

Development of Messages for the Let's Stop HIV Together National Campaign

Attachment 3: Web-based Survey Instrument

CDC estimates the average public reporting burden for this collection of information as 30 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information 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 Information Collection Review Office, 1600 Clifton Road NE, SD-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0920).

**Development of Messages for the Act Against AIDS National Testing Campaign:
Let's Stop HIV Together**

Web-based Survey Instrument

SCRIPT: Before we start, please note that you cannot use the browser "Back" button to go back in the survey. Please use the "back" and "next" buttons within the survey itself.

SECTION 1: AWARENESS OF AND PERCEPTIONS OF CDC

1. Before today, had you ever heard of the Centers for Disease Control and Prevention (CDC)?

- ₁ Yes
- ₂ No
- ₈₈ Don't know
- ₉₉ Prefer not to answer

2. How much do you disagree or agree with the following statement: I trust the Centers for Disease Control and Prevention (CDC) as a source of information about HIV?

- ₁ Strongly disagree
- ₂ Disagree
- ₃ Neither disagree nor agree
- ₄ Agree
- ₅ Strongly agree
- ₉₉ Prefer not to answer

3. How often do you visit the CDC website to find information about HIV?

- ₁ Never
- ₂ Rarely
- ₃ Sometimes
- ₄ Often
- ₅ Very often
- ₉₉ Prefer not to answer

SECTION 2: SELF-PERCEIVED RISK AND RISK BEHAVIORS

4. Please tell us how much you disagree or agree with each of the following statement:

I am familiar with all the ways to prevent HIV when having sex.

- ₁ Strongly disagree
- ₂ Disagree
- ₃ Neither disagree nor agree
- ₄ Agree
- ₅ Strongly agree
- ₉₉ Prefer not to answer

5. Thinking about the sex you've had over the past [6 months/12 months], do you consider yourself to be at high, medium or low risk for [getting/transmitting] HIV?

- ₁ High risk
- ₂ Medium risk
- ₃ Low risk
- ₈₈ Don't know
- ₉₉ Prefer not to answer

6. You indicated that you consider yourself to be at [insert response from Q5]. What are some reasons for this? [OPEN-ENDED]

- ₉₉ Prefer not to answer

7. Bearing in mind the different ways people can [get/transmit] HIV, how concerned are you about you, personally, [getting/transmitting] HIV?

- ₁ Not at all concerned
- ₂ Not very concerned
- ₃ Somewhat concerned
- ₄ Very concerned
- ₈₈ Don't know
- ₉₉ Prefer not to answer

8. Have you ever, even once, used a needle to inject any drug that was not prescribed for you or that you took only for the experience or feeling it caused?

- ₁ Yes
- ₂ No
- ₈₈ Don't know
- ₉₉ Prefer not to answer

[ONLY IF 8 = YES]

9. In the past [6 months/12 months], have you used a needle to inject any drug that was not prescribed for you or that you took only for the experience or feeling it caused?

- ₁ Yes

- _2 No
- _88 Don't know
- _99 Prefer not to answer

SECTION 3: CONDOM AWARENESS, USE AND BELIEFS

[ONLY IF S9 = YES]

10. In the past [6 months/12 months], how often did you and your sexual partner(s) use condoms for sex?

- _1 Never
- _2 Occasionally
- _3 Usually
- _4 Always
- _99 Prefer not to answer

11. You indicated that you had sex in the past [6 months/12 months]without a condom. For what reasons have you not used condoms for sex?[OPEN-ENDED]

- _99 Prefer not to answer.

12. Please tell us how much you disagree or agree with each of the following statements.

	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
a. It takes a lot of effort for me to always have safer sex.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
b. I feel tired of always having to monitor my sexual behavior.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
c. I find it difficult to maintain my commitment to safer sex.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
d. [INSERT SAFE-SEX FATIGUE ITEM]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

13. Please indicate how much you disagree or agree with the following statements. Using condoms to prevent getting HIV....

<i>[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]</i>	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Don't know	Prefer not to answer
a. is expensive.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _88	<input type="checkbox"/> _99
b. is inconvenient.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _88	<input type="checkbox"/> _99

c. is for someone like me.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _88	<input type="checkbox"/> _99
d. feels just as good as without condoms							
e. [insert belief here]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _88	<input type="checkbox"/> _99

14. Please indicate how much you disagree or agree with the following statements.

Statement	Strongly disagree	Disagree	Neither Disagree nor Agree	Agree	Strongly agree	Prefer not to answer
a. [Condoms] protect against other STDs like syphilis and gonorrhea.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
b. [Correct condom use] is the best way to prevent HIV when having sex.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
c. [Condoms] are an effective HIV prevention option [when used correctly and consistently].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
d. Because of [condoms], I am more willing to have sex with someone who has HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
e. Because of [condoms], I think more people are taking sexual risks.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
f. [insert belief here]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

15. Please tell us how much you disagree or agree with each of the following statements:

Statement	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
a. I am confident that I can talk to my sex partner about [using condoms].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
b. I am confident that I can talk to my healthcare provider about [condoms].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
c. I am confident that I know where and how to get condoms.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
d. I am confident that I can [insert behavior here].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

16. Are you currently using any type of birth control or family planning methods?

- ₁ Yes
- ₂ No
- ₈₈ Don't know
- ₉₉ Prefer not to answer

[ONLY IF 16 = YES]

17. What method of birth control or family planning are you currently using? [SELECT ALL]

- ₁ Birth control pills
- ₂ Injectable
- ₃ Ring
- ₄ IUD
- ₅ Fertility Tracking/Rhythm Method
- ₆ Condoms
- ₇ Withdrawal
- ₉₉ Prefer not to answer

18. How many living children do you have, that you have given birth to?

- ₍₉₈₎ Do not know
- ₍₉₉₎ No response

19. What is your ideal number of children to have in your lifetime?

- ₍₉₈₎ Don't Know
- ₍₉₉₎ No response

20. In the next year, what do you think is the chance that you will become pregnant?

- ₍₀₎ No chance
- ₍₁₎ Some chance
- ₍₂₎ A very high chance
- ₍₃₎ Already pregnant
- ₍₉₈₎ Don't Know
- ₍₉₉₎ No response

SECTION 4: PrEP AWARENESS, USE AND BELIEFS

21. PrEP, or pre-exposure prophylaxis (also known as Truvada or Descovy), is an FDA-approved medicine that can be used to prevent HIV for people who are HIV-negative. To be protected with PrEP, you have to take a pill every day. Before today, have you ever heard of people who do **not** have HIV taking HIV medicines (PrEP: also known as Truvada or Descovy) **daily**, to keep from getting HIV?

- ₁ _____ Yes
- ₂ _____ No
- ₈₈ _____ Don't know

99 _____ Prefer not to answer

22. On a scale from 1 to 5, where 1 is extremely harmful and 5 is extremely beneficial, how would you rate taking PrEP daily as prescribed by a doctor to prevent getting HIV?

1 _____ Extremely harmful

2 _____ Harmful

3 _____ Neither harmful or beneficial

4 _____ Beneficial

5 _____ Extremely beneficial

88 _____ Don't know

99 _____ Prefer not to answer

[ONLY HIV NEGATIVE OR NOT TESTED PARTICIPANTS]

23. [Have you ever taken/Are you currently taking/Have you taken within the last 6 months/Have you taken within the last 12 months] PrEP to prevent getting HIV?

1 _____ Yes

2 _____ No

88 _____ Don't know

99 _____ Prefer not to answer

[ONLY HIV NEGATIVE OR NOT TESTED PARTICIPANTS]

24. You indicated that you [have never used/are not currently using] PrEP to prevent getting HIV. For what reasons are you not using PrEP? [OPEN-ENDED]

99 _____ Prefer not to answer.

[ONLY HIV NEGATIVE OR NOT TESTED PARTICIPANTS]

25. When did you first start taking PrEP to prevent getting HIV?

1 _____ 0 to 3 months ago

2 _____ 4 to 6 months ago

3 _____ 7 to 12 months ago

4 _____ More than 12 months ago

88 _____ Don't know

99 _____ Prefer not to answer

[ONLY HIV NEGATIVE OR NOT TESTED PARTICIPANTS]

26. I feel confident in my ability to take PrEP as prescribed by my doctor to prevent getting HIV.

1 _____ Strongly agree

2 _____ Agree

3 _____ Neither disagree nor agree

4 _____ Disagree

5 _____ Strongly disagree

88 _____ Don't know
 99 _____ Prefer not to answer

[ONLY HIV NEGATIVE OR NOT TESTED PARTICIPANTS]

27. Please indicate how much you disagree or agree with the following statements. Taking PrEP to prevent getting HIV....

[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Don't know	Prefer not to answer
a. is expensive.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
b. is inconvenient.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
c. allows me to have sex without a condom with partners who are HIV positive.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
d. is for someone like me.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
e. is covered by insurance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
f. is for women like me.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
g. would give me peace of mind.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
h. might make me more likely to have sex without a condom.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
i. would make my partner think that I am not being faithful.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
j. would out me as someone who could get HIV	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
k. is only for gay men	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
l. is a way to care for myself.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
m. [insert belief statement]							

[ONLY HIV NEGATIVE OR NOT TESTED PARTICIPANTS]

28. Please indicate how much you disagree or agree with the following statements.

Statement	Strongly disagree	Disagree	Neither Disagree nor Agree	Agree	Strongly agree	Prefer not to answer
a. [PrEP] protects against other STDs like syphilis and gonorrhea.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
b. [PrEP] is the best way to prevent HIV when having sex.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
c. [PrEP] is an effective HIV prevention option [when taken every day as prescribed].	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
d. Because of [PrEP], I am more willing to have sex with someone who has HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
e. Because of [PrEP], I think more people are taking sexual risks.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
f. [INSERT belief statement]	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
g. PrEP is safe to take while pregnant or breastfeeding.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
h. PrEP is safe to take while using hormonal birth control	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

29. Please indicate how much you disagree or agree with the following statement.

	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
a. Taking PrEP is a way for [Black women] to take control of their sexual health.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

[ONLY HIV NEGATIVE OR NOT TESTED PARTICIPANTS]

30. Please tell us how much you disagree or agree with each of the following statements:

<i>[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]</i>	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
a. If I wanted to, I could bring up the topic of PrEP with my healthcare provider.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
b. I am confident that I know where and how to get PrEP.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

31. Please tell us how likely it is that you will do the following in the next 6 months.

<i>[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]</i>	Very unlikely	Some-what unlikely	Neither unlikely nor likely	Some-what likely	Very likely	Prefer not to answer
a. Talk to your friends or family members about PrEP.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
b. Talk to your sex partner(s) about PrEP.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
c. Talk to your healthcare provider about PrEP.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
d. Take PrEP if my healthcare provider prescribed it.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

[ONLY HIV NEGATIVE OR NOT TESTED PARTICIPANTS]

32. Please tell us how much you disagree or agree with each of the following statements:

Statement	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
a. I am confident that I can talk to my sex partner about [PrEP].	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
b. I am confident that I can talk to my healthcare provider about [PrEP].	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
c. I am confident that I know where and how to get PrEP.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
d. I am confident that I can [insert behavior here].	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

[ONLY HIV NEGATIVE OR NOT TESTED PARTICIPANTS]

33. Please tell us how much you disagree or agree with each of the following statements about PrEP. When taking PrEP.

	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
a. I [may be/am] less likely to inquire about my partner's HIV status before having sex	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
b. I [may be/am] less likely to [ask for/discuss/use condoms].	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
c. I [may be/am] more likely to have more adventurous sex.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
d. I think my sexual performance [will be/is] enhanced.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
e. I [may/do] feel more relaxed during sex.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
f. [I think it will be/It is] easier to express my sexual needs or desires.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
g. I think sex [will probably be/is] more loving.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
h. I [may/do] think about sex more often	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
i. [INSERT EXPECTANCY ITEM]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

[ONLY HIV NEGATIVE OR NOT TESTED PARTICIPANTS]

34. In the past [4/6/12 months], how often did you talk to a health care provider about PrEP?

- _1 Never
- _2 Rarely
- _3 Sometimes
- _4 Often
- _5 Very often
- _99 Prefer not to answer

35. Please indicate how much you disagree or agree with the following statements.

Statement	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
a) My healthcare provider respects me.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
b) I am comfortable talking to my health care provider about my sexual health.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
c) I am comfortable talking to my health care provider about HIV prevention options.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
d) My health care provider routinely offers me HIV testing.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
e) I am comfortable talking to my health care provider about PrEP.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

SECTION 5. ART AWARENESS, USE AND BELIEFS [ONLY PARTICIPANTS LIVING WITH HIV]

36. When did you first test positive for HIV?

Date (mm/yyyy) _____

37. About how often do you tell new sex partners that you have HIV?

- 1 _____ Never
- 2 _____ Some of the time
- 3 _____ Most of the time
- 4 _____ Always
- 88 _____ Don't know
- 99 _____ Prefer not to answer

38. Please indicate how much you disagree or agree with the following statements. Taking HIV medicine (antiretroviral therapy or ART) as prescribed by a doctor to treat HIV....

[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Don't know	Prefer not to answer
a. is expensive.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
b. is inconvenient.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
c. allows me to have sex without a condom with partners who are HIV negative.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
d. is for someone like me.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99
e. [INSERT belief statement]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88	<input type="checkbox"/> 99

39. On a scale from 1 to 5, where 1 is extremely harmful and 5 is extremely beneficial, how would you rate taking HIV medicine (antiretroviral therapy or ART) daily as prescribed by a doctor to treat HIV?

- 1 _____ Extremely harmful
- 2 _____ Harmful
- 3 _____ Neither harmful or beneficial
- 4 _____ Beneficial
- 5 _____ Extremely beneficial

- 88 _____ Don't know
- 99 _____ Prefer not to answer

40. Are you currently taking HIV medicine (antiretroviral therapy or ART) as prescribed by a doctor to treat HIV?

- 1 _____ Yes
- 2 _____ No
- 88 _____ Don't know
- 99 _____ Prefer not to answer

41. You indicated that you are not currently taking HIV medicine (or ART). For what reasons are you not using ART? [OPEN-ENDED]

- 99 _____ Prefer not to answer.

42. When did you first start taking HIV medicine (antiretroviral therapy or ART) as prescribed by a doctor to treat HIV?

- 1 _____ 0 to 3 months ago
- 2 _____ 4 to 6 months ago
- 3 _____ 7 to 12 months ago
- 4 _____ More than 12 months ago
- 88 _____ Don't know
- 99 _____ Prefer not to answer

43. In the past [30 days/6 months/12 months], about how often did you take your HIV medicine (antiretroviral therapy or ART) as prescribed by your doctor?

- 1 _____ Never
- 2 _____ Some of the time
- 3 _____ Most of the time
- 4 _____ All of the time
- 88 _____ Don't know
- 99 _____ Prefer not to answer

44. I feel confident in my ability to take my HIV medicine (antiretroviral therapy or ART) as prescribed by my doctor to treat HIV.

- 1 _____ Strongly agree
- 2 _____ Agree
- 3 _____ Neither disagree nor agree
- 4 _____ Disagree
- 5 _____ Strongly disagree
- 88 _____ Don't know

_99_____Prefer not to answer

45. To your knowledge, has your doctor (or another provider) ever ordered a viral load test for you?
This would have involved drawing your blood.

_1_____Yes

_2_____No

_88_____Don't know

_99_____Prefer not to answer

46. To your knowledge, what was the result of your last viral load test? If you were undetectable,
please put "0." If you're not sure, please estimate. [OPEN-ENDED]

_99_____Prefer not to answer.

47. Are you currently virally suppressed (viral load is less than 200 copies of HIV per milliliter of
blood)?

_1_____Yes

_2_____No

_88_____Don't know

_99_____Prefer not to answer

48. How would you describe your current viral load based on your most recent viral load test? [select
all that apply]

_1_____I have an undetectable viral load.

_2_____I am virally suppressed.

_3_____My viral load is detectable, and I am not virally suppressed.

_88_____Don't know

_99_____Prefer not to answer

49. Have you ever told a sex partner that you have an undetectable viral load?

_1_____Yes

_2_____No

_88_____Don't know

_99_____Prefer not to answer

50. Have you heard that if you have an undetectable viral load, you will not transmit HIV to sexual
partners?

_1_____Yes

_2_____No

_88_____Don't know

_99_____Prefer not to answer

51. Please indicate how much you disagree or agree with the following statements.

[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Don't know	Prefer not to answer
a. If I have an undetectable HIV viral load, I am more likely to have unprotected sex.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
b. Having an undetectable HIV viral load means I can worry less about having to use condoms.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
c. [INSERT belief statement]	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉

52. [In the past 6 months/In the past 12 months/At your last visit with your healthcare provider,] [have/did] you [ever] [discuss/discussed] viral suppression for sexual HIV prevention [with your healthcare provider]?

- ₁ Yes
- ₂ No
- ₈₈ Don't know
- ₉₉ Prefer not to answer

SECTION 6. HIV COMMUNICATION BEHAVIOR, BELIEFS, NORMS, AND INTENTIONS

Script: Next we would like to ask you some questions about communication and communicating with your partner(s).

53. How often do you think that your friends and other people close to you discuss ways to prevent HIV with their sexual partner(s)?

- ₁ _____ Never
- ₂ _____ Rarely
- ₃ _____ Sometimes
- ₄ _____ Often
- ₅ _____ Very often
- ₉₉ _____ Prefer not to answer

54. In the past [6 months/12 months], how often have you had one-on-one conversations with your current *main sexual partner* about ways to prevent HIV?

- 1 _____ Never
- 2 _____ Rarely
- 3 _____ Sometimes
- 4 _____ Often
- 5 _____ Very often
- 99 _____ Prefer not to answer

55. How sure are you that you could have one-on-one conversations with a *main sexual partner* about ways to prevent HIV?

- 1 _____ Very sure
- 2 _____ Somewhat sure
- 3 _____ Neither sure nor unsure
- 4 _____ Somewhat unsure
- 5 _____ Very unsure
- 99 _____ Prefer not to answer

56. Talking to a *main sexual partner* about ways to prevent HIV would be...

- 1 _____ Very good
- 2 _____ Somewhat good
- 3 _____ Neither good nor bad
- 4 _____ Somewhat bad
- 5 _____ Very bad
- 99 _____ Prefer not to answer

57. In the past [6 months/12 months], how often have you had one-on-one conversations with a *casual sexual partner* about ways to prevent HIV?

- 1 _____ Never
- 2 _____ Rarely
- 3 _____ Sometimes
- 4 _____ Often
- 5 _____ Very often
- 99 _____ Prefer not to answer

58. How sure are you that you could have one-on-one conversations with a *casual sexual partner* about ways to prevent HIV?

- 1 _____ Very sure
- 2 _____ Somewhat sure
- 3 _____ Neither sure nor unsure
- 4 _____ Somewhat unsure

_5 _____ Very unsure
_99 _____ Prefer not to answer

59. Talking to a *casual sexual partner* about ways to prevent HIV would be...

_1 _____ Very good
_2 _____ Somewhat good
_3 _____ Neither good nor bad
_4 _____ Somewhat bad
_5 _____ Very bad
_99 _____ Prefer not to answer

60. Please tell us how much you disagree or agree with each of the following statements:

Statement	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
a. Most of my friends and other people close to me think I should talk to my sexual partner(s) about ways to prevent HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
b. Most of my sexual partners think I should talk to them about ways to prevent HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
c. Most people who are important to me talk openly about HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
d. I am confident that I can talk to my sex partner about [INSERT].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
e. I am confident that I can talk to my healthcare provider about [INSERT].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
f. [INSERT statement]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

61. Please tell us how likely it is that you will do the following in the next [6 months/12 months].

Statement	Very unlikely	Some-what unlikely	Neither unlikely nor likely	Some-what likely	Very likely	Prefer not to answer
e. Talk to your friends or family members about [HIV/PrEP/condoms].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
f. Talk to your sex partner about [HIV/PrEP/condoms].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
g. Talk to your healthcare provider about [HIV/PrEP/condoms].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
h. [INSERT intention item]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
i. Be supportive of people who are living with HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

Statement	Very unlikely	Some-what unlikely	Neither unlikely nor likely	Some-what likely	Very likely	Prefer not to answer
j. Go with someone important to you (e.g., friend, family member) to get tested for HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
k. Find out more about [INSERT].	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
l. [Insert call to action related to stigma here].	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
m. Share an HIV self-test with a friend, family member, or someone else if two tests were provided for free.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99

SECTION 7. HIV STIGMA AND DISCRIMINATION

Script: In this section, we are going to ask questions about HIV-related stigma. By stigma, we mean the attitudes or beliefs you or others have about people with HIV. If you feel uncomfortable answering any of these questions, please select “prefer not to answer” and move on to the next questions.

[ONLY PARTICIPANTS LIVING WITH HIV]

62. Please tell us how much you agree or disagree with each of the following statements:

	Strongly disagree	Disagree	[Neither disagree nor agree]	Agree	Strongly agree	Prefer not to answer
a. I have been hurt by how people reacted to learning I have HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
b. I have lost friends by telling them I have HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
c. I am very careful who I tell that I have HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
d. I worry that people who know I have HIV will tell others.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
e. I feel that I am not as good a person as others because I have HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
f. Having HIV makes me feel [unclean/that I’m a bad person/etc.].	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
g. Most people think that a person with HIV is disgusting.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
h. Most people with HIV are rejected when others find out.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
i. [INSERT STATEMENT]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99

63. How worried are you that people will treat you in the following ways in the future because of your HIV status?

	Not worried	A little worried	Worried	Very worried	Prefer not to answer
a. Family members will [avoid me/ look down on me/treat me differently].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _99
b. Healthcare workers will [not listen to my concerns/avoid touching me/treat me with less respect].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _99
C. [INSERT STATEMENT.]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _99

SCRIPT: The following questions ask about the different ways people may have treated you in the past because you have HIV. If you feel uncomfortable answering any of these questions, please select “prefer not to answer” and move on to the next questions. As a reminder, your answers will be kept private. This means that your name will not be associated with your answers.

64. In the past [6 months/12 months], how often have [people treated you in the following ways because of your HIV status/you treated people in the following ways because of their HIV status]? [Please select “Not applicable” if the situation doesn’t apply to you.]

	[Never]	[Occasionally]	[Usually]	[Always]	[Not applicable]	Don’t know	Prefer not to answer
a. [I received poorer services than other people/I provided poorer services to people] in restaurants, stores, other businesses, or agencies.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _77	<input type="checkbox"/> _88	<input type="checkbox"/> _99
b. I [was treated/treated someone] unfairly at work or school.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _77	<input type="checkbox"/> _88	<input type="checkbox"/> _99
c. I [was excluded/excluded someone] from religious activities.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _77	<input type="checkbox"/> _88	<input type="checkbox"/> _99
d. I was denied or given lower quality healthcare.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _77	<input type="checkbox"/> _88	<input type="checkbox"/> _99
e. [Someone tried to get me fired from my job/I tried to get someone fired from their job].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _77	<input type="checkbox"/> _88	<input type="checkbox"/> _99
f. [My employer denied me opportunities/I denied someone opportunities at work].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _77	<input type="checkbox"/> _88	<input type="checkbox"/> _99
g. [Family members (avoided me/treated me differently/etc.)/I (avoided family members/treated family members differently)].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _77	<input type="checkbox"/> _88	<input type="checkbox"/> _99
h. Healthcare workers [have not listened to my concerns/ avoided touching me/treated me with less respect/etc.].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _77	<input type="checkbox"/> _88	<input type="checkbox"/> _99
I. [INSERT STATEMENT]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _77	<input type="checkbox"/> _88	<input type="checkbox"/> _99

SCRIPT: In this section, we are going to ask about the attitudes and beliefs you or others have about people with HIV. There are also some questions that ask about the different ways you or others may have acted toward people with HIV in the past or would act toward people with HIV in the future. If you feel uncomfortable answering any of these questions, please select “prefer not to answer” and move on to the next questions. As a reminder, your answers will be kept private. This means that your name will not be associated with your answers.

65. If you found out that you had HIV, how worried would you be that people you know would reject you? That is, that other people would not want to be associated with you because of your HIV status.

- ₁ Not worried
- ₂ A little worried
- ₃ Worried
- ₄ Very worried
- ₉₉ Prefer not to answer

66. In the past [6 months/12 months], how often have [you treated people/have people treated you] in the following ways because of [their/your] HIV status?

	[Never]	[Occasionally]	[Usually]	[Always]	Don't know	Prefer not to answer
a. I refused casual contact with someone living with HIV/ Someone refused casual contact with me.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
b. I judged someone living with HIV/Someone judged me.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
c. I socially isolated a family member or friend because they are living with HIV/A friend or someone in my family socially isolated me because I'm living with HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
d. I talked badly about someone living with HIV/Someone talked badly about me because I'm living with HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
e. I insulted someone living with HIV or called them names/ Someone insulted me or called me names.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
f. I physically attacked or injured someone living with HIV/Someone physically attacked me.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
g. I disclosed a family member or friend's HIV status to others without their permission/Someone disclosed my HIV status to others without my permission.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
h. I asked a family member or friend to keep their HIV status a secret/Someone asked me to keep my HIV status a secret.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉

	[Never]	[Occasionally]	[Usually]	[Always]	Don't know	Prefer not to answer
i. I gossiped about someone's HIV status and how they may have gotten HIV/Someone gossiped about how I may have gotten HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _88	<input type="checkbox"/> _99
j. [INSERT STATEMENT]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _88	<input type="checkbox"/> _99

67. How worried would you be about people treating you in the following ways if you were diagnosed with HIV?

	Not worried	A little worried	Worried	Very worried	Prefer not to answer
a. Family members will [INSERT].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _99
a. Healthcare workers will [INSERT].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _99
b. [INSERT STATEMENT]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _99

68. Please tell us how much you agree or disagree with each of the following statements:

	Strongly disagree	Disagree	[Neither disagree nor agree]	Agree	Strongly agree	Prefer not to answer
a. People with HIV should not feel ashamed of themselves.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
b. It is reasonable for an employer to fire a person living with HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
c. People with HIV face [verbal abuse/rejection from their peers/ physical abuse/getting kicked out of their homes by their families/etc.].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
d. Most people with HIV do not care if they infect other people.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
e. People should not eat food that has been handled by a person living with HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
f. HIV is punishment for bad behavior.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
g. People who are suspected of having HIV lose respect in the community.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
h. Most people with HIV have had many sexual partners.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
i. People get infected with HIV because they engage in irresponsible behaviors.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

	Strongly disagree	Disagree	[Neither disagree nor agree]	Agree	Strongly agree	Prefer not to answer
j. It is okay for a healthcare professional to refuse to provide high-quality care or services to a person living with HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
k. I am comfortable discussing HIV with friends or family members.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
L. [INSERT STATEMENT]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

69. In the past [6 months/12 months], have you [seen people being treated/treated someone] poorly because of their ...

	Yes	No	Prefer not to answer
a. HIV status?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _99
b. Gender identity?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _99
c. Sexual orientation or sexual practices?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _99
d. Race or ethnicity?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _99
e. [Injection] drug use?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _99
f. [INSERT]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _99

70. In the past [6 months/12 months], have you confronted, challenged, or educated someone who was stigmatizing and/or discriminating against [you/someone] because of [your/their] HIV status?

- _1 Yes
_2 No
_88 Don't know
_99 Prefer not to answer

71. Please tell us how much you agree or disagree with each of the following statements: Insert call to action related to [stigma/discrimination/prejudice] ...

	Strongly disagree	Disagree	[Neither disagree nor agree]	Agree	Strongly agree	Prefer not to answer
a. is important to me.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
b. makes me feel empowered.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
c. will encourage others to do their part to stop HIV [stigma/discrimination/ prejudice].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

	Strongly disagree	Disagree	[Neither disagree nor agree]	Agree	Strongly agree	Prefer not to answer
d. will encourage others to learn about [stigma/discrimination/prejudice] and how it affects people with HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
e. will make my community better.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
f. is important to my family or friends.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
g. demonstrates my support for people with HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
h. demonstrates my acceptance of people with HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
i. will help change how others [behave toward/treat] people with HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
j. will change the attitudes others have about people with HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
k. [INSERT STATEMENT]	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

SCRIPT: Now we are going to ask some questions about ways [you/other people] have been treated [by healthcare providers/in the community] because of [your/their] HIV status.

72. [People with HIV] sometimes sense discrimination from [healthcare providers/people in the community] in different ways. Has anyone in the [healthcare system/community] ever acted in any of the following ways toward you because you [have HIV]?

	Yes	No	Don't know	Prefer not to answer
a. Exhibited hostility or a lack of respect toward you?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
b. Given you less attention [than other patients]?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
c. Refused you service?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
d. Avoided touching you?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
e. Wore double gloves when providing care or services to you?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
f. Talked badly about you?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
g. Insulted you or called you names?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
h. [INSERT behavior]	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉

73. Thinking about the times you sensed discrimination from [healthcare providers/people in the community], did you think it occurred because of your ...

	Yes	No	Don't know	Prefer not to answer
a. HIV status?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉

b. Gender?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
c. Sexual orientation or sexual practices?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
d. Race or ethnicity?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
e. [Injection] drug use?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
f. Social class				
g. [INSERT descriptor]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99

74. In the past [6 months/12 months], have you [been treated poorly/seen other people being treated poorly] in the community (not including healthcare settings) because of [your/their] ...

	Yes	No	Don't know	Prefer not to answer
a. HIV status?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
b. Gender?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
c. Sexual orientation or sexual practices?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
d. Race or ethnicity?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
e. [Injection] drug use?	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
f. [INSERT descriptor]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99

SECTION 7: CAMPAIGN EXPOSURE

SCRIPT: We'd now like to ask you some questions about some campaign advertising that you may or may not have seen over the past [6 months/12 months] [SELF-REPORTED EXPOSURE TO SPECIFIC LET'S STOP HIV TOGETHER AND OTHER HIV PREVENTIONCAMPAIGNS]

75. In the past [6 months/12 months], do you recall seeing advertising messages focused on ways to prevent HIV?

_1 _____ Yes

_2 _____ No

_88 _____ Don't know

_99 _____ Prefer not to answer

[ONLY IF 75 = 1]

76. Please list anything you can remember about those advertising messages. If you can remember any key slogans or taglines, please include those as well. [OPEN ENDED]

[ONLY IF 75 = 1]

77. Please complete the following sentence if you have heard or seen this campaign.

- a) Let's _____ HIV _____.
- b) Ready, Set, _____.
- c) Greater Than _____.
- d) Undetectable = _____.
- e) [INSERT]

[ONLY IF 75 = 1]

78. In the past [6 months/12 months], did you see or hear the following campaign slogans or messages? Check all that apply.

[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]	Yes	No	Don't know/ Can't recall	Prefer not to answer
a) Let's Stop HIV Together	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _8	<input type="checkbox"/> _99
b) Greater Than AIDS	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _8	<input type="checkbox"/> _99
c) Ready, Set, PrEP.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _8	<input type="checkbox"/> _99
d) Act Against AIDS	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _8	<input type="checkbox"/> _99
e) Undetectable=Untransmittable.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _8	<input type="checkbox"/> _99
f) [INSERT]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _8	<input type="checkbox"/> _99

[ONLY IF 75 = 1]

79. You said you saw or heard a(n) [INSERT CAMPAIGN NAME] campaign slogan or message. On a scale of 1 to 5, where 1 means "not effective" and 5 means "very effective," how effective do you think this campaign slogan or message is [at INSERT BEHAVIOR]?

Not effective 1	2	3	4	Very effective 5	Prefer not to answer
<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _6	<input type="checkbox"/> _99

[ONLY IF 75 = 1]

80. In the past [6 months/12 months], how often did you see or hear campaign slogans or messages for [INSERT CAMPAIGN NAME]?

- _1 _____ Never
- _2 _____ Rarely
- _3 _____ Sometimes

4 _____ Often

5 _____ Very often

99 _____ Prefer not to answer

SECTION 8: CAMPAIGN AD RECEPTIVITY

[Ad Receptivity]

SCRIPT: Now we are going to show you some ads that could be part of a campaign about HIV. We will show you [insert number] ads, one at a time, and will ask you some questions to get your initial reactions to and feedback about each ad.

[ROTATE THE ORDER OF THE AD PRESENTATION]

81. Please tell us how much you disagree or agree with each of the following statements about the ad.

[INSERT AD]

[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]	Strongly disagree	Disagree	Neither Disagree nor Agree	Agree	Strongly Agree	Prefer not to answer
a) This ad grabbed my attention.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
b) This ad was confusing.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
c) This ad was convincing.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
d) I did not like this ad overall.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
e) This ad said something important to me.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
f) I learned something new from this ad.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
g) This ad gave me good reasons to [insert].	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
h) This ad was empowering.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
i) This ad would motivate me to [insert].	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
j) This ad stereotypes people who are at risk for getting HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
k) This ad stereotypes people with HIV.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99

[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]	Strongly disagree	Disagree	Neither Disagree nor Agree	Agree	Strongly Agree	Prefer not to answer
l) This ad spoke to me.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
m) I liked this ad overall.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
n) This ad was offensive.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
o) This ad confirmed what I already knew about how to prevent HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
p) This ad convinced me that [INSERT BEHAVIOR] is an effective way to prevent HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
q) I like the photo/image in the ad.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
r) I can relate to the photo/image in the ad.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
s) [INSERT]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

82. How would you change this ad to make it better (words/language, image/people, etc.)? [OPEN-ENDED]

_99 _____ Prefer not to answer.

83. You indicated that you liked the ad. What did you like about the ad? [OPEN-ENDED]

_99 _____ Prefer not to answer

84. Overall, what do you think that this ad is trying to say? [OPEN-ENDED]

_99 _____ Prefer not to answer

[REPEAT FOR ALL EXECUTIONS. ROTATE EXECUTIONS]

Now, we are going to show you [insert number] ads.

85. Please rank the ads from 1 to [insert number], where 1 is the ad [that you most prefer] and [X] is the ad [that you least prefer].

[INSERT RANKING EXERCISE HERE]

Now, we are going to show you [insert number] messages that might appear in campaign ads.

[RANDOMLY PRESENT EACH OF THE X MESSAGES BELOW]

86. Please tell us how much you disagree or agree with each of the following statements about the message. [INSERT MESSAGE]

<i>Statement</i>	Strongly disagree	Disagree	Neither Disagree nor Agree	Agree	Strongly Agree	Prefer not to answer
a) I liked this message.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
b) This message was easy to understand.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
c) This message would motivate me to [insert].	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
d) I believe this message.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
e) This message was written for someone like me.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
f) [INSERT]	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

87. You indicated that the message is not motivating. What would you change about the message to make it more motivating to you? [OPEN-ENDED]

₉₉ _____ Prefer not to answer

88. Please explain what, if anything, you did not like about this message. [OPEN-ENDED]

₉₉ _____ Prefer not to answer

89. Please explain what, if anything, you liked about this message. [OPEN-ENDED]

₉₉ _____ Prefer not to answer

[DO NOT FORCE RESPONSE FOR EITHER ITEM ABOVE]

[INSERT MESSAGE OPTIONS HERE]

Now, we are going to show you [insert number] taglines that might appear in future ads and ask you some questions about the taglines.

[RANDOMLY PRESENT EACH OF THE X TAGLINES BELOW]

90. Please tell us how much you disagree or agree with each of the following statements about the tagline. **[INSERT TAGLINE]**

[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]	Strongly disagree	Disagree	Neither Disagree nor Agree	Agree	Strongly Agree	Prefer not to answer
a) I liked this tagline.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
b) This tagline grabbed my attention.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
c) [INSERT]	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

[INSERT TAGLINE OPTIONS HERE]

SECTION 9: THEORETICAL CONSTRUCTS

[PERCEIVED NORMS]

SCRIPT: This section asks questions about how the people in your life think and feel about HIV.

91. Please tell us how much you disagree or agree with each of the following statements. By “people who are important to me,” we mean sexual partners, friends, family, and anyone else who is an important part of your life or who you respect.

[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]	Strongly disagree	Disagree	Neither Disagree nor agree	Agree	Strongly agree	Prefer not to answer
a) Most people who are important to me are accepting of people with HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
b) Most people who are important to me think it is wrong to discriminate against people with HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
c) Most people who are important to me stereotype people with HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
d) Most people who are important to me would think negatively of me if I [insert behavior] to prevent HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

[PROGRAMMER: RANDOMIZE ORDER OF ITEMS]	Strongly disagree	Disagree	Neither Disagree nor agree	Agree	Strongly agree	Prefer not to answer
e) [HIV-positive only] Most people who are important to me think I should take HIV medicines (antiretroviral therapy or ART) as prescribed by my doctor.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
f) Most people who are important to me [insert].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
g) [insert perceived norms item here].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

SCRIPT: This section asks questions about what you know and believe about HIV.

[KNOWLEDGE]

Demonstrated Knowledge

92. Please indicate whether the following statements about HIV are true, false, or if you don't know the answer.

Statement	True	False	Don't know	Prefer not to answer
a. People who are HIV negative can take medications (called pre-exposure prophylaxis or PrEP) to prevent getting infected with HIV if they have sex with someone who is HIV positive.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
b. [PrEP/condoms/etc.] protects against other sexually transmitted diseases (STDs) like syphilis and gonorrhea.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
c. If a person with HIV takes medicine that lowers the amount of virus in their body so much that it cannot be detected by standard blood tests, there is effectively no risk of that person transmitting HIV to an HIV negative sex partner.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
d. If a person with HIV has an undetectable viral load, there is effectively no risk of that person transmitting HIV to an HIV negative sex partner.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
e. There are medicines available to treat HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99
f. [INSERT STATEMENT]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _88	<input type="checkbox"/> _99

Self-Perceived Knowledge

93. Please indicate how much you disagree or agree with the following statements.

	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
a. I know [all I need to know about HIV].	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
b. [INSERT STATEMENT]	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

[ATTITUDES]

94. Please answer the following questions by choosing the answer that best describes your opinion.

	Very unimportant	Somewhat unimportant	Neither unimportant nor important	Somewhat important	Very important	Prefer not to answer
a. Having access to [INSERT] is...	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
b. Keeping myself healthy is...	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
c. Doing things to help my future is...	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
d. Knowing my HIV status is...	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
e. [INSERT STATEMENT]	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

[BELIEFS]

95. Please indicate how much you disagree or agree with the following statements.

Statement	Strongly disagree	Disagree	Neither Disagree nor Agree	Agree	Strongly agree	Prefer not to answer
a. [INSERT] protects against other STDs like syphilis and gonorrhea.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
b. [INSERT] is the best way to prevent HIV when [having sex/using drugs].	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

c. [INSERT] is an effective HIV prevention option [when taken every day as prescribed].	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
d. Because of [INSERT], I am more willing to have sex with someone who has HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
e. Because of [INSERT], I think more people are taking sexual risks.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
f. Treatment and support programs are available to people in my community who might test positive for HIV.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
g. If a person with HIV has an undetectable viral load, there is effectively no risk of that person transmitting HIV to a sex partner.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
h. HIV is an important health problem facing this nation today.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
i. [INSERT]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

96. Please tell us how much you agree or disagree with each of the following statements: [INSERT BEHAVIOR HERE]...

Statement	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
a. will help me stay strong.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
b. will help me make informed decisions.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
c. keeps me healthy.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
d. will help my future.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
e. is fast, free, and confidential.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
f. is something everyone should do in their lifetime.	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
g. [INSERT STATEMENT]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

[Self-Efficacy]

97. Please tell us how much you disagree or agree with each of the following statements:

Statement	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
1. I am confident that I know what choices I have to prevent getting or transmitting HIV.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
2. I am confident that I can [insert behavior here].	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉
3. <i>that I can speak up to stop HIV.</i>	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉

SECTION 10. AWARENESS AND USE OF OTHER HIV PREVENTION STRATEGIES

98. Before today, have you ever heard of people who do **not** have HIV taking HIV medicines (nPEP or non-occupational post-exposure prophylaxis) *after they may have been exposed to HIV through sex or needle-sharing*, to keep from getting HIV?

₁ _____ Yes

₂ _____ No

₈₈ _____ Don't know

₉₉ _____ Prefer not to answer

99. In the past [6 months/12 months], how often did you use your HIV status and your partner's HIV status to determine which sexual roles (i.e., insertive/top or receptive/bottom) or activities (i.e., oral and anal sex) you would engage in?

₁ _____ Never

₂ _____ Occasionally

₃ _____ Usually

₄ _____ Always

₈₈ _____ Don't know

₉₉ _____ Prefer not to answer

100. Before today, have you ever heard of [insert]?

₁ _____ Yes

₂ _____ No

₈₈ _____ Don't know

₉₉ _____ Prefer not to answer

101. In the past [6 months/12 months], how often did you [insert]?
- 1 _____ Never
- 2 _____ Occasionally
- 3 _____ Usually
- 4 _____ Always
- 88 _____ Don't know
- 99 _____ Prefer not to answer

SECTION 11: HIV SELF-TESTING

SCRIPT: Now we would like to ask you a few questions about your HIV testing experiences. The questions in this section are about HIV tests you may have at a doctor's office, community-based organization, health fair, or other out-of-home location.

102. Have you been tested for HIV in the past [INSERT TIME FRAME]?
- 1 Yes
- 2 No
- 99 Prefer not to answer

[ONLY IF 102 = 2]

103. Below is a list of reasons why some people have not been tested for HIV. Which of these statements best describes the most important reason you have not been tested for HIV in the past [INSERT TIME FRAME]? Select [only one reason/all that apply].
- 1 I haven't been sexually active.
- 2 I think I'm at low risk for HIV infection.
- 3 My doctor never recommended it.
- 4 I didn't have time.
- 5 I haven't had sex without a condom.
- 6 I'm afraid of finding out that I have HIV.
- 7 I didn't want to think about HIV or about being HIV positive.
- 8 I don't like needles or giving blood.
- 9 I don't trust the results to be kept private.
- 10 I had to wait too long for the results.
- 11 I didn't know where to get tested.
- 12 I trust my sexual partner.
- 13 I don't care about the results.
- 14 I'm worried about being labeled as HIV positive.
- 15 Some other reason [Specify: _____]
- 16 No particular reason.
- 17 [INSERT REASON]
- 88 Don't know

₉₉ Prefer not to answer

[ONLY IF 102 = 2]

104. Below is a list of reasons why some people have not been tested for HIV. Which of these statements describe the most important reasons you have not been tested for HIV [in the past INSERT TIME FRAME]? Select [only one reason/all that apply].

- ₁ I haven't been sexually active.
- ₂ I think I'm at low risk for HIV infection.
- ₃ My doctor never recommended it.
- ₄ I didn't have time.
- ₅ I haven't had sex without a condom.
- ₆ I'm afraid of finding out that I have HIV.
- ₇ I didn't want to think about HIV or about being HIV positive.
- ₈ I don't like needles or giving blood.
- ₉ I don't trust the results to be kept private.
- ₁₀ I had to wait too long for the results.
- ₁₁ I didn't know where to get tested.
- ₁₂ I trust my sexual partner.
- ₁₃ I don't care about the results.
- ₁₄ I'm worried about being labeled as HIV positive.
- ₁₅ I'm worried about being labeled as HIV positive.
- ₁₆ I don't want people to think I'm promiscuous.
- ₁₇ Some other reason [Specify: _____]
- ₁₈ No particular reason.
- ₁₇ [INSERT REASON]
- ₈₈ Don't know
- ₉₉ Prefer not to answer

SCRIPT: This section asks questions about HIV self-testing and your experiences with HIV self-testing. HIV self-testing (also called "home HIV testing" or "in-home HIV testing") allows people to take an HIV test in their own home or other private location. There are two types of HIV self-testing:

- **A Rapid Self-Test is done entirely at home or in a private location and can produce results within 20 minutes. You can buy a rapid self-test kit at a pharmacy or online. The only rapid self-test currently available in the US is the OraQuick In-Home oral fluid test.**
- **A Mail-In Self-Test includes a specimen collection kit that contains supplies to collect dried blood from a fingerstick at home. The sample is then sent to a lab for testing and the results are provided by a health care provider. Mail-in self-tests can be ordered through various online merchant sites. Your health care provider can also order a mail-in self-test for you.**

If any test were to come back positive, you would be able to call a toll-free, 24-hour hotline and get immediate counseling.

105. Before today, have you ever heard about HIV self-testing?
- 1 _____ Yes
- 2 _____ No
- 99 _____ Prefer not to answer

[ONLY IF 105 = 1]

106. Have you ever used an HIV self-test *to test yourself* or *someone else*? Select all that apply.
- 1 _____ Yes, I have used one to test *myself*
- 2 _____ Yes, I have used one to test *someone else*
- 3 _____ No, I have never used one
- 99 _____ I prefer not to answer

[ONLY IF 106 = 1 OR 2]

107. Which of these HIV self-tests have you used? Select all that apply.
- 1 Mail-in test (where you prick your finger, collect a blood sample on a card and mail that card to a lab for testing)
- 2 OraQuick® In-Home HIV Test (where you collect your own oral fluid sample by swabbing your mouth, use the testing device yourself and read test results within 20 minutes)
- 3 _____ [INSERT]
- 4 _____ Other HIV self-test (Specify _____)
- 88 _____ I don't remember
- 99 _____ I prefer not to answer

[ONLY IF 106 = 1 OR 2]

108. Where did you get your HIV self-test kit?
- 1 _____ I bought it online [from Together.TakeMeHome.org or TakeMeHome.org]
- 2 _____ I bought it in a pharmacy or other store
- 3 _____ I got it from a clinic or doctor's office
- 4 _____ A provider ordered a test for me
- 5 _____ I got it from a community organization
- 6 _____ I got it from an HIV testing event
- 7 _____ I got it from a sex partner
- 8 _____ I got it from a friend
- 9 _____ [INSERT]
- 10 _____ Other (Specify _____)
- 88 _____ I don't remember
- 99 _____ I prefer not to answer

[ONLY IF 106 = 1 OR 2]

109. What are some of your reasons for using an HIV self-test in the past? Select all that apply. *[randomize options except for “other” and “I prefer not to answer”]*

- 1 _____ Self-testing was convenient
- 2 _____ Self-testing was private
- 3 _____ To test with someone before having sex
- 4 _____ To test myself before having sex
- 5 _____ To test myself after having sex
- 6 _____ My sex partner asked me to self-test
- 7 It was required for a PrEP prescription.
- 8 I was part of a research study.
- 9 To test after potential exposure to HIV.
- 10 COVID-19 made it more difficult for me to access traditional places where testing is provided.
- 11 _____ [INSERT]
- 12 _____ Other (Specify _____)
- 88 _____ I don't remember
- 99 _____ I prefer not to answer

[ONLY IF 106 = 1 OR 2]

110. Among the reasons you indicated, what is the **main reason** you used an HIV self-test? Choose only one.

[ONLY IF 106 = 3]

111. What are some of your reasons for not using an HIV self-test in the past? Select all that apply. *[randomize options except for “other” and “I prefer not to answer”]*

- 1 _____ I did not know HIV self-tests were available
- 2 _____ I did not know where to get an HIV self-test
- 3 _____ I was concerned about the cost of HIV self-tests
- 4 _____ I was concerned about the accuracy of HIV self-tests
- 5 _____ I was concerned I would not be able to perform the HIV self-test correctly
- 6 _____ I was concerned I would not be able to read the test results correctly.

- 7 _____ I got tested for HIV another way, such as at a clinic or at my doctor's office
- 8 _____ I would rather talk to a counselor when I get an HIV test
- 9 _____ I did not want to stick my finger to get a drop of blood
- 10 _____ I did not want to swab my mouth to collect an oral fluid sample
- 11 _____ I would rather be tested by someone who is trained to conduct the test
- 12 _____ I did not want to mail my blood sample to a lab
- 13 _____ I didn't think I needed an HIV test

- 14 _____ I was afraid of finding out the results
- 15 _____ [INSERT reason]
- 16 _____ Other reason (Specify _____)
- 99 _____ I prefer not to answer

112. Among the reasons you indicated, what is the **main reason** you have not used an HIV self-test? Choose only one.

[ONLY IF 106 = 3]

113. How likely would you be to take an HIV self-test if...

Statement	Very unlikely	Somewh at unlikely	Neither unlikely nor likely	Somewha t likely	Very likely	Prefer not to answer
a. it was provided for free	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
b. it was delivered to my house	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
c. you were able to order it online	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
d. you were able to call and get one	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
e. [insert reason here]	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99

114. Would being able to take an HIV self-test [increase the likelihood that you would get tested/how often you get tested for HIV]?

- 1 _____ Yes
- 2 _____ No
- 88 _____ Don't know
- 99 _____ I prefer not to answer

115. What is the maximum amount you would be willing to pay for an HIV self-test?

- 1 _____ I would only use it if it were free
- 2 _____ Less than \$10
- 3 _____ \$11-20
- 4 _____ \$21-30
- 5 _____ \$31-40
- 6 _____ \$41-50
- 7 _____ More than \$50
- 99 _____ I prefer not to answer

116. Please indicate how much you disagree or agree with the following statements about HIV self-testing.

[PROGRAMMER: RANDOMIZE ORDER OF	Strongly	Disagree	Neither disagree	Agree	Strongly	Don't	Prefer not to
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<i>ITEMS]</i>	disagree		nor agree		agree	know	answer
a. HIV self-testing is a good idea.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
b. HIV self-testing is expensive.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
c. I prefer to self-test alone.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
d. I prefer to self-test with a partner.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
e. HIV self-test kits are easy to get.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
g. I know where I can get an HIV self-test kit [for free].	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
h. Self-testing saves time.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
i. Self-testing is convenient.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
j. Self-testing is private.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
k. Self-testing reduces anxiety.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
l. Just thinking about self-testing scares me.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
m. My partner [or others] expects me to self-test.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
n. HIV self-testing is a good option if I can't go to the clinic or my doctor's office.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
o. Self-testing would motivate me to get tested [more often/frequently/ every # months].	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉
p. [INSERT]	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈	<input type="checkbox"/> ₉₉

117. How sure are you that you could...

<i>[PROGRAMMER:</i>	Very	Somewhat	Neither	Somewhat	Very	Prefer not
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RANDOMIZE ORDER OF ITEMS]	Sure	Sure	Sure nor Unsure	Unsure	Unsure	to answer
a. use a mail-in test (where you prick your finger, collect a blood sample on a card and mail that card to a lab for testing)	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
b. use the OraQuick® In-Home HIV Test (where you collect your own oral fluid sample by swabbing your mouth, use the testing device yourself and read test results within 20 minutes)	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
c. use [another type of HIV self-test]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
d. understand the results of the HIV self-test	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
e. talk with a partner about HIV self-testing	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99
p. [INSERT]	<input type="checkbox"/> _1	<input type="checkbox"/> _2	<input type="checkbox"/> _3	<input type="checkbox"/> _4	<input type="checkbox"/> _5	<input type="checkbox"/> _99

118. Do you plan to take an HIV self-test [in the future/next 12 months]?

- _1 _____ Yes
- _2 _____ No
- _88 _____ Don't know
- _99 _____ Prefer not to answer

119. If you could order up to two free HIV self-tests online every 90 days, how many kits would you order each time?

- _1 One kit
- _2 Two kits
- _88 Don't know
- _99 Prefer not to answer

120. What would you most likely do with the second kit?

- _1 Save it for later
- _2 Give it to a partner
- _3 Give it to someone other than a partner
- _4 [Insert option]
- _88 Don't know
- _99 Prefer not to answer

SECTION 12. PERSONAL RELEVANCE AND OTHER SOCIODEMOGRAPHIC VARIABLES

SCRIPT: Finally, we'd now like to ask a few more questions about you.

121. Do you personally know anyone who has HIV or has died from AIDS?

- _1 _____ Yes
- _2 _____ No
- _88 _____ Don't know
- _99 _____ Prefer not to answer

[ONLY IF 119 = 1]

122. Is that person a family member, a close friend, an acquaintance or coworker, or someone else?

- _1 _____ Yes, close friend or family member
- _2 _____ Yes, acquaintance or coworker
- _3 _____ Someone else
- _88 _____ Don't know
- _99 _____ Prefer not to answer

123. What is your current marital status?

- _1 _____ Never married

- 2 _____ Married
- 3 _____ Separated
- 4 _____ Divorced
- 5 _____ Widowed
- 99 _____ Prefer not to answer

124. In what ZIP Code do you currently live? If you prefer not to answer, you may leave the question blank.

_____ (5 digits only)

125. Which best describes your total personal income during the past year?

- 1 _____ Less than \$20,000
- 2 _____ \$20,001 to \$30,000
- 3 _____ \$30,001 to \$40,000
- 4 _____ \$40,001 to \$50,000
- 5 _____ \$50,001 to \$74,999
- 6 _____ \$75,000 to \$99,999
- 7 _____ \$100,000 or more
- 99 _____ Prefer not to answer

126. Do you currently have health insurance or health care coverage?

- 1 _____ Yes
- 2 _____ No
- 88 _____ Don't know
- 99 _____ Prefer not to answer

127. Please tell us if you disagree or agree with the following statement:

Statement	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree	Prefer not to answer
I trust the Centers for Disease Control (CDC) as a source for HIV information.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99

128. Places where I can get medical care are very conveniently located.

- 1 Strongly disagree
- 2 Disagree
- 3 Neither disagree nor agree
- 4 Agree
- 5 Strongly agree
- 99 Prefer not to answer

129. In the past 12 months, how often did you go without the medical care or medications that you needed because you needed the money for food, clothing, housing, etc.?

- 1 Never
- 2 Occasionally
- 3 Usually
- 4 Always
- 99 Prefer not to answer

130. In the past 12 months, how often did you skip meals or cut meal size because there was not enough money for food?

- 1 Never
- 2 Occasionally
- 3 Usually
- 4 Always
- 99 Prefer not to answer

131. In the past 12 months, how often did you have problems finding a safe place to hang out or sleep?

- 1 Never
- 2 Occasionally
- 3 Usually
- 4 Always
- 99 Prefer not to answer