Form Approved

OMB No: 0920-1266

Exp. Date: 06/30/2021

HIV prevention among Latina transgender women who have sex with men:

Evaluation of a locally developed intervention

Attachment 4c

ChiCAS Questionnaire English

**HIV Prevention among Latina Transgender Women Who Have Sex with Men: Evaluation of a Locally Developed Intervention**

**Baseline and Follow-up Assessment Questionnaire**

**(NOTE: The Spanish version of the baseline assessment will be used in the proposed study; this English version is included solely for purposes of review.)**

|  |  |
| --- | --- |
| Date: |  |
| Interviewer: |  |
| Participant ID: |  |
| Place and city of interview: |  |
| Time interview started: |  |
| Time interview completed: |  |

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This information is collected under the authority of the Public Health Service Act, Section 301, "Research and Investigation," (42 U.S.C. 241); and Sections 304, 306 and 308(d) which discuss authority to maintain data and provide privacy for health research and related activities (42 U.S.C. 242 b, k, and m(d)). This information is also being collected in conjunction with the provisions of the Government Paperwork Elimination Act and the Paperwork Reduction Act (PRA). This information will only be used by the Centers for Disease Control and Prevention (CDC) staff to evaluate the efficacy of the locally developed ChiCAS HIV prevention intervention for Hispanic/Latina transgender women.

Public reporting burden of this collection of information is estimated to average 60 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)

|  |
| --- |
| **Again, we thank you for your time and participation in this assessment. Please remember that when answering these questions, it is very important to be honest. Some of the items will be very personal. Questions about your own health and sexual behaviors and feelings of discrimination, as examples, may be uncomfortable for you, but it is important that you be truthful.**  **Remember, all the information obtained you provide will be kept private. I am a trained professional and respect the trust you have given me. I will not make judgments about you or your answers. I will not tell anyone about what we talked about today and your answers will not be identifiable. Your name will be removed from the assessment so that others will not know your responses.**  **Also, there are no right or wrong answers, and we rely on you to be honest. The information that you provide will ensure the quality of this research. It will help us understand generally what is going on in the lives of transgender women like you and the needs of the community. It may create opportunities for new projects that are focused on these community needs. It will help us improve the quality of the lives of women like you. Simply, it will help us prevent HIV and support access to hormone therapy. Your honest answers can help us save lives.**  Thanks for your participation. I have a few questions for you to get us started. |

|  |  |
| --- | --- |
| 1) Which of the following best describes your ethnicity? | 🞏1 Hispanic or Latino  🞏0 Not Hispanic or Latino *[If not Hispanic or Latino, skip to end of assessment, item 134]* |
| 2) How old are you? | \_\_\_\_\_\_ years old  *[If under 18 years old, skip to end of assessment, item 134]* |
| 3) In which language would you consider yourself to be fluent? | 🞏1 Only Spanish  🞏2 More Spanish than English  🞏3 Both equally  🞏4 More English than Spanish  *[If more English than Spanish, skip to end of assessment, item 134]*  🞏5 Only English  *[If only English, skip to end of assessment, item 134]* |
| 4) What sex was on your original birth certificate? | 🞏0 Male  🞏1 Female  *[If female, skip to end of assessment, item 134]* |
| 5) How do you describe your gender identity? | 🞏0 Male  🞏1 Female  🞏2 Male-to-female transgender (MTF)  🞏3 Female-to-male transgender (FTM)  🞏4 Other gender identity (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *[If “male”, “female-to-male transgender”, or some other specific category that indicates that they identify as male, skip to end of assessment, item 134]* |
| 6) What was the result of your recent HIV test? | 🞏0 Positive  *[If “positive”, skip to end of assessment, item 134]*  🞏1 Negative  🞏2 I don’t know  🞏3 Indeterminate  🞏4 Never tested |
| 7) In the past 6 months, have you had sex with a man at least once? | 0 No 1 Yes  *[If no, skip to end of assessment, item 134]* |

GENERAL HEALTH & ACCESS TO CARE

|  |  |  |
| --- | --- | --- |
| **The next questions are about your general health and your access to health care.**  **We are asking this question of everyone just to get a picture of your perception of your health.** | | |
| 8) Compared to other people your age, would you say your health is… | | 1 Excellent  2 Very good  3 Good  4 Fair  5 Poor |
| 9) When did you most recently see a medical provider such as a doctor or nurse in the US for a routine check-up, a routine physical examine, or something similar, not including an Emergency Department visit? | | 0 Never  1 Within past 6 months  2 Within the past year  3 1-2 years ago  4 Over 2 years ago |
| 10) When did you most recently see a medical provider such as a doctor or nurse in the US for help with hormone therapy for feminization? | | 0 Never  1 Within past 6 months  2 Within the past year  3 1-2 years ago  4 Over 2 years ago |
| 11) When did you most recently see a medical provider such as a doctor or nurse in another country for help with hormone therapy for feminization? | | 0 Never  1 Within past 6 months  2 Within the past year  3 1-2 years ago  4 Over 2 years ago |
| 12) What country was that? |  | |

**BARRIERS TO HEALTH CARE**

|  |  |
| --- | --- |
| **Have any of the following reasons prevented you from seeking or obtaining general health or medical care in the US in the past 12 months?** | |
| 13A) You did not have health insurance. | 0 No 1 Yes |
| 13B) The clinic, health department, or hospital was too far away. | 0 No 1 Yes |
| 13C) You did not have transportation. | 0 No 1 Yes |
| 13D) You could not take time off from work. | 0 No 1 Yes |
| 13E) The clinic, health department, or hospital was not open when you could go. | 0 No 1 Yes |
| 13F) The staff and providers did not speak your language. | 0 No 1 Yes |
| 13G) You were not sure where to go for the services you needed. | 0 No 1 Yes |
| 13H) It took too long to get an appointment. | 0 No 1 Yes |
| 13I) During previous visits it took too long to see a doctor. | 0 No 1 Yes |
| 13J) You felt like you would be treated poorly. | 0 No 1 Yes |
| 13K) You didn’t know whether you were eligible to be seen. | 0 No 1 Yes |
| 13L) You were concerned about other people finding out about your health. | 0 No 1 Yes |
| 13M) You thought that the medical bill would be too high. | 0 No 1 Yes |

# ACCULTURATION

|  |  |
| --- | --- |
| **The following section is about language and how you prefer to communicate.** | |
| 14A) In general, what language(s) do you read and speak? | 🞏1 Only Spanish  🞏2 More Spanish than English  🞏3 Both equally  🞏4 More English than Spanish  🞏5 Only English  🞏6 Other language, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14B) What was the language(s) you used as a child? | 🞏1 Only Spanish  🞏2 More Spanish than English  🞏3 Both equally  🞏4 More English than Spanish  🞏5 Only English  🞏6 Other language, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14C) What language(s) do you usually speak at home? | 🞏1 Only Spanish  🞏2 More Spanish than English  🞏3 Both equally  🞏4 More English than Spanish  🞏5 Only English  🞏6 Other language, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14D) In which language(s) do you usually think? | 🞏1 Only Spanish  🞏2 More Spanish than English  🞏3 Both equally  🞏4 More English than Spanish  🞏5 Only English  🞏6 Other language, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14E) What language(s) do you usually speak with your friends? | 🞏1 Only Spanish  🞏2 More Spanish than English  🞏3 Both equally  🞏4 More English than Spanish  🞏5 Only English  🞏6 Other language, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14F) In what language(s) are the TV programs you usually watch? | 🞏1 Only Spanish  🞏2 More Spanish than English  🞏3 Both equally  🞏4 More English than Spanish  🞏5 Only English  🞏6 Other language, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14G) In what language(s) are the radio programs you usually listen to? | 🞏1 Only Spanish  🞏2 More Spanish than English  🞏3 Both equally  🞏4 More English than Spanish  🞏5 Only English  🞏6 Other language, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14H) In general, what language(s) are the movies, TV, and radio  programs you prefer to watch and listen to? | 🞏1 Only Spanish  🞏2 More Spanish than English  🞏3 Both equally  🞏4 More English than Spanish  🞏5 Only English  🞏6 Other language, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14I) Your close friends are… | 🞏1 All Latinos/Hispanics  🞏2 More Latinos than Americans  🞏3 About half and half  🞏4 More Americans than Latinos  🞏5 All Americans  🞏6 Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14J) You prefer going to social gatherings/parties at which people are… | 🞏1 All Latinos/Hispanics  🞏2 More Latinos than Americans  🞏3 About half and half  🞏4 More Americans than Latinos  🞏5 All Americans  🞏6 Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14K) The persons you visit or who visit you are… | 🞏1 All Latinos/Hispanics  🞏2 More Latinos than Americans  🞏3 About half and half  🞏4 More Americans than Latinos  🞏5 All Americans  🞏6 Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 14L) If you could choose your children’s friends you would want them to be… | 🞏1 All Latinos/Hispanics  🞏2 More Latinos than Americans  🞏3 About half and half  🞏4 More Americans than Latinos  🞏5 All Americans  🞏6 Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

HORMONE THERAPY USE

|  |  |
| --- | --- |
| I want to ask you a bit about your use of transition-related services such as hormone therapy. Remember that your answers are safe with me. I won’t tell anyone what we talked about today, and this information will help us plan for future potential projects. | |
| 15) Have you ever used hormones for feminization? | 0 No 1 Yes  *[If no, skip to 21A]* |
| 16) Are you currently using hormones for feminization? | 0 No 1 Yes |
| 17) When did you first start using hormones for feminization? | \_\_\_\_\_\_\_\_\_\_  Month/year |
| 18) When you first started using hormones for feminization, where did you get them? | 1 Tienda in US  2 Tienda in your country of origin  3 Flea market in US  4 Flea market in your country of origin  5 Traditional healer (e.g., Curandero, Botanico or Husero) in US  6 Traditional healer (e.g., Curandero, Botanico or Husero) in your country of origin  7 Friends in US  8 Friends in your country of origin  9 Family in US  10 Family in your country of origin  11 The internet  12 A medical doctor or nurse in the US prescribed them and you obtained them at a pharmacy  13 A medical doctor or nurse in your country of origin prescribed them and you obtained them at a pharmacy  14 Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_ |
| 19) When did you get your most recent hormones for feminization? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Month/Year |
| 20A) Where did you get your most recent hormones for feminization? | 1 Tienda in US  2 Tienda in your country of origin  3 Flea market in US  4 Flea market in your country of origin  5 Traditional healer (e.g., Curandero, Botanico or Husero) in US  6 Traditional healer (e.g., Curandero, Botanico or Husero) in your country of origin  7 Friends in US  8 Friends in your country of origin  9 Family in US  10 Family in your country of origin  11 The internet  12 A medical doctor or nurse in the US prescribed them and you obtained them at a pharmacy  13 A medical doctor or nurse in your country of origin prescribed them and you obtained them at a pharmacy  14 Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_ |
| 20B) Where did you go to get your most recent prescription? | 99 I did not obtain hormones prescribed by a medical doctor or nurse in the US.  Name of place and provider:  Address:  City:  State:  Zip: |
| 20C) What pharmacy did you use to get your most recent prescription filled? | 99 I did not obtain hormones prescribed by a medical doctor or nurse in the US.  Name:  Address:  City:  State:  Zip: |

HORMONE THERAPY KNOWLEDGE

|  |  |  |  |
| --- | --- | --- | --- |
| **Please tell me if the following statements are true or false. But don’t worry if you don’t know an answer; you can also tell me that you don’t know.** | False | True | Don’t Know |
| 21A) Only a medical doctor or nurse can determine the appropriate hormone therapy and dose. | 0 | 1 | 88 |
| 21B) Transgender women who are taking hormones should have periodic checkups with a medical doctor or nurse. | 0 | 1 | 88 |
| 21C) It is dangerous to use hormones without supervision of a medical doctor or nurse. | 0 | 1 | 88 |
| 21D) Hormones obtained from a tienda, the internet, or one’s friends are safe to use. | 0 | 1 | 88 |
| 21E) Using hormones other than as prescribed by a medical doctor or nurse can cause damage to the kidneys, liver, and heart, and could increase risk for diabetes. | 0 | 1 | 88 |
| 21F) Taking hormones changes the size of one’s adam’s apple. | 0 | 1 | 88 |
| 21G) Taking hormones completely eliminates facial hair. | 0 | 1 | 88 |
| 21H) There are places in NC that offer medically supervised hormone therapy for transgender women at reduce cost without insurance. | 0 | 1 | 88 |
| 21I) A prescription for hormone therapy must be obtained from a medical doctor or nurse. | 0 | 1 | 88 |

**READINESS FOR MEDICALLY SUPERVISED HORMONES**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Not at all likely | A little likely | Moderately likely | Very likely | Extremely likely | I am already taking medically supervised hormone therapy |
| 22) How likely is it that you would initiate medically supervised hormone therapy from a medical doctor or nurse in the US? | 1 | 2 | 3 | 4 | 5 | 99  *[Skip to 26A]* |

|  |  |
| --- | --- |
| 23) Are you planning to initiate medically supervised hormone therapy in the next 6 months? | 0 No 1 Yes |
| 24) Are you planning to initiate medically supervised hormone therapy in the next 30 days? | 0 No 1 Yes |
| 25) Have you made an appointment with a doctor or at a clinic to obtain medically supervised hormone therapy? | 0 No 1 Yes |

**BARRIERS TO MEDICALLY SUPERVISED HORMONE THERAPY**

|  |  |
| --- | --- |
| **Have any of the following reasons prevented you from seeking or obtaining medically supervised hormone therapy in the US in the past 12 months?** | |
| 26A) You did not have health insurance. | 0 No 1 Yes |
| 26B) The clinic, health department, or hospital was too far away. | 0 No 1 Yes |
| 26C) You did not have transportation. | 0 No 1 Yes |
| 26D) You could not take time off from work. | 0 No 1 Yes |
| 26E) The clinic, health department, or hospital was not open when you could go. | 0 No 1 Yes |
| 26F) The staff and providers did not speak your language. | 0 No 1 Yes |
| 26G) You were not sure where to go for medically supervised hormone therapy. | 0 No 1 Yes |
| 26H) It took too long to get an appointment. | 0 No 1 Yes |
| 26I) During previous visits it took too long to see a doctor. | 0 No 1 Yes |
| 26J) You felt like you would be treated poorly. | 0 No 1 Yes |
| 26K) You didn’t know whether you were eligible to be seen. | 0 No 1 Yes |
| 26L) You were concerned about other people finding out about your health. | 0 No 1 Yes |
| 26M) You thought that the medical bill would be too high. | 0 No 1 Yes |

**ACCESSING MEDICALLY SUPERVISED HORMONE THERAPY**

|  |  |  |
| --- | --- | --- |
| 27) If you wanted to learn more about hormones for feminization, where would you go? |  | 88 Don’t know |
| 28) If you wanted to get a prescription for hormones for feminization, where would you go? |  | 88 Don’t know |

HIV KNOWLEDGE

|  |  |  |  |
| --- | --- | --- | --- |
| I’d like to ask you about what you know about HIV.  By answering the following questions as honestly as possible, you will help ensure that this and future projects are meeting the health needs of Latinas like yourself.  Please tell me if the following statements are true or false. | | | |
|  | False | True | Don’t Know |
| 29A) HIV is a virus that causes AIDS. | 0 | 1 | 88 |
| 29B) Coughing and sneezing do not spread HIV. | 0 | 1 | 88 |
| 29C) A person can get HIV by sharing a glass of water with someone who has HIV. | 0 | 1 | 88 |
| 29D) Showering, douching, or washing one’s genitals/private parts after sex keeps a person from getting HIV. | 0 | 1 | 88 |
| 29E) If a man looks good, he doesn’t have HIV. | 0 | 1 | 88 |
| 29F) All pregnant women infected with HIV will have babies born with HIV. | 0 | 1 | 88 |
| 29G) People who have been infected with HIV quickly show physical signs of being infected. | 0 | 1 | 88 |
| 29H) I am safe from HIV if I only have unprotected sex with married men. | 0 | 1 | 88 |
| 29I) There is a vaccine that can stop adults from getting HIV. | 0 | 1 | 88 |
| 29J) An animal skin condom works better against HIV than does a latex condom. | 0 | 1 | 88 |
| 29K) A person will not get HIV if she or he is taking antibiotics. | 0 | 1 | 88 |
| 29L) Vaseline and baby oil are products that should be used with latex condoms. | 0 | 1 | 88 |
| 29M) There is a cure for HIV. | 0 | 1 | 88 |
| 29N) Latinos in the US have higher rates of HIV infection than whites. | 0 | 1 | 88 |
| 29O) During anal sex, the “top” (or insertive partner) is not at risk for HIV. | 0 | 1 | 88 |
| 29P) The southeastern US has higher rates of HIV infection than other regions of the US. | 0 | 1 | 88 |
| 29Q) North Carolina has one of the fastest growing HIV infection rates in the US. | 0 | 1 | 88 |
| 29R) North Carolina ranks within the top 10 US states with new HIV diagnoses. | 0 | 1 | 88 |
| 29S) Transgender women have higher rates of HIV than than the general population. | 0 | 1 | 88 |

STD KNOWLEDGE

|  |  |  |  |
| --- | --- | --- | --- |
| Next are a few statements about sexually transmitted diseases, also known as STDs.  Please tell me if the following statements are true or false. | | | |
|  | False | True | Don’t Know |
| 30A) Someone infected with an STD will always develop symptoms within 2 months. | 0 | 1 | 88 |
| 30B) There is a vaccine that prevents Hepatitis B. | 0 | 1 | 88 |
| 30C) It is possible to self-diagnosis for STD infection. | 0 | 1 | 88 |
| 30D) Female infertility can result from an untreated STD. | 0 | 1 | 88 |
| 30E) People who have another STD, such as herpes, chlamydia, and gonorrhea are at greater risk for contracting HIV. | 0 | 1 | 88 |
| 30F) People infected with genital herpes (Herpes Simplex Virus-type 2) can only pass the infection to someone else during the time that they have blisters or sores in the genital region. | 0 | 1 | 88 |
| 30G) Oral-anal sexual contact (‘rimming’) can spread Hepatitis A infection. | 0 | 1 | 88 |
| 30H) Chlamydia is the most common bacterial STD in the United States. | 0 | 1 | 88 |
| 30I) There is an STD that can cause cancer. | 0 | 1 | 88 |
| 30J) Genital warts can never be transmitted as long as condoms are used. | 0 | 1 | 88 |
| 30K) Painful urination is a symptom of gonorrhoea. | 0 | 1 | 88 |
| 30L) I was treated for an STD so I am now immune from getting it again. | 0 | 1 | 88 |
| 30M) If someone is being treated for HIV, they cannot get an STD. | 0 | 1 | 88 |
| 30N) Only those with lots of partners are at risk for STD infection. | 0 | 1 | 88 |
| 30O) Syphilis infection in North Carolina is increasing among men who have sex with men. | 0 | 1 | 88 |

PrEP

|  |  |
| --- | --- |
| One way to prevent HIV is to use a medication called PrEP.  PrEP stands for pre-exposure prophylaxis. | |
| 31) Have you heard of PrEP? | 0 No 1 Yes |
| 32) Are you currently using PrEP? | 0 No 1 Yes  *[If no, skip to 38]* |
| 33) When did you first start using PrEP? | \_\_\_\_\_\_\_\_\_\_  Month/year |
| 34) When you first started using PrEP, where did you go to get a prescription? | Name of place and provider:  Address:  City:  State:  Zip: |
| 35) Where did you go to get your most recent prescription? | Name of place and provider:  Address:  City:  State:  Zip: |
| 36) What pharmacy did you use to get your most recent prescription filled? | Name:  Address:  City:  State:  Zip: |
| 37) In the past seven days, how many days did you not take PrEP? | [Fill in number here:] \_\_\_\_\_\_\_\_\_\_  0 I took PrEP as prescribed |
| 38) On a scale from 0 to 10, with 0 being knowing nothing at all and 10 being a lot, how much would you say you know about PrEP? | 0 1 2 3 4 5 6 7 8 9 10  (Nothing (A lot)  at all) |

**PrEP KNOWLEDGE**

|  |  |  |  |
| --- | --- | --- | --- |
| **Please tell me if the following statements are true or false. But don’t worry if you don’t know an answer; you can also tell me that you don’t know.** | False | True | Don’t Know |
| 39A) PrEP can reduce the chances of getting HIV among those without HIV. | 0 | 1 | 88 |
| 39B) The medication that is currently approved for use as PrEP is called Truvada. | 0 | 1 | 88 |
| 39C) If taken every day as directed by a doctor, PrEP can be 99% effective against getting HIV. | 0 | 1 | 88 |
| 39D) PrEP protects against other STDs. | 0 | 1 | 88 |
| 39E) PrEP is a cure for HIV. | 0 | 1 | 88 |
| 39F) Most people who take PrEP report side effects. | 0 | 1 | 88 |
| 39G) PrEP can be taken with food. | 0 | 1 | 88 |
| 39H) Someone who has HIV should take PrEP. | 0 | 1 | 88 |
| 39I) PrEP interacts with female hormones that some transgender take or plan to take. | 0 | 1 | 88 |
| 39J) To be effective, PrEP must be taken every day. | 0 | 1 | 88 |
| 39K) A prescription for PrEP must be obtained from a medical doctor or nurse. | 0 | 1 | 88 |
| 39L) Only a pharmacy can provide PrEP. | 0 | 1 | 88 |
| 39M) There are no places available to get PrEP in the local community. | 0 | 1 | 88 |

**READINESS FOR PrEP**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Not at all likely | A little likely | Moderately likely | Very likely | Extremely likely | I am already using PrEP |
| 40) How likely is it that you’d use PrEP? | 1 | 2 | 3 | 4 | 5 | 99  *[Skip to 44A]* |

|  |  |
| --- | --- |
| 41) Are you planning to initiate PrEP use in the next 6 months? | 0 No 1 Yes |
| 42) Are you planning to initiate PrEP use in the next 30 days? | 0 No 1 Yes |
| 43) Have you made an appointment with a doctor or at a clinic to obtain a prescription for PrEP? | 0 No 1 Yes |

**BARRIERS TO PrEP**

|  |  |
| --- | --- |
| **Have any of the following reasons prevented you from seeking or obtaining PrEP in the US in the past 12 months?** | |
| 44A) You did not have health insurance. | 0 No 1 Yes |
| 44B) The clinic, health department, or hospital was too far away. | 0 No 1 Yes |
| 44C) You did not have transportation. | 0 No 1 Yes |
| 44D) You could not take time off from work. | 0 No 1 Yes |
| 44E) The clinic, health department, or hospital was not open when you could go. | 0 No 1 Yes |
| 44F) The staff and providers did not speak your language. | 0 No 1 Yes |
| 44G) You were not sure where to go to get PrEP. | 0 No 1 Yes |
| 44H) It took too long to get an appointment. | 0 No 1 Yes |
| 44I) During previous visits it took too long to see a doctor. | 0 No 1 Yes |
| 44J) You felt like you would be treated poorly. | 0 No 1 Yes |
| 44K) You didn’t know whether you were eligible to be seen. | 0 No 1 Yes |
| 44L) You were concerned about other people finding out about your health. | 0 No 1 Yes |
| 44M) You thought that the medical bill would be too high. | 0 No 1 Yes |

**ACCESSING PrEP**

|  |  |  |
| --- | --- | --- |
| 45) If you wanted to learn more about PrEP, where would you go? |  | 88 Don’t know |
| 46) If you wanted to get a prescription for PrEP, where would you go? |  | 88 Don’t know |

PROVIDER TRUST AND COMMUNICATION

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Thinking about doctors in general, please tell me how strongly you agree or disagree with the following statements.** | | | | |
|  | Strongly disagree | Disagree | Agree | Strongly agree |
| 47A) Sometimes doctors care more about what is convenient for them than about their patients’ medical needs. | 1 | **2** | 3 | 4 |
| 47B) Doctors are extremely thorough and careful. | 1 | **2** | 3 | 4 |
| 47C) I completely trust doctors’ decisions about which medical treatments are best. | 1 | **2** | 3 | 4 |
| 47D) A doctor would never mislead me about anything. | 1 | **2** | 3 | 4 |
| 47E) All in all, I trust doctors completely. | 1 | **2** | 3 | 4 |
| 48A) When all is said and done, I am the person who is responsible for managing my health. | 1 | **2** | 3 | 4 |
| 48B) Taking an active role in my own health care is the most important factor in determining my health and ability to function. | 1 | **2** | 3 | 4 |
| 48C) I am confident that I can take actions that will help prevent or minimize some symptoms or problems associated with my health. | 1 | **2** | 3 | 4 |
| 48D) I know what each of my prescribed medications do. | 1 | **2** | 3 | 4 |
| 48E) I am confident that I can tell when I need to go get medical care and when I can handle a health problem myself. | 1 | 2 | 3 | 4 |
| 48F) I am confident I can tell my health care provider concerns I have even when he or she does not ask. | 1 | **2** | 3 | 4 |
| 48G) I am confident that I can follow through on medical treatments I need to do at home. | 1 | **2** | 3 | 4 |
| 48H) I understand my health. | 1 | **2** | 3 | 4 |
| 48I) I know the different medical treatment options available for me. | 1 | **2** | 3 | 4 |
| 48J) I have been able to maintain the lifestyle changes for my health that I have made. | 1 | **2** | 3 | 4 |
| 48K) I know how to prevent problems with my health. | 1 | **2** | 3 | 4 |
| 48L) I am confident I can figure out solutions when situations or problems arise with my health. | 1 | 2 | 3 | 4 |
| 48M) I am confident that I can maintain lifestyle changes even during times of stress | 1 | **2** | 3 | 4 |

SEXUAL IDENTITY

|  |  |
| --- | --- |
| **Now I am going to ask you few more very personal questions about sex and sexual behaviors. Remember that your responses are private, and you do not have to answer any question you are not comfortable with. Just be honest.**  **These questions help us understand the behaviors and needs of Latina women just like you.** | |
| 49) Which of the following best represents how you think of yourself? | 🞏0 Gay (lesbian or gay)  🞏1 Straight, this is not gay (or lesbian or gay)  🞏2 Bisexual  🞏3  Something else  🞏4 I don’t know the answer |
| 50) What is your current relationship status? | 🞏1 Single and not dating anyone special *[Skip to 52***]**  🞏2 Dating someone special and having sex with other people also  🞏3 Dating someone special and not having sex with other people  🞏4 Partnered or married and have sex with other people also  🞏5 Partnered or married and don’t have sex with other people |
| 51) If dating, partnered, or married, what is that person’s gender? | 🞏0 Female  🞏1 Male  🞏2 Male to female transgender  🞏3 Female to male transgender  🞏4 Other [please specify]: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

SEX WITH MEN AND WOMEN

|  |  |
| --- | --- |
| **Now, I want to ask you about sex with men. In these next questions when we say “sex” we mean “oral” or “anal” sex. Oral sex is when someone puts their penis in another person’s mouth. Anal sex is when someone puts their penis in another person’s anus. Do you understand these terms?** | |
| 52) How many men have you had sex with in the past 6 months? | \_\_\_­­­­\_\_\_\_\_# men |
| 53) How many women have you had sex with in the past 6 months? | \_\_\_­­­­\_\_\_\_\_# women |

|  |  |
| --- | --- |
| **First, I want to ask you about the times that a man put his penis in your anus to have sex.** | |
| 54) About when was the most recent time that a man put his penis in your anus? | 🞏77 I have never had a man put his penis in my anus. *[Skip to 58***]**  🞏1 Within the past week  🞏2 Within the past 30 days, but more than a week ago  🞏3 Over one month ago but within the past 3 months  🞏4 3 months but less than 6 months ago  🞏5 6 months ago but less than a year ago  🞏6 A year or more ago |
| 55) Thinking about the most recent time that a man put his penis in your anus, did he use condoms? | 0 No 1 Yes |
| 56) Thinking about all the times that a man put his penis in your anus during the past 30 days, how often did he use condoms? | 🞏77 I have not had a man put his penis in my anus in the past 30 days.  🞏1  Never  🞏2 Once in awhile  🞏3 About half the time  🞏4 Most of the time  🞏5 Always |
| 57) Thinking about all the times that a man put his penis in your anus during the past 3 months, how often did he use condoms? | 🞏77 I have not had a man put his penis in my anus in the past 3 months.  🞏1  Never  🞏2 Once in awhile  🞏3 About half the time  🞏4 Most of the time  🞏5 Always |

|  |  |
| --- | --- |
| **Some transgender women have vaginas. If you have a vagina, we want to know about your use of condoms when a man puts his penis in your vagina.** | |
| 58) About when was the most recent time that a man put his penis in your vagina, if you have a vagina? | 🞏77 I have never had a man put his penis in my vagina or I don’t have a vagina. *[Skip to 62]*  🞏1 Within the past week  🞏2 Within the past 30 days, but more than a week ago  🞏3 Over one month ago but within the past 3 months  🞏4 3 months but less than 6 months ago  🞏5 6 months ago but less than a year ago  🞏6 A year or more ago |
| 59) Thinking about the most recent time that a man put his penis in your vagina, did he use condoms? | 0 No 1 Yes |
| 60) Thinking about all the times that a man put his penis in your vagina during the past 30 days, how often did he use condoms? | 🞏77 I have not had a man put his penis in my vagina in the past 30 days  🞏1  Never  🞏2 Once in awhile  🞏3 About half the time  🞏4 Most of the time  🞏5 Always |
| 61) Thinking about all the times that a man put his penis in your vagina during the past 3 months, how often did he use condoms? | 🞏77 I have not had a man put his penis in my vagina in the past 3 months  🞏1 Never  🞏2 Once in awhile  🞏3 About half the time  🞏4 Most of the time  🞏5 Always |

|  |  |
| --- | --- |
| **Some transgender women have penises. If you have a penis, we want to know about your use of condoms when you have sex with men and women.**  **First, I want to ask you about the times you put your penis in the anus of a man to have sex.** | |
| 62) About when was the most recent time that you put your penis in the anus of a man? | 🞏77 I never have put my penis in the anus of a man or I don’t have a penis*[Skip to 66]*  🞏1 Within the past week  🞏2 Within the past 30 days, but more than a week ago  🞏3 Over one month ago but within the past 3 months  🞏4 3 months but less than 6 months ago  🞏5 6 months ago but less than a year ago  🞏6 A year or more ago |
| 63) Thinking about the most recent time you put your penis in the anus of a man, did you use condoms? | 0 No 1 Yes |
| 64) Thinking about all the times you put your penis in the anus of a man during the past 30 days, how often did you use condoms? | 🞏77 I have not put my penis in the anus of a man in the past 30 days  🞏1  Never  🞏2 Once in awhile  🞏3 About half the time  🞏4 Most of the time  🞏5 Always |
| 65) Thinking about all the times you put your penis in the anus of a man during the past 3 months, how often did you use condoms? | 🞏77 I have not put my penis in the anus of a man in the past 3 months  🞏1  Never  🞏2 Once in awhile  🞏3 About half the time  🞏4 Most of the time  🞏5 Always |

|  |  |
| --- | --- |
| **Now, I want to ask you about the times you put your penis in the vagina of a woman to have sex.** | |
| 66) About when was the most recent time that you put your penis in the vagina of a woman? | 🞏77 I never have put my penis in the vagina of a woman or I don’t have a penis*[Skip to 70]*  🞏1 Within the past week  🞏2 Within the past 30 days, but more than a week ago  🞏3 Over one month ago but within the past 3 months  🞏4 3 months but less than 6 months ago  🞏5 6 months ago but less than a year ago  🞏6 A year or more ago |
| 67) Thinking about the most recent time you put your penis in the vagina of a woman, did you use condoms? | 0 No 1 Yes |
| 68) Thinking about all the times you put your penis in the vagina of a woman during the past 30 days, how often did you use condoms? | 🞏77 I have not put my penis in the vagina of a woman in the past 30 days  🞏1  Never  🞏2 Once in awhile  🞏3 About half the time  🞏4 Most of the time  🞏5 Always |
| 69) Thinking about all the times you put your penis in vagina of a woman during the past 3 months, how often did you use condoms? | 🞏77 I have not put my penis in the vagina of a woman in the past 3 months  🞏1  Never  🞏2 Once in awhile  🞏3 About half the time  🞏4 Most of the time  🞏5 Always |

|  |  |
| --- | --- |
| **Now, I want to ask you about the times you put your penis in the anus of a woman to have sex.** | |
| 70) About when was the most recent time that you put your penis in the anus of a woman? | 🞏77 I never have put my penis in the anus of a woman or I don’t have a penis*[Skip to 74]*  🞏1 Within the past week  🞏2 Within the past 30 days, but more than a week ago  🞏3 Over one month ago but within the past 3 months  🞏4 3 months but less than 6 months ago  🞏5 6 months ago but less than a year ago  🞏6 A year or more ago |
| 71) Thinking about the most recent time you put your penis in the anus of a woman, did you use condoms? | 0 No 1 Yes |
| 72) Thinking about all the times you put your penis in the anus of a woman during the past 30 days, how often did you use condoms? | 🞏77 I have not put my penis in the anus of a woman in the past 30 days.  🞏1  Never  🞏2 Once in awhile  🞏3 About half the time  🞏4 Most of the time  🞏5 Always |
| 73) Thinking about all the times you put your penis in the anus of a woman during the past 3 months, how often did you use condoms? | 🞏77 I have not put my penis in the anus of a woman in the past 3 months.  🞏1  Never  🞏2 Once in awhile  🞏3 About half the time  🞏4 Most of the time  🞏5 Always |

|  |  |
| --- | --- |
| 74) Where did you first meet your most recent male  sex partner? | 🞏1 Adult bookstore  🞏2 Through friend(s)  🞏3 Gay bar / Club  🞏4 Sex club / Bathhouse  🞏5 Non-gay bar / Club  🞏6 Gym / health club / athletic activity  🞏7 Facebook  🞏8 Internet dating or social networking site, including apps like Grindr, Jackd, Adam4Adam, and badoo  🞏9 Public places including park, shopping mall, library, public transportation  🞏10 School  🞏11 Social organizations / volunteer service activities  🞏12 Private party or social club  🞏13 Vacation / Business trip  🞏13 Work  🞏14 Grocery store  🞏16 Church, political group  🞏17 Some other­­ way (please specify):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**CONDOM USE SKILLS**

|  |  |  |  |
| --- | --- | --- | --- |
| **There are certain steps to using a condom correctly.**  **The following are statements about using a condom, some of which are correct, and some of which are incorrect. Tell me whether the statement is correct or incorrect.** | | | |
|  | Correct | Incorrect | Don’t know |
| 75A) Use a latex condom. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75B) Tear along one side of the foil, being sure not to rip the condom inside. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75C) Put the condom on anytime before ejaculation. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75D) Put the condom on when the penis is erect, before there is any contact between the penis and the other partner’s anus or vagina. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75E) Completely unroll the condom before placing on the penis. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75F) Withdraw the penis while it is still erect by holding the condom firmly in place, then remove the condom. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75G) If the penis is uncircumcised, pull the foreskin towards the base (hair) of the penis before putting the condom on. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75H) Use a water-based lubricant (e.g., KY Jelly). | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75I) Squeeze the closed end of the condom between your forefinger and thumb and unroll the condom over the erect penis. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75J) Wrap the used condom back in the foil to save for the next time. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75K) Unroll the condom to the base (hair) of the penis. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75L) Use an oil-based lubricant. (i.e., oil, Vaseline, baby oil) | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75M) Check the expiration date on the condom. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75N) Tear the condom package open with your teeth | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75O) With one hand pinch the tip of the condom to leave space and prevent air bubbles, and with the other hand, unroll the condom | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75P) Dispose of the used condoms. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75Q) Wash the condom to use it again. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |
| 75R) Use a lambskin condom. | cid:image001.png@01D152C7.95CF85F00 | cid:image001.png@01D152C7.95CF85F01 | cid:image001.png@01D152C7.95CF85F088 |

**CONDOM USE INTENTIONS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Now I am going to read some statements and want you to tell me how likely the following statement is to occur. You can choose:**  **Not at all likely; A little likely; Moderately likely; Very likely; and Extremely likely** | | | | | |
|  | Not at all likely | A little likely | Moderately likely | Very likely | Extremely likely |
| 76A) During the next month, you intend to try to persuade your partner(s) to use condoms every time you have sex. | 1 | 2 | 3 | 4 | 5 |
| 76B) You intend to get condoms during the next month. | 1 | 2 | 3 | 4 | 5 |
| 76C) You intend to always have condoms handy during the next month. | 1 | 2 | 3 | 4 | 5 |
| 76D) You intend to use condoms every time you have sex during the next month. | 1 | 2 | 3 | 4 | 5 |

# STD SELF REPORT

|  |  |
| --- | --- |
| **Now I’m going to ask questions about specific sexual activities and sexually transmitted diseases.**  **You can stop and ask me if you don’t understand the names of these diseases.** | |
| Have you ever been to a clinic, hospital, health department, or doctor’s office for either of the following? | |
| 77) To be tested for sexually transmitted diseases (STDs) | 0 No 1 Yes |
| 78) To be tested for HIV | 0 No 1 Yes |

|  |  |  |
| --- | --- | --- |
| 79) During the past 12 months, have you been to a clinic, hospital, health department, or doctor’s office to be tested for sexually transmitted diseases (STDs)? This does not include testing for HIV. | | 0 No 1 Yes |
| 80) During the past 6 months, have you been to a clinic, hospital, health department, or doctor’s office to be tested for sexually transmitted diseases (STDs)? This does not include testing for HIV. | | 0 No 1 Yes |
| 81) During the past 12 months, have you been to a clinic, hospital, health department, or doctor’s office to be tested for HIV? | | 0 No 1 Yes |
| 82) During the past 6 months, have you been to a clinic, hospital, health department, or doctor’s office to be tested for HIV? | | 0 No 1 Yes |
| 83) Where did you take your most recent HIV test? (What place or location? Examples include health department, free clinic, doctor’s office) |  | |
| 84) What was the result of your most recent HIV test? | 1 Negative  2  Positive  3  Indeterminate  4 Did not get the result of the most recent past test | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Has a doctor or nurse ever told you that you have the following sexually transmitted diseases (STDs)?**  **If a doctor or nurse has told you, how long ago was the most recent diagnosis:** | | | | |
|  | Never (0) | Less than 1 year ago (1) | 1-5 years ago (2) | More than 5 years ago (3) |
| 85) Gonorrhoea |  |  |  |  |
| 86) Syphilis |  |  |  |  |
| 87) Chlamydia |  |  |  |  |
| 88) Herpes |  |  |  |  |
| 89) Hepatitis A/B/C |  |  |  |  |
| 90) HIV / AIDS |  |  |  |  |
| 91) HPV / Genital Warts |  |  |  |  |
| 92) Other: \_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |

|  |  |  |
| --- | --- | --- |
|  | No | Yes |
| 93) In the past 3 months, have you given something to a man in exchange for sex? (i.e., money, drugs, alcohol, other) | 0 | 1 |
| 94) In the past 3 months, have you received something from a man in exchange for sex? (i.e., money, drugs, alcohol, other) | 0 | 1 |
| 95) In the past 3 months, have you given something to a woman in exchange for sex? (i.e., money, drugs, alcohol, other) | 0 | 1 |
| 96) In the past 3 months, have you received something from a woman in exchange for sex? (i.e., money, drugs, alcohol, other) | 0 | 1 |

**BARRIERS TO HIV TESTING**

|  |  |
| --- | --- |
| If you have never been tested for HIV, what are the reasons why you have never taken an HIV test? Please tell me all of the reasons that apply. | |
| 97A) I have been tested for HIV *[Skip to 98A]* | 1 Yes |
| 97B) I don’t have health insurance. | 1 Yes |
| 97C) I am afraid that my result will be reported to the government | 1 Yes |
| 97D) I am afraid I might be HIV positive. | 1 Yes |
| 97E) I am afraid people will think I'm transgender. | 1 Yes |
| 97F) I am afraid people might treat me differently. | 1 Yes |
| 97G) I don't have the time. | 1 Yes |
| 97H) I don’t have transportation. | 1 Yes |
| 97I) I can’t afford it. | 1 Yes |
| 97J) I have been practicing safer sex. | 1 Yes |
| 97K) I know my sexual partners don't have HIV. | 1 Yes |
| 97L) I am not at risk for HIV. | 1 Yes |
| 97M) I can’t take time off from work. | 1 Yes |
| 97N) I don’t think I am eligible to be seen. | 1 Yes |
| 97O) The hours aren’t convenient to my work schedule. | 1 Yes |
| 97P) I don’t know where to get tested. | 1 Yes |
| 97Q) It is not important. | 1 Yes |
| 97R) No one recommended getting tested to me. | 1 Yes |
| 97S) Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 1 Yes |

|  |  |
| --- | --- |
| Now think about the past 12 months. If you have not been tested for HIV in the past 12 months, what are the reasons why you have not taken an HIV test? Please tell me all of the reasons that apply. | |
| 98A) I have been tested for HIV in the past 12 months. *[Skip to 99A]* | 1 Yes |
| 98B) I don’t have health insurance. | 1 Yes |
| 98C) I am afraid that my result will be reported to the government. | 1 Yes |
| 98D) I am afraid I might be HIV positive. | 1 Yes |
| 98E) I am afraid people will think I'm transgender. | 1 Yes |
| 98F) I am afraid people might treat me differently. | 1 Yes |
| 98G) I don't have the time. | 1 Yes |
| 98H) I don’t have transportation. | 1 Yes |
| 98I) I can’t afford it. | 1 Yes |
| 98J) I have been practicing safer sex. | 1 Yes |
| 98K) I know my sexual partners don't have HIV. | 1 Yes |
| 98L) I am not at risk for HIV. | 1 Yes |
| 98M) I can’t take time off from work. | 1 Yes |
| 98N) I don’t think I am eligible to be seen. | 1 Yes |
| 98O) The hours aren’t convenient to my work schedule. | 1 Yes |
| 98P) I don’t know where to get tested. | 1 Yes |
| 98Q) It is not important. | 1 Yes |
| 98R) No one recommended getting tested to me. | 1 Yes |
| 98S) Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 1 Yes |

PERCEIVED DISCRIMINATION

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Now I want to ask you about feeling of discrimination.  How strongly do you agree or disagree with each statement? | | | | |
|  | Strongly disagree | Disagree | Agree | Strongly agree |
| 99A) Since coming to the US, I often have the feeling that I am being treated unfairly because of my ethnicity/race. | 1 | **2** | 3 | 4 |
| 99B) Since coming to the US, I have experienced violence due to my ethnicity/race. | 1 | **2** | 3 | 4 |
| 99C) Since coming to the US, I have experienced discrimination due to my ethnicity/race. | 1 | **2** | 3 | 4 |
| 99D) Since coming to the US, I often have the feeling that I am being treated unfairly because I am transgender. | 1 | **2** | 3 | 4 |
| 99E) Since coming to the US, I have experienced violence because I am transgender. | 1 | **2** | 3 | 4 |
| 99F) Since coming to the US, I have experienced discrimination because I am transgender. | 1 | **2** | 3 | 4 |
| 99G) Since coming to the US, I often have the feeling that I am being treated unfairly because I have sex with men. | 1 | **2** | 3 | 4 |
| 99H) Since coming to the US, I have experienced violence because I have sex with men. | 1 | **2** | 3 | 4 |
| 99I) Since coming to the US, I have experienced discrimination because I have sex with men. | 1 | **2** | 3 | 4 |
| 99J) Since coming to the US, I often have the feeling that I am being treated unfairly because of my documentation status. | 1 | **2** | 3 | 4 |
| 99K) Since coming to the US, I have experienced violence due to my documentation status. | 1 | **2** | 3 | 4 |
| 99L) Since coming to the US, I have experienced discrimination due to my documentation status. | 1 | **2** | 3 | 4 |

SUBSTANCE USE

|  |
| --- |
| **These next questions ask about substance use. Again, like in all of the questions, it is important to be honest so that we obtain the most accurate information and can develop the best programs to help Latinas.** |

**Thinking about drug use over the past 12 months…**

|  |  |  |
| --- | --- | --- |
|  | ***Column A*** | ***Column B*** |
| **Have you used?** | | **About how frequently?**  [Read response options] |
| 100) Marijuana | 􀁆1 Yes→ go to column B  􀁆0 No | 􀁆7 Daily  􀁆6 5-6 days a week  􀁆5  3-4 days a week  􀁆4 1-2 days a week  􀁆3 Several times a month  􀁆2 About once a month  􀁆1 Several times in the past 12 months |
| 101) Cocaine | 􀁆1 Yes→ go to column B  􀁆0 No | 􀁆7 Daily  􀁆6 5-6 days a week  􀁆5  3-4 days a week  􀁆4 1-2 days a week  􀁆3 Several times a month  􀁆2 About once a month  􀁆1 Several times in the past 12 months |
| 102) Crack | 􀁆1 Yes→ go to column B  􀁆0 No | 􀁆7 Daily  􀁆6 5-6 days a week  􀁆5  3-4 days a week  􀁆4 1-2 days a week  􀁆3 Several times a month  􀁆2 About once a month  􀁆1 Several times in the past 12 months |
| 103) Alkyl Nitrites such as poppers, Rush | 􀁆1 Yes→ go to column B  􀁆0 No | 􀁆7 Daily  􀁆6 5-6 days a week  􀁆5  3-4 days a week  􀁆4 1-2 days a week  􀁆3 Several times a month  􀁆2 About once a month  􀁆1 Several times in the past 12 months |
| 104) Pain Killers: Oxycotin, Percocet | 􀁆1 Yes→ go to column B  􀁆0 No | 􀁆7 Daily  􀁆6 5-6 days a week  􀁆5  3-4 days a week  􀁆4 1-2 days a week  􀁆3 Several times a month  􀁆2 About once a month  􀁆1 Several times in the past 12 months |
| 105) What other Drug: 1 | **􀁆1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | 􀁆7 Daily  􀁆6 5-6 days a week  􀁆5  3-4 days a week  􀁆4 1-2 days a week  􀁆3 Several times a month  􀁆2 About once a month  􀁆1 Several times in the past 12 months |
| 106) What other Drug: 2 | **􀁆2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | 􀁆7 Daily  􀁆6 5-6 days a week  􀁆5  3-4 days a week  􀁆4 1-2 days a week  􀁆3 Several times a month  􀁆2 About once a month  􀁆1 Several times in the past 12 months |

|  |  |
| --- | --- |
| 107A) In the past 12 months, have you ever used a needle or syringe that was used by someone else, even one time, outside of a medical setting to inject vitamins, medicines, drugs, or any other substances? | 🞏0 No *[Skip to 108]*  🞏1 Yes |
| 107B) If yes, please specify what substances you injected: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |
| --- | --- | --- |
| Column A | | Column B |
|  | | **About how frequently?**  *[Read response options]* |
| 108)Have you drunk alcohol in the past 12 months? | 􀁆1 Yes→ go to column B  􀁆0 No | 􀁆7 Daily  􀁆6 5-6 days a week  􀁆5 3-4 days a week  􀁆4 1-2 days a week  􀁆3 Several times a month  􀁆2 About once a month  􀁆1 Several times in the past 12 months |

|  |  |
| --- | --- |
| 109) In a typical week how many days do you get drunk? | **\_\_\_\_\_\_** Days  99 Don’t drink alcohol |
| 110) Considering all types of alcoholic beverages, how many *times* during the past 30 days did you have 5 drinks or more on an occasion? | **\_\_\_\_\_** Times  99 Don’t drink alcohol |
| 111) In the past 30 days, how many times have you been drunk immediately before or during sex? | **\_\_\_\_\_** Times |
| 112) In the past 30 days, how many times have you been high on drugs immediately before or during sex? | **\_\_\_\_\_** Times |

TRANSPHOBIA

|  |
| --- |
| **On a scale of 1 to 7, which best describes your response to the following statements?**  **The following questions are about how you have felt in the last 3 months about being transgender.**  **Give your first response and don’t spend a lot of time on any of the statements.** |

|  |  |
| --- | --- |
| 113A) Being transgender makes me feel special and unique. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113B) Being perceived as transgender by others is okay for me. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113C) I sometimes resent my transgender identity. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113D) Being transgender makes me feel like a freak. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113E) I feel isolated and separate from other transgender people. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113F) I have no problem talking about my transgenderism to almost anyone. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113G) Being transgender is a gift. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113H) When I think of being transgender, I feel depressed. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113I) For me, passing is everything. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113J) I cannot be happy unless I am perceived as a woman. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113K) Being read makes me try harder to pass. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113L) I am like other people but I am also special because I am transgender. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113M) Passing is my biggest concern. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113N) When I think about being transgender, I feel unhappy. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113O) Often, I feel weird like an outcast or a pervert. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113P) I often ask myself: Why can't I just be normal? | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113Q) It's much better to pass as female than to be recognized as transgender. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113R) I sometimes feel that being transgender is embarrassing. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113S) I am proud to be a transgender person. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113T) If I look the part, talk the talk, and walk the walk of a woman, it will allow others to accept me. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113U) Passing is a standard to measure my success. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113V) When interacting with members of the transgender community, I often feel like I don't fit in. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113W) I envy people who are not transgender. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113X) I'm not like other transgender people. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113Y) I am comfortable revealing to others that I am transgender. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |
| 113Z) I'd rather have people know everything and accept me as transgender. | 1 2 3 4 5 6 7  (Strongly (Strongly  disagree) agree) |

**EMPLOYMENT & EDUCATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **The following questions are about education and income.** | | | |
| 114) What is the highest level of education you reached? | 􀁆1 Less than 5 years of school  􀁆2 5-8 years of school  􀁆3 Less than high school diploma or equivalent (GED)  􀁆4 High school diploma or equivalent (GED)  􀁆5 Some college  􀁆6 2-year college degree  􀁆7 4-year college degree  􀁆8 Master’s degree, professional degree, or more | | |
| 115) Are you currently in school, not including ESL? | 􀁆0 No  􀁆1 Yes | | |
| 116) Are you in school full or part time? | 􀁆 99 I’m not in school  􀁆0 Part-time  􀁆 1 Fulltime | | |
| 117) What best describes your current employment status? | **􀁆**1Employed year round  􀁆2 Employed in seasonal work but not year round  􀁆3 Retired  􀁆4 Unemployed since arrived in US  􀁆5 Unemployed seasonal worker  􀁆6 Unemployed (but not ‘4’ or ‘5’ above)  􀁆7 Disabled and not working | | |
| 118) Of the following, what types of work have you done the past 12 months in the US? (Please check all that apply.) | | | |
| 􀁆 99 Have not worked in US in past 12 months | | | 􀁆 9 Hair stylist / Barber |
| 􀁆 1 Animal Slaughtering/ Processing | | | 􀁆 10 Child care |
| 􀁆 2 Furniture Manufacturing | | | 􀁆 11 Clerical / Administrative |
| 􀁆 3 Other type of factory (list)\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | 􀁆 12 Management |
| 􀁆 4 Construction | | | 􀁆 13 Sales / Retail |
| 􀁆 5 Farming | | | 􀁆 14 Odd jobs (work done from time to time) |
| 􀁆 6 Lawn care / Landscaping | | | 􀁆 15 Cashier |
| 􀁆 7 Food services (waiter/cook) | | | 􀁆 16 Bagging groceries |
| 􀁆 8 Janitor / Industrial Cleaning | | | 􀁆 17 Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 119) How much money do you take home each week? | | $\_\_\_\_\_\_\_\_\_\_ .00 | |
| 120) About how much money do you receive each month from all sources? | | 􀁆0 None  􀁆1 $1-$99  􀁆2 $100-$499  􀁆3 $500-$999  􀁆4 $1,000-$1,999  􀁆5 $2,000-$2,999  􀁆6 $3000 or more | |

**ETHNIC GROUP PRIDE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Now I am going to read some statements and want you to tell me how much you agree or disagree with each statement. You can choose:**  **Strongly disagree; Disagree; Agree; and Strongly agree.** | | | | |
|  | Strongly disagree | Disagree | Agree | Strongly agree |
| 121A) I have spent time trying to find out more about my ethnic group, such as its history, traditions, and customs. | 1 | 2 | 3 | 4 |
| 121B) I am active in organizations or social groups that include mostly members of my own ethnic group. | 1 | 2 | 3 | 4 |
| 121C) I have a clear sense of my ethnic background and what it means for me. | 1 | 2 | 3 | 4 |
| 121D) I think a lot about how my life will be affected by my ethnic group membership. | 1 | 2 | 3 | 4 |
| 121E) I am happy that I am a member of the group I belong to. | 1 | 2 | 3 | 4 |
| 121F) I have a strong sense of belonging to my own ethnic group. | 1 | 2 | 3 | 4 |
| 121G) I understand pretty well what my ethnic group membership means to me. | 1 | 2 | 3 | 4 |
| 121H) In order to learn more about my ethnic background, I have often talked to other people about my ethnic group. | 1 | 2 | 3 | 4 |
| 121I) I have a lot of pride in my ethnic group. | 1 | 2 | 3 | 4 |
| 121J) I participate in cultural practices of my own group, such as special food, music, or customs. | 1 | 2 | 3 | 4 |
| 121K) I feel a strong attachment towards my own ethnic group. | 1 | 2 | 3 | 4 |
| 121L) I feel good about my cultural or ethnic background. | 1 | 2 | 3 | 4 |
|  |

IMMIGRATION & SOCIAL SUPPORT

|  |  |
| --- | --- |
| **These are the final set of questions. Thanks for your cooperation and patience!** | |
| 122) Where were you born? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  [city]  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [region/state/department]  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  [country] |
| 123) How old were you when you first came to live in the United States? | \_\_\_\_\_\_\_ Years old   * 99 I was born in the US |
| 124) How long have you lived in the US, total years and/or months? | \_\_\_\_\_\_ [years] \_\_\_\_\_[months] |
| 125) How long have you lived in NC total years and/or months? | \_\_\_\_\_\_ [years] \_\_\_\_\_[months] |
| 126) What is your current zip code? | \_\_\_\_\_\_­­­­­­­­\_ |
| 127) What city do you live in now? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |
| --- | --- | --- |
| **We know that answering questions about your life, health, and immigration issues can sometimes be uncomfortable. As a reminder, the information that we gather in this interview will be kept confidential and in a safe place, and your name will never be revealed as a participant.**  **Your answers are important because they will allow us to create projects to help Latinos in this community to overcome the barriers they face to access health services.** | | |
| The following questions have to do with your current immigration status, which affects eligibility for some services. | No | Yes |
| 128A) Do you currently have a “green card”? | 0 | 1 |
| 128B) Do you currently have a valid student visa, valid tourist visa, work permit, or other legal immigration status such as deferred action? | 0 | 1 |
| 128C) Do you have or have you obtained citizenship in the US? | 0 | 1 |

**COMMUNITY ATTACHMENT**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Not at all | Very little | A little | Somewhat | Moderately | To a great extent |
| 129A) Please indicate how much you feel a part of or connected to the gay community. | 0 | 1 | 2 | 3 | 4 | 5 |
| 129B) Please indicate how much you feel a part of or connected to the Latino community. | 0 | 1 | 2 | 3 | 4 | 5 |
| 129C) Please indicate how much you feel a part of or connected to the Latino gay community. | 0 | 1 | 2 | 3 | 4 | 5 |
| 129D) Please indicate how much you feel a part of or connected to the transgender community. | 0 | 1 | 2 | 3 | 4 | 5 |
| 129E) Please indicate how much you feel a part of or connected to the Latino transgender community. | 0 | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |
| --- | --- | --- | --- |
| The following questions have to do with the possible effects of your documentation status on your life in the US. | No | Yes | |
| 130A) Do you think that your documentation status has limited contact between your family, friends and you? | 0 | 1 | |
| 130B) Have you ever been questioned about your documentation status? | 0 | 1 | |
| 130C) Do you think you will be deported or questioned about your documentation status if you go to a social agency or health department? | 0 | 1 | |
| 130D) Do you think you will be deported or questioned about your documentation status if you go to a clinic for HIV and STDs testing services? | 0 | 1 | |
| 130E) Do you think your documentation status has limited your ability to seek HIV and other STDs testing services? | 0 | 1 | |
| 130F) Do you avoid the police or other officials because of your documentation status? | 0 | 1 | |
| 130G) Do you find it difficult to find legal services? | 0 | 1 | |
|  |  | |  |

**SOCIAL SUPPORT**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I am going to read a series of tasks and behaviors. Tell me if you know persons in NC or outside NC, with whom you are maintaining some form of regular contact, who would perform each helpful behavior. | | | | | |
|  | No one would do this | Someone would do this | A few would do this | Several would do this | Many would do this |
| 131A) Comfort you whenever you feel homesick. | 0 | 1 | 2 | 3 | 4 |
| 131B) Listen and talk with you whenever you feel lonely or depressed. | 0 | 1 | 2 | 3 | 4 |
| 131C) Share your good and bad times. | 0 | 1 | 2 | 3 | 4 |
| 131D) Spend some quiet time with you whenever you do not feel like going out. | 0 | 1 | 2 | 3 | 4 |
| 131E) Spend time chatting with you whenever you are bored. | 0 | 1 | 2 | 3 | 4 |
| 131F) Accompany you to do things whenever you need someone for company. | 0 | 1 | 2 | 3 | 4 |
| 131G) Visit you to see how you are doing. | 0 | 1 | 2 | 3 | 4 |
| 131H) Accompany you somewhere even if he or she doesn’t have to. | 0 | 1 | 2 | 3 | 4 |
| 131I) Reassure you that you are loved, supported, and cared for. | 0 | 1 | 2 | 3 | 4 |
| 131J) Provide necessary information to help orient you to your new surroundings. | 0 | 1 | 2 | 3 | 4 |
| 131K) Help you deal with some local institutions’ official rules and regulations. | 0 | 1 | 2 | 3 | 4 |
| 131L) Show you how to do something that you didn’t know how to do. | 0 | 1 | 2 | 3 | 4 |
| 131M) Explain things to make your situation clearer and easier to understand. | 0 | 1 | 2 | 3 | 4 |
| 131N) Tell you what can and cannot be done in North Carolina. | 0 | 1 | 2 | 3 | 4 |
| 131O) Help you interpret things that you don’t really understand. | 0 | 1 | 2 | 3 | 4 |
| 131P) Give you some tangible assistance in dealing with any communication or language problems that you might face. | 0 | 1 | 2 | 3 | 4 |
| 131Q) Explain and help you understand the local culture and language. | 0 | 1 | 2 | 3 | 4 |
| 131R) Tell you about available choices and options. | 0 | 1 | 2 | 3 | 4 |

132) Thank you for participating in this assessment. Is there anything else that you would like to share with us?

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| --- |
|  |

**INTERVIEWER NOTES**

133) *Please document any observations or thoughts you have about this interview, the participant, etc. [Skip to 135A]*

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|  |

134) *[If the participant was found ineligible as determined from items 1-7 the interviewer should say the following:]* Thank you for your help. I really appreciate your interesting in this study but the information that you have shared with us indicates that you are not eligible.

*[The interviewer should politely terminate the interview.]*

**NOTE TO STAFF: Please detach these pages from the rest of the assessment and store in a separate lock box when completed.**

Participant ID: \_\_\_\_\_\_\_\_\_

**CONTACT INFORMATION**

|  |  |
| --- | --- |
| **Because we need to get in touch with you in the future for follow-up questions, we want to collect some information that will help us get in touch with you.** | |
| What is your current address?  135A) Street address:  135B) City, State:  135C) Zip code: |  |
| 135D) What is your current personal cell phone number? |  |
| Is there another way to get in touch with you - maybe another telephone number and an e-mail address? | 135E) Telephone number:  135F) E-mail address: |
| 135G) What about your Facebook name; what is it? |  |
| **Because you may forget to let us know that you have moved or that your telephone number has changed, we would like to get some supplemental ways to get in touch with you. We won’t tell them anything about you or the information you have provide to me, we just want to be able to find you.** | |
| Who else would know how to find you?  136A) Name:  136B) Relationship to you:  136C) Street address:  136D) City, State:  136E) Zip code:  136F) Telephone numbers: |  |

|  |  |
| --- | --- |
| Can you give me 2 more people who would know how to find you if we had trouble finding you?  137A) Name:  137B) Relationship to you:  137C) Street address:  137D) City, State:  137E) Zip code:  137F) Telephone numbers: |  |
| 138A) Name:  138B) Relationship to you:  138C) Street address:  138D) City, State:  138E) Zip code:  138F) Telephone numbers: |  |
| **I am also giving you a card for you to leave in your wallet that has the telephone number, mailing address, and e-mail address to get in touch with me in case your cell phone changes or address changes.** | |

NOTE TO STAFF: Please provide a Stay-in-Touch card to the participant.