

## eSTAMP part 4 Reporting of Home-test Results

# KNOW at HOME

Form Approved

OMB No 0920-XXXX

Expiration Date XX/XX/XXXX

Public reporting burden of this collection of information is estimated to average 5 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)

### \* How did you get the home rapid HIV test kit?

*Choose one of the following answers*

- I was mailed my test as part of KNOWatHOME (I am a KNOWatHOME participant) [Link to page for participant login]
- I was given my test by someone I know (I am not a KNOWatHOME participant) [Link to page to enter kit number]

**NEXT**

**EXIT AND CLEAR SURVEY**

**This survey is currently not active. You will not be able to save your responses.**

0%  
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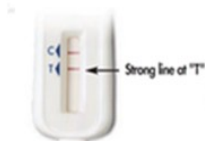
Group D1  
OraQuick Results Reporting

## OraQuick Results Reporting

What was the result from your OraQuick test?  
Choose one of the following answers

- Positive
- Negative
- Not sure

Please select the image that most looks like your test stick:  
Choose one of the following answers



- Some lines but my results do not look like the above examples
- No lines on the test stick

Resume later

Next

Exit and clear survey

This survey is currently not active. You will not be able to save your responses.

# KNOW at HOME

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Group A2  
OraQuick Results Reporting

• You mentioned that you are "Not sure" about your OraQuick test result. What happened when you tried to run the test?  
Check any that apply

- I did not understand the instructions
- I spilled the liquid from the test tube
- The test stick got dirty before I was able to swipe my gums
- I could not swipe the test stick on my gums properly
- I did not put the test stick into the test tube
- I did not time the test correctly
- I did not follow steps in the order described in the instructions
- There were no lines on the test stick
- I could not see the lines on the test stick clearly
- I did not understand what the lines on the test stick meant
- I think a part of the test kit was missing
- Other (specify:)

Resume later

Next

Exit and clear survey

This survey is currently not active. You will not be able to save your responses.

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Group C2

Sure Check Results Reporting

Please tell us the result of your finger-stick blood HIV test (Sure Check), and then select an image that most looks like your test device.

• What was the result from your Sure Check test?  
Choose one of the following answers

- Positive
- Negative
- Not sure
- Test is not working

• Please select the image that most looks like your test device:  
Choose one of the following answers



Some lines but my results do not look like the above examples

Resume later

Next




Exit and clear survey

This survey is currently not active. You will not be able to save your responses.

# KNOW at HOME

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## \* When did you test yourself with OraQuick?

Month  Day  Year 

## \* What was the result from your OraQuick test?

*Choose one of the following answers*

- Positive
- Negative
- Test is not working (results do not look like example OR there are no lines on the stick)

NEXT

EXIT AND CLEAR SURVEY

This survey is currently not active. You will not be able to save your responses.

# KNOW at HOME

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## \* Have you tested for HIV since the last survey, that is, since [insert calculated month and year]?

*Choose one of the following answers*

- No
- Yes
- I prefer not to answer

## \* Have you tested for HIV since the last survey, that is, since [insert calculated month and year]?

*Check any that apply*

- No
- Yes, I tested with the tests I received by mail from this study
- Yes, I tested some other way
- I prefer not to answer

# KNOW at HOME

0%  100%

## \* What is the main reason you have not tested for HIV since the last survey?

Choose one of the following answers

- I tested using the tests received by mail from this study [show only for intervention arm]
- I think I'm at low risk for HIV infection
- I am afraid to find out I have HIV
- I don't have time
- I don't know where to go for a test
- I don't have enough money or insurance for a test
- I don't want my friends and family to know that I got tested
- I don't want my sex partners to know that I got tested
- If I test positive I won't be able to get treatment
- I don't believe that treatment is effective
- If I test positive I will be rejected by my friends and family
- I do not want my result to be reported to the government
- Other reason (specify):
- I prefer not to answer

# KNOW at HOME

0%  100%

## \* Since the last survey, where have you tested for HIV?

Check any that apply

- Private doctor's office
- HIV counseling and testing site
- Public health clinic / community health clinic
- Street outreach program / mobile unit
- Sexually transmitted disease clinic
- Emergency room
- Hospital (inpatient)
- Correctional facility (jail or prison)
- Home or other private location
- Other location (specify):
- I prefer not to answer

## \* Since the last survey, when did you have your most recent HIV test?

# KNOW at HOME

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Thank you for reporting your home HIV test results. Questions marked with a **red asterisk (\*)** must be answered to move forward. You may choose to not answer other questions.

**Emory University and MANILA Consulting Group, Inc. are conducting the study, which is funded by the Centers for Disease Control and Prevention (CDC).**

**Select link below to watch video on home HIV testing:**

**OraQuick Video English**

**OraQuick Video Spanish**

**Sure Check Video English**

**Sure Check Video Spanish**

**NEXT**

**EXIT AND CLEAR SURVEY**