

Development of CDC's Let's Stop HIV Together Social Marketing Campaign for Consumers

Attachment 3p: HIV Testing Brief Survey Instrument

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**Attachment 3p: HIV Testing
Brief Survey Instrument**

CASE ID _____

PARTICIPANT SURVEY

We are interested in your opinions about HIV testing. We would also like to get some additional information about you. If you're not sure, choose an answer that comes closest to what you think might be true for each question. Please remember that your answers are private. You can choose not to answer any question and can stop at any time. Please let the person who checked you in know when you are finished with the survey.

BEHAVIORS

These next questions are about your personal HIV testing behaviors. Please remember that your answers are kept private.

1. Have you ever been tested for HIV? An HIV test checks whether someone has the virus that causes AIDS.

- ₁ Yes
- ₂ No [GO TO Q9]
- ₈₈ Don't know
- ₉₉ Prefer not to answer

2. When did you have your first HIV test? DATE (MM/YYYY): _____ [ERROR CHECK: CANNOT BE BEFORE 1985 OR BEYOND CURRENT DATE]

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

3. In the **past 2 years**, that is, since [INSERT CALCULATED MONTH AND YEAR], how many times have you been tested for HIV?

NUMBER _____

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

4. How often do you get an HIV test?

- ₁ Every 0-2 months

- 2 Every 3-6 month
- 3 Every 7-12 months
- 4 Less often than once a year
- 5 Other [Specify: _____]
- 88 Don't know
- 99 Prefer not to answer

5. What was the result of your most recent HIV test?

- 1 I tested positive for HIV [GO TO Q5a]
- 2 I tested negative for HIV [GO TO Q5b]
- 3 My results were unclear [GO TO Q5b]
- 4 I never got my results [GO TO Q5b]
- 88 Don't know
- 99 Prefer not to answer [TERMINATE AND GO TO CLOSING]

a. [IF POSITIVE] When did you test positive for HIV?

DATE (MM/YYYY): _____

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

b. [IF NEGATIVE] When did you have your **most recent** HIV test? DATE (MM/YYYY): _____

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

6. Where did you have your last HIV test?

- 1 Private doctor
- 2 STD or AIDS clinic or testing site
- 3 Hospital or emergency room
- 4 Public health department
- 5 Community health center
- 6 At home
- 7 Drug treatment facility
- 8 Other location
- 88 Don't know
- 99 Prefer not to answer

7. Which of these are the main reasons for your last HIV test? Mark all that apply.

- 1 It just seemed like a good idea
- 2 It's something you do every year
- 3 Just to find out
- 4 Worried that you are infected
- 5 A doctor, nurse, or other health care provider asked you to
- 6 The health department asked you to
- 7 Your sexual partner asked you to
- 8 Because of pregnancy
- 9 To get birth control
- 10 You found out your sexual partner cheated
- 11 Already had an STD
- 12 You were starting a new relationship
- 13 You get tested during your yearly exam
- 14 A family member or friend was diagnosed with HIV
- 15 Other reason [Specify: _____]
- 88 Don't know
- 99 Prefer not to answer

8. Below is a list of reasons why some people have not been tested for HIV. Which of these best describes the most important reason you have not been tested for HIV in the past [INSERT CALCULATED DATE FROM Q5b] months? Check only one.

- 1 I think I am at low risk for HIV infection.
- 2 I am afraid of finding out that I have HIV.
- 3 I didn't have time.
- 4 Some other reason [Specify: _____]
- 5 No particular reason
- 88 Don't know
- 99 Prefer not to answer

[GO TO Q10]

9. Below is a list of reasons why some people have not been tested for HIV. Which of these best describes the most important reasons you have not been tested for HIV? Mark all that apply.

- 1 I have not been sexually active.
- 2 I think I am at low risk for HIV infection.
- 3 My doctor never recommended it.
- 4 I didn't have time.

- 5 I have not had sex without a condom.
- 6 I was afraid to find out if I was HIV positive.
- 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 am worried about being labeled as HIV positive.
- 15 Some other reason [Specify:_____]
- 16 No particular reason.
- 88 Don't know
- 99 Prefer not to answer

HIV SELF-TESTING

Now I am going to ask you some questions related to 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.

10. Before today, have you ever heard about HIV self-testing?

- 1 Yes
- 2 No
- 99 I prefer not to answer

11. 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

IF Q11 = Yes, ask Q12 and Q13.

12. 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

13. Where did you get your HIV self-test kit?

- ₁ I bought it online
- ₂ I bought it in a pharmacy or other store
- ₃ My healthcare provider ordered one for me
- ₄ I got it from a community organization
- ₅ I got it from an HIV testing event
- ₆ I got it from a sex partner
- ₇ I got it from a friend
- ₈ [INSERT]
- ₉ Other (Specify _____)
- ₈₈ I don't remember
- ₉₉ I prefer not to answer

14. 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 [INSERT]
- ₈ Other (Specify _____)
- ₈₈ I don't remember
- ₉₉ I prefer not to answer

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

[Display response options based on selections in Q14.]

IF Q11= No, ask Q16 and/or Q17. SKIP IF PARTICIPANT IS HIV-POSITIVE.

16. 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 got tested for HIV another way, such as at a clinic or at my doctor’s office
- 7 I would rather talk to a counselor when I get an HIV test
- 8 I did not want to stick my finger to get a drop of blood
- 9 I did not want to swab my mouth to collect an oral fluid sample
- 10 I would rather be tested by someone who is trained to conduct the test
- 11 I did not want to mail my blood sample to a lab
- 12 I didn’t think I needed an HIV test
- 13 I was afraid of finding out the results
- 14 [INSERT reason]
- 15 Other reason (Specify _____)
- 99 I prefer not to answer

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

[Display response options based on selections in Q16.]

18. How likely would you be to take an HIV self-test if it were provided for free?

- 1 Very unlikely
- 2 Somewhat unlikely
- 3 Neither unlikely nor likely
- 4 Somewhat likely
- 5 Very likely
- 99 I prefer not to answer

19. 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

20. 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

21. Please indicate how much you disagree or agree with the following statements. (strongly disagree to strongly agree—5 point scale)

- ₁ HIV self-testing is a good idea.
- ₂ [OraQuick OR Mail-in] HIV self-testing is difficult to do.
- ₃ HIV self-testing is expensive.
- ₄ [OraQuick OR Mail-in] HIV self-test results are accurate.
- ₅ I would trust the results from an [OraQuick OR Mail-in] HIV self-test.
- ₆ I prefer to self-test alone.
- ₇ I prefer to self-test with a partner.
- ₈ HIV self-test kits are easy to get.
- ₉ I know where I can get an HIV self-test kit [for free].
- ₁₀ [OraQuick OR Mail-in] HIV self-test results are easy to understand.
- ₁₁ Self-testing saves time.
- ₁₂ Self-testing is convenient.
- ₁₃ Self-testing is private.
- ₁₄ Self-testing saves me the embarrassment of others knowing I was getting an HIV test.
- ₁₅ Self-testing reduces anxiety.
- ₁₆ Just thinking about self-testing scares me.
- ₁₇ My partner [or others] expects me to self-test.
- ₁₈ HIV self-testing is a good option if I can't go to the clinic or my doctor's office.

- ₁₉ Self-testing would motivate me to get tested [more often/frequently/every X months]
- ₂₀ [INSERT]
- ₉₉ I prefer not to answer

22. How sure are you that you could...

- ₁ Use the [OraQuick OR Mail-in] HIV self-test correctly
- ₂ Understand the results of the [OraQuick OR Mail-in] HIV self-test
- ₃ Talk with a partner about HIV self-testing
- ₄ [INSERT]
- ₉₉ I prefer not to answer

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

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

THEORETICAL CONSTRUCTS

Knowledge

24. When should you get an HIV test after having sex without a condom with a [woman/man]?

- ₁ 0–2 months after having sex without a condom
- ₂ 3–6 months after having sex without a condom
- ₃ 7–12 months after having sex without a condom
- ₄ More than 12 months after having sex without a condom
- ₅ When you start to feel sick
- ₈₈ Don't know
- ₉₉ Prefer not to answer

25. Do you get an HIV test after any situation when you think you might have been exposed to HIV?

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

26. Where can you get an HIV test? Mark all that apply.

- ₁ HIV counseling and testing site
- ₂ STD or AIDS clinic or testing site
- ₃ Hospital or emergency room

- 4 Community health clinic
- 5 Private physician office
- 6 Drug treatment program
- 7 At home
- 8 Correctional facility (jail or prison)
- 9 Military
- 10 Other [Specify: _____]
- 88 Don't know
- 99 Prefer not to answer

27. Please tell us how much you agree or disagree with each of the following statements:
 Someone who is HIV-negative and **not** taking medicines to prevent HIV (e.g., PrEP/Truvada,) should get tested for HIV every 6 months if they...

| | Strongly agree | Agree | Neither agree or disagree | Disagree | Strongly disagree | Don't know | Prefer not to answer |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------|
| a. always have sex with 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 |
| b. had vaginal 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 |
| c. have had anal insertive sex (topping) 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 |
| d. have had anal receptive sex (bottoming) 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 |
| e. have a sexual partner who is 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 |
| f. have unprotected [anal/vaginal/oral] sex with a partner whose HIV status they don't know. | <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. have had more than one sexual partner since their last HIV 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 |
| h. exchange sex for drugs. | <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 |

Attitudes and Beliefs

28. On a scale from 1 to 5, where 1 is extremely bad and 5 is extremely good, how would you rate getting tested for HIV at least every [INSERT] months?

| Extremely Bad 1 | Bad 2 | Neither bad or good 3 | Good 4 | Extremely Good 5 | Don't know | Prefer not to answer |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|------------------------------|------------------------------|
| <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 |

29. Please tell us how much you agree with each of the following statements: Getting tested at least every [INSERT] months....

| | Strongly agree | Agree | Neither agree or disagree | Disagree | Strongly disagree | 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. reassures me that I can get into treatment early if I test 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 |
| c. 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 |
| d. 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 |

30. Please tell us your opinion regarding the importance of each of the following statements.

| | Very important | Somewhat important | Neither important nor unimportant | Somewhat unimportant | Very unimportant | Don't know | Prefer not to answer |
|--|-----------------------------|-----------------------------|-----------------------------------|-----------------------------|-----------------------------|------------------------------|------------------------------|
| a. Having access to free HIV tests is... | <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 access to confidential HIV tests is... | <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. Taking better care of my sexual partner is... | <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. 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"/> 88 | <input type="checkbox"/> 99 |
| e. 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"/> 88 | <input type="checkbox"/> 99 |
| f. 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"/> 88 | <input type="checkbox"/> 99 |

31. Please tell us how much you agree or disagree with each of the following statements: Getting tested for HIV...

| | Strongly agree | Agree | Neither agree or disagree | Disagree | Strongly disagree | Don't know | Prefer not to answer |
|--|----------------------------|----------------------------|----------------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------|
| a. 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"/> 88 | <input type="checkbox"/> 99 |
| b. will help me take better care of my sexual 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 |
| 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"/> 88 | <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"/> 88 | <input type="checkbox"/> 99 |
| e. is free, fast, 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"/> 88 | <input type="checkbox"/> 99 |
| f. is important for my health. | <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. 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"/> 88 | <input type="checkbox"/> 99 |
| h. is important so that people who test positive can start getting treated right away. | <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 |

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

| | Strongly agree | Agree | Neither agree or disagree | Disagree | Strongly disagree | Don't know | Prefer not to answer |
|---|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|--|--|
| a. Your HIV test result expires every time you have risky 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. Getting an HIV test is free, fast, 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"/> ₈₈ | <input type="checkbox"/> ₉₉ |
| c. My family/friends are my reasons for getting tested. | <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. My reason for getting an HIV test is 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. Getting tested for HIV will help me stay strong and informed. | <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. Getting tested for HIV will help me take better care of my sexual 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 |
| g. Getting tested for HIV 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"/> ₈₈ | <input type="checkbox"/> ₉₉ |
| h. Getting tested for HIV 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"/> ₈₈ | <input type="checkbox"/> ₉₉ |

Self-Efficacy

33. Please tell us how much you agree or disagree with the following statement: I am confident that I can get an HIV test.

- ₁ Strongly agree
- ₂ Agree
- ₃ Neither agree nor disagree

- ₄ Disagree
- ₅ Strongly disagree
- ₈₈ Don't know
- ₉₉ Prefer not to answer

34. How sure are you that you could get an HIV test at least every [INSERT] months if you...

| | Very sure I could not | Somewh at sure I could not | Slightly sure I could | Somewh at sure I could | Very sure I could | Don't know | Prefer not to answer |
|---|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|--|--|
| a. wanted to get an HIV 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 |
| b. could find a free testing site? | <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. had to travel far to find a free testing site? | <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. could get the results of your HIV test within [INSERT TIMEFRAME]? | <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. knew that your results would be kept confidential? | <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. could find an HIV test provider that spoke your language (e.g., English, Spanish)? | <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. could find a provider that you feel comfortable with and trust? | <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. could use a home-based testing kit? | <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 |

Norms

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

| | Strongly | Agree | Neither | Disagre | Strongl | Don't | Prefer |
|--|----------|-------|---------|---------|---------|-------|--------|
|--|----------|-------|---------|---------|---------|-------|--------|

| | agree | | agree or disagree | e | y disagree | know | not to answer |
|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|------------------------------|------------------------------|
| a. Most people who are important to me think I should get tested for HIV at least every [INSERT #] months. (By “important to me”, we mean people like friends, family, and anyone else who is an important part of your life.) | <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. Most people in my community think HIV testing is important. | <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. Most of my sexual partners get tested for HIV at least every [INSERT #] 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 |
| d. Most [men/women] I know get tested for HIV at least every [INSERT #] 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 |
| e. Most people in my community would be supportive of someone 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"/> _88 | <input type="checkbox"/> _99 |
| f. Most people in my community would be supportive of a [gay/transgender] family member or friend. | <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 |

Behavioral Intentions

36. Please tell us how likely you are to do the following:

| | Very likely | Some-what likely | Neither likely nor unlikely | Some-what unlikely | Very unlikely | Don't know | Prefer not to answer |
|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|------------------------------|------------------------------|
| a. I plan to get an HIV test in the next [INSERT #] 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 |
| b. I plan to get an HIV test before sex with a new sexual 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 |

| | | | | | | | |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------|
| c. I plan to get tested with a sexual 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 |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------|

INFORMATION SEEKING

37. In the last [INSERT #] months, how often have you...

| | Very often | Often | Sometimes | Rarely | Never | Don't know | Prefer not to answer |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------|
| a. looked for information about 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"/> 88 | <input type="checkbox"/> 99 |
| b. searched online for a location to get an HIV 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 |
| c. called an HIV testing hotline? | <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. texted your zip code for a location to get an HIV 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 |
| e. talked about 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"/> 88 | <input type="checkbox"/> 99 |
| f. visited a Centers for Disease Control website 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"/> 88 | <input type="checkbox"/> 99 |

COMMUNICATION BEHAVIORS

38. Do you currently have a main sexual partner?

- 1 Yes
- 2 No [GO TO Q41]
- 88 Don't know
- 99 Prefer not to answer [GO TO Q41]

39. In the **past [INSERT #] months**, how often have you had one-on-one conversations with your current main sexual partner about HIV testing?

- 1 Very often
- 2 Often
- 3 Sometimes
- 4 Rarely
- 5 Never
- 88 Don't know

₉₉ Prefer not to answer

40. In the **past [INSERT #] months**, how often have you **discussed** the following topics with your current **main sexual partner**?

| | Very often | Often | Some-times | Rarely | Never | Don't know | Prefer not to answer |
|--|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|--|--|
| a. Your last HIV test and test results | <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. Your partner's last HIV test and test results | <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. Getting 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"/> ₈₈ | <input type="checkbox"/> ₉₉ |
| d. Getting tested for HIV together | <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 |

41. Do you currently have a [casual/non-main] sexual partner?

- ₁ Yes
- ₂ No [GO TO CLOSING]
- ₈₈ Don't know
- ₉₉ Prefer not to answer [GO TO CLOSING]

42. In the **past [INSERT #] months**, how often have you had one-on-one conversations with a current [casual/non-main] sexual partner about ways to prevent HIV?

- ₁ Very often
- ₂ Often
- ₃ Sometimes
- ₄ Rarely
- ₅ Never
- ₈₈ Don't know
- ₉₉ Prefer not to answer

43. In the **past [INSERT #] months**, how often have you **discussed** the following topics with a current [casual/non-main] sexual partner?

| | Very often | Often | Some-times | Rarely | Never | Don't know | Prefer not to answer |
|--|------------|-------|------------|--------|-------|------------|----------------------|
| | | | | | | | |

| | Very often | Often | Some-times | Rarely | Never | Don't know | Prefer not to answer |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------|
| b. Your partner's last HIV test and test results | <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. Getting 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"/> 88 | <input type="checkbox"/> 99 |
| d. Getting tested for HIV together | <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 |

THE END

Thank you for answering these questions. Please place the survey in the envelope provided. Give the survey and your consent form to the interviewer when you go into the interview room. The interviewer will not see your responses to these questions.