male] partner(s) in the past [INSERT TIME FRAME]?

- a. Yes
- b. No
- c. Refuse to answer

26. When you had [oral/vaginal/anal] sex with your [female/male] partner(s) in the past [INSERT TIME FRAME], how often did you and your partner use a condom?
- a. Never used a condom
  - b. Occasionally used a condom
  - c. Usually used a condom
  - d. Always used a condom
  - e. Refuse to answer
27. In the past [INSERT TIME FRAME], did you ever, even one time, have sex without a condom?
- a. Yes
  - b. No
  - d. Refuse to answer
28. In the past 30 days, have you been drunk [or buzzed from alcohol] or high during sex?
- a. Yes
  - b. No
  - c. Refuse to answer

### **Sexual Partners**

29. Do you currently have a main sex partner—that is, a partner you would call your spouse, significant other, or life partner?
- a. Yes
  - b. No
  - c. Refuse to answer
- 30.
31. Is your main partner male, female, or transgender?
- a. Male
  - b. Female
  - c. Transgender
  - d. Refuse to answer
32. What is your main partner's HIV status?
- a. My main partner is HIV negative
  - b. My main partner is HIV positive
  - c. My main partner has not been tested for HIV
  - d. My main partner has not told me his or her HIV status
  - e. Refuse to answer
33. Does your main partner know your HIV status?
- a. Yes
  - b. No
  - c. Refuse to answer

34. In the past 12 months, how many non-main partners – that is, somebody who you did not consider to be a spouse, significant other, or life partner – did you have oral, vaginal, or anal sex with?
- a. 0
  - b. 1-5
  - c. 6-10
  - d. 11-15
  - e. 16-20
  - f. Over 20
  - g. Refuse to answer
35. Did you have unprotected [vaginal/anal] sex with any [female/male] partners in the past 12 months whose HIV status you didn't know? By unprotected sex, I mean [oral/vaginal/anal] sex when you or your partner didn't use a condom.
- a. Yes
  - b. No
  - c. Refuse to answer
36. Did you have unprotected [vaginal/anal] sex with any [female/male] partners in the past 12 months who you knew or thought to be HIV positive? By unprotected sex, I mean [oral/vaginal/anal] sex when you or your partner didn't use a condom.
- a. Yes
  - b. No
  - c. Refuse to answer
- 37.



## Risk

39. Thinking about the sex you've had over the past (insert time frame), do you consider yourself to be high, medium or low risk for [getting or giving] HIV?
- Low risk
  - Medium risk
  - High risk
  - Refuse to answer
40. If you don't change any HIV-related behaviors what is your chance of getting HIV disease in the next (insert time period here)?
- 0-24% or have little to no chance of getting it
  - 25-49% or have some chance of getting it
  - 50% or have equal chance of getting it or not getting it
  - 51-74% or have a good chance of getting it
  - 75-100% or it is likely that I will get it
  - Refuse to answer
41. Tell me how risky you think each behavior is for [getting or giving] HIV. Use a scale where 0 is lowest risk and 100 is highest risk. Please assign any number in that range to each of the behaviors listed.
- [Deep kissing]
  - [Receptive anal sex ("bottom") with a condom]
  - [Receptive anal sex ("bottom") without a condom]
  - [Mutual masturbation]
  - [Receptive oral sex ("giving a blow job") with a condom]
  - [Receptive oral sex ("giving a blow job") without a condom]
  - [Insertive anal sex [("top")] with a condom]
  - [Insertive anal sex [("top")] without a condom]
  - [Vaginal sex with a condom]
  - [Vaginal sex without a condom]
  - [Other behavior]
  - Refuse to answer

## HIV TESTING

45. Have you ever been tested for HIV?
- a. Yes
  - b. No
  - c. Don't know
  - d. Refuse to answer
46. When was your last HIV test?
- a. 0–2 months ago
  - b. 3–6 months ago
  - c. 7–12 months ago
  - d. More than 12 months ago
  - e. Don't know
  - f. Refuse to answer

47. How often do you get an HIV test?
- a. Every 0-2 months
  - b. Every 3-6 months
  - c. Every 7-12 months
  - d. Less often than once a year
  - e. Other [Specify: \_\_\_\_\_]
  - f. Don't know
  - g. Refuse to answer

### **HIV Protective Behavioral Intentions**

48. Do you plan to [HIV prevention strategy] the next time you have sex?
- a. Yes
  - b. No
  - e. Refuse to answer
49. If your sexual partner does not want to [insert HIV prevention strategy], do you plan on insisting that the two of you [HIV prevention strategy]?
- a. Yes
  - b. No
  - e. Refuse to answer
50. The next time you have sex, do you plan on talking about [HIV prevention strategy] with your partner?
- a. Yes
  - b. No
  - e. Refuse to answer
51. How likely are you to (put example preventive action here) the next time you (add specific behavior here/have sex)?
- a. Very unlikely
  - b. Unlikely
  - c. Neither unlikely or likely
  - d. Likely
  - e. Very likely
  - f. Refuse to answer

## Norms and Attitudes

Most of my friends ...

	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neither Disagree Nor Agree</b>	<b>Agree</b>	<b>Strongly Agree</b>	<b>Refuse to Answer</b>
a. think you should always use condoms when having anal sex with a new partner.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>9</sub>
b. use condoms for anal sex.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>9</sub>
d. think negatively of me if I do not use condoms when I have anal sex.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>9</sub>

How sure are you that you could use a condom the next time you have anal sex with a partner whose HIV status you do not know?

- <sub>1</sub> Very sure I could not  
<sub>2</sub> Somewhat sure I could not  
<sub>3</sub> Neither unsure nor sure I could  
<sub>4</sub> Somewhat sure I could  
<sub>5</sub> Very sure I could  
<sub>9</sub> Refuse to answer

52. Most people who are important to me think I should [insert behavior here]. By important to me, we mean people like friends, family, and anyone else who is an important part of your life.
- Strongly disagree
  - Disagree
  - Neither disagree nor agree
  - Agree
  - Strongly Agree
  - Refuse to answer
53. Most of my sexual partners [insert behavior here].
- Strongly disagree
  - Disagree

- c. Neither disagree nor agree
  - d. Agree
  - e. Strongly Agree
  - f. Refuse to answer
54. Most [gay men/people I know] [insert behavior here].
- a. Strongly disagree
  - b. Disagree
  - c. Neither disagree nor agree
  - d. Agree
  - e. Strongly Agree
  - f. Refuse to answer
55. On a scale from 1 to 6, where 1 is extremely bad and 6 is extremely good, how would you rate [insert behavior here].
- a. Extremely bad
  - b. Bad
  - c. Neither bad nor good
  - d. Good
  - e. Extremely good
  - f. Refuse to answer
56. On a scale from 1 to 6, where 1 is extremely harmful and 6 is extremely beneficial, how would you rate [insert behavior here] to [prevent HIV]?
- a. Extremely harmful
  - b. Harmful
  - c. Neither harmful nor beneficial
  - d. Beneficial
  - e. Extremely beneficial
  - f. Refuse to answer
57. Please tell us how much you disagree or agree with the following statements
- a. [insert behavior here] is expensive.
  - b. [insert behavior here] is inconvenient.
  - c. [insert behavior here] allows me to have unprotected sex with partners who are [HIV negative or HIV positive]
  - d. [insert behavior here] [insert descriptor here].
  - e. Strongly disagree
  - f. Disagree
  - g. Neither disagree nor agree
  - h. Agree
  - i. Strongly Agree
  - j. Refuse to answer

58. How sure are you that you could [insert behavior here] if...

	<b>Very sure I could not</b>	<b>Somewhat sure I could not</b>	<b>Slightly sure I could</b>	<b>Somewhat sure I could</b>	<b>Very sure I could</b>
a. you wanted to [insert behavior here]?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. [insert circumstance]?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. [insert circumstance]?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. [insert circumstance]?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. [insert circumstance]?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

59. I feel confident in my ability to [insert HIV prevention strategy here].

- a. Strongly disagree
- b. Disagree
- c. Neither agree or disagree
- d. Agree
- e. Strongly agree

60. Listed below are a variety of thoughts that may pop into people’s heads when they are thinking about having unsafe sex with either a main or casual partner. Please tell us how often you have had these thoughts.

	<b>Never thought</b>	<b>Very occasionally think</b>	<b>Occasionally think</b>	<b>Frequently think</b>	<b>Very frequently think</b>
a. He looks so healthy, he can’t possibly be HIV positive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. He can’t be HIV positive because he is willing to have sex without a condom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. He seems intelligent/well-educated, so I’m sure he has been careful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I’m sure he isn’t infected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. My positive state of mind can prevent me from being infected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I’m too healthy to become infected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. I’ve been lucky so far, I’m sure I’ll continue to be lucky	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. I don’t care if I become HIV positive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. People who are HIV positive would insist on using a condom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. My regular partner only has unsafe sex with me, so I’m safe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. I believe him when he says he is negative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. I’m always the active/insertive/penetrative partner, therefore I’m safe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. [insert other reason]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### **Positive Attitudes toward Talking about HIV with Partners, Peers, and Family**

61. It is important to talk about [HIV].
- a. Strongly disagree
  - b. Disagree
  - c. Neither disagree nor agree
  - d. Agree
  - e. Strongly agree
  - f. Refuse to answer
62. It is important to talk about [HIV] with [INSERT].
- a. Strongly disagree
  - b. Disagree
  - c. Neither disagree nor agree
  - d. Agree
  - e. Strongly agree
  - f. Refuse to answer
63. I am confident that I can talk to [INSERT] about [INSERT].
- a. Strongly disagree
  - b. Disagree
  - c. Neither disagree nor agree
  - d. Agree
  - e. Strongly agree
  - f. Refuse to answer



## IDENTITY AND DISCRIMINATION

This next set of questions asks about how you identify in terms of race and sexual orientation. Some of the questions also ask about your experiences with how others have reacted to your race and/or sexual orientation.

64. Please tell us how much you disagree or agree with each of the following statements.

	<b>Do not agree at all 1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>Agree Completel y 7</b>
a. I feel good about being a [insert race/ethnicity/sexual orientation].	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I often regret that I am a [insert race/ethnicity/gender]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. In general, I am glad to be a [insert race/ethnicity/sexual orientation]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Overall, I often do not like being a [insert race/ethnicity/sexual orientation]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Being a [insert race/ethnicity/sexual orientation] is important to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. If someone says something bad about [insert race/ethnicity/sexual orientation] they say something bad about me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**THE END**

Thank you for answering these questions. Please place the survey in the envelope provided. Give the survey and your consent form to the interviewer when you go into the interview room. The interviewer will not see your responses to these questions.