

**Qualitative research to understand consumer opinions and preferences for emerging
HIV prevention products among MSM in Atlanta, Houston, and Miami**

Attachment 2e: Survey on PrEP

**Emerging Prevention Products for MSM
Survey for Participants Currently on PrEP**

Respondent ID: _____

Form Approved
OMB No: 0920-1091
Exp. Date: 09/30/2021

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Thank you for agreeing to participate in this survey. Your input is very important to us.

STUDY ID NUMBER: _____

Section 1: Questions about You

D1. How old are you?

_____ years

D2. Which of the following best describe your ethnicity?

- 1 Hispanic or Latino
- 0 Not Hispanic or Latino

D3. Which race or races, do you consider yourself to be?

Select all that apply

- 1 American Indian or Alaska Native
- 2 Asian
- 3 Black or African American
- 4 Native Hawaiian or Other Pacific Islander
- 5 White

D4. What is your country of birth?

- 1 United States
- 2 Other Specify: _____

D5. What is the highest level of education that you have completed?

- 1 Less than high school
- 2 High school diploma or GED
- 3 Some College, Associate's Degree, or Technical Degree
- 4 Bachelor's/4-year College Degree
- 5 Any post-graduate degree

D6. Which of the following best represents how you think of yourself?

- 1 Lesbian or gay
- 2 Straight, that is not lesbian or gay
- 3 Bisexual
- 4 Something else
- 7 I don't know the answer

D7. Do you currently have health insurance or health care coverage (including Medicare or Medicaid)?

- 1 Yes
- 0 No
- 7 I don't know
- 9 I prefer not to answer

Section 4: Questions about PrEP

P1. In the past 7 days, on how many days did you take your dose of PrEP?

_____ days

P2. If you missed any PrEP doses in the past 7 days, why did you miss your PrEP dose?

Select all that apply

- I forgot
- I was busy
- I didn't want to take it
- My prescription ran out
- I didn't miss any doses
- Other. Specify: _____

P3. Where have you heard about PrEP the most?

Select one response

- Sex partners
- Friends or family
- Health providers or counselors
- Sex or dating websites
- Other social media (e.g. Facebook, Instagram, Snapchat).
- News media
- Advertisements around town
- Other. Specify: _____

P4. Have you ever stopped taking PrEP on purpose?

- 0 No **(GO TO P6)**
- 1 Yes **(GO TO P5)**

P5. What was the most important reason you stopped taking PrEP?

Select one response

- My insurance wouldn't cover it
- I couldn't afford it
- I decided I didn't need it for protection anymore
- My relationship status changed
- I don't think it worked very well to protect me
- I didn't like the side effects
- I was worried about the safety of PrEP
- It was too hard taking the pills
- My doctor decided to take me off it
- I don't have anybody to prescribe it to me
- Other. Specify: _____

P6. Which one of the following statements best reflects your thoughts about taking PrEP in the future.

Select one response

- I am planning to continue to use PrEP **(END OF SURVEY)**
- I plan to stop PrEP in the coming weeks **(GO TO P7)**
- I plan to stop taking PrEP in the next 1-5 months **(GO TO P7)**
- I plan to stop taking PrEP in the next 6-12 months **(GO TO P7)**
- I am not sure

P7. If you plan to stop taking PrEP, what is the most important reason for stopping?

Select one response

- My insurance doesn't cover it
- I can't afford it
- I don't think I need it for protection anymore
- My relationship status has changed
- I don't think it works very well to protect me
- I don't like the side effects
- I am worried about the safety of PrEP
- It is too hard taking the pills
- My doctor plans to take me off it
- I don't have anybody to prescribe it to me
- Other. Specify: _____

Thank you for your valuable input on this survey!