## MTN-039- Baseline

**BEHAVIORAL MEASURES – ENGLISH**

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**PROGRAMMER:** Question logic is *italicized and in bold*. Skip patterns are in **CAPATILIZED BOLD**.
Thank you for agreeing to complete this questionnaire. Your responses will be kept confidential. To keep the information you provide private, personal information (name, address, phone number) will NOT be collected in this questionnaire. Before you begin, there are a few practice questions for you to get used to how the system works. If you have any questions on how to use the computer, the clinic staff can assist you.

If you prefer not to respond to a question, you may leave a question blank and click the “NEXT” button to go to the next question.

Click the “NEXT” button to go to the next screen.

Introduction [Page 2]

Good! You can always move to the next screen by clicking “next”, or, to go to the previous screen, click “previous.”

Click the “NEXT” button to go to the next screen.

[Question 1]

This question shows how to answer questions with click boxes. Try answering the question below by moving the mouse arrow and clicking on boxes that match your choices.

PRACTICE QUESTION 1:

Which items do you like to eat on a salad? Indicate all that apply.

[Answer options]

- Eggs
- Cheese
- Croutons
- Salad Dressing
- Carrots
- Bacon bits

This is an example of a question where more than one answer is allowed:

If you want to change your response, click the response you don’t want again to de-select it and then select the answer(s) you do want.

Click the “NEXT” button to go to the next screen.
PRACTICE QUESTION 2:
Do you like summer?

- Yes
- No

This is an example of a single response question:
If you want to change your response, simply click the response you want.

Practice [Question 3]
This screen shows the last question type in this questionnaire and involves clicking on the point in the scale that most closely matches how you feel. Use the mouse to move the arrow to the desired place on the scale, and then click to make your choice.

PRACTICE QUESTION 3:
How thick do you like soup to be?

<p>| | | | | |</p>
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<tbody>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Very liquid</td>
<td>Somewhat liquid</td>
<td>Neither</td>
<td>Somewhat thick</td>
<td>Very thick</td>
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</tbody>
</table>

Ok. If you had any problem answering the prior questions, let the study staff know about it. Otherwise, click “NEXT” and proceed with the first questionnaire.
SECTION A. DEMOGRAPHICS

A1. How old are you? ______ (In years)

A2. What is the highest education level you have completed?
   1. Eighth grade or lower/Secondary School level 2 or lower
   2. Partial high school/Partial Secondary School
   3. High school graduate/Secondary School graduate
   4. Partial college
   5. College graduate
   6. Partial graduate school
   7. Graduate school degree

A3. How often in the past 3 months did you or your family have to cut a meal’s size or skip a meal because there was not enough money for food?
   1. Almost every week
   2. Several weeks but not every week
   3. Only a few weeks
   4. Did not have to skip or cut the size of meals
   5. Decline to answer

A4. What sex were you assigned at birth, meaning what the doctor put on your original birth certificate?
   1. Male
   2. Female

A5. What is your current gender identity? That is, do you consider yourself…
   1. Male
   2. Female
   3. Trans male/Trans man
   4. Trans female/Trans woman
   5. Genderqueer/Gender non-conforming
   6. A gender not listed here, please specify: _______________________

[CASI SKIP PATTERN: ONLY ASK FOLLOWING TRANS QUESTIONS IF PARTICIPANT ANSWERS A5 = 3 or A5 = 4 OR A4=1 and A5 = 2 OR A4=2 and A5=1; OTHERWISE, JUMP TO A6].

T1. How old were you when you FIRST sought out any form of medical gender affirmation services (i.e., hormones, surgery to transition)?

   1. [_______] Years-old
   2. I have not had any form of gender affirmation services. [SKIP TO A6]
T2. In order to ask you accurate questions about sexual behavior, we will first ask you about your body. We know some transgender people have gender affirming surgery (genital reconstruction such as the creation of a vagina or a penis). Have you had genital reconstruction (i.e., “lower” or “bottom” surgery)?

1. Yes. I have had genital reconstruction
2. No. I have not had genital reconstruction. I have my birth anatomy.

T3. Which medical interventions have you used to affirm your gender? (check all that apply)
   1. Pubertal blockers (to inhibit puberty)
   2. Hormones (estrogen or testosterone)
   3. Breast Implants (breast augmentation)
   4. Chest Reconstruction/ Mastectomy
   5. Breast Reduction (no mastectomy)
   6. Facial or neck surgery (for example, nose job, cheek implants, forehead lift, trachael shave)
   7. Abdominal surgery (hysterectomy, oophorectomy)
   8. Lower feminizing surgery (vaginoplasty – creation of a vagina)
   9. Lower masculinizing surgery (metoidioplasty, phalloplasty – creation of a microphallus or phallus)

[ASK IF T3=8]

T4. What type of lubricant do you use for dilating?
   • Water-Based
   • Silicone-Based
   • Oil-Based
   • Hybrid
   • Other, please specify:________________

A6. Do you consider yourself...
   1. Straight/heterosexual
   2. Gay/Lesbian/homosexual
   3. Bisexual
   4. Other, please specify:________________
A7. How many of your immediate family members know your sexual orientation? “Immediate family members” includes family members you live with or family members you interact with often. If you do not have regular contact with any family members, please select “Does not apply”.
   1. None
   2. Some, but less than half
   3. About half
   4. More than half
   5. All
   6. Does not apply
   7. Decline to answer

A8. What is your marital status?
   1. Never married
   2. Domestic Partnership
   3. Married
   4. Widowed
   5. Divorced

A9. How many hours per week do you work? If you do not work, please enter 0.
   __________ hours per week

A10. Are you currently a student?
   1. Yes
   2. No
A11. Next, we would like to ask you about your everyday emotions and experiences. Please indicate your responses using the scale below by selecting how often you have experienced the feelings/thoughts in each question during the LAST MONTH.

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Almost Never</th>
<th>Sometimes</th>
<th>Fairly Often</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the last month, how often have you been upset because of something that happened unexpectedly?</td>
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<tr>
<td>In the last month, how often have you felt that you were unable to control the important things in your life?</td>
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<td>In the last month, how often have you felt nervous and “stressed”?</td>
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<tr>
<td>In the last month, how often have you felt confident about your ability to handle your personal problems?</td>
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<tr>
<td>In the last month, how often have you felt that things were going your way?</td>
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<tr>
<td>In the last month, how often have you found that you could not cope with all the things that you had to do?</td>
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<tr>
<td>In the last month, how often have you been able to control irritations in your life?</td>
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<tr>
<td>In the last month, how often have you felt that you were on top of things?</td>
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<tr>
<td>In the last month, how often have you been angered because of things that were outside your control?</td>
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<td>In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?</td>
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SECTION B. SEXUAL BEHAVIOR

The next set of questions will ask you about sexual behavior.

First, we will ask you questions about your body.

B1. Do you currently have a penis?

_____ 1 Yes [SKIP TO SEXBEHAVINTRO]

_____ 2 No [SKIP TO B2]

_____ 3 Decline to answer [IF DECLINE TO ANSWER, ask B1a]

B1a. You selected "Decline to answer." If you do not answer this question, you may be asked questions about your sexual behavior that do not apply to you. Please confirm your answer.

1. Yes, I decline to answer

2. No, I want to change my answer [SKIP TO B1]

B2. Do you currently have a vagina?

_____ 1 Yes [SKIP TO SEXBEHAVINTRO]

_____ 2 No [SKIP TO B1]

_____ 3 Decline to answer [IF DECLINE TO ANSWER, ask B2a]

B2a. You selected "Decline to answer." If you do not answer this question, you may be asked questions about your sexual behavior that do not apply to you. Please confirm your answer.

1. Yes, I decline to answer

2. No, I want to change my answer [SKIP TO B2]
SexBehavIntro

Now we will ask you questions about your sexual history.

We understand this topic is very personal, but every answer is important for the study. All of your answers will be kept confidential. For questions that ask the number of times, if you are unsure just give your best guess.

First, let’s take a minute to review some words so it is clear what we are asking.

**Penis** is the male sex organ. Some people call it “dick” or “cock.” Men and transgender people can have penises.

**Vagina** is the female sex organ. Some people call it “pussy.” Women and transgender people can have vaginas.

**Rectum and anus** are frequently called “butt” or “ asshole.”

**Anal sex** is when someone puts their penis in another person’s rectum or anus; some people call this "butt fucking."

**Receptive anal sex** is when someone’s rectum or anus is penetrated by another person’s penis or when they are the “bottom”

**Insertive anal sex** is when someone puts their penis into a rectum or anus or when they are the “top”

**Vaginal sex** is when someone puts their penis into a vagina; some people call this "fucking" or "screwing" or "having sex."

**Oral sex** is when people put their mouth or tongue on each other's sex organs. When someone puts their mouth on another person's penis, some people call this a "blow job" or "fellatio." When someone puts their mouth on another person’s vagina, some people call this “cunnilingus.”

**Analingus** is when someone puts their mouth on another person’s anus; some people call this “rimming”

In some cases, these questions may not specifically apply to you. At the end of this section, you will have a space to enter comments.
RECENT SEXUAL BEHAVIOR

SEXUAL BEHAVIOR WITH MEN
The next set of questions will be about your sexual behavior with men in the past month.

B3. During the past 30 days, how many male sexual partners have you had?

_____ Male sexual partner(s) [IF B1=0, SKIP TO B15]

[IF B3 = 1]
You said you had one male sexual partner.

B4. Regarding this man please select one answer...

___ 1. This man told you he was HIV negative and you had no reason to doubt it.
___ 2. You knew this man was HIV positive.
___ 3. You were not completely sure of this man’s HIV status.

[IF B3 > 1]
B5. Of these [import B3], how many do you consider to be ...(Please put a number in each box. Enter 0 (zero) if none. Your answers must add up to ______ [CASI PROGRAMMER: ENTER NUMBER FROM B3]):

5.1 Lovers (men with whom you’ve felt emotionally involved in a committed relationship and with whom you had sex - like a spouse, fiancée, or boyfriend)

5.2 One-night stands (men with whom you had sex only once)

5.3 Other male partners (men with whom you had sex who are neither your lovers nor one-night stands)

Vaginal Intercourse [ASK ONLY IF B2=1]
During the past 30 days...

B6. How many men inserted their penis into your vagina without a condom?

_______ [IF 0, SKIP TO B10]

B7. How many times did your male partner(s) put his/their penis inside your vagina without a condom?

_______

[IF B6=1]
You said one man put his penis inside your vagina without a condom.

B8. Regarding this man please select one answer...

___ 1. This man told you he was HIV negative and you had no reason to doubt it.
___ 2. You knew this man was HIV positive.
___ 3. You were not completely sure of this man’s HIV status.
[If B6 > 1]


9.1 Of those men, how many had actually told you they were HIV-negative and you had no reasons to doubt it? 
________

9.2 Of those men, how many do you know to be HIV-positive? 
________

9.3 How many were you **NOT** completely sure about their HIV status? 
________

**Receptive Anal Intercourse**

During the past 30 days...

B10. How many men inserted their **penises** inside your **rectum** **without** a condom? 
________ [If B10 = 0; SKIP TO B14]

B11. How many times did your male partner(s) insert his/their **penis** inside your **rectum** **without** a condom? __________

[If B10=1]

B12. You said that one man put his penis inside your rectum **without** a condom. Regarding this man please select one answer...

___ 1. This man told you he was HIV negative and you had no reason to doubt it.
___ 2. You knew this man was HIV positive.
___ 3. You were not completely sure of this man’s HIV status.

[If B10 > 1]


13.1 Of those men, how many had actually told you they were HIV-negative and you had no reasons to doubt it? 
________

13.2 Of those men, how many do you know to be HIV-positive? 
________

13.3 How many were you **NOT** completely sure about their HIV status? 
________
**Insertive Anal Intercourse**

During the past 30 days...

B14. Into how many men’s rectums did you insert your penis without a condom? 
    __________ [IF 0, GO TO B18]

B15. How many times did you put your penis in a man/men’s rectum without a condom? 
    __________

**[IF B14=1]**

B16. You said you put your penis in one man’s rectum without a condom.

    Regarding this man please select one answer...
    ___ 1. This man told you he was HIV negative and you had no reason to doubt it.
    ___ 2. You knew this man was HIV positive.
    ___ 3. You were not completely sure of this man’s HIV status.

**[IF B14 > 1]**

B17. You said you put your penis in [import B14] men’s rectums without a condom.

    17.1. Of those men, how many had actually told you they were HIV-negative and you had no reasons to doubt it? 
        __________

    17.2. Of those men, how many do you know to be HIV-positive? 
        __________

    17.3. How many were you NOT completely sure about their HIV status? 
        __________

**SEXUAL BEHAVIOR WITH WOMEN**

I will now ask you questions about your sexual behavior with women.

B18. During the past 30 days, how many female sexual partners have you had? 
    __________ [IF 0, SKIP TO B28]

**[IF B18=1]**

B19. You said that you had one female sex partner. Regarding this woman please select one answer...
    ___ 1. This woman told you she was HIV negative and you had no reason to doubt it.
    ___ 2. You knew this woman was HIV positive.
    ___ 3. You were not completely sure of this man’s HIV status.
**[IF B18 > 1]**

B20. Of these [import B17] women, how many do you consider to be ... (Please put a number in each box Enter 0 (zero) if none.):

20.1. Lovers (women with whom you’ve felt emotionally involved in a committed relationship and with whom you had sex - like a spouse, fiancée, or girlfriend)

20.2. One-night stands (women with whom you had sex only once)

20.3. Other female partners (women with whom you had sex who are neither your lovers nor one-night stands)

---

**Vaginal Intercourse**

During the past 30 days...

B21. How many women's **vaginas did you penetrate** with your **penis** without a condom?

[IF 0, SKIP TO B28]

B21. How many times did you put your **penis** in a woman/women’s **vagina(s)** without a condom?

---

**[IF B21=1]**

You said you put your penis in one woman’s vagina without a condom.

B22. Regarding this woman please select one answer...

___ 1. This woman told you she was HIV negative and you had no reason to doubt it.
___ 2. You knew this woman was HIV positive.
___ 3. You were not completely sure of this woman’s HIV status.
[IF B21 > 1]


23.1 Of those women, how many had actually told you they were HIV-negative and you had no reasons to doubt it?

_________

23.2 Of those women, how many do you know to be HIV-positive?

_________

23.3 How many were you NOT completely sure about their HIV status?

_________

Insertive Anal Intercourse
During the past 30 days...

B24. How many women’s rectum did you penetrate with your penis without a condom?

_________ [IF 0, GO TO B28]

B25. How many times did you put your penis inside a woman/women’s rectum(s) without a condom?

_________

[IF B24 = 1]

B26. You said you put your penis inside one woman’s rectum without a condom.

Regarding this woman (please select one answer)...
___ 1. This woman told you she was HIV negative and you had no reason to doubt it.
___ 2. You knew this woman was HIV positive.
___ 3. You were not completely sure of this woman’s HIV status.

[IF B24 > 1]

B27. You said you put your penis inside [import B24] women’s rectums without a condom.

27.1. Of those women, how many had actually told you they were HIV-negative and you had no reasons to doubt it?

_________

27.2. Of those women, how many do you know to be HIV-positive?

_________

27.3. How many were you NOT completely sure about their HIV status?

_________
B28. Please leave us any comments you have about this sexual behavior questionnaire, especially if you thought these questions did not apply to you:
SECTION C. RECTAL DOUCHING

The following questions refer to rectal douching. For clarity, we will define the term.

A rectal douche, or enema, refers to water or a prepared liquid or substance that is inserted in your rectum or “butt” to clean it.

C1. Have you ever used a rectal douche?
   1. No [IF C1 = 2; GO TO D1]
   2. Yes

C2. How old were you when you used a rectal douche before receptive anal intercourse for the first time?
   ____ Years
   ____ I have never doused before receptive anal intercourse [IF C2=2; GO TO C6]

C3. What made you use a rectal douche before receptive anal intercourse? Indicate all that apply
   - To be clean
   - My sex partner suggested it
   - My friends talked about it
   - Other, please specify: ______________________

C4. How frequently do you give yourself a rectal douche before receptive anal intercourse?
   - Always
   - Sometimes
   - Rarely
   - Never [IF never, GO TO C6]

C5. Typically, how long before receptive anal intercourse do you use a rectal douche?
   - Less than 30 minutes
   - 30 minutes to 1 hour
   - Between 1 and 2 hours
   - Between 2 and 3 hours
   - Between 3 and 4 hours
   - 4 hours or more
C6. How old were you when you used a rectal douche after receptive anal intercourse for the first time?

- ___________ Years
- I’ve never doused after sex  [IF C6 = 2, GO TO C10]

C7. What made you use a rectal douche after receptive anal intercourse? *Indicate all that apply*

- To be clean
- To prevent getting any sexually transmitted infections, including HIV, from my sex partner
- My sex partner suggested it
- My friends talked about it
- Other, *please specify*: __________________

C8. How frequently do you give yourself a rectal douche after receptive anal intercourse?

- Always
- Sometimes
- Rarely
- Never  [IF never, Jump to C10]

C9. Typically, how long after receptive anal intercourse do you use a rectal douche?

- Less than 30 minutes
- 30 minutes to 1 hour
- Between 1 and 2 hours
- Between 2 and 3 hours
- Between 3 and 4 hours
- 4 hours or more

C10. How many times did you use a rectal douche in the past 3 (three) months?

___ ___ ___  [IF C10 = 0, GO TO C19]

C11. Of the [C10%] times you doused rectally in the past three months, how many times did you douche for EACH of the following reasons? *Indicate all that apply*

- For general hygiene  ___ ___
- In preparation for sex  ___ ___
- Following sex  ___ ___
- For pleasure  ___ ___
- When constipated  ___ ___
- When ill  ___ ___
- Other, *please specify*: _________  ___ ___

{Programmer Note: Total=C10}
C12. When you douche in the past three months, how many times did you use...

a. Hose apparatus __________ times

b. Pre packaged bulb apparatus __________ times

[IF C12_a > 0]

C12_1. When you used the hose apparatus [%C12_a%] times, how many times did you use...

- A non-disposable douche or enema bag system (neoprene or rubber bag, rubber hose, plastic clamp, and plastic or rubber nozzle) ___ ___
- A shower head hose and nozzle ___ ___
- A “sinker”, a portable rubber or vinyl hose that attaches to a sink or bidet ___ ___
- Other (please specify:___________) ___ ___
C12.2. When you used the pre-packaged bulb apparatus [%C12_b%] times, how many times did you use...
- Over-the-counter disposable enema product (e.g., Fleet\textsuperscript{\textregistered}) __ __
- Re-useable bulb enema __ __
- Vaginal douche in your rectum __ __
- Other (please specify: ____________) __ __

C13. When you use a rectal douche with a hose apparatus, how long do you usually run the water?
- 15 seconds or less
- 16 seconds to 1 minute
- Between 1 and 4 minutes
- 5 minutes or more

C14. Each time you use a rectal douche that is a pre-packaged product, do you typically go through your rectal douching procedure once or more than once?
- Once
- More than once

C15. Please estimate how far into your rectum you typically insert the applicator.
- Up to 1 inch
- Between 1 and 2 inches
- Between 2 and 3 inches
- More than 3 inches

C16. Where do you typically use a rectal douche?
- Toilet
- Shower/tub
- Sink
- Bidet
- Other, please specify: ________________________________________________

C17. What temperature do you prefer when you use the rectal douche?
- Hot
- Warm
- Cool
- No preference
C18. In what position do you typically prefer to use a rectal douche?

- Kneeling
- Laying on side
- Standing
- Squatting or seated over toilet/tub
- Other, please specify: ______________________________________

C19. Have you ever had an injury as a result of rectal douching?

- Yes
- No [IF NO, SKIP TO C22]

C20. How many times have you had an injury to the anus or rectum while douching in the past 3 months?

______ [If “0,” SKIP to C22]

C21. When injuries have occurred, what was the cause? *Indicate all that apply*

- Problems with the nozzle
- Position played a role
- Problems with the product
- Other, please specify: ______________________________________

C22. Do you get cramps or any other kind of discomfort when you use a rectal douche?

- Always
- Frequently
- Infrequently
- Never

C23. When you use a rectal douche, how long does it usually take you before you have a bowel movement?

- Occurs immediately
- 1-5 minutes
- More than 5 minutes
SECTION D. RECTAL INSERT

D1. Had you ever heard of a rectal insert before enrolling in this study?

1. No  [IF D1=1, SKIP TO E1]
2. Yes

D2. From whom or what did you first learn about a rectal insert?

1. Friend
2. Partner
3. Media
4. Doctor or Clinic staff
5. Other

D3. Have you ever used a rectal insert before receptive anal intercourse?

1. No  [IF D3=1, SKIP TO D]
2. Yes

D4. How old were you when you used a rectal insert before receptive anal intercourse for the first time

______ Years

D5. What made you use an insert before receptive anal intercourse? *Indicate all that apply*

• To be clean
• My sex partner suggested it
• My friends talked about it
• Other, please specify:

D6. How frequently do you use a rectal insert before receptive anal intercourse?

• Always
• Sometimes
• Rarely

D7. Typically, how long before receptive anal intercourse do you use a rectal insert?

• Less than 30 minutes
• 30 minutes to 1 hour
• Between 1 and 2 hours
• Between 2 and 3 hours
• Between 3 and 4 hours
• 4 hours or more

D8. Have you ever used a rectal insert after receptive anal intercourse?

1. No  [IF D8=NO, SKIP TO E1]
2. Yes
D9. How old were you when you used a rectal insert before receptive anal intercourse for the first time

______ Years

D10. What made you use an insert after receptive anal intercourse? *Indicate all that apply*

- To be clean
- To prevent getting any sexually transmitted infections, including, HIV, from my sex partner
- My sex partner suggested it
- My friends talked about it
- Other, *please specify:*

D11. How frequently do you give yourself a *rectal insert* after *receptive anal intercourse*?

- Always
- Sometimes
- Rarely

D12. Typically, how long after *receptive anal intercourse* do you use a *rectal insert*?

- Less than 30 minutes
- 30 minutes to 1 hour
- Between 1 and 2 hours
- Between 2 and 3 hours
- Between 3 and 4 hours
- 4 hours or more

D13. How many times have you used a rectal insert in the past 30 days?

______ times
SECTION E. SUBSTANCE USE

The following questions refer to alcohol and drug use. Remember, your answers are confidential and will not be viewed by clinic staff.

E1. Now I will show you a list of different drugs. During the last 30 days, how often have you used each of the following substances?

**GO DOWN “A” COLUMN FIRST. IF “0” FOR ANY SUBSTANCES, SKIP B FOR THOSE PARTICULAR SUBSTANCES.**

<table>
<thead>
<tr>
<th></th>
<th>[A] Number of times used in past 30 days</th>
<th>[B] Number of times used before or during sex in past 30 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Alcohol (beer, wine, liquor)</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>b. Marijuana/hashish/pot/weed</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>c. Ecstasy/MDMA</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>d. Crystal Meth/amphetamines/methamphetamines/speed/crank/ice</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>e. Ketamine/special K</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>f. GHB (Gamma hydroxybutyrate)</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>g. Other hallucinogens/LSD/mushrooms</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>h. Poppers/amyl nitrate,butyl nitrate</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>i. Crack</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>j. Cocaine (not crack)</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>k. Opium/Opioids (Heroin, Codeine, Vicodin, OxyContin)</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>l. Any other pharmaceutical drugs not prescribed to you by a physician or not used as directed. Please specify</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
<tr>
<td>m. Other, please specify:</td>
<td>___ ___ times</td>
<td>___ ___ times</td>
</tr>
</tbody>
</table>
E2. Thinking about the times you used alcohol during the last 30 days, how much did you typically use?

1. Too little to feel any effect
2. Enough to feel it a little
3. Enough to feel it a lot
4. Enough to get drunk
5. Enough to feel like you might pass out
SECTION F. PrEP (PRE-EXPOSURE PROPHYLAXIS)

PrEP/PEP

Now, we would like to learn about your knowledge concerning Pre-Exposure Prophylaxis (PrEP) or Truvada, a pill you take every day to reduce your risk of acquiring HIV.

F1. Before today, had you heard about PrEP?

1. Yes
2. No [IF F1=2, GO TO F9]
3. I don’t know [IF F1=3 GO TO F9]

F2. Where did you first hear about PrEP?

1. Newspaper/Magazine
2. Through Friends
3. Through the internet
4. From a health care provider
5. At the study clinic
6. Other _________________

F3. To your knowledge, how effective is PrEP at preventing HIV transmission when having sex without a condom, when adhered to?

1. Very/completely effective
2. Somewhat effective
3. Minimally effective
4. Not at all effective
5. I don't know

F4. Have you ever taken PrEP (pre-exposure prophylaxis) BEFORE a sexual or injection drug use exposure, to reduce the risk of getting HIV?

1. Yes, I was in the past, but I’m not on PrEP anymore
2. No, I’ve never taken PrEP

F5. [IF F4=1] Where did you get PrEP? (Check all that apply)

☐ Doctor or other health care provider
☐ Sex partner, friend, relative, or acquaintance
☐ Internet
☐ Other, please specify: ___________
F6. **[If F4 = 1]** What are your reasons for not taking PrEP? *(Check all that apply)*

☐ My work/school schedule could get in the way
☐ I would forget
☐ I don’t think I need it
☐ I would have difficulty getting the medication
☐ I don’t know how to get the costs of PrEP covered
☐ I do not know where to go to get PrEP
☐ I am worried about talking to a doctor about my sex life
☐ I’m worried that people would judge me for taking PrEP
☐ Other, specify _______

F7. **[F4 = 2]** What are your reasons for not taking PrEP? *(Check all that apply)*

☐ I tried to access PrEP, but my doctor wouldn’t prescribe it for me
☐ I am not able to return for PrEP medical check-ups every 3 months
☐ My work/school schedule could get in the way
☐ I would forget to take it consistently
☐ I don’t think I need it
☐ I would have difficulty getting the medication
☐ I don’t know how to get the costs of PrEP covered
☐ I do not know where to go to get PrEP
☐ I am worried about talking to a doctor about my sex life
☐ I’m concerned that PrEP might not provide complete protection against HIV
☐ I am nervous about side effects that might make me sick
☐ I’m worried about the long-term effects of PrEP on my health
☐ I’m worried that people would judge me for taking PrEP
☐ I’m worried that people may think I’m HIV-positive if they see that I’m taking HIV medications as PrEP
☐ Other, specify _______

F8. Before today, have you ever heard of people taking anti-HIV medicine AFTER a sexual or injectable drug use exposure, to reduce the risk of getting HIV? This is called post-exposure prophylaxis, or PEP.

1. Yes
2. No [GO TO G1]

F9. **[If F8 = 1]** Have you ever taken post-exposure prophylaxis (PEP) AFTER a sexual or drug use exposure, to reduce the risk of getting HIV?

1. Yes
2. No

F10. **[If F9 = 1]** In the past 12 months, have you taken PEP AFTER a sexual or drug use exposure, to reduce the risk of getting HIV?

1. Yes
2. No
SECTION G RECTAL MICROBICIDE INTENTIONS

Researchers are trying to develop alternatives to condoms for the prevention of HIV transmission during anal intercourse. Microbicides could be one such alternative.

G1. If a rectal microbicide were available that provided some protection against HIV, how likely would you be to use it every time you have anal intercourse?

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<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
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</thead>
<tbody>
<tr>
<td>Extremely Unlikely</td>
<td>Unlikely</td>
<td>Neither</td>
<td>Likely</td>
<td>Extremely Likely</td>
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</tbody>
</table>

G2. How likely would you be to use it every time you have *receptive anal intercourse* with a *steady sex partner*?

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<tr>
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G3. How likely would you be to use a *rectal insert that provided some protection against HIV*, every time you had receptive anal intercourse with a one-night stand?

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<td>Unlikely</td>
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G4. How likely would you be to use a *rectal insert that provided some protection against HIV*, every time you have *receptive anal intercourse* with other partners, men who were neither your *steady sex partner* nor *one-night stands*?

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G5. How likely would you be to use a *rectal insert that provided some protection against HIV*, every time you have *receptive anal intercourse* if you were using alcohol or drugs?

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G6. How likely would you be to use a *rectal insert that provided some protection against HIV*, every time you have *receptive anal intercourse* on the occasions when you don’t use condoms?

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<td>Unlikely</td>
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<td>Extremely Likely</td>
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G7. How likely would you be to use a *rectal insert that provided some protection against HIV*, every time you have *receptive anal intercourse* if you had to wait 30 minues after application before having anal intercourse?

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G8. If a rectal microbicide were available that provided some protection against HIV, and it came in the form of a **insert**, how likely would you be to use it every time you have receptive anal intercourse?

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</table>

G9. If a rectal microbicide were available that provided some protection against HIV, and it came in the form of a **suppository**, how likely would you be to use it every time you have receptive anal intercourse?

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<tbody>
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</table>

G10. If a rectal microbicide were available that provided some protection against HIV, and it came in the form of a **gel**, like commercial sexual lubricant, how likely would you be to use it every time you have receptive anal intercourse?

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</tbody>
</table>

G11. If a rectal microbicide were available that provided some protection against HIV, and it came in the form of a **douche**, how likely would you be to use it every time you have receptive anal intercourse?

<table>
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</table>

G12. How much would you be willing to spend on a microbicide product per sexual occasion?

- About as much as I spend on lube and condoms
- Twice as much as I spend on lube and condoms
- Three times as much as I spend on lube and condoms
- Other, please specify:

G13. If you have a steady sexual partner, would you want to use a microbicide without their knowledge?

1. No
2. Yes

G13a. Under what circumstances would you use a microbicide without your steady partner’s knowledge? [NoTellCircumstance] _______________________(text range 0-500) *(fill-in)*

G14. Would you want to use a microbicide without a casual sexual partner’s knowledge? [MicrobicideNoTellCasual]
1. No
2. Yes

SECTION H. MOTIVATION & ADDITIONAL COMMENTS

H1. Please indicate the **top 3 main** reason(s) you joined this research study.
   1. To receive the financial reimbursement
   2. To be provided with free health care during the study, or to get higher quality health care
   3. To be tested for HIV
   4. To get educated or find out more about HIV
   5. To help test a product that may prevent men and women from getting HIV
   6. To contribute to scientific knowledge
   7. To satisfy my curiosity about participating in a study
   8. A friend/family member recommended that I join the study
   9. I am worried about getting infected with HIV
   10. My health care provider recommended I join the study
   11. Other, *please specify:* ______________________________

H2. Is there anything that we haven’t asked that you think we should have?

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

This is the end of the interview. Thank you for completing this questionnaire!