**Exit Acceptability Questionnaire – Women (EAW)**

Thank you for coming to the clinic today for the MTN-011 study. The questions in this survey are about your experience with the gel and this study.

## Part A: Product Acceptability

The following questions are about your experience with the gel since you started the study, including today.

1. Overall, how comfortable were you with using the study gel?
	* Very uncomfortable
	* Uncomfortable
	* Comfortable
	* Very comfortable
2. Overall, how much did you like the study gel?
	* Disliked very much
	* Disliked
	* Liked
	* Liked very much

2a. Please specify why you liked or disliked the study gel:

Please go to the next page.

## Part B: Trial Acceptability

The following questions are about your experience with this study.

1. How would you rate your overall experience of participating in this study?
	* Very negative
	* Negative
	* Neutral
	* Positive
	* Very positive
2. Overall, how bothered were you by the following study procedures:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Very bothered | A little bothered | Not at all bothered |
| 4a. Having to be sexually abstinent during specified times |  |  |  |
| 4b. Computer-administered questionnaires |  |  |  |
| 4c. Physical examination  |  |  |  |
| 4d. Pelvic examination |  |  |  |
| 4e. Genital swab specimen collection |  |  |  |
| 4f. Rinsing the vagina and cervix with fluids |  |  |  |
| 4g. Genital tissue biopsy |  |  |  |
| 4h. Rectal sponge |  |  |  |
| 4i. Having blood drawn |  |  |  |
| 4j. Being tested for HIV |  |  |  |
| 4k. Being tested for other sexually transmitted infections |  |  |  |
| 4l. Providing a urine sample |  |  |  |
| 4m. Using the study gel |  |  |  |
| 4n. Having sex at specified times and location |  |  |  |
| 4o. Having your partner participate in the study |  |  |  |

Please go to the next page.

1. In the future, would you be willing to join a research study similar to this one?
	* Yes, I would be willing to join a similar study **Continue to Question 6.**
	* No, I would not be willing to join a similar study **Skip to Question 8.**
2. Please indicate the reasons why you are **willing** to join a similar study in the future. *(Please choose* ***all*** *that apply.)*
* To receive the financial reimbursement
* To be provided with free health care during the study, or to get faster or better quality health care
* To be tested for HIV
* To get educated or find out more about HIV
* To help test a product that may prevent women from getting HIV
* To contribute to scientific knowledge
* To satisfy my curiosity about participating in a study
* A friend/family member recommended that I join the study
* Other (*Please specify*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

\*\*NOTE: If you marked only one response to **Question 6**, please **skip the remaining questions** and go to the end of the survey. \*\*

1. Of the reasons you selected above in Question 6, please indicate the **MAIN** reason you are **willing** to join a similar study in the future. *(Please choose* ***ONE*** *answer below.)*
* To receive the financial reimbursement
* To be provided with free health care during the study, or to get faster or better quality health care
* To be tested for HIV
* To get educated or find out more about HIV
* To help test a product that may prevent women from getting HIV
* To contribute to scientific knowledge
* To satisfy my curiosity about participating in a study
* A friend/family member recommended that I join the study
	+ Other *(as indicated above)*

Please go to the next page.

\*\*NOTE: If you answered **Questions 6 & 7**, please **skip Questions 8 & 9** and go to the end of the survey.\*\*

1. Please indicate the reasons why you are **not willing** to join a similar study in the future. *(Please choose* ***all*** *that apply.)*
	* The study participation was too time-consuming
	* The financial compensation was not sufficient
	* I did not like the study product
	* I did not like having to be sexually abstinent during specified times
	* I did not like completing the computer-administered questionnaires
	* I did not like the study staff, or I had a bad interaction with study staff
	* I did not like being tested for HIV
	* I did not feel the information I provided was kept confidential
	* I did not like having sex at specified times and location
	* I did not like some of the study procedures (Please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)
	* Other (*Please specify*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

Please go to the next page.

\*\*NOTE: If you marked only one response to **Question 8**, please **skip** **Question 9** and go to the end of the survey. \*\*

1. Of the reasons you selected above in Question 8, please indicate the **MAIN** reason you are **not willing** to join a similar study in the future. *(Please choose* ***ONE*** *answer below.)*
	* The study participation was too time-consuming
	* The financial compensation was not sufficient
	* I did not like the study product
	* I did not like having to be sexually abstinent during specified times
	* I did not like completing the computer-administered questionnaires
	* I did not like the study staff, or I had a bad interaction with study staff
	* I did not like being tested for HIV
	* I did not feel the information I provided was kept confidential
	* I did not like having sex at specified times and location
	* I did not like some of the study procedures *(as indicated above)*
	* Other *(as indicated above)*

Thank you for completing this questionnaire! Please inform the research staff member that you are finished.

**To be completed by staff**

Date entered into CASI: \_\_\_\_\_\_\_\_\_\_

Staff initials: \_\_\_\_\_\_\_\_\_