**To confirm eligibility for MTN-041, ask the participant the following questions and mark responses accordingly. Interviewers should complete N/A boxes as appropriate for criteria that do not apply to participant based on their cohort.**

|  |  |
| --- | --- |
| ***All Participants*** |  ***Yes No***  |
| 1. If you were to join this research study, are you able and willing to complete the required study procedures?
 |    |
| ***Additional Criteria for Currently/Recently Pregnant/Breastfeeding Women*** |  ***Yes No* *N/A*** |
| 1. Are you currently or recently (within the past two years) pregnant or breastfeeding?
 |  |
| 1. To the best of your knowledge, is your current HIV status negative?
 |  |
| ***Additional Criteria for Male Partners*** |  ***Yes No N/A*** |
| 1. Are you a primary sexual partner of a woman who is currently or was recently (within two years) pregnant or breastfeeding?
 |   |
|  ***Additional Criteria for Grandmothers*** |  ***Yes No N/A*** |
| 1. Are you a mother or mother-in-law of a woman who is currently or was recently (within the past two years) pregnant or breastfeeding?

*Note for Interviewers: The term “mother-in-law” includes relationships to women who are/were not married to their male partner during or after pregnancy.* |   |
| ***Additional Criteria for Service Provider Key Informants*** |  ***Yes No N/A*** |
| 1. Are you currently working as a clinician (e.g., obstetrician, nurse, pharmacist, etc.), traditional care provider (e.g., TBA, healer, midwife, etc.), social service provider (e.g., social worker, family planning counselor, etc.) or community health worker?
 |   |
| 1. Do you have experience providing services to pregnant and/or breastfeeding women?
 |  |
| ***Additional Criteria for Community Leader Key Informants*** |  ***Yes No N/A*** |
| 1. Are you currently acting in a community leadership role (e.g., local chief, religious leader, etc.)
 |   |

***For the participant to be eligible, responses to items for applicable cohort must be ‘YES’ at the participant’s Screening/Enrollment Visit.***

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Staff Initials and Date*