**National HIV Behavioral Surveillance System - Brief Biobehavioral HIV Assessments (NHBS-BHBA)**

**Attachment #3f (English)**

**Qualitative interviews (English)**

Public reporting burden of this collection of information is estimated to average 90 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30329; Attn: OMB-PRA (0920-1398)

# National HIV Behavioral Surveillance

# Brief HIV Biobehavioral Assessment (NHBS-BHBA)

# Model Qualitative Data Collection Topic Guide

Below is a list of model qualitative data collection topics and interview questions that project areas can use to develop interview guides, focus group guides, and brief intercept surveys (BIS).

**Adapting the Guide**

Project areas should tailor topics and questions for the type of data collection being conducted and to the BHBA population. Not all topic areas will be applicable for every sub-population. Guides should be designed for the individual(s) being interviewed (e.g., Community Key Informant (CKI), Professional Key Informant (PKI), focus groups, Brief Intercept Surveys(BIS)). Project areas must modify the questions for specific sub-populations (e.g., young PWID, racial and ethnic minority MSM). Additionally, project areas may need to include eligibility criteria to ensure they are reaching the correct participants.

*Example:* When developing a PKI interview guide, remember to tailor the questions and remove sections as needed. Below are some examples of how to adapt questions for PKI interviews.

* Instead of asking about services accessed, ask about services provided (if applicable) and sub-populations served, for example:
	+ What are your organization’s most important objectives?
	+ What types of services does your organization provide? (e.g., HIV testing and treatment, PrEP, etc.)
	+ What sub-population(s) does your organization primarily serve?
	+ What types of referrals does your organization provide?
	+ What additional support/services would you like to provide but are currently unable to?

 *Example:* When developing a guide for BIS, make sure to include very few questions (e.g., 1-3), that answering would not compromise someone’s privacy, and that can be asked in a public space. Below is an example of how to adapt questions for BIS to learn about service provision in an area. Note that you may also use these questions to gauge whether an individual may be a good key informant (e.g., they are very knowledgeable and willing to answer questions).

* Instead of asking someone about *their* experiences using a syringe services program (SSP), ask about their knowledge of services in the area. For example:
	+ Do you know if there is a syringe exchange around here?
	+ What kinds of services do they offer?

**Model NHBS-BHBA Interview Guide Sections**

Below are the interview guide sections for developing different interview guides (e.g., key informant interviews, focus groups, brief intercept surveys). Guides should be developed for each population you hope to interview.

1. **Checklist Prior to Data Collection**
2. **Eligibility Screener (if applicable)**
3. **Cover Page**
4. **Guide**
5. Demographic Information
6. Introduction
7. Warm Up
8. Healthcare and Mental Health CareAccess and Services
9. Sexual Risk Behaviors
10. HIV Testing and Treatment
11. PrEP and PEP
12. Sexually Transmitted Infections
13. Viral Hepatitis
14. Injection Drug Use
15. Non-injection Drug Use
16. Access to Syringe Service Programs (SSPs) and Other Harm Reduction Services
17. Social Determinants of Health and Health Equity
18. Stigma and Discrimination
19. Social Capital
20. Experiences with the Criminal Justice System

# Checklist Prior to Data Collection

* Informed consent in hand
* Interview guide in hand (i.e., screener, cover sheet, guide)
* Audio recording program open
* Test computer or phone video and audio (if applicable)
* Incentives (if applicable)

***DO NOT WRITE ANYTHING ON THE FORM***

***WHICH COULD IDENTIFY THE PARTICIPANT***

# NHBS-BHBA Model Interview Guide

|  |
| --- |
| **Cover Page: To be completed by the interviewer/moderator at the beginning of the interview for eligible participants:** |
| **State**  |  |
| **NHBS-BHBA Project Area**  |  |
| **BHBA Population** |  |
| **Qualitative ID** |  |
| **Mode (CKI, PKI, Focus Group)** |  |
| **Date of interview** |  |
| **Site of interview**  |  |
| **Lead interviewer name** |  |
| **Notetaker name**  |   |
| **Informed consent provided (yes/no)** |  |
| ***[For Focus Groups Only]*** |
| **Number of participants** |  |
| **To be completed by the interviewer after interview:** |
| **Comments and Observations:** |

|  |
| --- |
| **Section A:** **Demographic Information**  |

[Remember to add additional demographic questions based on your project area’s needs.]

[Begin after informed consent, but before beginning audio recording]:

[Information gathered for eligibility can be transferred to this form]

[Interviewer may introduce themselves using their pronouns and ask for participants’ pronouns as appropriate]: Thank you for agreeing to participate in this interview. Before we begin, I would like to collect some basic information from you.

|  |
| --- |
| **For community key informant interviews** (as appropriate for BHBA population) |
| Do you consider yourself to be of Hispanic or Latino/a origin? |  |
| What racial group or groups do you consider yourself to be in? (e.g., American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, White) |  |
| Current age [collected from eligibility screener] |  |
| What is your sex? (e.g., male, female) |  |
|  |  |
| What is your highest level of education? |  |
| Are you currently employed? (e.g., full-time, part-time, unemployed, disability) |  |
| Do you currently have health insurance? |  |
| How would you describe your sexuality? |  |
| Other group characteristics [as needed]: |  |
| **For focus groups** (as appropriate for BHBA population) |
| Number of participants |  |
| Perceived group sex(es) |  |
| Perceived group race(s) and ethnicity(ies)  |  |
| Perceived group age range |  |
| Other group characteristics [as needed]: |  |

**Section B: Introduction**

Thank you again for your interest in this health project**.** My colleague will be taking notes while we talk. No personal information, such as your name(s), will be recorded.

**The purpose** of this interview is to seek information about health programs and policies to make services more easily accessible to you and improve HIV prevention and care for people in your community.

[Insert local Health Department/jurisdiction name] is very interested in understanding your experiences to help improve these services.

Many of our questions will ask you to **share your current and past experiences,** including questions about your [applicable topics, e.g., sex life, healthcare needs, injection experiences, and non-injection drug use].Some questions will directly ask you about HIV and sexually transmitted infections. If at any point in time you feel that you cannot say what you would like to say, please let me know so we can allow you to either move to a more private area or pause the interview.

**The interview and your responses are private. Your name will NOT be attached to this interview, the recording, the transcription, or later reports that may use your interview responses.** Also, I have no ties to law enforcement or immigration services.

If there is anything you would like to remove from the record after you have said it, please let me know and I will have it taken out of the transcript. Any names, places, or other identifying information spoken during this interview will be changed or removed to protect your identity.

Our conversation will take about **an hour** and to thank you for your time, we will give you [insert incentive amount and type] at the end of the interview. You can stop me at any time if you have a question or concern, or if you want to skip a question or end the conversation.

Does this sound like something you’re still interested in?

Great!

Before I begin, I want to go over a couple of items:

* (If participant has provided consent for audio recording). I am going to begin recording our conversation. Maintaining your privacy is very important to us- I do this simply to make sure that I capture all of the information that you share and so I can listen to what you have to say and not worry about taking exact notes. The recording helps me in writing my report and is used for that purpose only. The audio file from this interview will be destroyed once the information is transcribed and checked. Again, I will not ask your name at any time during this interview. Is it okay for me to record our conversation? And if at any point during our conversation, you would like me to stop recording, please let me know. We will also take notes (in case the recording does not work).
* So before we get started I just want to say **there are no right or wrong answers. I am interested in your opinion**. If you don’t want to answer a question, we can skip it.
* **Do you have any questions before we begin**? If you have any questions at any time, please stop me and ask.

[After **informed consent is provided**]

* **Turn on** the audio recorder if participant consented to recording.
* **Say the date**, the **interview ID**, the **interviewer’s name**, and that **informed consent was provided.**
* **Begin** the interview

**Section C: Warm Up**

**Remember, these are example questions your project area may use as ‘warm up’ questions. Please adapt section to your local needs and include relevant probes.**

**C1. You said that you spend most of your time in [insert location from eligibility question]. Can you tell me a little bit about this area?**

**C2. What have you heard about HIV in [insert local county/jurisdiction name]?**

**C3. What else can you tell me about yourself?**

**Section D: Healthcare and Mental Health Care Access and Services**

**Remember, these are sample questions your project area may use as part of the Healthcare and Mental Health Care Access and Services section. Please adapt this section and add questions to address local needs as necessary and include relevant probes.**

**Now I would like to talk to you about your experiences with health care providers, and other community services. To start, I would like to ask about how you get healthcare and what your experience has been.**

**D1. Tell me about the last time you went to get medical care.**

**Probes:**

* *Where did you go?*
* *Why did you go there?*
* *Where do you feel most comfortable getting medical services? Why?*
* *Where do you usually go when you need to see a doctor?*

**D2. Tell me about the last time when you needed medical care but didn’t go see a medical provider.**

**Probes:**

* [If yes] Tell me about the reasons you didn’t go. (Probe: insurance, cost, transportation, etc.)
* How often does this happen?

**D3. Tell me about service providers in the area (housing, food, medical, mental health, behavioral health, syringe services)? Which ones are most helpful? Least helpful?**

**Probes:**

* *What have your experiences been like with these service providers (ask for each service experience)?*

**D4. What services do you need that you can’t get? (syringe services, substance abuse treatment, HIV or hepatitis C testing, sexual health, PrEP, shelter, food pantries, mental health, behavioral health, legal services)**

**Probes:**

* + *Where should the services you need be located?*
	+ *What has made it difficult for you to get these services?*
	+ *What would make it easier for you to access these services?*

**D5. How can doctors and hospitals best care for [BHBA population]? What are other suggestions?**

**D6. What else about health care or other services would you like to tell me about?**

**D7. Can you tell me about the last time you went to get mental health care?**

* *[If yes] Where did you go?*
	+ *Why did you go there?*
	+ *Where do you usually go for services?*
	+ *Where do you feel most comfortable getting mental health services? Why?*
* *[If hasn’t sought mental health care] Have you wanted to get mental health care but could not? Can you tell me more about that?*

**D8.****What else about mental health care or other mental health services would you like to tell me about?**

**Section E: Sexual Risk Behaviors**

**Remember, these are example questions your project area may use as part of the sex behavior section. Please adapt this section to your local needs as necessary and include relevant probes.**

**Now we’re going to ask you some questions about sex.**

**E1. Can you tell me about the sex you’ve had in the past 12 months?**

**Probes:**

* *Can you tell me a bit about who you generally have sex with? (Probe: sex with women, men) (Probe: how many casual, how many could consider serious)*
* For casual partners probe:
	+ *What types of sex were you having (oral, vaginal, anal)?*
	+ *Tell me about your condom use. (Probe about condom use by types of sex, if needed)*
	+ *Do you use drugs or alcohol with the people you have sex with? How?*
	+ *Do you use drugs or alcohol during sex? How (probe into why)?*
	+ *What types of drugs do you use during sex? Why those drugs?*
* For main/serious partners probe:
	+ *What types of sex were you having (oral, vaginal, anal)?*
	+ *Tell me about your condom use. (Probe about condom use by types of sex, if needed)*
	+ *Do you use drugs or alcohol with the people you have sex with? How?*
	+ *Do you use drugs or alcohol during sex? How (probe into why)?*
	+ *What types of drugs do you use during sex? Why those drugs?*

**E2. Do you ever have sex in exchange for something like money, food, drugs, or a place to stay? Can you tell me about that?**

**Probes:**

* *What do you call people you exchange sex with (probe: clients, sex partners, dates)?*
* *Where do you normally find [preferred participant term] you trade sex with?*
* *What do you receive from [participant term] in exchange for having sex with them?*
* *Tell me about [participant term]. Where are they from? Are they primarily men or women?*
* *Tell me about your condom use with [participant term].*
* *(If no condoms used) what are some of the reasons why you don’t use condoms with [participant term]?*

**E3. Have you ever given someone something in exchange for sex like money, food, drugs or a place to stay?**

**Probes:**

* + *Tell me about the people you buy sex from. How do you find them? Where do you find them?*
	+ *Tell me about your condom use with the people you buy sex from.*
	+ *(If no condoms used) what are some of the situations when you don’t use condoms with clients?*

**Now I’m going to ask you some questions about ways to prevent HIV with sex partners.**

**E4. What are some things people can do to prevent getting HIV during sex?**

**Probes:**

* *How comfortable would you be discussing these ways with your sexual partner(s)?*
* *Can you tell me about a time when you’ve discussed preventing HIV with a sexual partner?*

**E5. What else about sex would you like to tell me about?**

**Section F: HIV Testing and Treatment**

**Remember, these are sample questions your project area may use as part of the HIV Testing and Treatment section. Please adapt this section to your local needs as necessary and include relevant probes.**

**Now I would like to hear what you know and what you have heard about getting tested or treated for HIV infection.**

**F1. Share with me what you know about HIV.**

**Probes:**

* + *Where do you get information about HIV? (probes on different sources of information, what makes them trust the source, and how they obtain the information, e.g., social network, webpage, videos, radio)*

**F2. Tell me about experiences you’ve had talking to a doctor or other provider about HIV.**

**Probes:**

* ***What about ways to prevent HIV?***

**F3. Have you ever been tested for HIV before?**

**Probes:**

* *(If not tested), tell me a little about why you haven’t been tested.*
* *(If yes), tell me about your experience getting tested for HIV.*
* *Why did you get tested?*
	+ *When did you last get tested?*
	+ *What was the outcome of the test?*
	+ *Where did you get tested? (probes on location of last HIV test, e.g., public health clinic or community health center, private doctor’s office, emergency room, hospital (inpatient), HIV testing site, street outreach program, drug treatment program, syringe exchange program, jail, family planning clinic, at-home)*
	+ *Did you have to ask for the HIV test, or was it offered to you first?*

**F4. What are reasons why people may not get tested for HIV?**

**Probes:**

* *What are some barriers for getting an HIV test? (e.g., low perceived risk, afraid of results, stigma, misinformation, medical mistrust, lack of time, never offered a test by a healthcare provider)*

**F5. What can be done to get more people tested for HIV?**

**Probes:**

* *What are some reasons why sexually active people may not get tested as often as they should? (Provide HIV screening and testing guideline for population of interest, e.g., sexually active MSM should be screened for HIV at least annually)*
* *What are some ways that people could be encouraged to get tested the recommended amount?*
	+ *Who are the important people in the community to work with on increasing HIV testing? How do we get them interested?*
	+ *What resources could help increase HIV testing in the community?*

**F6. What else about HIV testing would you like to tell me about?**

**F7. Now tell me a little about what you know about HIV medications.**

**F8. [IF HIV-POSITIVE] I want to learn a bit more about your experiences with getting treatment for HIV.**

**Probes:**

* + *Can you tell me a bit about when you first went to the doctor after you found out your HIV test was positive? (probes on how long they waited to see a doctor, what medication they were prescribed, what type of support they received)*
	+ *What have your experiences been like trying to get HIV medication? (probes on prescription coverage, provider relationship, support to retain in care)*
	+ *Are you currently taking HIV medication? Why or why not?*
	+ *If yes, where are you currently receiving HIV care? Tell me about your experience.*
	+ *If yes, in the past week, how many times did you miss a dose of the HIV medication?*
	+ *If no, tell me about some of the things that make it hard for you to get medical care and HIV medication.*
	+ *[FOR ALL] What would make getting HIV care or HIV medication easier for you?*

**F9. What, if any, barriers do you know of for people trying to get HIV care? What can be done to make access to HIV treatment better for people?**

**F10. What else about HIV treatment would you like to tell me about?**

**Section G: PrEP and PEP**

**Remember, these are sample questions your project area may use as part of the PrEP and PEP section. Please adapt this section to your local needs as necessary and include relevant probes.**

**G1. [IF HIV-NEGATIVE or HIV-POSITIVE as appropriate] Have you heard of pre-exposure prophylaxis or PrEP? (If no, then explain PrEP: *Pre-exposure prophylaxis, or PrEP, is a daily pill that prevents HIV-negative people from getting HIV.*)**

**Probes:**

* *If yes, what have you heard about PrEP?*
* *If yes, how did you learn about PrEP?*
	+ *Tell me about experiences you’ve had talking to a provider about PrEP or taking PrEP.*
	+ *Have you heard of ‘non-daily,’ ‘2-1-1’ or PrEP on-demand? (If no, then explain PrEP on-demand: 2-1-1 schedule means taking 2 pills 2-24 hours before sex, 1 pill 24 hours after the first dose, and 1 pill 24 hours after the second dose)*

**G2. [If not taking PrEP] What are some reasons that you or others may have for not taking PrEP?**

**G3. [If not taking PrEP] What would make you want to take PrEP?**

**G4. [If taking PrEP] Tell me about your experience taking PrEP.**

**Probes:**

* + *Can you tell me about how you take your PrEP?*
	+ *Who provides it for you/Where do you get it?*
	+ *How are you paying for it?*
	+ *What motivated you to take it?*
	+ *How does taking PrEP make you feel (e.g., risk level, perceptions by friends or partners, side effects, value or worth)*
	+ *Do you know which PrEP drug you are taking (e.g., Truvada or Descovy)?*
	+ *What appealed to you about taking PrEP?*

**G5. What recommendations do you have to help people learn about PrEP?**

**G6. What do you think would help other people to take PrEP if they wanted to?**

**G7. What else about PrEP would you like to tell me about?**

**G8. Have you ever heard of Post-Exposure Prophylaxis or PEP (If not, then explain PEP: Post-exposure prophylaxis means taking medicine to prevent HIV after a possible exposure; must be started within 72 hours after a recent possible exposure to HIV)?**

**G9. Have you ever taken PEP? Can you tell me about that?**

**G10. What else about PEP would you like to tell me about?**

**Section H: Sexually Transmitted Infections**

**Remember, these are sample questions your project area may use as part of the Sexually Transmitted Infections section. Please adapt this section to your local needs as necessary and include relevant probes.**

**H1. Have you ever been tested for an STI before (e.g., gonorrhea, chlamydia, syphilis, genital herpes)? What was the outcome of the test(s)?**

**Probes:**

* *[If tested positive for STI] Did you seek treatment?*
	+ *Where did you go to get treatment? What was that experience like?*
	+ *If not treated- Why weren’t you treated? Did you try to get STI treatment but were unable to?*
	+ *Did your sexual partner(s) get treated?*
		- *[If not] Why not?*

**H2. Share with me what you know about Sexually Transmitted Infections (STIs)?**

**H3. Where do you get information about STIs?**

**Probes:**

* *What are some of the different sources of information?*
* *What makes you trust a source of information?*
* *How do you obtain the information (e.g., social network, webpage, videos, radio, etc.)?*

**H3. Tell me about experiences you’ve had talking to a doctor or other provider about ways to prevent STIs.**

**H4. Now tell me a little about what you know about treatment for STIs.**

**H5. What else about STIs would like you like to tell me about?**

**Section I: Viral Hepatitis**

**Remember, these are sample questions your project area may use as part of the viral Hepatitis section. Please adapt this section to your local needs as necessary and include relevant probes.**

**There are three common types of viral hepatitis- hepatitis A, hepatitis B and hepatitis C. Hepatitis C virus is spread through infected blood and DOES NOT have a vaccine.**

**I1. Please share with me what you know about Hepatitis.**

**I2. Have you been vaccinated for Hepatitis? Can you tell me about that? (***probe whether HAV, HAB***)**

**I3. Have you ever had Hepatitis A? Can you tell me about that?**

**I4. Have you ever had Hepatitis B? Can you tell me about that?**

**I5. Have you ever been tested for Hepatitis C? If so, tell me about your experience getting tested.**

**Probes:**

* When was your most recent test?
* Where did you get tested?
* What was the outcome of the test?

**I6. Have you ever been told by a doctor or other health care provider that you have Hepatitis C? Can you tell me more about that?**

**I7. [If tested positive for Hepatitis C] Tell me about your experiences getting treatment for Hepatitis C infection?**

**Probes:**

* *[If tested positive but never got treatment] Did you want to get treatment? Why/why not? Can you tell me about that?*
* *Did you have any trouble getting treated for Hepatitis C? (probe if told they could not get treated if they were still injecting).*
* *Have you ever taken medicines to treat the Hepatitis C infection? What were those medicines?*
* *Have you been reinfected with Hepatitis C? Can you tell me about that?*

**I8. Has a healthcare provider ever told you that you were cured of Hepatitis C? Can you tell me about that?**

**I9. What else about Hepatitis would you like to tell me about?**

**Section J: Injection Drug Use**

**Remember, these are sample questions your project area may use as part of the Injection Drug Use section. Please adapt this section to your local needs as necessary and include relevant probes.**

**I’d like to learn about the types of drugs you have injected and what your experiences have been.**

**J1. Thinking about the last time you injected, can you walk me through the experience?**

**Probes:**

* *What drugs did you use?*
* *Did you use the drugs together?*
* *How did you get the drugs?*
* *How much did they cost?*
* *How did you pay for the drugs?*
* *How many people were there the last time you injected? Can you describe your relationships with the people there? Where are they from?*
* *Where did you get the rig/syringe you used? Was it new or used? If used, was any cleaning done before reusing the syringe? If so, how was it cleaned? (probe if injected with a used syringe, how many times had it been used?)*
* *Tell me about any reusing you did with your own equipment? How about any cleaning?*
* *Tell me about any sharing you did? Rig/syringe? Cookers? Cotton? Drug solution? Order of sharing?*
* *How were the drugs divided? Drawing separately from the cooker into syringes? Using ONE syringe to divide up drugs into other syringes?*
* *Frontloading (using the front of syringe)? Backloading (using the back of the syringe)?*
* *Tell me about any reusing you did with your own equipment? How about any cleaning?*
* *How many times did you inject?*
* *What did you do with your needles and syringes after using them?*

**J2. Now that you told me about the last time you injected drugs, can you tell me if that time was similar to how you normally inject? What was different about that time? Why was it different?**

**J3. Where do you typically get your needles? (probe, syringe services program, pharmacy, doctor’s office, friend, bought off the street, injection partner, someone with medical condition)**

**J4. If you wanted to use completely clean equipment (needle, syringe, cooker, cotton, everything), where do you get it? (probe, syringe services program, pharmacy)**

**Probes:**

* *How important is it for you to get new equipment before using? Tell me why you think this is important or not important.*
* *Tell me about a time you couldn’t get new syringes or other equipment from where you normally get them. What did you do? How often does that happen?*

**J5. Can you tell me about where you usually discard your syringes after you inject? (probe barriers to safe disposal)**

**J6. Have there been any changes in what drugs you’ve used in the last 12 months? What about how you’ve used them? Including injecting more frequently or combining drugs?**

**Probes:**

* *Why has this changed? (Probe about drug supply, if needed)*

**J7. What are reasons why you would not share your shot or equipment with someone?**

**Probes:**

* *How does your relationship to the person affect whether you share?*
* *Do you usually know the HIV status of people you share equipment with? Can you tell me more about that?*
* *Does knowing or not knowing about someone’s HIV status affect how you share your equipment? Why or why not?*
* *What about someone’s hepatitis C status? Why or why not?*

**J8. What are reasons why you would share your shot or equipment with someone?**

**Probes:**

* *Does your relationship to the person affect whether you share?*
* *Does knowing or not knowing about someone’s HIV and hepatitis C status affect how you share your equipment? Why or why not?*

**J9. How many people who inject did you hang out with in the past month?**

**Probes:**

* *What are your relationships to the people you interacted with (family, friends, dealers, sex partners)?*
* *Can you describe the people you interacted with (age, sex, drugs they use, where they spend time, location)?*

**J10. What recommendations do you have to help prevent people who inject drugs from getting HIV?**

**J11. [If used opioids] In *the past 12 months, have you overdosed?* Can you tell me a little bit about that experience?**

**Probes:**

* *What drug(s) were you using when you overdosed?*
* *Who was with you? Were you alone?*
* *Did you do anything to reverse the overdose? What did you use? Naloxone?*
* *How many times have you overdosed in the past year? How is this different than in previous years? More or less? Why do you think that is?*
* *How many times in the past year has someone administered naloxone/Narcan when you overdosed? (Can you tell me about your use of naloxone? )*

**J12. In the past year, were you present when someone else overdosed (can be from injection or non-injection drugs)? Can you tell me about that experience? Was naloxone used to reverse the overdose?**

**J13. [If injected methamphetamine or other stimulants] In the past year, did you need immediate care or call 911 because you injected too much methamphetamine/other stimulants or were having a bad reaction? Can you tell me about that experience?**

**J14. What are different options for drug treatment you have heard of? (Probe about thoughts on each option they mention and barriers to access)**

**Probes:**

* + *What do you think about MAT/MOUD (use language participant uses)?*

**J15. Tell me about any experiences you have had with drug treatment.**

**Probes:**

* *What drug treatment did you try?*
* *How did you get referred/find treatment?*
* *How did you feel about the treatment (probe: effectiveness, ease, barriers)?*

**J16. Have you taken medicines (like methadone, buprenorphine, Suboxone or Subutex) to treat drug use in the past year?**

**Probes:**

* *Which medicines did you take?*
* *Why did you take those medicines?*
* *Have you tried to get medicines to treat drug use but were unable to? What were those?*
* *Why weren’t you able to get them?*

**I17. What else about injection drug use would you like to tell me about?**

**Section K: Non-Injection Drug Use**

**Remember, these are sample questions your project area may use as part of the Non-Injection Drug Use section. Please adapt this section to your local needs as necessary and include relevant probes.**

**I’m wanting to learn about times you may have used drugs that you did NOT inject.**

**K1. In the past 12 months, have you used any drugs that were not prescribed for you and that you did not inject? Can you tell me about that?**

**Probes:**

* *What drugs did you use?*
* *How much did they cost?*
* *How did you pay for the drugs? If you didn’t have money, how did you get your drugs?*
* *How often did you use these drugs?*
* *Did you use the drugs together?*

**K2.In the past 12 months, did you overdose on any drugs you did not inject? Can you tell me about that?**

**Probes:**

* *What drug(s) did you use when you overdosed? [If opioid] Was naloxone/Narcan used to reverse your overdose?*

**K3. [If not asked in section I] In the past 12 months, were you present when someone else overdosed (can be from injection or non-injection drugs)? Can you tell me about that experience? Was naloxone used to reverse the overdose?**

**K4. [If not asked in section I] What are different options for drug treatment you have heard of? (Probe about thoughts on each option they mention and barriers to access)**

**K5. [If not asked in section I] Tell me about any experiences you have had with drug treatment.**

**Probes:**

* *What drug treatment did you try? How did you get referred/find it?*
* *How did you feel about the treatment (probe: effectiveness, ease, barriers)?*

**I6. What else about drug use or drug treatment would you like to tell me about?**

**Section L: Access to Syringe Services Programs and Other Harm Reduction Services**

**Remember, these are sample questions your project area may use as part of the Access to Syringe Services Programs section. Please adapt this section to your local needs as necessary and include relevant probes.**

**Now I would like to get your opinions about [use language that is common to local area] *syringe services programs SSPs/needle exchange programs* and other harm reduction services*.* These are programs that provide sterile syringes and dispose of used ones.**

**L1. Have you ever been to a needle exchange program? Tell me about any experiences you have had with SSPs.**

**Probes:**

* + *Where did you go?*
	+ *When was the last time you went?*
	+ *Why did you first start going?*
	+ *Why do you continue to go?*
	+ *How far away is it from where you stay?*
	+ *How do you get there?*
	+ *Did they have mobile services or other ways to get sterile syringes (e.g., mail-order, vending machines)?*

 **L2. [If used SSP] What types of syringe and injection equipment did you get at the SSP?**

**Probes:**

* *How many syringes do you usually get at the SSP?*
* *Do you get injection equipment?*
* *Do you get syringes or injection equipment for others?*

**L3. [If used SSP] Have you received any other services, counseling, or products from the SSP? [Do not read options, but probe as necessary]**

* Examples:
	+ *Injecting equipment such as cookers, cotton, water, etc.*
	+ *Sharps container*
	+ *Naloxone/Narcan and/or overdose prevention education*
	+ *Other harm reduction tools such as safer smoking supplies, fentanyl test strips*
	+ *Supervised injection*
	+ *Food, showers, or medication locker*
	+ *Information on or referrals to mental health services*
	+ *Information or counseling about sexual risk behaviors*
	+ *Information or counseling about injection risk behaviors*
	+ *Recovery coaches*
	+ *Peer support*
	+ *Referrals to treatment for drug use*
	+ *Referrals to PrEP/PEP services*
	+ *Medication-assisted treatment for drug use (e.g., buprenorphine)*
	+ *Treatment for HIV or HCV*
	+ *Testing for and/or information on HIV or HCV*
	+ *Wound care*
	+ *Reproductive healthcare, pregnancy test, or condoms*
	+ *Vaccinations*
* Please tell me about your experience with these other services.

 **L4. [If not used an SSP]. What are some of the reasons you have not used the SSP? What would make you want to/be able to use their services? (Probe: no SSP nearby, did not know about it, inconvenient, safety, transportation, did not trust staff, afraid of arrest).**

**L5. [If not used an SSP]. How else are you getting sterile syringes if not from an SSP? (Probe: pharmacy, purchasing off the street, someone you know, etc.)**

**Probes:**

* *What are barriers for accessing syringes through these sources? (e.g., hours, location, limit on how many provided)*
* *Tell me more about what may help people have better access to sterile syringes.*

**L6. What recommendations do you have for improving SSPs for people who inject drugs?**

* *Access (e.g., hours, location, enrollment)*
* *Supplies*
* *Services*
* *Staff*
* *Modes (e.g. mobile vs brick and mortar)*

 **L7. What do other people who inject drugs say about the SSP?**

**Probes:**

* *What about other community members who do not inject drugs?*

**L8. [For areas with no legal SSP] What are your thoughts on there being an SSP in this area?**

**Probes:**

* *Do you think people would use it?*
* *What would other community members think about the SSP?*
* *Where should it be located?*

**L9. Have you ever been to a [use terminology that is common to local area] *supervised injection site*? These are places where people can use illegal drugs under medical supervision. [If YES] Can you tell me about it (Probe on experience with service)? [If NO] Do you think this is something you would use if it was available (Probe on barriers to service or ways it would be useful)?**

**L10. What else about SSPs would you like to tell me about?**

**Section M: Social Determinants of Health and Health Equity**

**Remember, these are sample questions your project area may use as part of the Social Determinants of Health and Health Equity section. Please adapt this section to your local needs as necessary and include relevant probes.**

**M1. Can you describe your living situation?**

**M2. During the past [insert time frame e.g., 12 months], how often have you found yourself without a place to stay? Can you tell me about that?**

**M3. Describe where you’ve slept most nights in the last 30 nights?**

* + *friend’s place*
	+ *hotel/motel*
	+ *family house*
	+ *car*
	+ *abandoned house*
	+ *street, tent cities*
	+ *any movement across the state, or across state lines?*

**M4. Can you tell me about the last time you were refused shelter or a place to stay?**

**Probes:**

* + *How many times has that happened?*
	+ *What were reasons why you were refused?*
	+ *Was there anything different about this last time?*

 **M5. Have you ever been denied housing? Can you tell me about that?**

**M6. Can you tell me about the last time you skipped a meal or meals due to cost?**

**Probes:**

* *How often does this happen?*
* *Have you tried accessing a local food bank or food pantry? Can you tell me about that?*

**M7. Where do you usually get your water?**

**Probes:**

* *Is there a place you can go to shower or wash your hands? Where?*
* *How frequently can you access those places?*
* *Do you have access to safe drinking water?*

**M8. Can you tell me about local services or programs that support people with low incomes?**

**Probes:**

* *Type of program*
* *Type of services offered*
* *Have you used the program? If yes, how was your experience with the program?*
* *How do people in the area feel about these programs?*

**M9. How do you usually get around? What types of transportation do you use?**

**Probes:**

* *Personal car or other vehicle that you own?*
* *Could you borrow someone’s car if you needed it?*
* *Public transportation?*

**M10. How do you think your living situation affects your health?**

**M11. What else about your living situation would you like to tell me about?**

**M12. [If experienced unsheltered/sheltered homelessness] Is there anything else you would like to tell me about housing? What about homelessness?**

**Probes:**

* *Experiences with intermittent homelessness*
* *Experiences with chronic homelessness*

**Now I would like to ask you about some difficult situations involving violence that may have happened to you.**

**M13. In the past 12 months have you experienced any verbal abuse or harassment??**

* *[If yes] Can you tell me a bit about that? (Probe: who/relationship, where, frequency, talked to or reported to someone)*

**M14. In the past 12 months have you been physically abused or harassed?**

* *[If yes] Can you tell me a bit about that? (Probe: who/relationship, where, frequency, severity, seek treatment for injuries, talked to or reported to someone)*

**M15. In the past 12 months have you been sexually abused or harassed?**

* *[If yes] Can you tell me a bit about that? (Probe: who/relationship, where, frequency, severity, seek treatment for injuries, talked to or reported to someone)*

**M16. In the past 12 months, has anyone forced or pressured you to have vaginal, oral, or anal sex when you did not want to?**

* *[If yes] Can you tell me a bit about that? (Probe: who/relationship, where, frequency, severity, seek treatment for injuries, talked to or reported to someone)*

**M16. What else about situations involving violence would you like to tell me about?**

**M17. What else about [*insert social determinants of health or health equity topic*] would you like to tell me about?**

**Section N: Stigma and Discrimination**

**Remember, these are sample questions your project area may use as part of the Stigma/Discrimination section. Please adapt this section to your local needs as necessary and include relevant probes.**

**N1. Tell me about when you have been unfairly treated in your day-to-day life? Have you experienced (probe on experiences with harassment, threats, racism, discrimination, insults, poorer services in businesses or medical care)?**

**Probes:**

* *What do you think are reasons you are treated this way? (probe reasons, e.g., HIV status, race or ethnicity, injection drug use, mental health, sexual orientation, , physical characteristics, unstable housing or homelessness)*
* *How have these experiences affected you? (probes on experiences in different settings like job, housing, education, health care services)*

**N2. What else about discrimination would you like to tell me about?**

**Section O: Social Capital**

**Remember, these are sample questions your project area may use as part of the Social Capital section. Please adapt this section to your local needs as necessary and include relevant probes.**

**Now I want to ask you about the people in your life and your community, and whether or not you are able to depend on them for things you might need.**

**O1. How many people do you think you can borrow [insert dollar amount e.g. $50] from today?**

**O2. About how many close friends do you have? These are people you feel at ease with, can talk to about private matters, or call on for help.**

**O3. Are there people that you could turn to for help with a personal problem? Can you tell me a bit about how they might help you? (Probe, financial/tangible, emotional, informational, other).**

**O4. If you suddenly faced a long-term emergency such as an illness or loss of income, who are the people beyond your immediate household you could turn to who would be willing to assist you? Why those people? Why not?**

**O5. If you suddenly had to go away for a week or two, could you count on your neighbors to take care of your household? Why or why not? Who are the other people you could count on?**

**O6. What else about people in your life that you can depend on would you like to tell me about?**

**Section P: Experiences with the Criminal Justice System**

**Remember, these are sample questions your project area may use as part of the Experiences with the Criminal Justice System section. Please adapt this section to your local needs as necessary and include relevant probes.**

**Now I would like to talk to you about any experiences you’ve had with local law enforcement.**

**P1. Can you tell me about your interactions with local law enforcement?**

**Probes:**

* *Can you tell me about your most recent interaction with local law enforcement?*
* *Positive?*
* *Negative?*

**P2. What else about local law enforcement would you like to tell me about?**

**Now I would like to talk about any experiences you’ve had with being in jail and prison.**

**P3. Have you ever been held in detention center, jail, or prison for more than 24 hours?**

**Probes:**

* *[If yes] For how long?*
* *Were you tested for HIV while there?*
* *If no, was HIV testing available?*
* *[If participant previously indicated being HIV positive] Can you describe how you were treated for HIV while in jail?*
* *[If participant previously reported drug use]*
	1. *Can you tell be about the withdrawal you went through while in jail or prison?*
	2. *Were you treated for your withdrawal?*
	3. *Tell me about any drug use while incarcerated.*
		1. *Did you inject? How did you get equipment to inject?*
	4. *Did you receive any drug treatment in jail?*
	5. *When you were discharged from jail, did they send you to drug treatment? If yes, tell me about that…*
* *When you were discharged from jail, did they send you to medical treatment? If yes, tell me about that…*

**P4. What else about the jail or prison system would you like to tell me about?**

**[Conclude the interview and thank participant for their time.]**