

**“Community-based Organization Outcome Monitoring Projects for CBO HIV  
Prevention Services Clients”**

**Attachment 5d#**

**Category 2 Follow-up (3, 6, and 9-months interview)**

Public reporting burden of this collection of information is estimated to average 30 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-New)

**General Information- to be completed by staff member**

Complete the General Information section prior to administering the interview.

**G1. Name of the CBO (Choose one)**

- TBD
- TBD
- TBD

**G2. CBO-OMP ID:**

\_\_\_\_\_

**G3. Participant Screener ID:**

\_\_\_\_\_

**G4. Staff ID:**

\_\_\_\_\_

**G5. Interview date:**

\_\_\_/\_\_\_/\_\_\_ (MM/DD/YYYY)

**G6. Interview site: (Choose one)**

- TBD
- TBD
- TBD

**G7. Interview time point: (Choose one)**

- Time 2 (three month follow-up)
- Time 3 (six month follow-up)
- Time 4 (nine month follow-up)

**G8. Interview administered by: (Choose one)**

- Provider (in person)
- Provider (on phone)

**G9. Since last interview date (MM/DD/YYYY), what new CBO-HPS referrals were provided? (Choose all that apply from list below. Any referrals made prior to the last interview, as captured in previous interviews, will be automatically populated in this list.)**

**Pre-exposure prophylaxis (PrEP) and Non-occupational Post-Exposure Prophylaxis (nPEP):**

- Pre-exposure prophylaxis (PrEP)
- Non-occupational Post-exposure Prophylaxis (nPEP)

**HIP behavioral interventions: (Note: these may be known by different names at each CBO.)**

- Community PROMISE
- d-up!
- Mpowerment
- Popular Opinion Leader
- Sister to Sister
- Personalized Cognitive Counseling (PCC)
- VOICES/VOCES
- Safe in the City

- € Many Men, Many Voices (3MV)
- € Other CDC-supported evidenced-based intervention

#### **HIV Testing**

- € HIV testing

#### **Screening and treatment for STDs, Hepatitis, and TB**

- € Screening for STDs syphilis, gonorrhea, and chlamydia
- € Treatment for STDs syphilis, gonorrhea, and chlamydia
- € Screening for hepatitis
- € Vaccination for hepatitis
- € Treatment for hepatitis
- € Screening for TB
- € Treatment for TB

#### **Other prevention services**

- € Insurance navigation and enrollment
- € Mental health counseling and services
- € Substance abuse treatment and services
- € Housing
- € Transportation services (to and from HIV prevention and medical care appointments)
- € Employment services
- € Basic education continuation and completion services
- € Sex education, including HIV education (e.g., risk reduction programs, school-based HIV prevention providers)

## Participant Interview

**Interviewer:** Welcome and thank you for participating. This interview will cover a variety of topics related to your experiences with different HIV-related services. For some of these experiences, we will ask you about them during each interview. But there will be other information that we only ask you once. I want to assure you that anything you tell me will be kept private. This interview will be about 20 minutes. Feel free to stop me at any time if you have questions. Do you have any questions before we begin? Let's get started.

## CBO-HPS Referrals and Services

The questions below will be based on how G9 is populated.

(For those referred to PrEP):

## PrEP Referral, Linkage, and Use

(For people who were referred to PrEP since the last interview, ask all questions in this section as shown.) This includes clients who received a second (or third, etc.) referral to PrEP, as well as clients whose first referral to PrEP occurred after the last interview.

(For people who were referred to PrEP prior to the last interview):

- If at the last interview they reported they had not gone to the first appointment, then
  - Start with questions about first appointment
- If at the last interview they reported they had not gone to the second appointment, then
  - Start with questions about second appointment
- If at the last interview they reported they had not been prescribed PrEP (for any reason other than being HIV-positive), then
  - Start with question about getting a prescription from PrEP
- If at the last interview they reported they had not taken any pills yet, then
  - Start with question about taking pills
- If at the last interview they reported they were not currently taking the pills, then
  - Start with question about currently taking meds

**Interviewer:** The next set of questions refer to [CBO] giving you a referral to get started on PrEP. For these questions, when we say "health care provider" we mean a medical doctor or clinician who can prescribe PrEP and then monitor people as they are taking it.

**Interviewer:** You received a referral from [CBO] for PrEP on [MM/DD/YYYY].

**1. Which of the following things were you offered? (Check all that apply)**

- Only contact information for doctor, nurse, or other healthcare provider
- Help making an appointment with a healthcare provider
- Help with transportation to healthcare provider
- Someone to go with you to your 1st PrEP appointment with a health care provider
- Help figuring out if you qualified for free or low-cost PrEP
- Something else (specify: \_\_\_\_\_)

(Questions about first PrEP appointment):

**2. Did you go to your first PrEP appointment (i.e., with the health care provider)? (Choose one)**

- Yes (Go to question that asks about the date of the first appointment)
- No, it is scheduled but hasn't happened yet (Go to questions for next referral)

- No, did not go for another reason
- Declined to answer
- Don't know

**3. I'm going to read you a list of possible reasons people who were referred to PrEP may not have gone to that first PrEP appointment. Please tell me whether or not each reason applies to you. Is one of the reasons...?**

(Only ask questions in this section if participant indicates that they did not go to first appointment for another reason, or they declined to answer, or indicated don't know.)

- ...because you had difficulties scheduling an appointment?**
  - Yes
  - No
  - Declined to answer
  - Don't know
- ...because you couldn't get time off of work for the appointment?**
  - Yes
  - No
  - Declined to answer
  - Don't know
- ...because you couldn't find childcare?**
  - Yes
  - No
  - Declined to answer
  - Don't know
- ...because you don't think you are at risk for HIV?**
  - Yes
  - No
  - Declined to answer
  - Don't know
- ...because you don't want to be on PrEP?**
  - Yes
  - No
  - Declined to answer
  - Don't know
- ...because you don't believe that taking PrEP would protect you from HIV?**
  - Yes
  - No
  - Declined to answer
  - Don't know
- ...because you don't want people to think that you have HIV?**
  - Yes
  - No
  - Declined to answer
  - Don't know
- ...because you haven't liked or trusted healthcare providers?**
  - Yes

- No
- Declined to answer
- Don't know

**i. ...because of problems with money or health insurance?**

- Yes
- No
- Declined to answer
- Don't know

**j. ...because you've been drinking or using drugs?**

- Yes
- No
- Declined to answer
- Don't know

**k. ...because you've been depressed or been having other mental health problems?**

- Yes
- No
- Declined to answer
- Don't know

**l. ...because you've been physically sick or hospitalized?**

- Yes
- No
- Declined to answer
- Don't know

**m. ...because you've been in prison or jail?**

- Yes
- No
- Declined to answer
- Don't know

**n. ...because the clinic or doctor was too far away?**

- Yes
- No
- Declined to answer
- Don't know

**o. ...because you haven't found a clinic or doctor that spoke your language?**

- Yes
- No
- Declined to answer
- Don't know

**p. ...because you've had trouble getting transportation?**

- Yes
- No
- Declined to answer
- Don't know

q. ...because you forgot?

- Yes
- No
- Declined to answer
- Don't know

r. ...because of some other reason(s)?

- Yes
- No
- Declined to answer
- Don't know

s. If yes, please tell me the other reason(s). \_\_\_\_\_

- Declined to answer
- Don't know

4. Of all the reasons you just gave for not going to that 1st PrEP appointment, what is the most important one? \_\_\_\_ (Enter only one response a-s)

- Declined to answer
- Don't know

(Go to questions for next referral.)

**If "yes" to attended first PrEP appointment:**

5. You indicated that you have had your first PrEP appointment with a health care provider. When was this appointment?

(Only ask if participant indicated that they attended their first PrEP appointment).

\_\_\_/\_\_\_/\_\_\_\_ MM/DD/YYYY

- Declined to answer
- Don't know

*Interviewer: The next set of questions will ask you about your experience during that first PrEP appointment, with specific doctors, nurses, and other health care providers involved in getting you on PrEP and keeping you on PrEP. For each statement, please tell me, in your opinion, did your PrEP health care providers.*

6. ...listen carefully to you? (Read choices)

- € Strongly disagree
- € Somewhat disagree
- € Neutral
- € Somewhat agree
- € Strongly agree
- € Declined to answer
- € Don't know

7. ... explain things in a way that you can understand? (Read choices)

- € Strongly disagree
- € Somewhat disagree
- € Neutral
- € Somewhat agree
- € Strongly agree
- € Declined to answer
- € Don't know

8. ... show respect for what you have to say? (Read choices)

- € Strongly disagree
- € Somewhat disagree
- € Neutral
- € Somewhat agree
- € Strongly agree
- € Declined to answer
- € Don't know

9. ... spend enough time with you? (Read choices)

- € Strongly disagree
- € Somewhat disagree
- € Neutral
- € Somewhat agree
- € Strongly agree
- € Declined to answer
- € Don't know

(Questions about second PrEP appointment):

10. Did you go to your second (follow-up) PrEP appointment? (Choose one)

- Yes (Go to question that asks about being prescribed PrEP)
- No, it is scheduled but hasn't happened yet (Go to questions for next referral)
- No, did not go for another reason
- Declined to answer
- Don't know

11. I'm going to read you a list of possible reasons people who were referred to PrEP may not have not gone to that second (follow-up) PrEP appointment. Please tell me whether or not each reason applies to you. Is one of the reasons...? (Only ask questions in this section if participant indicates that they have not attended 2nd PrEP appointment for another reason, declined to answer, or indicated don't know.)

a. ...because you had difficulties scheduling an appointment?

- Yes
- No
- Declined to answer
- Don't know

b. ...because you couldn't get time off of work for the appointment?

- Yes
- No
- Declined to answer
- Don't know

c. ...because you couldn't find childcare?

- Yes
- No
- Declined to answer
- Don't know

d. ...because you don't think you are at risk for HIV?

- Yes



- No
- Declined to answer
- Don't know

**e. ...because you don't want to be on PrEP?**

- Yes
- No
- Declined to answer
- Don't know

**f. ...because you don't believe that taking PrEP would protect you from HIV?**

- Yes
- No
- Declined to answer
- Don't know

**g. ...because you don't want people to think that you have HIV?**

- Yes
- No
- Declined to answer
- Don't know

**h. ...because you haven't liked or trusted healthcare providers?**

- Yes
- No
- Declined to answer
- Don't know

**i. ...because of problems with money or health insurance?**

- Yes
- No
- Declined to answer
- Don't know

**j. ...because you've been drinking or using drugs?**

- Yes
- No
- Declined to answer
- Don't know

**k. ...because you've been depressed or been having other mental health problems?**

- Yes
- No
- Declined to answer
- Don't know

**l. ...because you've been physically sick or hospitalized?**

- Yes
- No
- Declined to answer
- Don't know

**m. ...because you've been in prison or jail?**

- Yes
- No
- Declined to answer
- Don't know

**n. ...because the clinic or doctor was too far away?**

- Yes
- No
- Declined to answer
- Don't know

**o. ...because you haven't found a clinic or doctor that spoke your language?**

- Yes
- No
- Declined to answer
- Don't know

**p. ...because you've had trouble getting transportation?**

- Yes
- No
- Declined to answer
- Don't know

**q. ...because you forgot?**

- Yes
- No
- Declined to answer
- Don't know

**r. ...because of some other reason(s)?**

- Yes
- No
- Declined to answer
- Don't know

**s. If yes, please tell me the other reason(s). \_\_\_\_\_**

- Declined to answer
- Don't know

**12. Of all the reasons you just gave for not going to that second PrEP appointment, what is the most important one? \_\_\_\_ (Enter only one response a-s)**

- Declined to answer
- Don't know

(Go to questions for next referral.)

**13. Were you prescribed PrEP? (if reported not being prescribed PrEP at last interview, ask the following) Have you been prescribed since last interview? (Choose one)**

- Yes (Go to question about have you taken any pills yet)

- No
- Declined to answer
- Don't know

**14. Why not? (Choose all that apply)**

- Health care provider recommended against it because I tested HIV-positive (Complete interview, but client will not be interviewed with the POSH questionnaire at later time-points)
- Health care provider recommended against it because of laboratory results (NOT including testing HIV-positive)
- Laboratory results not back yet
- I changed my mind about taking it
- Other (specify \_\_\_\_\_)
- Declined to answer
- Don't know

(Go to questions for next referral.)

**15. Have you taken any of the pills yet? (Choose one)**

- Yes (Go to question about are you currently taking them)
- No
- Declined to answer
- Don't know

**16. Why not? (Choose all that apply)**

- I have not filled the prescription yet
- My doctor said I should not take PrEP right now
- I have had problems paying for/getting insurance for the medication
- I don't think I need it
- I am worried about the side effects (will make me sick or be harmful) or have had side effects in the past
- It is too expensive
- I changed my mind about taking PrEP because \_\_\_\_\_
- Other (specify \_\_\_\_\_)
- Declined to answer
- Don't know

**17. Of all the reasons you just gave for not having taken the pills yet, what is the most important one? \_\_\_\_\_**

(Go to questions for next referral.)

**18. Are you currently taking PrEP? (Choose one)**

- Yes (Go to questions about adherence)
- No
- Declined to answer
- Don't know

**19. Why not? (Choose all that apply)**

- My doctor said I should not take PrEP right now
- I have had problems paying for/getting insurance for the medication
- I don't think I need it
- I am worried about the side effects (will make me sick or be harmful) or have had side effects in the past
- It is too expensive
- I changed my mind about taking PrEP because \_\_\_\_\_
- Other (specify \_\_\_\_\_)

- Declined to answer
- Don't know

**Interviewer:** Now, we're going to talk about how often you took your PrEP pills in the last week (the past 7 days). We need to understand what people on PrEP are really doing with their pills. Please tell us what you are actually doing. Don't worry about telling us that you don't take all your pills. We need to know what is really happening, not what you think we want to hear. Whatever you share will be kept private. (Only ask questions in this section if participant indicates that they are currently taking PrEP, or declined to answer, or indicated don't know)

**20. Did you miss your PrEP dose...**

**a. Yesterday? (Choose one)**

- Yes
- No (Go to "The day before yesterday...")
- Declined to answer (Go to "The day before yesterday...")
- Don't know (Go to "The day before yesterday...")

**aa. What was the main reason you missed the dose yesterday? (Choose all that apply)**

- Was busy with other things
- Had a change in daily routine
- Was high/tipsy/drunk
- Felt like the medicine was harmful
- Simply forgot
- Fell asleep
- Wanted to avoid side effects
- Felt like I didn't need it
- Ran out of pills
- Did not want others to notice me taking the medicine
- Was sick
- Was away from home and didn't have the pills with me
- Other (\_\_\_\_\_)
- Declined to answer
- Don't know

**b. The day before yesterday- that was [Monday/Tuesday/Wednesday/etc.]? (Choose one)**

- Yes
- No (Go to "3 days ago")
- Declined to answer (Go to "3 days ago")
- Don't know (Go to "3 days ago")

**ba. What was the main reason you missed the dose the day before yesterday? (Choose one)**

- Was busy with other things
- Had a change in daily routine
- Was high/tipsy/drunk
- Felt like the medicine was harmful
- Simply forgot
- Fell asleep
- Wanted to avoid side effects
- Felt like I didn't need it
- Ran out of pills
- Did not want others to notice me taking the medicine
- Was sick

- Was away from home and didn't have the pills with me
- Other (\_\_\_\_\_)
- Declined to answer
- Don't know

**c. 3 days ago- that was [Monday/Tuesday/Wednesday/etc.]? (Choose one)**

- Yes
- No (Go to "4 days ago")
- Declined to answer (Go to "4 days ago")
- Don't know (Go to "4 days ago")

**ca. If yes, what was the main reason you missed the dose on [Monday/Tuesday/Wednesday/etc.]? (Choose one)**

- Was busy with other things
- Had a change in daily routine
- Was high/tipsy/drunk
- Felt like the medicine was harmful
- Simply forgot
- Fell asleep
- Wanted to avoid side effects
- Felt like I didn't need it
- Ran out of pills
- Did not want others to notice me taking the medicine
- Was sick
- Was away from home and didn't have the pills with me
- Other (\_\_\_\_\_)
- Declined to answer
- Don't know

**d. 4 days ago- that was [Monday/Tuesday/Wednesday/etc.]? (Choose one)**

- Yes
- No (Go to "5 days ago")
- Declined to answer (Go to "5 days ago")
- Don't know (Go to "5 days ago")

**da. If yes, what was the main reason you missed the dose on [Monday/Tuesday/Wednesday/etc.]? (Choose one)**

- Was busy with other things
- Had a change in daily routine
- Was high/tipsy/drunk
- Felt like the medicine was harmful
- Simply forgot
- Fell asleep
- Wanted to avoid side effects
- Felt like I didn't need it
- Ran out of pills
- Did not want others to notice me taking the medicine
- Was sick
- Was away from home and didn't have the pills with me
- Other (\_\_\_\_\_)

- Declined to answer
- Don't know

**e. 5 days ago- that was [Monday/Tuesday/Wednesday/etc.]? (Choose one)**

- Yes
- No (Go to "6 days ago")
- Declined to answer (Go to "6 days ago")
- Don't know (Go to "6 days ago")

**ea. If yes, what was the main reason you missed the dose on [Monday/Tuesday/Wednesday/etc.]? (Choose one)**

- Was busy with other things
- Had a change in daily routine
- Was high/tipsy/drunk
- Felt like the medicine was harmful
- Simply forgot
- Fell asleep
- Wanted to avoid side effects
- Felt like I didn't need it
- Ran out of pills
- Did not want others to notice me taking the medicine
- Was sick
- Was away from home and didn't have the pills with me
- Other (\_\_\_\_\_)
- Declined to answer
- Don't know

**f. 6 days ago- that was [Monday/Tuesday/Wednesday/etc.]?**

- Yes
- No (Go to "7 days ago")
- Declined to answer (Go to "7 days ago")
- Don't know (Go to "7 days ago")

**fa. If yes, what was the main reason you missed the dose on [Monday/Tuesday/Wednesday/etc.]? (Choose one)**

- Was busy with other things
- Had a change in daily routine
- Was high/tipsy/drunk
- Felt like the medicine was harmful
- Simply forgot
- Fell asleep
- Wanted to avoid side effects
- Felt like I didn't need it
- Ran out of pills
- Did not want others to notice me taking the medicine
- Was sick
- Was away from home and didn't have the pills with me
- Other (\_\_\_\_\_)
- Declined to answer
- Don't know

**g. 7 days ago- that was [Monday/Tuesday/Wednesday/etc.]?**

- Yes
- No (Go to question #17)
- Declined to answer (Go to question #17)
- Don't know (Go to question #17)

**ga. If yes, what was the main reason you missed the dose on [Monday/Tuesday/Wednesday/etc.]?**

- Was busy with other things
- Had a change in daily routine
- Was high/tipsy/drunk
- Felt like the medicine was harmful
- Simply forgot
- Fell asleep
- Wanted to avoid side effects
- Felt like I didn't need it
- Ran out of pills
- Did not want others to notice me taking the medicine
- Was sick
- Was away from home and didn't have the pills with me
- Other ( \_\_\_\_\_ )
- Declined to answer
- Don't know

**21. Please tell me how many times you went to see a PrEP health care provider in...** (Only ask the participant about the months starting with the date of the first PrEP appointment through the current month/interview date.)

January 2017 \_\_\_\_  
February 2017 \_\_\_\_  
March 2017 \_\_\_\_  
April 2017 \_\_\_\_  
May 2017 \_\_\_\_  
June 2017 \_\_\_\_  
July 2017 \_\_\_\_  
August 2017 \_\_\_\_  
September 2017 \_\_\_\_  
October 2017 \_\_\_\_  
November 2017 \_\_\_\_  
December 2017 \_\_\_\_  
January 2018 \_\_\_\_  
February 2018 \_\_\_\_  
March 2018 \_\_\_\_  
April 2018 \_\_\_\_  
May 2018 \_\_\_\_  
June 2018 \_\_\_\_  
July 2018 \_\_\_\_  
August 2018 \_\_\_\_  
September 2018 \_\_\_\_  
October 2018 \_\_\_\_  
November 2018 \_\_\_\_  
December 2018 \_\_\_\_  
January 2019 \_\_\_\_  
February 2019 \_\_\_\_  
March 2019 \_\_\_\_

April 2019 \_\_\_\_  
May 2019 \_\_\_\_  
June 2019 \_\_\_\_  
July 2019 \_\_\_\_  
August 2019 \_\_\_\_

- € Declined to answer
- € Don't know

(If participant has been to three or more PrEP-related appointments, ask the next four questions)

*Interviewer: These final questions about PrEP refer to the overall experience you had with the PrEP health care provider and your feelings about the experience. When I say "health care provider", I mean the provider you have been working with to take PrEP, or to talk about taking PrEP. Please tell me if you agree/disagree/or are undecided with respect to the following statements.*

**22. I feel comfortable talking to my health care provider about my sexual behavior and sexual relationships. (Read choices.)**

- Agree
- Undecided
- Disagree
- Declined to answer
- Don't know

**23. I worry that my health care provider will make judgments about me for my sexual behavior. (Read choices.)**

- Agree
- Undecided
- Disagree
- Declined to answer
- Don't know

**24. I feel comfortable talking to my health care provider about PrEP. (Read choices.)**

- Agree
- Undecided
- Disagree
- Declined to answer
- Don't know

**25. I avoid telling my medical provider about how often I miss doses of my PrEP medication because I would not want him/her to be disappointed in me. (Read choices.)**

- Agree
- Undecided
- Disagree
- Declined to answer
- Don't know

(For those referred to nPEP):

nPEP

(For people referred to nPEP since the last interview, ask all the questions in this section. This includes clients who received a second (or third, etc.) referral to nPEP, as well as clients whose first referral to nPEP occurred since the last interview.)



- If an nPEP referral was asked about in the last interview, but the participant hadn't completed nPEP
  - Start with the question where participant responded "no".

**26. You were referred to nPEP. Which of the following things were you offered? (Check all that apply)**

- Only contact information for doctor, nurse, or other healthcare provider
- Help making an appointment with a healthcare provider
- Help with transportation to healthcare provider
- Someone to go with you to the appointment with a health care provider
- Something else (specify: \_\_\_\_\_)
- Declined to answer
- Don't know

**27. Have you started the nPEP treatment (28-day treatment with HAART medications)? (Choose one.)**

- Yes ([Go to question about completing nPEP](#))
- No
- Declined to answer
- Don't know

*Interviewer: I'm going to read you a list of possible reasons why someone may not have started taking the medication.*

**28. Please tell me whether or not each reason applies to you. Is one of the reasons... (Only ask the questions in this section if participant indicates not starting taking the medicine, or declined to answer, or indicated don't know.)**

**a. ...because you have not filled your prescription yet?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**b. ...because your medical care provider did not give you a prescription or said you should not take the medication for some reason?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**c. ...because you have problems paying for or getting insurance or coverage for the medication?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**d. ... because you don't think you need it?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**e. ... because you are worried it would make you feel sick or harm you?**

- € Yes
- € No
- € Declined to answer

Don't know

f. ...because you have taken these medicines in the past and they have caused side effects?

Yes

No

Declined to answer

Don't know

g. ...because you decided not to start the medications for some other reason?

Yes

No

Declined to answer

Don't know

h. Please tell me the other reason that you decided not to start the medications.

Declined to answer

Don't know

29. Of all the reasons you just gave, what is the most important one? \_\_\_\_ (Enter only one response a-h)

[\(Go to questions for next referral\)](#)

30. Have you completed the nPEP treatment? (Choose one)

- Yes ([Go to questions for next referral](#))
- No
- Declined to answer
- Don't know

*Interviewer: I'm going to read you a list of possible reasons why someone may not have taking all of the nPEP pills.*

31. Please tell me whether or not each reason applies to you. Is one of the reasons... (Only ask the questions in this section if participant indicates not taking all their nPEP pills, or declined to answer, or indicated don't know.)

a. ...because your medical care provider told you to stop taking the medications for some reason?

Yes

No

Declined to answer

Don't know

b. ... because you don't think you need it?

Yes

No

Declined to answer

Don't know

c. ... because you are worried it might make you feel sick or harm you?

Yes

No

Declined to answer

Don't know

d. ...because the medications were making you sick or had adverse side effects?

Yes

- No
- Declined to answer
- Don't know

e. ...because you decided not to complete the medications for some other reason?

- Yes
- No
- Declined to answer
- Don't know

f. Please tell me the other reason that you decided not to start the medications.

- \_\_\_\_\_
- Declined to answer
  - Don't know

32. Of all the reasons you just gave, what is the most important one? \_\_\_\_ (Enter only one response a-f)

(Go to questions for next referral)

(For those referred to HIP Behavioral Interventions):

#### HIP Behavioral Interventions

The questions below will be based on responses to G9. For any referrals received since last interview, ask all the questions. For any referrals that were asked about in the last interview and had not connected to the service and/or completed, start with question in the relevant section where participant responded "no".

33. You were referred to [INTERVENTION1]. Did you attend at least one session? (Choose one.)

- Yes (Go to "Did you complete or graduate from...")
- No
- Declined to answer
- Don't know

34. I'm going to read you a list of possible reasons you may have not attended at least one session of [INTERVENTION1]. After I read each one, let me know if the reason applies to you. Is one of the reasons... (Only ask questions in this section if participant did not attend at least one session of the intervention, declined to answer, or indicated don't know.)

a. ...because you couldn't get time off of work to attend?

- Yes
- No
- Declined to answer
- Don't know

b. ...because you couldn't find childcare?

- Yes
- No
- Declined to answer
- Don't know

c. ...because you didn't think you needed to?

- Yes
- No
- Declined to answer

Don't know

**d. ...because you've been drinking or using drugs?**

Yes

No

Declined to answer

Don't know

**e. ...because you've been depressed or been having other mental health problems?**

Yes

No

Declined to answer

Don't know

**f. ...because you've been physically sick or hospitalized?**

Yes

No

Declined to answer

Don't know

**g. ...because you've been in prison or jail?**

Yes

No

Declined to answer

Don't know

**h. ...because the location was too far away?**

Yes

No

Declined to answer

Don't know

**i. ...because the services offered were not in your language?**

Yes

No

Declined to answer

Don't know

**j. ...because you've had trouble getting transportation?**

Yes

No

Declined to answer

Don't know

**k. ...because you forgot?**

Yes

No

Declined to answer

Don't know

**l. ...because of some other reason(s)?**

Yes

- € No
- € Declined to answer
- € Don't know

m. If yes, please tell me the other reason(s) that you did not attend [INTERVENTION1].

- \_\_\_\_\_
- € Declined to answer
  - € Don't know

35. Of all the reasons you just gave, what is the most important one? \_\_\_\_\_ (Enter one of the responses above a-m)

- € Declined to answer
- € Don't know

(If participant did not go to at least one session of [INTERVENTION1], go to questions for next referral.)

36. Did you complete or graduate from [INTERVENTION1]? (Choose one)

- Yes (Go to questions for next referral.)
- No
- Declined to answer
- Don't know

(Repeat questions in this section for referrals to other HIP behavioral interventions)

(For those who were referred to HIV testing):

### HIV Testing

(For people referred to HIV testing since the last interview, ask all the questions in this section.)

(This includes clients who received a second (or third, etc.) referral to HIV testing, as well as clients whose first referral to HIV testing occurred since the last interview.)

- If an HIV testing referral was asked about in the last interview, but the participant hadn't gotten tested
  - Start with the question where participant responded "no".

37. You were referred to HIV testing. Did you get tested? (Choose one)

- € Yes (Go to question about testing positive )
- € No
- € Declined to answer
- € Don't know

*Interviewer: I'm going to read you a list of possible reasons people may not have been tested for HIV.*

38. Please tell me whether or not each reason applies to you. Is one of the reasons... (Only ask questions in this section if participant was not tested for HIV, or declined to answer, or indicated don't know.)

a. ...because you didn't think you needed to?

- € Yes
- € No
- € Declined to answer
- € Don't know

b. ...because you haven't felt sick?

- € Yes

- No
- Declined to answer
- Don't know

**c. ...because you've been afraid or in denial about having HIV?**

- Yes
- No
- Declined to answer
- Don't know

**d. ...because you haven't liked or trusted health care providers?**

- Yes
- No
- Declined to answer
- Don't know

**e. ...because of problems with money or health insurance?**

- Yes
- No
- Declined to answer
- Don't know

**f. ...because you've been drinking or using drugs?**

- Yes
- No
- Declined to answer
- Don't know

**g. ...because you've been depressed or been having other mental health problems?**

- Yes
- No
- Declined to answer
- Don't know

**h. ...because you've been physically sick or hospitalized?**

- Yes
- No
- Declined to answer
- Don't know

**i. ...because you've been in prison or jail?**

- Yes
- No
- Declined to answer
- Don't know

**j. ...because the location was too far away?**

- Yes
- No

- Declined to answer
- Don't know

**k. ...because you haven't found a clinic that spoke your language?**

- Yes
- No
- Declined to answer
- Don't know

**l. ...because you've had trouble getting transportation?**

- Yes
- No
- Declined to answer
- Don't know

**m. ...because you forgot?**

- Yes
- No
- Declined to answer
- Don't know

**n. ...because of some other reason(s)?**

- Yes
- No
- Declined to answer
- Don't know

**o. If yes, please tell me the other reason(s) why you did not get an HIV test.**

- 
- Declined to answer
  - Don't know

**39. Of all the reasons you just gave, what is the most important one? \_\_\_\_ (Enter only one response a-o)**

- Declined to answer
- Don't know

[\(Go to questions for next referral.\)](#)

**40. Did you test positive for HIV? (Choose one)**

- Yes
- No
- Declined to answer
- Don't know

[\(For those who were referred to STD/Hepatitis/TB screening or treatment\):](#)

**STD/Hepatitis/Tuberculosis Screening and Treatment**

The questions below will be based on responses to G9. For any referrals received since last interview, ask all the questions. For any referrals that were asked about in the last interview and had not connected to the service and/or completed, start with question in the relevant section where participant responded “no”.

(For those referred to STD screening/treatment):

**41. You were referred to STD testing. Did you get tested? (Choose one)**

- Yes (Go to “Which of the following STDs did you test positive for?”)
- No
- Declined to answer
- Don't know

*Interviewer: I'm going to read you a list of possible reasons people may not have been tested for STDs.*

**42. Please tell me whether or not each reason applies to you. Is one of the reasons... (Only ask questions in this section if participant was not tested for any STDs, or declined to answer, or indicated don't know.)**

**a. ...because you had difficulties scheduling an appointment?**

- Yes
- No
- Declined to answer
- Don't know

**b. ...because you couldn't get time off of work to go to appointment?**

- Yes
- No
- Declined to answer
- Don't know

**c. ...because you couldn't find childcare?**

- Yes
- No
- Declined to answer
- Don't know

**d. ...because you didn't think you needed to?**

- Yes
- No
- Declined to answer
- Don't know

**e. ...because you haven't felt sick?**

- Yes
- No
- Declined to answer
- Don't know

**f. ...because you've been afraid or in denial about having an STD?**

- Yes
- No
- Declined to answer



Don't know

**g. ...because you haven't wanted anyone to know that you have an STD?**

Yes

No

Declined to answer

Don't know

**h. ...because you haven't liked or trusted health care providers?**

Yes

No

Declined to answer

Don't know

**i. ...because of problems with money or health insurance?**

Yes

No

Declined to answer

Don't know

**j. ...because you've been drinking or using drugs?**

Yes

No

Declined to answer

Don't know

**k. ...because you've been depressed or been having other mental health problems?**

Yes

No

Declined to answer

Don't know

**l. ...because you've been physically sick or hospitalized?**

Yes

No

Declined to answer

Don't know

**m. ...because you've been in prison or jail?**

Yes

No

Declined to answer

Don't know

**n. ...because the location was too far away?**

Yes

No

Declined to answer

Don't know

**o. ...because you haven't found an STD clinic or provider that spoke your language?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**p. ...because you've had trouble getting transportation?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**q. ...because you forgot?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**r. ...because of some other reason(s)?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**s. If yes, please tell me the other reason(s) that you may not have gone to get STD testing.**

- 
- € Declined to answer
  - € Don't know

**43. Of all the reasons you just gave, what is the most important one? \_\_\_\_ (Enter only one response a-s)**

- € Declined to answer
- € Don't know

*(If did not test for any STDs, go to questions for next referral)*

**44. Did you test positive for an STD? (Choose one)**

- € Yes
- No *(Go to questions for next referral.)*
- Declined to answer
- Don't know

**45. Did you receive treatment for at least one of those STDs? (Don't read. Choose one)**

- Yes *(Go to questions for next referral.)*
- No
- Declined to answer
- Don't know

*Interviewer: I'm going to read you a list of possible reasons people may not receive treatment for STDs.*

46. Please tell me whether or not each reason applies to you. Is one of the reasons... (Only ask the questions in this section if participant indicates not receiving treatment for STDs, or declined to answer, or indicated don't know.)

a. ...because you have not filled your prescription yet?

- Yes
- No
- Declined to answer
- Don't know

b. ...because your medical care provider said you do not need treatment?

- Yes
- No
- Declined to answer
- Don't know

c. ...because you have problems paying for or getting insurance or coverage for treatment?

- Yes
- No
- Declined to answer
- Don't know

d. ...because you don't think you need treatment?

- Yes
- No
- Declined to answer
- Don't know

e. ...because you think treatment would make you feel sick or harm you?

- Yes
- No
- Declined to answer
- Don't know

f. ...because treatment caused side effects in the past?

- Yes
- No
- Declined to answer
- Don't know

g. ...because you did not receive treatment for some other reason?

- Yes
- No
- Declined to answer
- Don't know

h. Please tell me the other reason that you did not receive treatment?

- \_\_\_\_\_
- Declined to answer
  - Don't know

47. Of all the reasons you just gave, what is the most important one? \_\_\_\_ (Enter only one response a-h)

- Declined to answer
- Don't know

(Go to questions for next referral.)

*Interviewer: I'm going to ask you about hepatitis. By hepatitis, I am talking about hepatitis A, B, or C.*

**48. You were referred to testing for hepatitis. Did you get tested? (Choose one)**

- € Yes (Go to "Did you test positive for hepatitis?")
- € No
- € Declined to answer
- € Don't know

(If referred to Hepatitis screening/treatment/vaccination):

*Interviewer: I'm going to read you a list of possible reasons people may not have been tested for hepatitis.*

**49. Please tell me whether or not each reason applies to you. Is one of the reasons... (Only ask questions in this section if participant was not tested for hepatitis, or declined to answer, or indicated don't know.)**

**a. ...because you had difficulties scheduling an appointment?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**b. ...because you couldn't get time off of work to go to appointment?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**c. ...because you couldn't find childcare?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**d. ...because you didn't think you needed to?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**e. ...because you haven't felt sick?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**f. ...because you've been afraid or in denial about having hepatitis?**

- € Yes
- € No

Declined to answer

Don't know

**g. ...because you haven't liked or trusted health care providers?**

Yes

No

Declined to answer

Don't know

**h. ...because of problems with money or health insurance?**

Yes

No

Declined to answer

Don't know

**i. ...because you've been drinking or using drugs?**

Yes

No

Declined to answer

Don't know

**j. ...because you've been depressed or been having other mental health problems?**

Yes

No

Declined to answer

Don't know

**k. ...because you've been physically sick or hospitalized?**

Yes

No

Declined to answer

Don't know

**l. ...because you've been in prison or jail?**

Yes

No

Declined to answer

Don't know

**m. ...because the location was too far away?**

Yes

No

Declined to answer

Don't know

**n. ...because you haven't found a medical care provider that spoke your language?**

Yes

No

Declined to answer

Don't know

**o. ...because you've had trouble getting transportation?**

Yes

No

Declined to answer

Don't know

**p. ...because you forgot?**

Yes

No

Declined to answer

Don't know

**q. ...because of some other reason(s)?**

Yes

No

Declined to answer

Don't know

**r. If yes, please tell me the other reason(s) that you have not gone to get tested for hepatitis.**

\_\_\_\_\_  
 Declined to answer

Don't know

**50. Of all the reasons you just gave, what is the most important one? \_\_\_\_** (Enter only one response a-r)

Declined to answer

Don't know

(Go to questions for next referral.)

**51. Did you test positive for hepatitis? (Choose one)**

- Yes
- No (Go to "Did you get vaccinated for hepatitis?")
- Declined to answer
- Don't know

**52. Did you receive treatment for hepatitis? (Choose one)**

- Yes (Go to "Did you get vaccinated for hepatitis?")
- No
- Declined to answer
- Don't know

*Interviewer: I'm going to read you a list of possible reasons people may not receive treatment for hepatitis.*

**53. Please tell me whether or not each reason applies to you. Is one of the reasons...** (Only ask the questions in this section if participant indicates not receiving treatment for hepatitis, or declined to answer, or indicated don't know.)

**i. ...because you have not filled your prescription yet?**

Yes

- No
- Declined to answer
- Don't know

**j. ...because your medical care provider said you do not need treatment?**

- Yes
- No
- Declined to answer
- Don't know

**k. ...because you have problems paying for or getting insurance or coverage for treatment?**

- Yes
- No
- Declined to answer
- Don't know

**l. ...because you don't think you need treatment?**

- Yes
- No
- Declined to answer
- Don't know

**m. ...because you think treatment would make you feel sick or harm you?**

- Yes
- No
- Declined to answer
- Don't know

**n. ...because treatment caused side effects in the past?**

- Yes
- No
- Declined to answer
- Don't know

**o. ...because you did not receive treatment for some other reason?**

- Yes
- No
- Declined to answer
- Don't know

**p. Please tell me the other reason that you did not receive treatment?**

- \_\_\_\_\_
- Declined to answer
  - Don't know

**54. Of all the reasons you just gave, what is the most important one? \_\_\_\_ (Enter only one response a-p)**

- Declined to answer
- Don't know

**55. Did you get vaccinated for hepatitis? (Choose one)**

- Yes ([Go to questions for next referral.](#))
- No

- Declined to answer
- Don't know

*Interviewer: I'm going to read you a list of possible reasons people may not have been vaccinated for hepatitis.*

**56. Please tell me whether or not each reason applies to you. Is one of the reasons...** (Only ask questions in this section if participant was not vaccinated for hepatitis, or declined to answer, or indicated don't know.)

**a. ...because you had difficulties scheduling an appointment?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**b. ...because you couldn't get time off of work to go to appointment?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**c. ...because you couldn't find childcare?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**d. ...because you didn't think you needed to?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**e. ...because you haven't felt sick?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**f. ...because your medical care provider told you should not get vaccinated?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**g. ...because you haven't liked or trusted health care providers?**

- € Yes
- € No
- € Declined to answer
- € Don't know

**h. ...because of problems with money or health insurance?**



- Yes
- No
- Declined to answer
- Don't know

**i. ...because you've been drinking or using drugs?**

- Yes
- No
- Declined to answer
- Don't know

**j. ...because you've been depressed or been having other mental health problems?**

- Yes
- No
- Declined to answer
- Don't know

**k. ...because you've been physically sick or hospitalized?**

- Yes
- No
- Declined to answer
- Don't know

**l. ...because you've been in prison or jail?**

- Yes
- No
- Declined to answer
- Don't know

**m. ...because the location was too far away?**

- Yes
- No
- Declined to answer
- Don't know

**n. ...because you haven't found an HIV medical care provider that spoke your language?**

- Yes
- No
- Declined to answer
- Don't know

**o. ...because you've had trouble getting transportation?**

- Yes
- No
- Declined to answer
- Don't know

**p. ...because you forgot?**

- Yes

- No
- Declined to answer
- Don't know

q. ...because of some other reason(s)?

- Yes
- No
- Declined to answer
- Don't know

r. ...because of some other reason(s)?

- Yes
- No
- Declined to answer
- Don't know

s. If yes, please tell me the other reason(s) that you have not received a vaccination for hepatitis.

- \_\_\_\_\_
- Declined to answer
  - Don't know

57. Of all the reasons you just gave, what is the most important one? \_\_\_\_ (Enter only one response a-s)

- Declined to answer
- Don't know

(Go to questions for next referral.)

(If referred to TB screening/treatment):

58. You were referred to tuberculosis or TB testing. Did you get tested for TB? (Choose one)

- Yes (Go to "Did you receive a positive result for TB?")
- No
- Declined to answer
- Don't know

*Interviewer: I'm going to read you a list of possible reasons people may not have been tested for TB.*

59. Please tell me whether or not each reason applies to you. Is one of the reasons... (Only ask questions in this section if participant was not tested for TB, or declined to answer, or indicated don't know.)

a. ...because you had difficulties scheduling an appointment?

- Yes
- No
- Declined to answer
- Don't know

b. ...because you couldn't get time off of work to go to appointment?

- Yes
- No
- Declined to answer

Don't know

**c. ...because you couldn't find childcare?**

Yes

No

Declined to answer

Don't know

**d. ...because you didn't think you needed to?**

Yes

No

Declined to answer

Don't know

**e. ...because you haven't felt sick?**

Yes

No

Declined to answer

Don't know

**f. ...because you've been afraid or in denial about having TB?**

Yes

No

Declined to answer

Don't know

**g. ...because you haven't liked or trusted health care providers?**

Yes

No

Declined to answer

Don't know

**h. ...because of problems with money or health insurance?**

Yes

No

Declined to answer

Don't know

**i. ...because you've been drinking or using drugs?**

Yes

No

Declined to answer

Don't know

**j. ...because you've been depressed or been having other mental health problems?**

Yes

No

Declined to answer

Don't know

**k. ...because you've been physically sick or hospitalized?**

- Yes
- No
- Declined to answer
- Don't know

**l. ...because you've been in prison or jail?**

- Yes
- No
- Declined to answer
- Don't know

**m. ...because the location was too far away?**

- Yes
- No
- Declined to answer
- Don't know

**n. ...because you haven't found a medical care provider that spoke your language?**

- Yes
- No
- Declined to answer
- Don't know

**o. ...because you've had trouble getting transportation?**

- Yes
- No
- Declined to answer
- Don't know

**p. ...because you forgot?**

- Yes
- No
- Declined to answer
- Don't know

**q. ...because of some other reason(s)?**

- Yes
- No
- Declined to answer
- Don't know

**r. If yes, please tell me the other reason(s) that you have not gone to get tested for tuberculosis.**

- 
- Declined to answer
  - Don't know

**60. Of all the reasons you just gave, what is the most important one? \_\_\_\_ (Enter only one response a-r)**

Declined to answer

Don't know

(If did not test for tuberculosis, go to questions for next referral)

**61. Did you receive a positive result for TB? (Choose one)**

Yes

No (Go to questions for next referral)

Declined to answer

Don't know

**62. Did you receive treatment for tuberculosis? (Choose one)**

- Yes (Go to questions for next referral)
- No
- Declined to answer
- Don't know

*Interviewer: I'm going to read you a list of possible reasons people may not receive treatment for TB.*

**63. Please tell me whether or not each reason applies to you. Is one of the reasons... (Only ask the questions in this section if participant indicates not receiving treatment for TB, or declined to answer, or indicated don't know.)**

**a. ...because you have not filled your prescription yet?**

Yes

No

Declined to answer

Don't know

**b. ...because your medical care provider said you do not need treatment?**

Yes

No

Declined to answer

Don't know

**c. ...because you have problems paying for or getting insurance or coverage for treatment?**

Yes

No

Declined to answer

Don't know

**d. ...because you don't think you need treatment?**

Yes

No

Declined to answer

Don't know

**e. ...because you think treatment would make you feel sick or harm you?**

Yes

No

Declined to answer

Don't know

f. ...because treatment caused side effects in the past?

- Yes
- No
- Declined to answer
- Don't know

g. ...because you did not receive treatment for some other reason?

- Yes
- No
- Declined to answer
- Don't know

h. Please tell me the other reason that you did not receive treatment?

- \_\_\_\_\_
- Declined to answer
  - Don't know

64. Of all the reasons you just gave, what is the most important one? \_\_\_\_ (Enter only one response a-h)

- Declined to answer
- Don't know

(Go to questions for next referral.)

(For those referred to other HIV prevention services):

#### Other HIV Prevention Services

For any referrals that were asked about in the last interview and had not connected to the service and/or completed, start with question in the relevant section where participant responded "no".

65. You were referred to [SERVICE]. Recommended services include basic education continuation and completion services, employment services, housing services, insurance navigation and enrollment services, mental health counseling and services, sex education including HIV education, substance abuse treatment and services, and transportation services. Did you talk to a professional about [SERVICE]? (Choose one)

- Yes
- No
- Declined to answer
- Don't know

(Repeat question above for each referral made to other HIV prevention services)

(For all participants):

#### End of Interview

**Interviewer:** This concludes the interview, thank you so much for your time. Someone will be in touch with you to conduct the next interview in approximately X months' time.

- Check this box if interview was not completed for some reason.

**Reason:**

- Person was not alert
- Person decided to prematurely stop the interview

€ Other (specify \_\_\_\_\_)

**Interviewer comments:** Please note anything unusual about this interview- this could be anything important shared by the participant that could help us understand their responses, any device glitches, environmental/background factors at time of interview that may have affected participant responses, etc.

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