**Form Approved**

**OMB No. 0920-XXXX**

**Expiration Date: XX/XX/XXXX**

**Evaluation of Free Rapid HIV self-testing in MSM (eSTAMP)**

**Attachment 3f**

**Follow-up Survey— Intervention and Comparison Arms**

Public reporting burden of this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attn: OMB-PRA (0920-XXXX)

**Follow-up Survey – Intervention and Comparison Arms**

AUTO1. Date of Survey: \_\_ \_\_/ \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

(M M / D D / Y Y Y Y )

AUTO2. Time Began Survey \_\_ \_\_:\_\_ \_\_ : \_\_ \_\_ [24 Hour time HH:MM:SS]

Thank you for your interest in this study. Please take note of the following information:

1. Your answers are private: the information you provide us will be kept private and known only to study staff.
2. This survey includes some personal questions. You can choose to not answer any questions that make you feel uncomfortable.
3. We appreciate your willingness to be part of this study. Your participation will help us learn more about ways to get people tested. The results of this study will be used to improve HIV testing programs in the United States.
4. Emory University and MANILA Consulting Group, Inc. are conducting the study, which is funded by the Centers for Disease Control and Prevention (CDC).

**Section A. General HIV Testing Questions**

***For Comparison Arm:***

A-1a.Have you tested for HIV since the last survey, that is, since **[insert calculated month and year]**?

1. No
2. Yes

77 I prefer not to answer

***If A-1a = “Yes” go to A-4, else go to A-2***

***If A-1a = “1”, “7” or “9” go to A-2***

***For Intervention Arm:***

A-1b.Have you tested for HIV since the last survey, that is, since **[insert calculated month and year]**?

**(Check all that apply).**

1 No

2 Yes, I tested with the tests I received by mail from this study

3 Yes, I tested some other way

77 I prefer not to answer

***If A-1b response is only “2”, go to SECTION D (home-testing questions)***

***If A-1b response includes “3” go to A-4***

***If A-1b = “1”, “7” or “9” go to A-2***

A-2. What are the reasons you have not tested for HIV since the last survey? Check all that apply.

1. I tested using the tests received by mail from this study ***(show only for intervention arm)***
2. I think I’m at low risk for HIV infection
3. I am afraid to find out I have HIV
4. I don’t have time
5. I don’t know where to go for a test
6. I don’t have enough money or insurance for a test
7. I don’t want my friends and family to know that I got tested
8. I don’t want my sex partners to know that I got tested
9. If I test positive I won’t be able to get treatment
10. I don’t believe that treatment is effective
11. If I test positive I will be rejected by my friends and family
12. I do not want my result to be reported to the government
13. Other reason (Specify\_\_\_\_\_\_\_\_\_\_\_)

77 I prefer not to answer

A-3. What is the main reason you have not tested for HIV since the last survey? Choose only one.

***Display response options based on selections in A2.***

***If A-1a = “No” go to section F (Sex Behaviors)***

***If A-1b = “No” go to section D (Home-testing questions)***

A4. Since the last survey, that is, since ***[insert calculated month and year]***, how many times have you been tested for HIV?

***If A-1b includes “2” add:*** Please do NOT include testing with the mailed study tests.

***Provide drop down box with all values, separate boxes with limited range.***

\_\_\_ \_\_\_ Number of times (1 to N)

77 I prefer not to answer

A-5. Since the last survey, where have you tested for HIV? **Check all that apply**.

1. Private doctor’s office
2. HIV counseling and testing site
3. Public health clinic / Community health clinic
4. Street outreach program / Mobile unit
5. Sexually transmitted disease clinic
6. Emergency room
7. Hospital (inpatient)
8. Correctional facility (jail or prison)
9. Home or other private location
10. Other location (Specify\_\_\_\_\_\_\_\_\_\_\_)

77 I prefer not to answer

A-6. Since the last survey, when did you have your most recent HIV test?

***If A-1b includes “2” add:*** Please do NOT include testing with the study tests.

\_\_ \_\_ /\_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

[MM / DD / YYYY]

77 I prefer not to answer

***If YYYY < “1985”, display*** “HIV testing was not widely available before 1985. Please re-enter the correct year.” ***and loop back to put in the correct year.***

***If MM/YYYY<last survey date in A4, display*** “This date is before your last survey. Please re-enter the correct date.” ***and loop back to put in the correct date.***

A-7. What was the result of your most recent HIV test on ***[insert date from A-6]***?

1. Negative
2. Positive
3. Never obtained results
4. Indeterminate
5. Invalid

77 I prefer not to answer

99 I don't know

***If A7 = “Positive” then go to A8, else skip to Section B***

A-8. Was your test on \_\_\_\_/\_\_\_\_/\_\_\_\_\_ ***[insert date from A-6 “most recent test”]*** your first positive test?

1. No
2. Yes

77 I prefer not to answer

***If A-6 = “No” Proceed to A-9***

***Else, skip to next section***

A-9 When did you first test positive for HIV?

***If A-1b includes “2” add:*** You can include testing with the mailed study tests.

\_\_ \_\_/ \_\_ \_\_/ \_\_ \_\_ \_\_ \_\_

(MM / DD / YYYY )

77 I prefer not to answer

**Section B. Assessing Home HIV Testing with Non-Study Tests**

A home HIV test is a test you use to test yourself in the privacy of your home or other private location.

***For Intervention Arm:***

C-1a. Since the last survey, have you used a home HIV test? Please ***do NOT include*** the ones sent to you for this study.

1. No
2. Yes

77 I prefer not to answer

***If C-1a = “Yes” go to C-2a***

***Else go to Section D- ST1 (Study home-testing questions for intervention group)***

***For Comparison Arm:***

C-1b. Since the last survey, have you used a home HIV test?

1. No
2. Yes

77 I prefer not to answer

***If C-1b= “Yes” go to C-2b***

***Else go to Section C – CT1 (conventional testing questions for control group)***

***If C-1b = “No” in assessments 3, 6, 9 and this survey is the “12 months questionnaire” go to K-1***

**For *Comparison Arm - 12 month questionnaire only*:**

K-1. What are some of your reasons for not using a home HIV test? Check all that apply.

1. The home HIV test costs too much
2. I’m concerned about the accuracy of the test
3. I’m concerned I will not be able to perform the test correctly
4. I’m concerned I would not be able to read the result properly
5. I do not know where to get a home HIV test kit
6. I would rather talk to a counselor when I get an HIV test
7. I would rather talk to my doctor when I get an HIV test
8. I do not want to stick my finger to get a drop of blood
9. I do not want to mail my blood sample to a lab
10. I got tested at a different location such as my doctor’s office
11. I’m afraid of finding out that I have HIV
12. Other reason (Specify\_\_\_\_\_\_\_\_\_\_\_)

77 I prefer not to answer

***For Intervention Arm:***

C-2a. Since the last survey, which of these home HIV tests have you used? Please ***do NOT include*** the ones sent to you for this study. **Check all that apply**.

1. HomeAccess® HIV-1Test System (where you prick yourself and collect a blood sample on a card that you mail to a lab for testing)
2. OraQuick® In-Home HIV test (where you collect your own oral fluid sample, use the testing device yourself and read the results in approximately 20 minutes)
3. Other rapid HIV test not from this study

77 I prefer not to answer

***For Control Arm:***

C-2b. Since the last survey, which of these home HIV tests have you used? **Check all that apply**.

1. HomeAccess® HIV-1Test System (where you prick yourself and collect a blood sample on a card that you mail to a lab for testing)
2. OraQuick® In-Home HIV test (where you collect your own oral fluid sample, use the testing device yourself and read the results in approximately 20 minutes)
3. Other rapid HIV test not from this study

77 I prefer not to answer

C-3. You mentioned you used ***[insert option(s) from C-2a or C-2b]*** to test yourself for HIV. How did you get the home HIV test(s)? Check all that apply.

1. Bought online
2. From a pharmacy
3. From a friend
4. From a sex partner
5. From my doctor’s office
6. From an HIV counseling and testing site
7. From a Health Department
8. From another research study (not this one)
9. Other location or person (Specify\_\_\_\_\_\_\_\_\_\_\_)

77 I prefer not to answer

C-4. Since the last survey, did you use the home HIV test(s) for any of the following reasons: **Check all that apply**.

1. It was more convenient than getting tested by a doctor or at an HIV testing site
2. It was more private than getting tested by a doctor or at an HIV testing site
3. I didn’t want other people to know I was testing
4. To test together with someone, before having sex
5. To test myself, before having sex
6. To test myself, after having sex
7. A sex partner asked me to take a home HIV test
8. Other reason

77 I prefer not to answer

***If C-4 = 6 (“[…] after having sex […]” ) go to C-5, else skip to next section***

C-5. When you used a home HIV test(s) **after having sex,** was it because you were worried about that sexual encounter?

1. No
2. Yes

77 I prefer not to answer

***If C\_5 = “Yes” go to C-6, else skip to next section***

C-6. Why were you worried about that particular sexual encounter? (Check all that apply)

1. The condom broke or came off
2. Did not use condoms
3. I was drunk or “high” and I am not sure what happened
4. I felt sick after that sexual encounter
5. I learned that I had sex with a person that is HIV positive
6. I had sex with someone of unknown HIV status
7. Other. Specify\_\_\_\_\_\_\_\_\_\_\_\_

77 I prefer not to answer

C-7. How long after this particular sexual encounter did you take the home HIV test? Give result in days, weeks or months.

Give result in days, weeks or months. (Drop down menu)

\_\_\_\_ days OR \_\_\_\_ weeks OR \_\_\_\_ months

77 I prefer not to answer

99 I don't know

***Go to Section C (if Comparison Arm) or Section D (if Intervention Arm).***

**Section C. HIV Testing for Comparison Arm**

***If A-1 = “Yes” continue to CT-1; else go to next section.***

CT-1. Since the last survey you have tested for HIV at least once. After taking an HIV test and getting a test result some people decide to do things differently. Did you do any of the following because of the result of the HIV test? (Check all that apply):

1. Have sex only with partners that were the same HIV status as you
2. Exclusively be the top
3. Exclusively be the bottom
4. Always use condoms
5. Sometimes use condoms
6. Never use condoms
7. Not have anal sex
8. Only have oral sex
9. Not have vaginal sex
10. Not have sex
11. I didn’t do anything different based on the result of the HIV test
12. None of the above

77 I prefer not to answer

***End of section. Go to Section F (Sexual Behavior).***

**Section D. Home-testing for Intervention Arm**

ST-1. Did you receive the study’s home HIV tests that

were shipped to you? ***(only 3 months assessment)***

you requested? ***(6, 9 and 12 months assessments)***

No

Yes

I did not request more home HIV tests (response option for 6, 9, and 12 months assessments)

ST-2. Since the last survey, that is, since ***[insert calculated month and year]***, how many study home HIV tests did you use to ***test******yourself***?

Number of oral fluid HIV tests (OraQuick) used: \_\_\_\_\_ (***enter number between 0-4***)

Number of finger-stick blood HIV tests (Sure Check) used: \_\_\_\_ (***enter number between 0-4***)

***If ST-2 = “0” then go to ST3, else go to ST-4.***

ST-3. What are the reasons you didn’t use the study home HIV tests to test yourself? **Check all that apply.**

1. I live with people who might see me take the test
2. I live with people who might find out I am testing for HIV
3. I do not want to stick my finger to get a drop of blood
4. I’m afraid of finding out that I have HIV
5. I don’t want to test when I am home alone
6. I gave them all away
7. I’m concerned about the accuracy of the test(s)
8. I’m concerned I would not be able to perform the test correctly
9. I’m concerned I would not be able to read the result properly
10. I would rather talk to a counselor when I get an HIV test
11. I would rather be tested by someone who is trained to conduct the test
12. Other reason (Specify\_\_\_\_\_\_\_\_\_\_\_)

77 I prefer not to answer

ST-4. We would like to confirm that you used the study website to enter the result of (***ST-2***) OraQuick test(s) and (***ST-2***) Sure Check test(s). Did you enter the test results into the study website?

No (***Pop-up box: We will ask you a few questions about those tests***)

Yes (***Pop-up box: Thank you. Please wait one moment while we find your information on the tests***.)

***If participant is missing the report of test results based on answers to ST-2 then go to “Results reporting survey”***. ***When results reporting is done come back here.***

ST-5. Since the last survey, did you use the study home HIV test(s) for any of the following reasons: **Check all that apply**.

1. It was more convenient than getting tested by a doctor or at an HIV testing site
2. It was more private than getting tested by a doctor or at an HIV testing site
3. I didn’t want other people to know I am testing
4. To test together with someone, before having sex
5. To test myself, before having sex
6. To test myself, after having sex
7. A sex partner asked me to take a home HIV test
8. Other reason

77 I prefer not to answer

ST-6. After taking an HIV test and getting a test result some people decide to do things differently. Did you do any of the following because of the result of a study home HIV test? (Check all that apply):

1. Have sex only with partners that were the same HIV status as you
2. Exclusively be the top
3. Exclusively be the bottom
4. Always use condoms
5. Sometimes use condoms
6. Never use condoms
7. Not have anal sex
8. Only have oral sex
9. Not have vaginal sex
10. Not have sex
11. I didn’t do anything different based on the result of the HIV test
12. None of the above

77 I prefer not to answer

***If ST-5 = “I used a study home HIV test by myself, after having sex” go to ST-7.***

***Else go to next section.***

ST-7. When you used a home HIV test(s) **after having sex,** was it because you were worried about that sexual encounter?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***If ST-7 = “Yes” go to ST-8, else go to next Section.***

ST-8. Why were you worried about that particular sexual encounter? (Check all that apply)

1. The condom broke or came off
2. Did not use condoms
3. I was drunk or “high” and I am not sure what happened
4. I felt sick after that sexual encounter
5. I learned that I had sex with a person that is HIV positive
6. I had sex with someone of unknown HIV status
7. Other, Specify\_\_\_\_\_\_\_\_\_\_\_\_

77 I prefer not to answer

ST-9. How long after this particular sexual encounter did you take the study home HIV test?

Give result in days, weeks or months.

\_\_\_\_ days OR \_\_\_\_ weeks OR \_\_\_\_ months (Drop down menu)

77 I prefer not to answer

99 I don't know

**Section E. Test Distribution for Intervention Arm**

TD-1. Since the last survey, did you give away any study home HIV test?

No

Yes

77 I prefer not to answer

99 I don't know

***If TD-1=No, go to TD-2.***

***If TD-1= Yes, go to TD-3.***

TD-2. What are the reasons you didn’t give away the study home HIV tests? **Check all that apply.**

1. I wanted to use it for myself
2. I was concerned this might affect our relationship
3. I thought they would get upset or angry
4. I didn’t know I could give them away
5. I was afraid they would think I have HIV
6. I was concerned about the accuracy of such a test
7. I was concerned they would not be able to perform and read the test correctly
8. I would rather they talked to a counselor when they get an HIV test
9. Other reason (Specify\_\_\_\_\_\_\_\_\_\_\_)

77 I prefer not to answer

99 I don't know

***If TD-1=No, go to next section.***

***If TD-1= Yes, continue to TD-3.***

TD-3. How many different people **refused** to accept the study test when you offered it to them?

\_\_\_\_\_\_

77 I prefer not to answer

99 I don't know

TD-4. We want to ask a few questions about each person who received a study home test kit from you.

To help you remember, please write the initials or nickname of the person(s) you gave a study home test to in the space(s) in the table below. If you gave someone more than one test kit, just put his/her nickname or initials in the box next to the kit’s name. If two people have the same initials or nickname, please use different initials or nickname for each.

|  |  |
| --- | --- |
|  | Initials or Nickname of person you gave the study home test kit |
| OraQuick | 4a or “I didn’t give away” |
| OraQuick | 4b or “I didn’t give away” |
| Sure Check | 4c or “I didn’t give away” |
| Sure Check | 4d or “I didn’t give away” |

***Ask secondary user-specific questions based on number from TD-4***

***Secondary user #1 [4a]***

The following questions are about ***[insert initials or nickname of entered in TD-4a]***

TD-5. What is ***[insert initials or nickname of entered in TD-4a]’s*** age? Use your best guess if you’re not sure.

\_\_\_\_\_

TD-6. What is ***[insert initials or nickname of entered in TD-4a]’s*** gender?

1. Male
2. Female
3. Transgender (Male to Female)
4. Transgender (Female to Male)

77 I prefer not to answer

TD-7. What is ***[insert initials or nickname of entered in TD-4a]***’s race/ethnicity? Check all that apply.

1. American Indian or Alaska Native
2. Asian
3. Black or African American
4. Hispanic or Latino
5. Native Hawaiian or Other Pacific Islander
6. White

77 I prefer not to answer

TD-8. How long have you known ***[insert initials or nickname of entered in TD-4a]***?

1. Less than a month
2. 1 to 3 months
3. 4 to 6 months
4. 7 to 11 months
5. 1 to 3 years
6. Over 3 years

77 I prefer not to answer

TD-9. To the best of your knowledge, does ***[insert initials or nickname of entered in TD-4a]*** have sex with:

1. Men only
2. Women only
3. Both men and women

77 I prefer not to answer

99 I don't know

TD-10. To the best of your knowledge, does ***[insert initials or nickname of entered in TD-4a]*** inject drugs that are not prescribed for him/her?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

TD-11. Who is ***[insert initials or nickname of entered in TD-4a]?* Check only one**.

1. A main sexual partner (Someone you feel committed to above all others)
2. A casual sexual partner (Someone you do not feel committed to above all others)
3. A family member (who is not a sexual partner)
4. A friend (who is not a sexual partner)
5. A stranger (who is not a sexual partner)
6. An acquaintance (who is not a sexual partner)
7. Other (please specify: \_\_\_\_\_\_\_\_\_)

77 I prefer not to answer

99 I don't know

***For study participants who gave only 1 HIV test(s) to [4a]:***

**BOX: The following questions are about that [insert “OraQuick” or “Sure Check” based on response from TD-4] HIV test you gave to *[insert initials or nickname of entered in TD-4a]*.**

***For study participants who gave more than 1 HIV test(s) to [4a]:***

**BOX: The following questions are about the FIRST HIV test [insert “OraQuick” or “Sure Check” based on response from TD-4] you gave to *[insert initials or nickname of entered in TD-4a]*.**

TD-12. To the best of your knowledge, when did ***[insert initials or nickname of entered in TD-4a] use the* [insert “OraQuick” or “Sure Check” based on response from TD-4] *test*** that you gave him/her?

\_\_\_\_\_\_/\_\_\_\_\_\_\_ Month/Day

77 I prefer not to answer

99 I don't know

TD-13. What was the result of the **[*insert “OraQuick” or “Sure Check” based on response from TD-4*]** HIV test you gave to ***[insert initials or nickname of entered in TD-4a]***?

1. Negative
2. Positive
3. Invalid

77 I prefer not to answer

99 I don't know the result of the test

***For study participants who gave more than1 HIV test(s) to [4a] go to TD-15, else skip to TD-17:***

**BOX: The following questions are about the SECOND or MOST RECENT HIV test ([insert “OraQuick” or “Sure Check” based on response from TD-4]) you gave to *[insert initials or nickname of entered in TD-4a]*.**

TD-14. To the best of your knowledge, when did ***[insert initials or nickname of entered in TD-4a]*** use ***the SECOND or MOST RECENT HIV test (*[insert “OraQuick” or “Sure Check” based on response from TD-4])**you gave him/her?

\_\_\_\_\_\_/\_\_\_\_\_\_\_ Month/Day

77 I prefer not to answer

99 I don't know

TD-15. What was the result of the **SECOND or MOST RECENT** HIV test (**[*insert “OraQuick” or “Sure Check” based on response from TD-4*]**) you gave to ***[insert initials or nickname of entered in TD-4a]***?

1. Negative
2. Positive
3. Invalid

77 I prefer not to answer

99 I don't know the result of the test

TD-16. To the best of your knowledge, did ***[insert initials or nickname of entered in TD-4a]*** call the study number for information, counseling or a referral?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***If TD-14 or TD-16 = “Positive” go to TD-18, else go to TD-21***

TD-17. To the best of your knowledge, did ***[insert initials or nickname of entered in TD-4a]*** already know she/he was HIV-positive?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

TD-18. To the best of your knowledge, did ***[insert initials or nickname of entered in TD-4a]*** go to a health care provider for more tests or to start care after the HIV positive test result from the**[*insert “OraQuick” or “Sure Check” based on response from TD-4*]** HIV test?

No

Yes

77 I prefer not to answer

99 I don't know

TD-19. Did you help ***[insert initials or nickname of entered in TD-4a]*** to see a doctor after she/he found out that she/he was infected (e.g., encouraging them to call the study number, going with them to see a HIV health care professional)?

No

Yes

77 I prefer not to answer

99 I don't know

***If TD-11 = “main sexual partner” or “casual sexual partner” AND TD-4 indicates that [4a] received only 1 test go to TD-19***

***If TD-11 ≠ “main sexual partner” or “casual sexual partner” go to next section.***

TD-20. You mentioned ***[insert initials or nickname of entered in TD-4a]*** is a sexual partner. Did the result of the test influence your decision to have sex?

1. No
2. Yes

77 I prefer not to answer

TD-21. Did you have **anal** or **vaginal sex** with ***[insert initials or nickname of entered in TD-4a]* after** ***[insert initials or nickname of entered in TD-4a]*** used the study home HIV test?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***If TD-21 = “Yes”, go to TD-22. Else go to End Section Box***

TD-22. Think about the time or times you had **anal** or **vaginal sex** with ***[insert initials or nickname of entered in TD-4a]*** after ***[insert initials or nickname of entered in TD-4a]*** used the study home HIV test. Did you have sex **without condoms** with ***[insert initials or nickname of entered in TD-6a]?***

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***IF TD-6 is not “Female” and TD-23 = “Yes”, go to TD-23. Else go to End Section Box.***

TD-23. When you had sex without condoms with ***[insert initials or nickname of entered in TD-4a]*** after ***[insert initials or nickname of entered in TD-4a]*** took the test, were you …

(Check only one)

1. Both top and bottom
2. Top only
3. Bottom only

77 I prefer not to answer

99 I don't know

***End Section Box: Repeat TD-5 to TD-23 for 4b, 4c, 4d if applicable. Else go to next section.***

**Section F. Sexual Behavior (SX)**

We will now ask you some questions about your sex partners since the last survey. We only want to know about partners you had anal or vaginal sex with since **[*insert date from last survey*]**.

SX-1. Since the last survey, did you have anal or vaginal sex with:

1. Only men
2. Only women
3. Both men and women
4. Nobody

***If SX-1 = “Only men”, ask only Male Sex Partner questions.***

***If SX-1 = “Only women”, ask only Female Sex Partner questions.***

***If SX-1 = “Both men and women”, ask first Female Sex Partner followed by Male Sex Partner questions.***

***If SX-1 = “Nobody”, skip to the next section.***

***If SX-1 is not answered, prompt “Please enter a response”.***

**Female Sex Partner Questions**

The next questions are about women you had vaginal or anal sex with since the last survey. “Vaginal sex” means you put your penis in her vagina. “Anal sex" means you put your penis in her butt.

FX-1. Since the last survey, with how many different women did you have vaginal or anal sex?

\_\_\_ \_\_\_ Number of women (1 to N)

77 I prefer not to answer

FX-2. With how many of these **[*FX-1*]** women did you have vaginal or anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of women (0 to N)

77 I prefer not to answer

***Check to make sure SX-27 ≤ SX-27.***

***If not, then display*** *“*The number of women you had sex without using a condom or not using it the whole time cannot be more than the number of women you had vaginal or anal sex with Since the last survey. Please carefully re-enter your response.*”****, and loop back to enter the number.***

FX-3. Since the last survey, how many of these **[*FX-2]*** women you had vaginal or anal sex without using a condom were:

1. HIV positive? \_\_\_ \_\_\_ Number of women (0 to N)
2. HIV negative? \_\_\_ \_\_\_ Number of women (0 to N)
3. Women whose HIV status you did not know? \_\_\_ \_\_\_ (0 to N)

77 I prefer not to answer

***Check to make sure that the numbers in FX-3 add up to the total N from FX-2.***

***If not, then display “***The number of HIV positive, HIV negative and HIV status unknown partners must add up to **[*FX-2*].** Please carefully re-enter your responses.***”, and loop back to enter the numbers.***

**Male Sex Partner Questions**

The next questions are about men you had anal sex with since the last survey. “Anal sex" means you put your penis in his butt, or he puts his penis in your butt.

SX-2. Since the last survey, that is, since **[*insert date from last survey*]**, with how many different men did you have anal sex?

\_\_\_ \_\_\_ Number of men (1 to N)

77 I prefer not to answer

***If SX-2 = 1 ask Partner 1 questions***

***If SX-2 = 2 ask Partner 1 and Partner 2 questions***

***If SX-2 = 3 ask Partner 1, Partner 2 and Partner 3 questions***

***If SX-2 = 4 ask Partner 1, Partner 2, Partner 3 and Partner 4 questions***

***If SX-2 ≥ 5 ask Partner 1, Partner 2, Partner 3, Partner 4 and Questions for ≥ 5 partners***

SX-3. Please enter a nickname or initials for the **[*insert number from SX-2 if SX-2 < 4, or insert 4*]** most recent men you had anal sex with since **[*insert date from last survey*]**.

We do not want to know the names of your partners. Please choose a nickname or initials that will best help you remember that person. If [***TD-4a, TD-4b, TD-4c or TD-4d***] is/are part of the most recent men you had sex with please use the same initials or nickname.

***Display options below based on number from SX-2***

1. Partner 1 \_\_\_\_\_\_\_\_\_\_
2. Partner 2 \_\_\_\_\_\_\_\_\_\_
3. Partner 3 \_\_\_\_\_\_\_\_\_\_
4. Partner 4 \_\_\_\_\_\_\_\_\_\_

***Ask partner-specific questions based on number from SX-2.***

**Partner 1:**

SX-4. What is/was your relationship with **[*Partner 1*]**?

1. Main Partner, Serious relationship, Boyfriend (Someone you feel committed to above all others)
2. Casually dating but not serious
3. Having sex with but not dating
4. One night stand/Stranger/Anonymous

77 I prefer not to answer

***If SX-4 = 1, 2 or 3 go to SX-5 else skip to SX-6.***

SX-5. How long have you been with **[*Partner 1*]**?

1. Less than a month
2. 1 to 3 months
3. 4 to 6 months
4. 7 to 11 months
5. 1 to 3 years
6. Over 3 years

77 I prefer not to answer

SX-6. What is ***[Partner 1]’s*** race/ethnicity? Check all that apply.

1. American Indian or Alaska Native
2. Asian
3. Black or African American
4. Hispanic or Latino
5. Native Hawaiian or Other Pacific Islander
6. White

77 I prefer not to answer

SX-7. To the best of your knowledge, what was [***Partner 1***]'s HIV status?

1. I know this person is HIV negative
2. I think this person is HIV negative
3. I don’t know this person’s HIV status
4. I think this person is HIV positive
5. I know this person is HIV positive

77 I prefer not to answer

SX-8. Since the last survey, how many times did you and **[*Partner 1*]** have anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of times (0 to N)

77 I prefer not to answer

***If SX-7 = 0 or “I prefer not to answer”, skip SX-8***

SX-9. Since the last survey, when you and **[*Partner 1*]** had anal sex without a condom were you the top (your penis in his butt), bottom (his penis in your butt) or both? (Check only one)

1. Both top and bottom
2. Top only
3. Bottom only

77 I prefer not to answer

**Partner 2:**

SX-10. What is/was your relationship with **[*Partner 2*]**?

1. Main Partner, Serious relationship, Boyfriend (Someone you feel committed to above all others)
2. Casually dating but not serious
3. Having sex with but not dating
4. One night stand/ Stranger/Anonymous

77 I prefer not to answer

***If SX-10 = 1, 2 or 3 go to SX-11 else skip to SX-12.***

SX-11. How long have you been with **[*Partner 2*]**?

1. Less than a month
2. 1 to 3 months
3. 4 to 6 months
4. 7 to 11 months
5. 1 to 3 years
6. Over 3 years

77 I prefer not to answer

SX-12. What is ***[Partner 2]***’s race/ethnicity? Check all that apply.

1. American Indian or Alaska Native
2. Asian
3. Black or African American
4. Hispanic or Latino
5. Native Hawaiian or Other Pacific Islander
6. White

77 I prefer not to answer

SX-13. To the best of your knowledge, what was [***Partner 2***]'s HIV status?

1. I know this person is HIV negative
2. I think this person is HIV negative
3. I don’t know this person’s HIV status
4. I think this person is HIV positive
5. I know this person is HIV positive

77 I prefer not to answer

SX-14. Since the last survey, how many times did you and **[*Partner 2*]** have anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of times (0 to N)

77 I prefer not to answer

***If SX-14 = 0 or “I prefer not to answer”, skip SX-15***

SX-15. Since the last survey, when you and **[*Partner 2*]** had anal sex without a condom were you the top (your penis in his butt), bottom (his penis in your butt) or both? (Check only one)

1. Both top and bottom
2. Top only
3. Bottom only

77 I prefer not to answer

**Partner 3:**

SX-16. What is/was your relationship with **[*Partner 3*]**?

1. Main Partner, Serious relationship, Boyfriend (Someone you feel committed to above all others)
2. Casually dating but not serious
3. Sleeping with but not dating
4. One night stand/ Stranger/Anonymous

77 I prefer not to answer

***If SX-16 = 1,2 or 3, go to SX-17 else skip to SX-18.***

SX-17. How long have you been with **[*Partner 3*]**?

1. Less than a month
2. 1 to 3 months
3. 4 to 6 months
4. 7 to 11 months
5. 1 to 3 years
6. Over 3 years

77 I prefer not to answer

SX-18. What is ***[Partner 3]’s*** race/ethnicity? Check all that apply.

1. American Indian or Alaska Native
2. Asian
3. Black or African American
4. Hispanic or Latino
5. Native Hawaiian or Other Pacific Islander
6. White

77 I prefer not to answer

SX-19. To the best of your knowledge, what was [***Partner 3***]'s HIV status?

1. I know this person is HIV negative
2. I think this person is HIV negative
3. I don’t know this person’s HIV status
4. I think this person is HIV positive
5. I know this person is HIV positive

77 I prefer not to answer

SX-20. Since the last survey, how many times did you and **[*Partner 3*]** have anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of times (0 to N)

77 I prefer not to answer

***If SX-20 = 0 or “I prefer not to answer”, skip SX-21***

SX-21. Since the last survey, when you and **[*Partner 3*]** had anal sex without a condom were you the top (your penis in his butt), bottom (his penis in your butt) or both? (Check only one)

1. Both top and bottom
2. Top only
3. Bottom only

77 I prefer not to answer

**Partner 4:**

SX-22. What is/was your relationship with **[*Partner 4*]**?

1. Main Partner, Serious relationship, Boyfriend (Someone you feel committed to above all others)
2. Casually dating but not serious
3. Having sex with but not dating
4. One night stand/ Anonymous

77 I prefer not to answer

***If SX- 22= 1,2 or 3, go to SX- 23 else skip to SX-24.***

SX-23. How long have you been with **[*Partner 4*]**?

1. Less than a month
2. 1 to 3 months
3. 4 to 6 months
4. 7 to 11 months
5. 1 to 3 years
6. Over 3 years

77 I prefer not to answer

SX-24. What is ***[Partner 4]’s*** race/ethnicity? Check all that apply.

1. American Indian or Alaska Native
2. Asian
3. Black or African American
4. Hispanic or Latino
5. Native Hawaiian or Other Pacific Islander
6. White

77 I prefer not to answer

SX-25. To the best of your knowledge, what was [***Partner 4***]'s HIV status?

1. I know this person is HIV negative
2. I think this person is HIV negative
3. I don’t know this person’s HIV status
4. I think this person is HIV positive
5. I know this person is HIV positive

77 I prefer not to answer

SX-26. Since the last survey, how many times did you and **[*Partner 4*]** have anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of times (0 to N)

77 I prefer not to answer

***If SX- 26= 0 or “I prefer not to answer”, skip SX- 27.***

SX-27. Since the last survey, when you and **[*Partner 4*]** had anal sex without a condom were you the top (your penis in his butt), bottom (his penis in your butt) or both? (Check only one)

1. Both top and bottom
2. Top only
3. Bottom only

77 I prefer not to answer

**Questions for ≥ 5 male sex partners**

The next questions are about the **[(*SX-2) – 4*]** men you had anal sex with **since the last survey** other than **[*insert nicknames from SX-3*].**

SX-28. With how many of these **[(*SX-2) – 4*]** men did you have anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of times (0 to N)

77 I prefer not to answer

***Check to make sure SX-24 ≤ (SX-2) – 4.***

***If not, then display “***The number of other men you had anal sex without a condom cannot be more than the number of other men you had anal sex **since the last survey**. Please carefully re-enter your response.***”, and loop back to enter the number.***

SX-29. Since the last survey, how many of these **[*SX-28*]** men you had anal sex without using a condom were:

HIV positive? \_\_\_ \_\_\_ Number of men (0 to N)

With how many were you the top only? \_\_\_ \_\_\_ Number of men (0 to N)

With how many were you the bottom only? \_\_\_ \_\_\_ Number of men only (0 to N)

With how many were you both (top and bottom)? \_\_\_ \_\_\_ Number of men (0 to N)

HIV negative? \_\_\_ \_\_\_ (0 to N)

With how many were you the top only? \_\_\_ \_\_\_ Number of men (0 to N)

With how many were you the bottom only? \_\_\_ \_\_\_ Number of men only (0 to N)

With how many were you both (top and bottom)? \_\_\_ \_\_\_ Number of men (0 to N)

Men whose HIV status you did not know? \_\_\_ \_\_\_ (0 to N)

With how many were you the top only? \_\_\_ \_\_\_ Number of men (0 to N)

With how many were you the bottom only? \_\_\_ \_\_\_ Number of men only (0 to N)

With how many were you both (top and bottom)? \_\_\_ \_\_\_ Number of men (0 to N)

77 I prefer not to answer

99 I don't know

***Check to make sure that the numbers in SX-29 add up to the total N from SX-28.***

***If not, then display*** *“*The number of HIV positive, HIV negative and HIV status unknown partners must add up to [*SX-28*]. Please carefully re-enter your responses.*”****, and loop back to enter the numbers.***

**Section G. Partner Risk (PR):**

For the following questions, think about the **[*SX-*2] men** you had anal sex with since the last survey **[*insert date of last survey*]**.

PR-1. How many of these **[*SX-*2]** men were:

1. Younger than ***[ES1 – 5]***? \_\_\_ \_\_\_ (0 to N)
2. Older than ***[ES1 + 5]***? \_\_\_ \_\_\_ (0 to N)
3. Within 5 years of your age? \_\_\_ \_\_\_ (0 to N)

77 I prefer not to answer

***Check to make sure that the numbers in PR-1 add up to the total N from SX-2.***

***If not, then display*** *“*The number of younger men, older men and men within 5 years of your age must add up to [*SX-2*]. Please carefully re-enter your responses.*”****, and loop back to enter the numbers.***

PR-2. Where did you first meet these **[*SX-*2]** men? Check all that apply.

1. Adult novelty store (sex shop)
2. Bar/dance club
3. Bathhouse, sex club, or gay resort
4. Circuit party or Rave
5. Gym
6. Park, outdoors or other public space
7. Private sex party
8. Public restroom
9. Social organization/community event (e.g., fundraiser, Pride parade, etc.)
10. Gay specific dating and hook-up site (Manhunt, Adam4Adam, Grindr, Scruff)
11. General dating and hook-up site (Craigslist, Match.com, OKCupid)
12. Social networking sites (e.g., Facebook, Google+, Twitter)
13. Other (Specify\_\_\_\_\_\_\_\_\_ )

77 I prefer not to answer

PR-3. Since the last survey, did you give or receivethings like money or drugs in exchange for sex?

1. No
2. Yes

77 I prefer not to answer

PR-4. Since the last survey, did you have sex with someone who ever injected drugs other than those prescribed for them?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

PR-5. Since the last survey, did you have sex with someone who has other sex partners?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

PR-6. Since the last survey, before having sex with a new partner how often did you discuss each other’s HIV status?

1. Always
2. Usually
3. Sometimes
4. Rarely
5. Never
6. No new partners Since the last survey

77 I prefer not to answer

PR-7. Since the last survey, did you have anal sex with more than one man in the same encounterwithout using a condom or not using it the whole time?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***If PR-7 = “Yes” continue to PR-8; else skip PR-8.***

PR-8. What is the HIV status of those men? (Check all that apply)

1. They were negative
2. They were positive
3. I did not know their HIV status

77 I prefer not to answer

***Only for 12 months questionnaire:***

K-2. Since you enrolled in this study – approximately 12 months ago, how many different sex partners, both male and female, have you had?

Total number of sex partners: \_\_\_

Total number of male partners: \_\_\_\_\_\_

Total number of female partners: \_\_\_\_\_\_

77 I prefer not to answer

99 I don't know

K-3. How many of these [insert number from H-3] partners were:

HIV negative \_\_\_

HIV positive \_\_\_

Not sure of their HIV status \_\_\_

77 I prefer not to answer

99 I don't know

**Section H. Drug Use (ID and ND)**

**Injection Drug Use**

The next questions are about injection drug use. This means injecting drugs yourself or having someone who isn't a health care provider inject you. Please remember that your answers will remain private.

ID-2. Since the last survey, did you inject or shoot up any drugs other than those prescribed for you? By shooting up, we mean using drugs with a needle, either by mainlining, skin popping, or muscling.

1 No

2 Yes

77 I prefer not to answer

***If ND-1 ≠ “Yes”, skip to Non-injection drug use.***

ID-3. Since the last survey, how often did you use needles or syringes that someone else had already used?

1 Never

2 Rarely

3 About half the time

4 Most of the time

5 Always

77 I prefer not to answer

**Non-Injection Drug Use (ND)**

The following questions are about times when you may have used drugs but did not inject them. This includes smoking, snorting, inhaling or ingesting drugs such as marijuana, methamphetamine, cocaine, crack, club drunks, painkillers, or poppers.

ND-1. Since the last survey, have you used any drugs in ways other than injecting?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***If ND-1 ≠ “Yes”, skip to next section.***

ND-2. Since the last survey, which of the following drugs did you use in ways other than injecting? Check all that apply.

1. Marijuana
2. Heroin
3. Powdered cocaine
4. Crack cocaine
5. Poppers (amyl nitrite)
6. X or Ectasy
7. Painkillers such as Oxycontin, Vicodin, or Percocet
8. Downers such as Valium, Ativan, or Xanax
9. Methamphetamine (meth, crystal meth,tina, speed, or ice)
10. Hallucinogens such as LSD or mushroom
11. Special K (ketamine)
12. GHB
13. Bath Salts
14. Viagra, Levitra or Cialis
15. Other drug

77 I prefer not to answer

99 I don't know

ND-3. Since the last survey, have you used Viagra, Levitra or Cialis in combination with other drugs, such as Methamphetamine?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***Section I. ONLY FOR 12 –MONTH ASSESSMENT:***

K-4. If a Health Department or local agency made rapid home HIV tests available free, on-line or by phone, would you request a home HIV test for your use?

1. No
2. Yes

77 I prefer not to answer

***For Intervention Arm***

K-5. The window period for HIV tests is the time period from when someone is infected until the test can reliably detect antibodies to the virus. What do manufacturers of the rapid tests used in this study state that the window period is?

1. One month
2. Two months
3. Three months
4. Four months
5. Six months

77 I prefer not to answer

99 I don't know

**Alcohol Use (AL) (12months only)**

One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. Please note that a 40 ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks ***Display images of alcohol drink size.***

AL-1. During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

AL-2. Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks on an occasion?

\_ \_ Number of times

88 None

77 I prefer not to answer

99 I don't know

AL-3. During the past 30 days, what is the largest number of drinks you had on any occasion?

\_\_ \_\_ Number of drinks

77 I prefer not to answer

99 I don't know

**Coercive and Abusive Acts and Home-testing for Intervention Arm at 12 Month Survey Only**

The next few questions are about things that may have happened when people used the home HIV tests. Please remember that all answers will be kept strictly confidential.

CA-1. During the course of the study did you pressure someone to use one of the study home HIV tests?

No

Yes

77 I prefer not to answer

99 I don't know

***If CA-1 = “Yes” go to CA-2, else go to CA-5.***

CA-2. Who was this someone?

1. Sex partner
2. Family member
3. Friend
4. Stranger
5. Other

77 I prefer not to answer

***If CA-2 = “sex partner” go to CA-3, else go to CA-5.***

CA-3. During the course of this study, did you do any of the following? (Check all that apply)

1. Pressure a sexual partner to use one of the study home HIV tests.
2. Threaten to leave or break up with a sexual partner if they did not test using one of the study home HIV tests
3. Yell or curse at a sexual partner who refused to test using one of the study home HIV tests
4. Break up with a sexual partner who refused to test using one of the study home HIV tests
5. Threaten to hit a sexual partner if they did not test using one of the study home HIV tests
6. Hit, punch, or kick a sexual partner who refused to test using one of the study home HIV tests
7. Physically force a sexual partner to test using one of the study home HIV tests

77 I prefer not to answer

CA-4. During the course of this study, did you do any of the following after a sexual partner tested using one of the study home HIV tests? (Check all that apply)

1. Threaten to leave or break up with a sexual partner because of their test result
2. Yell or curse at a sexual partner because of their test result
3. Break up with a sexual partner because of their test result
4. Threaten to hit a sexual partner because of their test result
5. Hit, punch, or kicked a sexual partner because of their test result

77 I prefer not to answer

CA-5. During the course of the study did someone pressure you to use one of the study home HIV tests?

No

Yes

77 I prefer not to answer

***If CA-5 = “Yes” go to CA-6, else go to end of section***

CA-6. Was this someone a sex partner, family member, friend, stranger or other?

1. Sex partner
2. Family member
3. Friend
4. Stranger
5. Other

77 I prefer not to answer

***If CA-6 = “sex partner” go to CA-7, else go to end of section***

CA-7. Did any of the following occur between you and a sexual partner before you used one of the study home HIV tests? (Check all that apply)

1. He/she pressured you to test yourself
2. He/she threatened to leave or break up with you if you did not test yourself
3. He/she yelled or cursed at you when you refused to test yourself
4. He/she broke up with you when you refused to test yourself
5. He/she threatened to hit you if you did not test yourself
6. He/she hit, punched, or kicked you when you refused to test yourself
7. He/she forced you to test yourself

77 I prefer not to answer

CA-8. Did any of the following occur between you and a sex partner after you used one of the study home HIV tests? (Check all that apply)

1. He/she threatened to leave or break up with you
2. He/she yelled or cursed at you
3. He/she broke up with you
4. He/she threatened to hit you
5. He/she hit, punched, or kicked you

77 I prefer not to answer

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AUTO3.**  Time Ended Survey: \_\_ \_\_:\_\_ \_\_ : \_\_ \_\_ [24 Hour time HH:MM:SS]

SURVEY END:

***If A8 = “Positive” and HTP-1 = “No” go to End1 else go to End2.***

END1. Would you like the study staff to communicate with you and help you find a health care provider in your area?

No

Yes

END2. Thank you for taking our survey! Your participation in the study is very important to us.    
 **Your PayPal** token of appreciation **or electronic gift card will be sent to you by email at the address you indicated earlier. If you have not received your PayPal** token of appreciation **or electronic gift card within 10 days, please first check your spam filter/junk email folder, and then email us at X@X.  Please send this email from the email address you provided during registration i.e. [*insert email address from QS1*].  
  
To find an HIV testing location near you, please visit: www.aidsvu.org**

**To get more information about HIV, please visit: www.cdc.gov/hiv**

**Otherwise, you can close your browser window. Thank you for your time.**

**Follow-up Survey – Intervention or Comparison Arm Participants with a Previous HIV+ Test Result**

AUTO1. Date of Survey: \_\_ \_\_/ \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

(M M / D D / Y Y Y Y )

AUTO2. Time Began Survey \_\_ \_\_:\_\_ \_\_ : \_\_ \_\_ [24 Hour time HH:MM:SS]

Thank you for your interest in this study. Please take note of the following information:

1. Your answers are private: the information you provide us will be kept private and known only to study staff.
2. This survey includes some personal questions. You can choose to not answer any questions that make you feel uncomfortable.
3. We appreciate your willingness to be part of this study. Your participation will help us learn more about ways to get people tested. The results of this study will be used to improve HIV testing programs in the United States.
4. Emory University and MANILA Consulting Group, Inc. are conducting the study, which is funded by the Centers for Disease Control and Prevention (CDC).

On your previous survey (***date of previous survey***) you mentioned you received an HIV positive test result on (***insert date from A-6 or A-9 from previous survey***).

**Section A. Test Results**

HT-1. Where did you get the positive HIV test result?

1. At home, when using one of the study home HIV tests received by mail ***[intervention arm only]***
2. At home, when using a rapid home HIV test bought from a store or online (such as Oraquick® In-Home HIV test)
3. At home, when using a blood collection/testing kit (such as HomeAccess® HIV-1 Test System)
4. Private doctor’s office
5. Hospital (in patient)
6. Emergency room
7. Sexually Transmitted Disease (STD) Clinic
8. Public health clinic/Community health clinic
9. HIV counseling and testing site
10. Street outreach program/mobile unit
11. Correctional facility (jail or prison)
12. Other location (Specify: \_\_\_\_\_\_\_\_\_)

77 I prefer not to answer

99 Don’t know

***If HT-1 = 1 or 2 go to HT-2, otherwise go to HT-4.***

HT-2. Was someone with you when you read the result from the rapid home HIV test?

* 1. No
  2. Yes

77 I prefer not to answer

***If HT-2=No, skip to HT-4a.***

HT-3. Who was this person?

* 1. A main sexual partner (Someone you feel committed to above all others)
  2. A casual sexual partner (Someone you do not feel committed to above all others)
  3. A family member (not sexual partner)
  4. A friend (not sexual partner)
  5. An acquaintance (not sexual partner)
  6. A stranger (not sexual partner)
  7. Other (please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

77 I prefer not to answer

***Intervention arm and HT-1 = 1 or 2***

HT-4a. Did you use a study home HIV test to check the result of the first test?

1. No
2. Yes

77 I prefer not to answer

***If HT-5a = “Yes”, go to HT-6a, else go to HT-9.***

***Control arm***

HT-4b. Did you take/get another HIV test to check the first test result?

1 No

2 Yes

77 I prefer not to answer

***If HT-5b = Yes, go to HT-5b, else go to next section.***

***Intervention arm***

HT-5a. When did you use this second rapid home HIV test?

1. The same day
2. 1 to 7 days later
3. 8 to 30 days later
4. Over 30 days later

77 I prefer not to answer

99 I don't know

***Continue to 7a.***

***Control arm***

HT-5b. When did you get/take this second HIV test?

1. The same day
2. 1 to 7 days later
3. 8 to 30 days later
4. Over 30 days later

77 I prefer not to answer

99 I don't know

***Continue to 7b.***

***Intervention arm***

HT-6a. What was the result of this second rapid home HIV test on ***[insert date from HT-6a]***?

Negative

Positive

Invalid

77 I prefer not to answer

99 I don't know

***Continue to HT-8.***

***Control arm***

HT-6b. What was the result of this second HIV test on ***[insert date from HT-6b]***?

Negative

Positive

Never obtained results

Indeterminate

Invalid

77 I prefer not to answer

99 I don't know

***Control arm***

HT-7b. Where did you get the second HIV test?

1. At home, when using a rapid home HIV test bought from a store or online (such as Oraquick® In-Home HIV test)
2. At home, when using a blood collection/testing kit (such as HomeAccess® HIV-1 Test System)
3. Private doctor’s office
4. Hospital (in patient)
5. Emergency room
6. Sexually Transmitted Disease (STD) Clinic
7. Public health clinic/Community health clinic
8. HIV counseling and testing site
9. Street outreach program/mobile unit
10. Correctional facility (jail or prison)
11. Other location (Specify: \_\_\_\_\_\_\_\_\_)

77 I prefer not to answer

99 Don’t know

***If HT7b = 1 or 2 go to HT-8, else go to next section***

HT-8. A positive result from rapid home HIV test is preliminary and requires confirmation with a different test, usually a laboratory test. Did you get another test to confirm the positive HIV test result from the home HIV tests?

1. No
2. Yes

77 I prefer not to answer

***If HT-8 = Yes, go to HT-9, else go to next section.***

HT-9. When did you get this confirmatory HIV test?

\_\_ \_\_ /\_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

[MM / DD / YYYY]

77 I prefer not to answer

99 I don't know

HT-10. What was the result of the confirmatory HIV test on ***[insert date from HT-9]***?

1. Negative
2. Positive
3. Never obtained results
4. Indeterminate
5. Invalid

77 I prefer not to answer

99 I don't know

HT-11. Where did you get the confirmatory test on ***[insert date from HT-9]***?

* 1. Private doctor’s office
  2. Public health clinic/Community health clinic
  3. Hospital (in patient)
  4. Emergency room
  5. Sexually Transmitted Disease (STD) Clinic
  6. HIV counseling and testing site
  7. Street outreach program/mobile unit
  8. Correctional facility (jail or prison)
  9. Other location (Specify: \_\_\_\_\_\_\_\_\_)

77 I prefer not to answer

99 Don’t know

***If this is the first time answering this survey go to Section B.***

***If this is not first time doing this survey only go to section B if HTP-1 = “No”.***

***If HTP-1 = “Yes” in previous survey go to section C.***

**SECTION B. Linkage to Care - Initial**

The next questions are about medical appointments to a see a health care provider (doctor, physician’s assistant or nurse) because of a positive HIV test result or to get care for your HIV infection.

HTP-1. Since the last survey, have you been seen by a health care provider after getting a HIV positive test result or for your HIV infection?

1. No
2. Yes

77 I prefer not to answer

***If HTP-1 = “No” or “I prefer not to answer”, go to HTP-2.***

***If HTP-1 = “Yes”, go to HTP-4.***

HTP-2. What are the reasons you have NOT gone to a health care provider after getting a HIV positive test result or for your HIV infection? **Check all that apply.**

1. I don’t want anyone to know I have HIV
2. I felt good and didn’t need to go
3. I didn’t believe that I am HIV positive or want to think about it
4. I didn’t have enough money or health insurance
5. I had other responsibilities such as child care or work
6. I was homeless
7. I was too sick to go
8. I forgot to go or missed my appointment(s)
9. I was unable to get transportation
10. Going to the appointment is inconvenient (location/hours/wait-time, etc.)
11. I don’t know where to go or couldn’t find the right HIV health care provider
12. I have not gone to confirm my HIV test yet
13. Other (specify:\_\_\_\_\_\_)

77 I prefer not to answer

HTP-3. Of these reasons you picked, what is the main reason you did NOT go to a health care provider? **Choose only one.**

***Display response options based on selections in HTP-2.***

***If HTP-1 = “No” or “I prefer not to answer”, go to M-1.***

***If HTP-1 = “Yes”, go to HTP-4 if this is the first time in this section. Else go to M-1.***

HTP-4. How long did it take from the time you found out about your HIV infection to the time you first saw a health care provider?

Give answer in days, weeks or months. (Drop down menu)

\_\_\_\_ days OR \_\_\_\_ weeks OR \_\_\_\_ months

77 I prefer not to answer

HTP-5. How did you get the health care provider’s contact information? (Check all that apply)

1. I called the study phone number
2. I called an AIDS/HIV hotline
3. I called the number in the Oraquick or Home Access package
4. Counselor who tested me gave it to me
5. Partner, friend or family member gave it to me
6. My regular health care provider gave it to me
7. An agency or social service organization gave it to me
8. From Internet/website
9. Other (specify):

HTP-6. Did you make the appointment?

1. No, someone else made the appointment
2. Yes, I made the appointment

77 I prefer not to answer

***If HTP-6 = No, go to HTP-7. Else go to HTP-8***

HTP-7. Who made your appointment with that health care provider? Check only one answer.

1. Counselor from study
2. Counselor from AIDS/HIV hotline
3. Counselor who tested me
4. Partner, friend, or family member
5. My regular health care provider
6. An agency or social service organization
7. Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

77 I prefer not to answer

HTP-8. Did anyone go with you to that appointment?

1. No
2. Yes

77 I prefer not to answer

The next questions are about tests your health care provider may have done.

HTP-9. Did your healthcare provider order a T-cell or CD-4 test?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***If HTP-9 = “Yes” continue to HTP-10; else go to HTP-12***

HTP-10. When was your most recent T-cell or CD-4 test?

\_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ [MM/YYYY]

77 I prefer not to answer

99 I don't know

HTP-11. What was the result of your most recent T-cell or CD-4 test?

1. 500 or more
2. 350-499
3. 201-349
4. 200 or less
5. Results not back yet

77 I prefer not to answer

99 I don't know

HTP-12. Did your healthcare provider order a viral load test?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***If HTP-12 = “Yes” continue to HTP-13; else go to M-1***

HTP-13. When was your most recent viral load test?

\_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ [MM/YYYY]

77 I prefer not to answer

99 I don't know

HTP-14. What was the result of your most recent viral load test?

1. Undetectable
2. Detectable
3. Results not back yet

77 I prefer not to answer

99 I don't know

**HIV Medicines**

M-1. Are you taking HIV medicines prescribed by your doctor (also known as antiretrovirals, ART, or HAART) for your HIV infection?

1. No
2. Yes

77 I prefer not to answer

***If M-1 = “Yes”, proceed to M-2***

***If M-1 ≠ “Yes”, proceed to M-3***

M-2. Since the last survey, which of the following best describes your general experience taking your HIV medicines (also known as antiretrovirals, ART, or HAART)?

1. I take them exactly as prescribed, almost never missing a dose
2. I sometimes skip a dose or forget to take my pills
3. I often skip a dose or forget to take my pills
4. I rarely take my pills as prescribed
5. I do not take my medication at all

77 I prefer not to answer

M-3. What is the **main** reason you are not currently taking any HIV medicines (also known as antiretrovirals, ART, or HAART)? Choose only one reason.

1. I’m not currently going to an HIV health care provider
2. My health care provider advised to delay treatment
3. My CD4 count and viral load are good
4. I don’t have the money or insurance for HIV medicines
5. I don’t want to take HIV medicines
6. I feel fine/healthy and don’t need HIV medicines
7. I am concerned about side effects of HIV medicines
8. I feel depressed or overwhelmed
9. I don’t want to think about being HIV positive
10. I am concerned that I cannot stick to a medication schedule
11. I was/am homeless
12. I am taking alternative or complementary medicines
13. Other reason (specify: \_\_\_\_\_\_ )

77 I prefer not to answer

***Continue to next Section. Section D for Intervention; Section E for Control.***

***If this is the first time answering this survey go to Section B.***

***If this is not first time doing this survey only go to section B if HTP-1 = “No”.***

***If HTP-1 = “Yes” in previous survey go to section C.***

**Section C. Linkage to Care – Follow-Up**

The next questions are about medical appointments to a see a health care provider (doctor, physician’s assistant or nurse) because of a positive HIV test result or to get care for your HIV infection.

HTP-1. Since the last survey, have you been seen by a health care provider for your HIV infection?

1. No
2. Yes

77 I prefer not to answer

***If HTP-1 = “No” or “I prefer not to answer”, go to HTP-2.***

***If HTP-1 = “Yes”, go to HTP-4.***

HTP-2. What are the reasons you have NOT gone to a health care provider after getting a HIV positive test result or for your HIV infection? **Check all that apply.**

1. I don’t want anyone to know I have HIV
2. I felt good and didn’t need to go
3. I didn’t believe that I am HIV positive or want to think about it
4. I didn’t have enough money or health insurance
5. I had other responsibilities such as child care or work
6. I was homeless
7. I was too sick to go
8. I forgot to go or missed my appointment(s)
9. I was unable to get transportation
10. Going to the appointment is inconvenient (location/hours/wait-time, etc.)
11. I don’t know where to go or couldn’t find the right HIV health care provider
12. I have not gone to confirm my HIV test yet
13. Other (specify:\_\_\_\_\_\_)

77 I prefer not to answer

HTP-3. Of these reasons you picked, what is the main reason you did NOT go to a health care provider? **Choose only one.**

***Display response options based on selections in HTP-2.***

***If HTP-1 = “No” or “I prefer not to answer”, go to M-1.***

***If HTP-1 = “Yes”, go to HTP-4 if this is the first time in this section. Else go to M-1.***

The next questions are about tests your health care provider may have done.

HTP-4. Did your healthcare provider order a T-cell or CD-4 test?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***If HTP-4 = “Yes” continue to HTP-5; else go to HTP-7***

HTP-5. When was your most recent T-cell or CD-4 test?

\_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ [MM/YYYY]

77 I prefer not to answer

99 I don't know

HTP-6. What was the result of your most recent T-cell or CD-4 test?

1. 500 or more
2. 350-499
3. 201-349
4. 200 or less
5. Results not back yet

77 I prefer not to answer

99 I don't know

HTP-7. Did your healthcare provider order a viral load test?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***If HTP-7 = “Yes” continue to HTP-8; else go to M-1***

HTP-8. When was your most recent viral load test?

\_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ [MM/YYYY]

77 I prefer not to answer

99 I don't know

HTP-9. What was the result of your most recent viral load test?

1. Undetectable
2. Detectable
3. Results not back yet

77 I prefer not to answer

99 I don't know

**HIV Medicines**

M-1. Are you taking HIV medicines prescribed by your doctor (also known as antiretrovirals, ART, or HAART) for your HIV infection?

1. No
2. Yes

77 I prefer not to answer

***If M-1 = “Yes”, proceed to M-2***

***If M-1 ≠ “Yes”, proceed to M-3***

M-2. Since the last survey, which of the following best describes your general experience taking your HIV medicines (also known as antiretrovirals, ART, or HAART)?

1. I take them exactly as prescribed, almost never missing a dose
2. I sometimes skip a dose or forget to take my pills
3. I often skip a dose or forget to take my pills
4. I rarely take my pills as prescribed
5. I do not take my medication at all

77 I prefer not to answer

M-3. What is the **main** reason you are not currently taking any HIV medicines (also known as antiretrovirals, ART, or HAART)? Choose only one reason.

1. I’m not currently going to an HIV health care provider
2. My health care provider advised to delay treatment
3. My CD4 count and viral load are good
4. I don’t have the money or insurance for HIV medicines
5. I don’t want to take HIV medicines
6. I feel fine/healthy and don’t need HIV medicines
7. I am concerned about side effects of HIV medicines
8. I feel depressed or overwhelmed
9. I don’t want to think about being HIV positive
10. I am concerned that I cannot stick to a medication schedule
11. I was/am homeless
12. I am taking alternative or complementary medicines
13. Other reason (specify: \_\_\_\_\_\_ )

77 I prefer not to answer

***Continue to Section D for Intervention arm; Section E for Comparison arm.***

**Section D. Study Home HIV Tests – Intervention Arm**

TD-1. Since the last survey, how many study home HIV tests did you use on yourself?

TD-1a. Oral fluid HIV test (OraQuick): \_\_\_\_\_ (enter number between 0-2)

TD-1b. Finger-stick blood HIV test (Sure Check): \_\_\_\_ (enter number between 0-2)

If TD-1a > 0 or TD-1b > 0, go to TD-2, else go to TD-3.

TD-2. What are the reasons you used the study home HIV test(s) on yourself? Check all that apply.

Curious about the home HIV test

Wanted to check or confirm my HIV status

Wanted to show someone how to use the home HIV test

Wanted to show someone my results from the home HIV test

Wanted to show someone my results before having sex with him or her

Wanted to show someone my results after having sex with him or her

Other: (please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

TD-3. Since the last survey, did you give away any study home HIV test?

No

Yes

I prefer not to answer

Don't know

***If TD-3=No, go to TD-4.***

***If TD-3= Yes, go to TD-5.***

TD-4. What are the reasons you didn’t give away the study home HIV tests? Check all that apply.

I’m concerned this might affect our friendship

I’m concerned this might affect our sexual relationship

I think they would get upset or angry

I didn’t know I could give them away

I’m afraid they would think I have HIV

I’m concerned about the accuracy of such a test

I’m concerned they would not be able to perform the test correctly

I’m concerned they would not be able to read the result properly

I would rather they talk to a counselor when they get an HIV test

Other reason (Specify\_\_\_\_\_\_\_\_\_\_\_)

I prefer not to answer

Don’t know

Go to next section.

TD-5. How many different people did you offer a study home HIV test and they **refused**?

\_\_\_\_\_\_

TD-6. We want to ask a few questions about each person who received a study home test kit from you.

To help you remember, please write the initial(s) or nickname(s) of the person(s) you gave a study home test to in the corresponding space in the table below. If two people that you gave a study home test kit to have the same initial(s) or nickname, please use different initial(s) or nickname(s) for each person.

|  |  |
| --- | --- |
|  | Initial or Nickname of person you gave the study home test kit |
| OraQuick #1 | 6a |
| OraQuick #2 | 6b |
| Sure Check #1 | 6c |
| Sure Check #2 | 6d |

Secondary user #1 [6a]

The following questions are about [insert initials or nickname of entered in TD-6a]

TD-7. What is [insert initials or nickname of entered in [TD-6a]’s age? Use your best guess if you’re not sure.

\_\_\_\_\_

TD-8. What is [insert initials or nickname of entered in [TD-6a]’s gender ?

Male

Female

Transgender (Male to Female)

Transgender (Female to Male)

TD-9. What is [insert initials or nickname of entered in [TD-6a]’s ethnic/racial background? Check all that apply.

American Indian or Alaska Native

Asian

Black or African American

Hispanic or Latino

Native Hawaiian or Other Pacific Islander

White

TD-10. How long have you known [insert initials or nickname of entered in [TD-6a]?

Less than a month

1 to 3 months

4 to 6 months

7 to 11 months

1 to 3 years

Over 3 years

I prefer not to answer

TD-11. To the best of your knowledge, does [insert initials or nickname of entered in [TD-6a] have sex with:

Men only

Women only

Both men and women

I don’t know

Prefer not to answer

TD-12. To the best of your knowledge, does [insert initials or nickname of entered in [TD-6a] use intravenous drugs?

Yes

No

I don’t know

Prefer not to answer

TD-13. Who is [insert initials or nickname of entered in [TD-6a] ? Check only one.

A main sexual partner (Someone you feel committed to above all others)

A casual sexual partner (Someone you do not feel committed to above all others)

A family member (not sexual partner)

A friend (not sexual partner)

A stranger (not sexual partner)

An acquaintance (not sexual partner)

Other (please specify: \_\_\_\_\_\_\_\_\_)

If TD-13 = “Family member, friend, acquaintance, stranger or other”, go to Box before TD-15

If TD-13 = “Main,” go to TD-16.

**If TD-13=”Casual,” go to TD 14.**

TD-14. How would you define your relationship with **[insert initials or nickname of entered in TD-6a]** ?

Casually dating but not serious

Having sex with but not dating

One night stand/Stranger/Anonymous

Pay him/her or he/she pays me for sex (e.g., exchanging money, drugs, housing, food, etc. for sex or the other way around)

I prefer not to answer

For study participants who gave only 1 HIV test(s) to [6a]:

BOX: The following questions are about that [insert “OraQuick” or “Sure Check” based on response from [TD-6] HIV test you gave to [6a].

For study participants who gave more than 1 HIV test(s) to [4a]:

BOX: The following questions are about the FIRST HIV test [insert “OraQuick” or “Sure Check” based on response from TD-6 you gave to [insert initials or nickname of entered in TD-6a].

TD-15. To the best of your knowledge, when did [insert initials or nickname of entered in TD-6a use the [OraQuick or Sure Check] test that you gave him/her?

\_\_\_\_\_\_/\_\_\_\_\_\_\_ Month/Day

\_\_ \_\_ I don’t know

TD-17. What was the result?

Negative

Positive

Invalid

I prefer not to answer

I don't know

For study participants who gave more than 1 HIV test(s) to [6a] go to TD18; else go to skip pattern before TD 20

BOX: The following questions are about the SECOND or MOST RECENT HIV test ([insert “OraQuick” or “Sure Check” based on response from TD-4]) you gave to [insert initials or nickname of entered in TD-4a].

TD-18. To the best of your knowledge, when did [insert initials or nickname of entered in TD-4a] use the SECOND or MOST RECENT HIV test ([insert “OraQuick” or “Sure Check” based on response from TD-4]) you gave him/her?

\_\_\_\_\_\_/\_\_\_\_\_\_\_ Month/Day

77 I prefer not to answer

99 I don't know

TD-19. What was the result of the SECOND or MOST RECENT HIV test ([insert “OraQuick” or “Sure Check” based on response from TD-4]) you gave to [insert initials or nickname of entered in TD-4a]?

Negative

Positive

Invalid

77 I prefer not to answer

99 I don't know the result of the test

If TD-17 or TD-19 = “Positive” go to TD-20, else go to TD-21

TD-20. Did [insert initials or nickname of entered in TD-6a] already know she/he was HIV-positive?

No

Yes

I don’t know

Prefer not to answer

TD-21. To the best of your knowledge, did [insert initials or nickname of entered in TD-6a] call the study number for information, counseling or a referral?

No

Yes

77 I prefer not to answer

99 I don't know

TD-22. To the best of your knowledge, did [insert initials or nickname of entered in TD-6a] go to a health care provider for more tests or start care after the HIV positive test result from the [insert “OraQuick” or “Sure Check” based on response from TD-6] HIV test?

No

Yes

I don’t know

Prefer not to answer

TD-23. Did you help [insert initials or nickname of entered in TD-6a] get linked into care (e.g., encouraging them to call the study number, going with them to see a HIV health care professional)?

No

Yes

I don’t know

Prefer not to answer

If TD-13 = “main sexual partner” or “casual sexual partner” AND TD-6 indicates that [6a] received only 1 test go to TD-24

If TD-13 ≠ “main sexual partner” or “casual sexual partner” go to next section.

TD-24. You mentioned [insert initials or nickname of entered in TD-6a] is a sexual partner.

Did you have anal or vaginal sex with [insert initials or nickname of entered in TD-6a] after [insert initials or nickname of entered in TD-6a] used the [insert “Oraquick” or “Sure Check” based on response from TD-6] HIV home test you gave him/her?

No

Yes

77 I prefer not to answer

99 I don't know

If TD-24 = “Yes” go to TD-25

If TD-24 = “No” go to TD-27

Else go to End Section Box.

TD-25.Think about the time or times you had anal or vaginal sex with [insert initials or nickname of entered in TD-6a] after [insert initials or nickname of entered in TD-6a] used the HIV test you gave him/her.

Did you have sex without condoms with [insert initials or nickname of entered in TD-6a]?

No

Yes

77 I prefer not to answer

99 I don't know

IF TD-8 is not “Female” and TD-25 = “Yes”, go to TD-26. Else go to End Section Box.

TD-26. When you had sex without condoms with [insert initials or nickname of entered in TD-4a] after [insert initials or nickname of entered in TD-6a] *took the test,* were you …

(Check only one)

\_\_ \_\_ Both top and bottom

\_\_ \_\_ Top only

\_\_ \_\_ Bottom only

77 I prefer not to answer

99 I don't know

TD-27. What was the reason for not having sex with [insert initials or nickname of entered in TD-4a] after [insert initials or nickname of entered in TD-4a] took the test?

There was no opportunity

I was influenced by the result of the HIV test

Other

77 I prefer not to answer

99 I don't know

End Section Box: Repeat TD-7 to TD-27 for 6b, 6c, 6d if applicable. Else go to next section.

**Section E. Sexual Behavior**

We will now ask you some questions about your sex partners since the last survey. We only want to know about partners you had anal or vaginal sex with since **[*insert date from last survey*]**. “Vaginal sex” means you put your penis in her vagina. “Anal sex" means you put your penis in her butt.

SX-1. Since the last survey, did you have anal or vaginal sex with:

1. Only men
2. Only women
3. Both men and women
4. Nobody

***If SX-1 = “Only men”, ask only Male Sex Partner questions.***

***If SX-1 = “Only women”, ask only Female Sex Partner questions.***

***If SX-1 = “Both men and women”, ask first Female Sex Partner followed by Male Sex Partner questions.***

***If SX-1 = “Nobody”, skip to the next section.***

***If SX-1 is not answered, prompt “Please enter a response”.***

**Female Sex Partner Questions**

The next questions are about women you had vaginal or anal sex with since the last survey.

FX-1. Since the last survey, with how many different women did you have vaginal or anal sex?

\_\_\_ \_\_\_ Number of women (1 to N)

77 I prefer not to answer

FX-2. With how many of these **[*FX-1*]** women did you have vaginal or anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of women (0 to N)

77 I prefer not to answer

***Check to make sure FX2 ≤ FX1.***

***If not, then display “***The number of women you had sex without using a condom or not using it the whole time cannot be more than the number of women you had vaginal or anal sex with Since the last survey. Please carefully re-enter your response.***”, and loop back to enter the number.***

FX-3. Since the last survey, how many of these **[*FX-2]*** women you had vaginal or anal sex without using a condom were:

1. HIV positive? \_\_\_ \_\_\_ Number of women (0 to N)
2. HIV negative? \_\_\_ \_\_\_ Number of women (0 to N)
3. Women whose HIV status you did not know? \_\_\_ \_\_\_ (0 to N)

77 I prefer not to answer

***Check to make sure that the numbers in FX-3 add up to the total N from FX-2.***

***If not, then display “***The number of HIV positive, HIV negative and HIV status unknown partners must add up to **[*FX-2*].** Please carefully re-enter your responses.***”, and loop back to enter the numbers.***

**Male Sex Partner Questions**

The next questions are about men you had anal sex with since the last survey. “Anal sex" means you put your penis in his butt, or he puts his penis in your butt.

SX-2. Since the last survey, that is, since **[*insert date from last survey*]**, with how many different men did you have anal sex?

\_\_\_ \_\_\_ Number of men (1 to N)

77 I prefer not to answer

***If SX-2 = 1 ask Partner 1 questions***

***If SX-2 = 2 ask Partner 1 and Partner 2 questions***

***If SX-2 = 3 ask Partner 1, Partner 2 and Partner 3 questions***

***If SX-2 = 4 ask Partner 1, Partner 2, Partner 3 and Partner 4 questions***

***If SX-2 ≥ 5 ask Partner 1, Partner 2, Partner 3, Partner 4 and Questions for ≥ 5 partners***

SX-3. Please enter a nickname or initials for the **[*insert number from SX-2 if SX-2 < 4, or insert 4*]** most recent men you had anal sex with since **[*insert date from last survey*]**.

We do not want to know the names of your partners. Please choose a nickname or initials that will best help you remember that person. If [***TD-4a, TD-4b, TD-4c or TD-4d***] is/are part of the most recent men you had sex with please use the same initials or nickname.

***Display options below based on number from SX-2***

1. Partner 1 \_\_\_\_\_\_\_\_\_\_
2. Partner 2 \_\_\_\_\_\_\_\_\_\_
3. Partner 3 \_\_\_\_\_\_\_\_\_\_
4. Partner 4 \_\_\_\_\_\_\_\_\_\_

***Ask partner-specific questions based on number from SX-2.***

**Partner 1:**

SX-4. What is/was your relationship with **[*Partner 1*]**?

1. Main Partner, Serious relationship, Boyfriend (Someone you feel committed to above all others)
2. Casually dating but not serious
3. Having sex with but not dating
4. One night stand/Stranger/Anonymous

77 I prefer not to answer

***If SX-4 = 1, 2 or 3 go to SX-5 else skip to SX-6.***

SX-5. How long have you been with **[*Partner 1*]**?

1. Less than a month
2. 1 to 3 months
3. 4 to 6 months
4. 7 to 11 months
5. 1 to 3 years
6. Over 3 years

77 I prefer not to answer

SX-6. What is ***[Partner 1]’s*** race/ethnicity? Check all that apply.

1. American Indian or Alaska Native
2. Asian
3. Black or African American
4. Hispanic or Latino
5. Native Hawaiian or Other Pacific Islander
6. White

77 I prefer not to answer

SX-7. To the best of your knowledge, what was [***Partner 1***]'s HIV status?

1. I know this person is HIV negative
2. I think this person is HIV negative
3. I don’t know this person’s HIV status
4. I think this person is HIV positive
5. I know this person is HIV positive

77 I prefer not to answer

SX-8. Since the last survey, how many times did you and **[*Partner 1*]** have anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of times (0 to N)

77 I prefer not to answer

***If SX-7 = 0 or “I prefer not to answer”, skip SX-8***

SX-9. Since the last survey, when you and **[*Partner 1*]** had anal sex without a condom were you the top (your penis in his butt), bottom (his penis in your butt) or both? (Check only one)

1. Both top and bottom
2. Top only
3. Bottom only

77 I prefer not to answer

**Partner 2:**

SX-10. What is/was your relationship with **[*Partner 2*]**?

1. Main Partner, Serious relationship, Boyfriend (Someone you feel committed to above all others)
2. Casually dating but not serious
3. Having sex with but not dating
4. One night stand/ Stranger/Anonymous

77 I prefer not to answer

***If SX-10 = 1, 2 or 3 go to SX-11 else skip to SX-12.***

SX-11. How long have you been with **[*Partner 2*]**?

1. Less than a month
2. 1 to 3 months
3. 4 to 6 months
4. 7 to 11 months
5. 1 to 3 years
6. Over 3 years

77 I prefer not to answer

SX-12. What is ***[Partner 2]***’s race/ethnicity? Check all that apply.

1. American Indian or Alaska Native
2. Asian
3. Black or African American
4. Hispanic or Latino
5. Native Hawaiian or Other Pacific Islander
6. White

77 I prefer not to answer

SX-13. To the best of your knowledge, what was [***Partner 2***]'s HIV status?

1. I know this person is HIV negative
2. I think this person is HIV negative
3. I don’t know this person’s HIV status
4. I think this person is HIV positive
5. I know this person is HIV positive

77 I prefer not to answer

SX-14. Since the last survey, how many times did you and **[*Partner 2*]** have anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of times (0 to N)

77 I prefer not to answer

***If SX-14 = 0 or “I prefer not to answer”, skip SX-15***

SX-15. Since the last survey, when you and **[*Partner 2*]** had anal sex without a condom were you the top (your penis in his butt), bottom (his penis in your butt) or both? (Check only one)

1. Both top and bottom
2. Top only
3. Bottom only

77 I prefer not to answer

**Partner 3:**

SX-16. What is/was your relationship with **[*Partner 3*]**?

1. Main Partner, Serious relationship, Boyfriend (Someone you feel committed to above all others)
2. Casually dating but not serious
3. Sleeping with but not dating
4. One night stand/ Stranger/Anonymous

77 I prefer not to answer

***If SX-16 = 1,2 or 3, go to SX-17 else skip to SX-18.***

SX-17. How long have you been with **[*Partner 3*]**?

1. Less than a month
2. 1 to 3 months
3. 4 to 6 months
4. 7 to 11 months
5. 1 to 3 years
6. Over 3 years

77 I prefer not to answer

SX-18. What is ***[Partner 3]’s*** race/ethnicity? Check all that apply.

1. American Indian or Alaska Native
2. Asian
3. Black or African American
4. Hispanic or Latino
5. Native Hawaiian or Other Pacific Islander
6. White

77 I prefer not to answer

SX-19. To the best of your knowledge, what was [***Partner 3***]'s HIV status?

1. I know this person is HIV negative
2. I think this person is HIV negative
3. I don’t know this person’s HIV status
4. I think this person is HIV positive
5. I know this person is HIV positive

77 I prefer not to answer

SX-20. Since the last survey, how many times did you and **[*Partner 3*]** have anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of times (0 to N)

77 I prefer not to answer

***If SX-20 = 0 or “I prefer not to answer”, skip SX-21***

SX-21. Since the last survey, when you and **[*Partner 3*]** had anal sex without a condom were you the top (your penis in his butt), bottom (his penis in your butt) or both? (Check only one)

1. Both top and bottom
2. Top only
3. Bottom only

77 I prefer not to answer

**Partner 4:**

SX-22. What is/was your relationship with **[*Partner 4*]**?

1. Main Partner, Serious relationship, Boyfriend (Someone you feel committed to above all others)
2. Casually dating but not serious
3. Having sex with but not dating
4. One night stand/ Anonymous

77 I prefer not to answer

***If SX- 22= 1,2 or 3, go to SX- 23 else skip to SX-24.***

SX-23. How long have you been with **[*Partner 4*]**?

1. Less than a month
2. 1 to 3 months
3. 4 to 6 months
4. 7 to 11 months
5. 1 to 3 years
6. Over 3 years

77 I prefer not to answer

SX-24. What is ***[Partner 4]’s*** race/ethnicity? Check all that apply.

1. American Indian or Alaska Native
2. Asian
3. Black or African American
4. Hispanic or Latino
5. Native Hawaiian or Other Pacific Islander
6. White

77 I prefer not to answer

SX-25. To the best of your knowledge, what was [***Partner 4***]'s HIV status?

1. I know this person is HIV negative
2. I think this person is HIV negative
3. I don’t know this person’s HIV status
4. I think this person is HIV positive
5. I know this person is HIV positive

77 I prefer not to answer

SX-26. Since the last survey, how many times did you and **[*Partner 4*]** have anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of times (0 to N)

77 I prefer not to answer

***If SX- 26= 0 or “I prefer not to answer”, skip SX- 27.***

SX-27. Since the last survey, when you and **[*Partner 4*]** had anal sex without a condom were you the top (your penis in his butt), bottom (his penis in your butt) or both? (Check only one)

1. Both top and bottom
2. Top only
3. Bottom only

77 I prefer not to answer

**Questions for ≥ 5 male sex partners**

The next questions are about the **[(*SX-2) – 4*]** men you had anal sex with **since the last survey** other than **[*insert nicknames from SX-3*].**

SX-28. With how many of these **[(*SX-2) – 4*]** men did you have anal sex **without using a condom or not using it the whole time**?

\_\_\_ \_\_\_ Number of times (0 to N)

77 I prefer not to answer

***Check to make sure SX-28 ≤ (SX-2) – 4.***

***If not, then display “***The number of other men you had anal sex without a condom cannot be more than the number of other men you had anal sex **since the last survey**. Please carefully re-enter your response.***”, and loop back to enter the number.***

SX-29. Since the last survey, how many of these **[*SX-28*]** men you had anal sex without using a condom were:

HIV positive? \_\_\_ \_\_\_ Number of men (0 to N)

With how many were you the top only? \_\_\_ \_\_\_ Number of men (0 to N)

With how many were you the bottom only? \_\_\_ \_\_\_ Number of men only (0 to N)

With how many were you both (top and bottom)? \_\_\_ \_\_\_ Number of men (0 to N)

HIV negative? \_\_\_ \_\_\_ (0 to N)

With how many were you the top only? \_\_\_ \_\_\_ Number of men (0 to N)

With how many were you the bottom only? \_\_\_ \_\_\_ Number of men only (0 to N)

With how many were you both (top and bottom)? \_\_\_ \_\_\_ Number of men (0 to N)

Men whose HIV status you did not know? \_\_\_ \_\_\_ (0 to N)

With how many were you the top only? \_\_\_ \_\_\_ Number of men (0 to N)

With how many were you the bottom only? \_\_\_ \_\_\_ Number of men only (0 to N)

With how many were you both (top and bottom)? \_\_\_ \_\_\_ Number of men (0 to N)

77 I prefer not to answer

99 I don't know

***Check to make sure that the numbers in SX-25 add up to the total N from SX-24.***

***If not, then display “***The number of HIV positive, HIV negative and HIV status unknown partners must add up to **[*SX-24*].** Please carefully re-enter your responses.***”, and loop back to enter the numbers.***

**Section E. Partner Risk (PR)**

For the following questions, think about the **[*SX-*2] men** you had anal sex with since the last survey **[*insert date of last survey*]**.

PR-1. How many of these **[*SX-*2]** men were:

1. Younger than ***[ES1 – 5]***? \_\_\_ \_\_\_ (0 to N)
2. Older than ***[ES1 + 5]***? \_\_\_ \_\_\_ (0 to N)
3. Within 5 years of your age? \_\_\_ \_\_\_ (0 to N)

77 I prefer not to answer

***Check to make sure that the numbers in PR-1 add up to the total N from SX-2.***

***If not, then display “***The number of younger men, older men and men within 5 years of your age must add up to **[*SX-2*].** Please carefully re-enter your responses.***”, and loop back to enter the numbers.***

PR-2. Where did you first meet these **[*SX-*2]** men? Check all that apply.

1. Adult novelty store (sex shop)
2. Bar/dance club
3. Bathhouse, sex club, or gay resort
4. Circuit party or Rave
5. Gym
6. Park, outdoors or other public space
7. Private sex party
8. Public restroom
9. Social organization/community event (e.g., fundraiser, Pride parade, etc.)
10. Gay specific dating and hook-up site (Manhunt, Adam4Adam, Grindr, Scruff)
11. General dating and hook-up site (Craigslist, Match.com, OKCupid)
12. Social networking sites (e.g., Facebook, Google+, Twitter)
13. Other (Specify\_\_\_\_\_\_\_\_\_ )

77 I prefer not to answer

PR-3. Since the last survey, did you give or receivethings like money or drugs in exchange for sex?

1. No
2. Yes

77 I prefer not to answer

PR-4. Since the last survey, did you have sex with someone who ever injected drugs other than those prescribed for them?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

PR-5. Since the last survey, did you have sex with someone who has other sex partners?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

PR-6. Since the last survey, before having sex with a new partner how often did you discuss each other’s HIV status?

1. Always
2. Usually
3. Sometimes
4. Rarely
5. Never
6. No new partners Since the last survey

77 I prefer not to answer

PR-7. Since the last survey, did you have anal sex with more than one man in the same encounterwithout using a condom or not using it the whole time?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***If PR-7 = “Yes” continue to PR-8; else skip to PR-9.***

PR-8. What is the HIV status of those men? (Check all that apply)

1. They were negative
2. They were positive
3. I did not know their HIV status

77 I prefer not to answer

***Only for 12 months questionnaire:***

K-2. Since you enrolled in this study – approximately 12 months ago, how many different sex partners, both male and female, have you had?

Total number of sex partners: \_\_\_

Total number of male partners: \_\_\_\_\_\_

Total number of female partners: \_\_\_\_\_\_

77 I prefer not to answer

99 I don't know

K-3. How many of these [insert number from H-3] partners were:

HIV negative \_\_\_

HIV positive \_\_\_

Not sure of their HIV status \_\_\_

77 I prefer not to answer

99 I don't know

**Section F. Drug Use**

**Injection Drug Use**

The next questions are about injection drug use. This means injecting drugs yourself or having someone who isn't a health care provider inject you. Please remember that your answers will remain private.

ID-2. Since the last survey, did you inject or shoot up any drugs other than those prescribed for you? By shooting up, we mean using drugs with a needle, either by mainlining, skin popping, or muscling.

1 No

2 Yes

77 I prefer not to answer

***If ND-1 ≠ “Yes”, skip to Non-injection drug use.***

ID-3. Since the last survey, how often did someone else use needles or syringes that you had already used?

1 Never

2 Rarely

3 About half the time

4 Most of the time

5 Always

77 I prefer not to answer

**Non-Injection Drug Use (ND)**

The following questions are about times when you may have used drugs but did not inject them. This includes smoking, snorting, inhaling or ingesting drugs such as marijuana, methamphetamine, cocaine, crack, club drunks, painkillers, or poppers.

ND-1. Since the last survey, have you used any drugs in ways other than injecting?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***If ND-1 ≠ “Yes”, skip to next section.***

ND-2. Since the last survey, which of the following drugs did you use in ways other than injecting? Check all that apply.

1. Marijuana
2. Heroin
3. Powdered cocaine
4. Crack cocaine
5. Poppers (amyl nitrite)
6. X or Ectasy
7. Painkillers such as Oxycontin, Vicodin, or Percocet
8. Downers such as Valium, Ativan, or Xanax
9. Methamphetamine (meth, crystal meth,tina, speed, or ice)
10. Hallucinogens such as LSD or mushroom
11. Special K (ketamine)
12. GHB
13. Bath Salts
14. Viagra, Levitra or Cialis
15. Other drug

77 I prefer not to answer

99 I don't know

ND-3. Since the last survey, have you used Viagra, Levitra or Cialis in combination with other drugs, such as Methamphetamine?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

***Only for Intervention Arm at 12 month***

K-5. The window period for HIV tests is the time period from when someone is infected until the test can reliably detect antibodies to the virus. What do manufacturers of the rapid tests used in this study state that the window period is?

1. One month
2. Two months
3. Three months
4. Four months
5. Six months

77 I prefer not to answer

99 I don't know

**Alcohol Use (AL) (12months only)**

One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. Please note that a 40 ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks ***Display images of alcohol drink size.***

AL-1. During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

1. No
2. Yes

77 I prefer not to answer

99 I don't know

AL-2. Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks on an occasion?

\_ \_ Number of times

88 None

77 I prefer not to answer

99 I don't know

AL-3. During the past 30 days, what is the largest number of drinks you had on any occasion?

\_\_ \_\_ Number of drinks

77 I prefer not to answer

99 I don't know

**Coercion and Abuse – Intervention Arm Only**

The next few questions are about things that may have happened when people used the home HIV tests. Please remember that all answers will be kept strictly confidential.

CA-1. During the course of the study did you pressure someone to use one of the study home HIV tests?

No

Yes

77 I prefer not to answer

99 I don't know

***If CA-1 = “Yes” go to CA-2, else go to CA-5.***

CA-2. Who was this person?

1. Sex partner
2. Family member
3. Friend
4. Stranger
5. Other

77 I prefer not to answer

***If CA-2 = “sex partner” go to CA-3, else go to CA-5.***

CA-3. During the course of this study, did you do any of the following? (Check all that apply)

1. Pressure a sexual partner to use one of the study home HIV tests.
2. Threaten to leave or break up with a sexual partner if they did not test using one of the study home HIV tests
3. Yell or curse at a sexual partner who refused to test using one of the study home HIV tests
4. Break up with a sexual partner who refused to test using one of the study home HIV tests
5. Threaten to hit a sexual partner if they did not test using one of the study home HIV tests
6. Hit, punch, or kick a sexual partner who refused to test using one of the study home HIV tests
7. Physically force a sexual partner to test using one of the study home HIV tests

77 I prefer not to answer

CA-4. During the course of this study, did you do any of the following after a sexual partner tested using one of the study home HIV tests? (Check all that apply)

1. Threaten to leave or break up with a sexual partner because of their test result
2. Yell or curse at a sexual partner because of their test result
3. Break up with a sexual partner because of their test result
4. Threaten to hit a sexual partner because of their test result
5. Hit, punch, or kicked a sexual partner because of their test result

77 I prefer not to answer

CA-5. During the course of the study did someone pressure you to use one of the study home HIV tests?

No

Yes

77 I prefer not to answer

***If CA-5 = “Yes” go to CA-6, else go to end of section***

CA-6. Who was this person?

1. Sex partner
2. Family member
3. Friend
4. Stranger
5. Other

77 I prefer not to answer

***If CA-6 = “sex partner” go to CA-7, else go to end of section***

CA-7. Did any of the following occur between you and a sexual partner prior to you using one of the study home HIV tests? (Check all that apply)

1. He/she pressured you to test yourself
2. He/she threatened to leave or break up with you if you did not test yourself
3. He/she yelled or cursed at you when you refused to test yourself
4. He/she broke up with you when you refused to test yourself
5. He/she threatened to hit you if you did not test yourself
6. He/she hit, punched, or kicked you when you refused to test yourself
7. He/she forced you to test yourself

77 I prefer not to answer

CA-8. Did any of the following occur between you and a sex partner after you tested yourself using one of the study home HIV tests? (Check all that apply)

1. He/she threatened to leave or break up with you
2. He/she yelled or cursed at you
3. He/she broke up with you
4. He/she threatened to hit you
5. He/she hit, punched, or kicked you

77 I prefer not to answer

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AUTO3.**  Time Ended Survey: \_\_ \_\_:\_\_ \_\_ : \_\_ \_\_ [24 Hour time HH:MM:SS]