

Testing of the National HIV Behavioral Surveillance System Results of Interviews Conducted 1/13/2011- 4/5/2011

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Introduction

This report summarizes the findings from a research project designed to evaluate questions on social networks, HIV risk and exposure, as well as knowledge and use of post-exposure prophylaxis (PEP) or pre-exposure prophylaxis (PrEP) for the National HIV Behavioral Surveillance System (NHBS). The NHBS is conducted in three revolving cycles, which target three groups that are identified as being at high risk for HIV: Heterosexuals who are at high risk (HET); Men who have sex with men (MSM); and Injecting drug users (IDU). To recruit participants for the HET and IDU cycles, the NHBS uses respondent-driven sampling, which is a chain-referral sampling strategy. Information of respondents' networks is collected during the survey to determine sample weights. The NHBS survey sponsor was interested in the validity of data produced from measures of network size and characteristics. In particular, do respondents consider similar types of people when reporting on their networks? Additionally, sponsors were interested in how respondents interpret and respond to measures regarding their knowledge and use of PEP and PrEP in the prevention of HIV. Other measures on the NHBS were evaluated in this study; however priority was given to questions which measured these particular constructs.

This evaluation is based on three rounds of cognitive interviews that were conducted by the Questionnaire Design Research Laboratory (QDRL) at the National Center for Health Statistics (NCHS). Cognitive interviewing is a qualitative question evaluation method used to evaluate the validity of survey questions (Willis 2005; Miller 2011). The main goals of the project were to: 1) assess respondents' interpretation of the survey questions and 2) identify any potential question response problems that could lead to response error in the survey data. The project was funded by the National Center for HIV, Hepatitis, STD, and TB Prevention (NCHHSTP), Division of HIV/AIDS Prevention (DHAP).

The following report summarizes the cognitive interviewing methodology and describes how data analysis was conducted. An overview of the findings is then presented, followed by a question by question review of the findings.

Methodology

As mentioned above, the NHBS is conducted in three cycles with three target groups: Heterosexuals who are at risk for HIV (HET); Men who have sex with men (MSM); and Injecting drug users (IDU). Therefore, three rounds of cognitive testing were conducting to

evaluate the three instruments used in each cycle of data collection. In Round 1, we evaluated the survey used for the HET sample. A copy of the HET questionnaire can be found in Appendix A. Respondents for the HET sample were recruited through a newspaper advertisement. The HET group had the most stringent screening criteria. In order to participate in the testing of the HET questionnaire, respondents had to be between the ages of 18 and 60, they had to identify as the gender they were assigned at birth (i.e., not transgender), they had to have engaged in vaginal or anal sex with an opposite sex partner at least once in the past 12 months, they could not have injected drugs in the past 12 months, and they had to either have low income or low education (i.e., less than or equal to a high school diploma/GED). In an attempt to attain a diverse group of respondents within the sample constraints, respondents were also screened on their race, ethnicity and HIV status. Despite these efforts, respondents in this round of testing were disproportionately African American and HIV negative. Twenty-five respondents were recruited for this round of testing.

In Round 2, we evaluated the survey used for the MSM sample. A copy of the MSM questionnaire can be found in Appendix B. Respondents for the MSM sample were recruited using flyers posted at an LGBT community center and through word of mouth. In order to participate in testing of the MSM questionnaire, respondents had to be 18 or older, they had to identify as the gender they were assigned at birth (i.e., not transgender), and they must have had oral or anal sex with a same sex partner at least once in their lifetime. In an attempt to attain a diverse group of respondents within the sample constraints, respondents were also screened on their education level, income, race, ethnicity and HIV status. Despite these efforts, respondents in this group were disproportionately African American, low income and HIV positive. Twenty-five respondents were recruited for this round of testing.

The third and last round of testing evaluated the survey used for the IDU sample. A copy of the IDU questionnaire can be found in Appendix C. Respondents for the IDU sample were recruited using flyers posted at a needle exchange center and through word of mouth. In order to participate in testing of the IDU questionnaire, respondents had to be 18 or older, they had to identify as the gender they were assigned at birth (i.e., not transgender) and they had to have injected drugs within the past 12 months. In an attempted to attain a diverse group of respondents within the sample constraints, respondents were also screened on their education level, income, race, ethnicity and HIV status. Despite these efforts, respondents in this group were disproportionately African American, less educated, low income, and HIV negative. Twenty-five respondents were recruited for this round of testing. See Table 1 for a demographic summary of each sample of respondents.

Interviewing Procedures

Each questionnaire was evaluated using cognitive interviewing. Cognitive interviewing is a qualitative method used to determine the construct that is captured by a survey question, as well as to uncover problems that could lead to response error in the survey data (Miller 2011; Willis 2005). Traditionally, cognitive interviewing has focused on response error that emerges due to disruption in the cognitive processes that respondents engage in when answering survey questions (i.e., comprehension, recall, judgment and response mapping) (Tourangeau, Rips, and Rasinski 2000). However, it is increasingly argued that these cognitive processes occur within a larger socio-cultural context, and in order to fully understand how respondents comprehend and

respond to survey questions it is necessary to examine how each step in the response process is informed by individuals' lived experiences (Miller 2011).

In each round of testing, respondents were administered the questionnaire in its entirety and then retrospective intensive verbal probing was used to collect respondent narrative. Probe questions included such things as: Why did you answer that way? How did you arrive at your response? Can you tell me more about that? Can you clarify what you mean? The interviews were audio recorded; audio recordings and interview summaries were used to conduct data analysis. Interviews typically lasted 90 minutes. However, respondents in the IDU sample were particularly difficult to interview. Several of these respondents appeared to be high during the interview, and most were anxious and had difficulty sitting still for the full 90 minutes. All respondents were remunerated \$50 for their time.

Table 1: Demographic summary of respondents for each round of testing and in total.

	HET	MSM	IDU	Total
	n=25	n=25	n=25	n=75
Age				
18-25	4 (16%)	1 (4%)	0 (0%)	5 (7%)
26-35	0 (0%)	4 (16%)	0 (0%)	4 (5%)
36-45	8 (32%)	4 (16%)	6 (24%)	18 (24%)
46-55	9 (36%)	11 (44%)	15 (60%)	35 (47%)
56-65	4 (16%)	5 (20%)	4 (16%)	13 (17%)
Gender				
Female	11 (44%)	-- --	12 (48%)	23 (31%)
Male	14 (56%)	25 (100%)	13 (52%)	52 (69%)
Ethnicity				
Hispanic	0 (0%)	1 (4%)	0 (0%)	1 (1%)
Non-Hispanic	25 (100%)	24 (96%)	25 (100%)	74 (99%)
Race				
White	0 (0%)	6 (24%)	0 (0%)	6 (8%)
Black	23 (92%)	16 (64%)	24 (96%)	63 (84%)
Multi-racial	2 (8%)	3 (12%)	1 (4%)	6 (8%)
Education				
Less than HS	13 (52%)	0 (0%)	9 (36%)	22 (29%)
High School	11 (44%)	5 (20%)	13 (52%)	29 (39%)
Some College	1 (4%)	9 (36%)	3 (12%)	13 (17%)
College	0 (0%)	7 (28%)	0 (0%)	7 (9%)
Post Graduate	0 (0%)	4 (16%)	0 (0%)	4 (5%)
Household Income				
Less than \$10,000	10 (40%)	4 (16%)	15 (60%)	29 (39%)
\$10,000-30,000	9 (36%)	12 (48%)	7 (28%)	28 (37%)
\$30,000 or more	4 (16%)	9 (36%)	2 (8%)	15 (20%)
DK	2 (8%)	0 (0%)	1 (4%)	3 (4%)
Marital Status				
Married	4 (16%)	1 (4%)	2 (8%)	7 (9%)
Separated	1 (4%)	2 (8%)	3 (12%)	6 (8%)
Divorced	4 (16%)	1 (4%)	4 (16%)	9 (12%)
Widowed	1 (4%)	0 (0%)	4 (16%)	5 (7%)
Never Married	15 (60%)	21 (84%)	11 (44%)	47 (63%)
DK	0 (0%)	0 (0%)	1 (4%)	1 (1%)
Sexual Identity				
Heterosexual or Straight	24 (96%)	1 (4%)	20 (80%)	45 (60%)
Homosexual or Gay/Lesbian	0 (0%)	20 (80%)	3 (12%)	23 (31%)
Bisexual	1 (4%)	2 (8%)	1 (4%)	4 (5%)
Other	0 (0%)	2 (8%)	1 (4%)	3 (4%)
HIV Status				
Positive	5 (20%)	23 (92%)	1 (4%)	28 (37%)
Negative	17 (68%)	2 (8%)	24 (96%)	43 (57%)
Indeterminate	0 (0%)	0 (0%)	0 (0%)	1 (1%)
Status unknown ¹	3 (12%)	0 (0%)	0 (0%)	3 (4%)

¹ One respondent in the HET interviews was not administered the HIV section of the questionnaire. All others whose HIV status was categorized as "status unknown" have not been tested for HIV.

Data Analysis

Data from this evaluation were analyzed using the constant comparative method of analysis (Lincoln and Guba, 1985; Strauss and Corbin, 1990; Creswell, 1998). The constant comparative method involves a constant comparison of data findings to the original data. This typically involves three steps of data reduction (Strauss and Corbin 1990). First, we performed open coding. This entailed reviewing the data with two questions in mind: 1) how did respondents interpret this question and 2) why did respondents select the response they did? During this analysis step a number of codes were assigned to the interview notes for each respondent. In the next step of data analysis, called axial coding, analysts refined the themes/categories that emerged from open coding. Analysts identified the dimensionality of categories (i.e., range of properties that fall under a particular category), as well as potential conflicts between items placed under the same category. In the final analytic step, referred to as selective coding, analysts specified the core themes that emerged from the analysis. These core themes served as the unifying link between all themes/categories, and denoted a working theory that depicts the phenomena captured by this question.

Summary of Findings

As mentioned above, the primary focus of this study was to examine the validity of measures of social network size and characteristics, and measures on knowledge and use of PEP and PrEP in the prevention of HIV for the NHBS. In this section, a summary of results from the evaluation of these measures is provided. Other measures on the NHBS were also evaluated in this study but the results from the evaluation of those measures are not included in this summary.

Measures of Social Networks

Respondents in the HET and IDU rounds were both administered a series of network questions to determine the size and characteristics of their social networks. However, the criteria used to determine networks varied across these two rounds. Respondents in the HET interviews were asked to think of a broader social network than were people in the IDU interviews. That is, respondents in the HET interviews were asked to think of friends, relatives or people they are close to who are at least 18 years old, and live in Washington DC. Whereas, respondents in the IDU interviews were asked to think about people they know in Washington DC who inject. In both rounds, respondents were then asked more specific information about people in these networks, such as how many they have seen in the past 30 days, their gender, and their ethnicity and race. This proved to be a much more difficult task for respondents in the HET interviews compared to respondents in the IDU interviews.

Respondents in the HET interviews did not consistently adhere to the network criteria (i.e., friends, relatives or people they are close to who are at least 18 years old, and live in Washington DC) when answering this series of questions. Asking respondents to consider all of their friends, family and people who they are close to, who are at least 18 years old, and live in

Washington DC was cognitively challenging for respondents. Only about half of the respondents adhered to all of these criteria when answering. The other half of the respondents either did not adhere to all of these criteria when answering these questions, or shifted which aspects they adhered to when answering different questions. Even when respondents did adhere to the network criteria established in these questions, response error was often found as a result of misinterpretation of particular questions and recall problems. As a result, respondents erroneously included and excluded people from their networks, and ultimately this led to a misrepresentation of the size and demographic characteristics of their social networks.

Conversely, respondents in the IDU interviews considered similar types of people when answering this series of questions, both across and between interviews. It appeared that asking respondents to report on people they know in Washington DC who inject was a much easier cognitive task in comparison to the social network respondents in the HET interviews were asked to consider. Still, incidents of response error were found. Some respondents excluded injecting drug users whose names they did not know from their responses to this question, despite being instructed to include them. Respondents also erroneously included individuals in their networks. However, less response error was found in responses to these questions in comparison to responses to the HET network questions. Based on these findings, sponsors may want to consider narrowing the social networks in ways that are meaningful to respondents.

PEP & PrEP Questions

The questions which measured knowledge of PEP and PrEP worked fairly well. Most respondents, who were HIV positive, understood the intent of the question used to measure their knowledge of PEP and PrEP (i.e., HET QH8, MSM QH8, IDU QH8) and were able to provide a valid response to this question. About half of the respondents who were HIV positive have heard of PEP and/or PrEP. Respondents typically heard about these medicines through the media or through healthcare providers but most did not know someone who had personally taken these medications. However, a couple of respondents had difficulty understanding the intent of this question in the MSM interviews. Some respondents were unsure if these questions were asking if they have heard of PEP or PrEP or if they knew someone personally who has taken these medicines. Additionally, one respondent interpreted this question as asking if he had ever heard of someone who was HIV positive not taking antiretroviral medications. However, overall the majority of respondents who were HIV positive understood the intent of this question.

Most respondents, who were HIV negative, understood the intent of the question used to measure their knowledge of PEP and PrEP (i.e., HET QH10, MSM QH10, IDU QH10) and were able to provide a valid response to this question. Unlike respondents who were HIV positive, most of the respondents who were HIV negative were not familiar with PEP and PrEP. When asked about these medicines most respondents indicated that they never heard of this before, and never knew anyone who has taken these medicines. In the PEP and PrEP questions for respondents who were HIV negative, these medications were referred to as anti-HIV medicines. Most of these respondents interpreted this as asking about different medications than the ones prescribed to treat HIV (i.e., antiretroviral medicines). A few respondents who were HIV negative also exhibited comprehension problems with the question used to elicit their knowledge of PEP and PrEP. Like, respondents who were HIV positive, some respondents who were HIV negative were unsure of these questions were asking if they have heard of PEP or PrEP or if they

know someone who has used PEP and PrEP. In some cases this led to response error. Depending on what construct sponsors are intending to measure with these questions (having heard of PEP and PrEP or having known someone who has used PEP and PrEP), they may want to consider clarifying the intent of questions H8 and H10.

Respondents generally understood questions which asked if they have ever used PEP and PrEP. There was limited probing on these questions for respondents who were HIV positive (i.e., HET H9, MSM H9, IDU H9). This is because many respondents were inadvertently skipped out of this question. This problem should not occur on the CAPI instrument. Respondents who were administered and probed on this question understood the intent of this question and provided valid responses. No respondents who were HIV positive have ever shared their antiretroviral medicines with sex partners.

Most respondents, who were HIV negative, understood the intent of the question used to measure their use of PEP and PrEP (i.e., HET QH11 & H12, MSM QH11 & H12, IDU QH11 & H12) and were able to provide a valid response to this question. No respondents who were HIV negative have ever taken any medication before or after sex to keep them from getting HIV. A few respondents did have comprehension issues with these questions. One respondent interpreted these questions as asking if people who are HIV *positive* took HIV medications before and after sex it would prevent them from contracting HIV. These questions also assumed respondents were sexually active and in some cases they were not. Finally, some respondents and interviewers thought it was strange to ask if a respondent has taken these medicines before or after sex when they have already indicated that they have never heard of anyone using medicines such as these. Sponsors may want to consider skipping respondents who have not engaged in sexual intercourse out of these questions.

Finally, when respondents, who were HIV negative, were asked if they would be willing to take “HIV medicines” to lower their chances of contracting HIV (i.e., HET H14, MSM H14, IDU H14) most respondents said no. Respondents often thought this question was asking about a new type of medication that was different from those prescribed to treat HIV. Respondents who answered no expressed the need for more information about these medicines, and were concerned about the side effects from these medicines, as well as the effectiveness of these medicines. Some respondents also thought they were not at risk for contracting HIV and therefore answered no. Many respondents across the three rounds had difficulty providing a definitive yes or no response to this question. Often these respondents had the same concerns raised by those who answered no. That is, they were concerned about the side effects of these medicines and how effective these medicines were in lowering one’s risk for contracting HIV. Some respondents also did not believe they were at risk for contracting HIV. However, if these respondents had more information, or felt they were at risk for contracting HIV, they would be willing to use these medicines. Two respondents in the HET interviews had difficulty comprehending the intent of these questions. These respondents interpreted this question as asking if they were HIV positive would they be willing to take HIV medicines before and after sex. However, the majority of respondents had no difficulty understanding the intent of this question.

Question by Question Review

HET QUESTIONNAIRE

E1. What is your date of birth?

 / / / / / / /
(M M / D D / Y Y Y Y)

This question was not probed on.

E6. What county do you currently live in? _____

All 25 respondents received this question and all but five respondents answered “Washington DC.” The majority of respondents were not probed on this question, however, in some cases we were able to verify that the respondent lived in Washington DC when probing on other questions, and therefore it appeared that most respondents provided a valid response to this question. Two respondents did have difficulty providing a response to this question as they did not know the name of the county they lived in. In both cases the interviewer showed the respondent the list of counties under the Washington DC and Baltimore MSA to see if this would prompt their recall. Also, in six of the interviews, the interviewer mistakenly provided respondents with the list of counties while administering this question (prior to them answering) and in one case this affected the respondent’s answer. These issues are discussed in more detail below.

Two respondents did not know the name of the county they lived in, which made it difficult for them to answer this question. Upon hearing this question for the first time, one respondent stated, “I think it’s Waldorf.” He was referring to the name of the city he lives in and not the county. He has only been living in this city for three months. The interviewer then showed this respondent the list of counties used to determine the MSA and he read through them and stated that he thought it might be “Charles County.” The interviewer then categorized him as living in the Washington, DC MSA. This response turned out to be valid as Waldorf is in Charles County, which is in the Washington, DC MSA. Another respondent also did not know the name of the county where he lived. He replied to this question, “I don’t know if it’s a county. I live in Alexandria.” The interviewer then showed him the list of counties used to categorize MSA and asked him to find his county on it, pointing out to the respondent that Alexandria City was on there. The respondent appeared to still be unsure but selected Alexandria City. It may be helpful to provide a way for interviewers themselves to identify what county a respondent lives in for cases where respondents know the name of the town or city they live in, but not the county.

Some cases of interviewer error were also found. One interviewer mistakenly handed the list of eligible counties to each respondent after asking this question (and prior to them answering) and asked them to find their county on the list. In most of these cases, this did not appear to affect the respondents’ answers to this question as most of them answered that they

lived in “Washington DC” and then read the list of counties. However, in one case the respondent changed her response after looking at the list. This respondent initially answered “Arlington.” However, after looking at the list the respondent then said, “Actually my address is in Alexandria. My daughter stays in Arlington but I stay in Alexandria, so Alexandria” and then stated that she couldn’t find Arlington on the list (although Arlington County was listed). When probed on this question, the respondent was shown the list of counties again and she located Arlington County on it. She was then asked if she would change her answer and she said “I guess I would kind of say both. Because sometimes I’m at one daughter’s house (in Arlington, VA) and sometimes I’m at the other daughter’s house (in Alexandria City).” She said her identification listed Alexandria, VA as her residence so she stuck with this response. While seeing the card affected her response, it ultimately did not affect the validity of her response as both Arlington, VA and Alexandria City should both fall under the DC MSA.

E6a. How long have you been living in *[project area]*? (*Interviewer:* If response is in months, enter 0 below and then enter the number of months in the next screen.)

Years __ __

[Refused = 777, Don't know = 999]

If E6a= 1-99, 777, or 999, skip to Q2a

E6b.

Number of months: __ __

[Refused = 77, Don't know = 99]

range of values= 1-11

All 25 respondents received this question. Thirteen respondents were probed on this response. All respondents lived in the Washington DC MSA. A number of problems were found with this question. When forming their response, respondents were fairly evenly split between those who estimated how long they lived in the project area and those who provided an exact number. Some respondents included, in their response, years they did not live in the Washington, DC MSA. Also, because the project area (Washington, DC) was ambiguous some respondents who had lived in different places within this MSA, only reported on the years they had lived within the city of Washington, DC. These findings are discussed in more detail below.

About half of the respondents probed provided an exact number of years they have lived in the project area and almost all of these respondents had lived in the project area (Washington, DC) their entire lives. Therefore, their responses to this question were easy to recall as they matched their age. Other respondents, who moved to the project area, could recall the exact number of years they lived in Washington, DC because their moves coincided with other life events, such as the birth of a child, or a specific time of year, like Thanksgiving, or they could recall how old they were when they moved to Washington, DC.

Conversely, almost half of the respondents probed provided an estimate of how long they have been living in Washington, DC. Most of these respondents had moved to the project area at some point in their life, or they were born in Washington, DC and had moved away for some period of time and then moved back. Because they could not recall how long they had been living in the project area, they provided estimates, such as “over 20 something years,” “30 some

years,” “maybe about 51 years.” However, one respondent who has lived in Washington, DC his entire life provided an estimate when answering. When first asked this question he said, “Probably about 50, 60 years. Well, no. I’m not that old. Be about 50 years. I’m almost 50 now.”

Some respondents did not provide responses to this question in the correct format. Often this was because they have lived in Washington, DC their entire lives. Common examples were, “All of my life. Born and raised” or “Since birth.” However, a couple of respondents who moved to Washington, DC also provided responses in incorrect formats, including, “Since 2003” and “Since I was two.” While this did not lead to response error, these respondents had to be prompted by interviewers to provide a response in the proper format (i.e., number of years or months).

For respondents who were born in the project area, but had moved away at some point in time and then returned, it was not clear how to calculate their response. That is, it was not clear if respondents should report on the number of years they had lived in Washington, DC overall, or the number of years they have lived in Washington, DC since last moving back. Most of these respondents reported how many years they had lived in Washington, DC overall, while some respondents reported on how many years they have been living in Washington, DC since they last moved back. For example, one respondent described himself as born and raised in Washington, DC, however, he has traveled a lot and lived in other places. He last lived in Seattle before moving back to Washington, DC in 1983. He answered 51 years, because he is 55 years old and is subtracting out how long he lived in other places. However, if the intent of this question is to measure how many consecutive years they have lived in the project area; this would be response error, as he has only lived in Washington, DC for the last 27 years consecutively. There was also one respondent who was stationed in other cities when he was in the military. This respondent initially answered “All of my life, for 53 years.” He answered 53 years, because that is how old he is. However, it was not clear to him if he should account for the years when he was in the military and stationed somewhere else when answering.

There were a couple of respondents who answered based on how many years they have lived in Washington, DC since last moving back. For example, one respondent was born in Washington, DC, and is now 44 years old. She moved to Florida as a teenager and attended high school there. She moved back from Florida some time after high school and she guessed that she has been living in Washington for the past 20 years. Similarly, another respondent only reported on how long he has been living in Washington, DC since last moving back. This respondent was born in Washington, DC, but had been living in North Carolina for the past 11 years. When answering this question he reported that he has been living in Washington, DC for four months, because he moved back from North Carolina four months prior to the interview.

There were also some respondents who had moved within the Washington, DC MSA, but because they interpreted “Washington, DC” to mean the city of Washington, DC, they only reported on the number of years they have lived in the city. For example, one respondent, who was 24 years old, grew up in Prince George’s County which is in the Washington, DC MSA. However, she has been living in the city of Washington, DC for one year. When she answered this question she only reported on how long she has been living in the city and did not report on the total time she has lived in the MSA, which should have been 24 years. Similarly, another respondent, who was 38 years old, grew up in Montgomery County, which is in the Washington, DC MSA. However, she has been living in the city of Washington, DC for the past seven years. Like the previous respondent she only reported on the number of years she has been living in the

city of Washington, DC. However, one respondent who had moved within the MSA did report on the total number of years he had lived in the Washington, DC MSA. This is likely because he only lived outside of the city for a couple of years. This respondent, upon hearing this question for the first time said, “Well actually I’ve been living in the area all my life but we moved to Montgomery County and then later on in life I moved back to DC as I got older. So, it’s been really all my life.” He ultimately answered based on how old he was – “50 years.”

There was also one case where the respondent did not include all of the years he had lived in the Washington, DC MSA, however, this was due to interviewer error. This respondent answered question E6 “Prince George’s,” and instead of then inserting “Washington, DC” as the project area, the interviewer asked, ‘How long have you been living in *Prince George’s County*?’ To which the respondent replied, “One year.” However, this respondent was born in Washington, DC and only moved to Prince George’s County recently.

There were a couple of other cases of response error found. Two respondents appeared to experience recall error when they initially answered this question and wanted to change their response. Interestingly, both of these respondents based their response on the age of their daughters. In one case, the respondent answered “30 some years... my daughter will be 34 on the 25th, 30 some years.” When probed to see if she could recall exactly how long she has lived in the MSA, this respondent stated that she has lived here since 1973 and then wanted to change her response to 38 years. The other respondent first answered this question 15 years. When probed on her response, she said she was able to recall this because her daughter is 16 years old and she was living in Washington, DC when she gave birth to her. She then wanted to change her response to 16 years.

E4. Do you consider yourself to be Hispanic or Latino/a?

No.....	0
Yes.....	1
Refused to answer.....	7
Don't know.....	9

All 25 respondents received this question, and all 25 respondents answered “no” to this question. However, only 11 respondents were probed on their response. Respondents did not understand Hispanic to be an ethnicity separate from one’s race and thus they did not appear to interpret this question as an ethnicity question but rather answered it as a race question. Additionally, one respondent interpreted this question as asking about nationality and not ethnicity. When asked why they answered “no,” the most common response given was because they are African American or some other race(s). Respondents often discussed their knowledge of their ancestry as reasoning for why they answered “no.” In particular, reporting on the race of their mother and father. For example, when asked why she answered “no” to this question one respondent replied, “Because I know my dad’s an Indian and my mom’s mixed with Indian and she’s African American.” A couple of respondents also mentioned having discussions with family members about their race. Two respondents also discussed how they do not speak Spanish as a reason for why they are not Latino or Hispanic. A couple of respondents provided a response that was not in the appropriate format – one respondent replied “African American,” and the another respondent replied “American.” However, once

prompted to provide a yes or no response, these respondents were able to provide a valid response.

E5. **[GIVE RESPONDENT FLASHCARD A.]** Which racial group or groups do you consider yourself to be in? You may choose more than one option. **[READ CHOICES. CHECK ALL THAT APPLY.]**

American Indian or Alaska Native.....	1
Asian	2
Black or African American	3
Native Hawaiian or Other Pacific Islander.....	4
White	5
Refused to answer.....	7
Does not apply	8
Don't know.....	9

All 25 respondents received this question. Thirteen respondents were probed on their response. Most respondents selected “Black or African American” only; however two respondents selected more than one race. In some cases respondents had biracial backgrounds but only identified as one race. Respondents based their response to this question on a number of factors including their ancestry, their physical characteristics, conversations with others regarding their race, and their personal identity. A couple of respondents had problems with the response category “Black or African American” as it did not adequately reflect their racial identity claims. Finally there were some administration problems with this question. In many of the interviews, the interviewer did not read the response options as instructed and a few respondents did not know how to use the handcard. These findings are discussed in more detail below.

During probing respondents indicated that they based their response on a number of factors including their ancestry, their physical characteristics, discussions they have had regarding their race with family members, and their personal identity. For example, when asked why she selected “American Indian or Alaska Native” and “Black or African American” one woman stated,

Because I know my dad’s an Indian and my mom’s mixed with Indian and she’s African American. I basically asked them ‘what’s my race’ because they look so different from each other. By him having this long black straight hair and his mom, and then my grandmother, my mother’s mom has this long pretty hair and then my mother’s father he was African American, you can pretty much tell it... I was in junior high school... everybody kept asking me ‘am I Ethiopian?’ So I had to ask my race because I didn’t know. People keep asking me ‘am I Ethiopian?’ Right now today people still ask me if I’m Ethiopian.

Some respondents had biracial family backgrounds and thus selected multiple response categories; however, other respondents had biracial family backgrounds, but only identified with one race. In all of these cases the respondent either had a great-grandparent or a grandparent who was biracial and these respondents all commented on how far removed they were from the

particular race which they did not select. Therefore, they did not identify with this race and a few respondents also commented on how family members closer in lineage to the respondent (i.e., grandparents and parents) also did not identify with that race. For example, one respondent, who answered “Black or African American,” indicated during probing that his mother and father were African American; however, his maternal grandmother was Cherokee Indian. When asked why then he does not also identify as American Indian he said, “I think by the time it got to my genes, I don’t have any in me.” He then discussed how his mother also only identified as African American.

A couple of respondents had difficulty with the response option “Black or African American.” One respondent who identifies as African American but not as black had a difficult time selecting this response category. When she first received this question she said, “This is a hard one. Because black- I’m African American. But it says black *or* African American... African American is what I am. I have to choose that one.” During probing she revealed that she is a member of the Moor Science Temple of America and they reject the term black and instead identify as African American. Conversely another respondent answered this question “black” and then indicated that she identifies as black and not African American.

I’m black but I’m not African American. I’m black American because to me I was- Africans don’t- they look down below to us, like we on the ground. Because they so superior and I can’t figure out how I got to be- my race got to be black African. I ain’t never been to the continent. I’ve only been here in the United States. So I don’t know how I got to be- that’s what they wrote down but I guess that’s okay. But I feel myself is just black American.

Similar to these two respondents, a few other respondents also indicated that they preferred to use particular terms, such as black, African American, or Black American over other terms, when describing their race.

Finally, in 14 of the interviews the respondents were not read the response options as instructed, however respondents were given the handcard. In some of these cases this was because the respondent provided a response after hearing the question but before the interviewer could begin reading the response options and the interviewer did not continue reading the rest of the question. Additionally, in two interviews the respondents provided a response after hearing a response option that applied to them but before all of the response options were administered. A couple of respondents were unsure how to use the handcard and asked the interviewer if they should circle the response category that applied to them. Interviewers then had to instruct the respondents to tell them the categories that they wanted to select.

E7. Do you consider yourself to be male, female, or transgender? [**CHECK only ONE**]

- Male..... 1
- Female 2
- Transgender 3
- Refused to answer..... 7

All 25 respondents received this question. Eleven respondents answered “female” and 14 respondents answered “male.” All respondents were probed on their response to this question. Women and men had similar interpretations of this question and gave similar reasons for why they selected the response they did. However, women were slightly more likely than men to discuss their anatomy when explaining why they answered “female,” and men were slightly more likely to talk about choosing their gender (or not wanting to change genders) when explaining why they answered the “male.” Both men and women conflated gender with sexuality. Most respondents had some level of familiarity with the term transgender; however, not knowing the meaning of this term appeared to have little impact on their interpretation of this question. However, the presence of this term in the question may have altered how respondents thought about this question. This cannot be determined however without evaluating a version of this question that does not contain the transgender category.

Some women we interviewed interpreted this question as a biological sex question and based their response on indicators of their biological sex, rather than as a gender question. That is, they based their response on the fact that they were born a female, have the anatomy of a female, and have used their female organs to reproduce. For example, when asked why she answered the way she did one woman stated, “I birthed children. I have parts that- a vagina.”

Other women interpreted this question as asking about both their biological sex and their gender. Like other woman, they based their responses on the fact that they were born female, that they have the anatomy of a woman, and that they have used their female organs to reproduce. However, they also based their response to this question on their socialization by parents to be a woman, their enactment of their gender role and their presentation of self as a woman, and their choice to remain a woman and not have their gender or sex altered in any way. For example, when asked why she answered “female” one woman stated,

I was born a female. I choose to stay as a female... On my birth certificate it says I was a female. My mom named me [name], which is a feminine name. She proclaims me as her daughter so my identity from when I was born, before I knew what sex was... was a female... I do things females naturally do. I have things females naturally have... ovaries, fallopian tubes, things of that nature.

No woman interpreted this question or based their response to this question solely on their gender.

However, as mentioned above some women conflated the concept of sex/gender with sexuality. This was done both by women who based their response to this question on their biological sex and women who based their response on their biological sex and gender. For example, when asked why she answered “female” one woman, replied, “That’s what I am. I have all my female parts and I’ve never been with a female.” Another woman, who based her response on her sex and gender, also conflated sex/gender with sexuality: “I have eight children. I have sexual relations with men. I do things women do. I cook, clean. I guess have woman body parts.”

Some men also interpreted this question and based their responses to this question on indicators of their biological sex. That is, they based their response on the fact that they were born a male, have the anatomy of a male, and have used their male organs to reproduce.

Unlike in the interviews with women, some men interpreted this question and based their response to this question solely on their gender. That is, they discussed how they were socialized to be men and how they enact gender roles. For example, when asked what it means to say he is male one respondent stated, “I like to do things that men do... work construction jobs, play basketball, love to watch football, cook, love chess, I just love talk about politics like men do...” Additionally, when asked why they answered “male” a couple of men discussed identifying with their gender and not having any desire to change their gender. For example, when asked why he answered “male” one man stated, “Cause I’m a male. I have no other feelings... what a regular, straight male has. I don’t have feelings of being a female trapped in a male body.”

Other men interpreted this question as asking about both their biological sex and their gender. Like the men cited above, these men based their responses on the fact that they were born male, and that they have used their male organs to reproduce. However, they also based their response to this question on the fact that they present themselves to others as a man, and they choose to stay a man. For example, when asked what being a male means to him he stated, “you were born male and you currently present- what is on your birth certificate. And to this day what you currently present yourself to be.”

Many respondents conflated sex/gender with sexuality. That is, when asked why they answered “male” many respondents discussed their sexuality. For example, when asked why he answered male one respondent stated, “I was born with a penis and I like women, strictly. I see men as men but I lust for women.” Similarly another respondent who recognized this question as asking about sex and gender provided the following reason for answering “male”: “Born a male. Never had any desire to be anything but. I’m heterosexual. That’s just my preference.”

Transgender

As mentioned above most respondents reported that they were familiar with the response option “transgender.” Respondents generally understood this to mean someone who wanted to present themselves as the opposite sex, however, some interpreted this to mean they simply dressed as the opposite sex, while others interpreted it to mean they have altered their body through surgery, and some respondents interpreted it as a combination of the two. Some respondents also conflated the terms transgender and sexuality. There were no differences in how men and women interpreted this term.

Some respondents understood this term as referring to a person who presents themselves as the opposite sex: Maybe a male or female who carries themselves as the opposite sex or who dresses as the opposite sex... Like if I’m a female and I dress as a male and I keep my hair cut short like a male. I act more like a male than I do a female... or if it’s a male, acting like a female and dresses like a female.

Others interpreted this term as referring to a person who wants to change their sex. This could involve taking hormones or having surgery to alter this body. For example when asked to describe someone who is transgender one respondent replied, “That’s when they want to switch their bodies over. Like change their breasts and their vagina area and stuff over.”

Some respondents interpreted this term as referring to a person who either presents as the opposite sex through his or her outward appearance (i.e., through their clothing), or a wants to alter his or her sex through surgery or has already altered his or her sex through surgery or by taking hormones. For example, one woman described a transgender person as: “A female that wants to change herself over to a man and go and get an operation to get a penis, or just dress up like a guy all the time.”

Other respondents gave slightly different interpretations. For example, one respondent understood it to mean someone who was born one sex but believed they were the other sex. Another respondent interpreted this term as referring to a man who has female traits. One other respondent interpreted it to mean one who acts or carries themselves like the opposite sex.

Just as respondents conflated their own sex/gender with their sexuality, respondents also conflated sex/gender and sexuality when discussing their interpretation of the term transgender. For example, one woman described transgender in the following way:

I think homosexuality is the foundation. You know, being homosexual is like- well it's not the foundation but I think it's the basis and transgender is just taking it to a total different level... it's taking it to the extreme.... They (homosexuals) could dress accordingly to their gender but then they might take it to the next level and want to be transgender. ...they take it to the extremes... nail polish and things... wearing tight fitting clothing. Men wearing things that look like that it would look like women would wear. You know, like eye shadow and lipstick, and getting their nails done with acrylic, pinks nails- women going to the extreme. Taping down their breasts and wearing big, baggy clothes.

Two respondents interpreted this term to simply mean that one is gay. For example, when asked for his interpretation of the term transgender one respondent replied, “It means someone who's homosexual.” Similarly the other respondent stated, “I've heard of it but I don't do that kind of stuff. I like women. I think it means... having sex with another man.”

Some respondents indicated that they were unsure what this term meant but still had a general sense that it had something to do with changing one's gender or presenting as the opposite gender. For example, one respondent when asked to describe a transgender person asked, “Is that like a sex change or that's not a hermaphrodite? Is it? No, it's not that. Transgender, that's a person who comes from one gender, goes to another. Put it that way. Something's different in the gender. They transform.” Other respondents knew the term had to do with either presenting oneself as the opposite sex or surgically altering their body to be the opposite sex but did not think this term applied to both genders. For example, one respondent, when asked for her interpretation of this term, replied, “Isn't that when a lady want to be a man? Something like that, right? Something like that. That's what I say transgender means. A lady who want to be a man or a man that want to be a lady. One of those. I don't know exactly which one it is.” Similarly, another respondent thought this term only applied to men who want to be women. When asked for his interpretation of the term transgender, this respondent interpreted his term as referring to men who dress up in women's clothes and get a sex change. However, he did not think this term applied to women who dress up in men's clothes and get sex changes: “When they do that it's not a transgender for women. What they all them all? When the men do it they call them transgender but the women, well I guess it could be both ways...”

Some respondents have friends or know people who they consider transgender. In some cases this helped them understand the meaning of this term. For example, one respondent has a friend who transitioned from male to female. He described transgender people as “individuals born one way but mentally they believe they’re something else.” He went on to discuss how his friend began dressing as a female and eventually got breast implants and had her penis surgically altered into a vagina. However, knowing someone who is transgendered did not always help respondents understand this term. During probing on this question in general she indicated that she has male friends who want to be girls. “I have a couple of male friends that are like all the way women so I don’t know how they would answer it. Because they like go into girls’ bathrooms. They don’t go in the guys’ bathrooms.” Finally, despite having friends who are transgender, one respondent was confused over whether this term applies to individuals who are transitioning sexes only or if it applies to both those who are transitioning and those who have transitioned sexes. When asked how she interpreted the term transgender she initially said, “Like when you change your sex. When you get the surgery and everything.” However she then added that she did not think her friends would select this category if they were asked this question because they self-identify as women. She wasn’t sure who would choose transgender and then began to question whether it meant you have had a surgery to alter your sex or if you just present yourself as the opposite sex.

D5. What is the highest level of education you completed?
[DO NOT read choices. Check only ONE.]

- Never attended school..... 00
- Grades 1 through 8..... 01
- Grades 9 through 11..... 02
- Grades 12 or GED..... 03
- Some college, Associate’s Degree, or
 Technical Degree..... 04
- Bachelor’s Degree..... 05
- Any post graduate studies 06
- Refused to answer..... 77
- Don't know..... 99

All 25 respondents received this question and 17 were probed on their response. Six respondents answered “Grades 1 through 8,” eight respondents answered “Grades 9 through 11,” ten respondents answered “Grades 12 or GED,” and one respondent answered “Some college, Associate’s Degree or Technical Degree.” Some respondents had difficulty selecting appropriate an appropriate response.

First, this question was not easy to answer for respondents who dropped out of high school and then later received a GED. Upon hearing this question for the first time, one respondent took a long time to answer and then said “11th grade... I have a GED so... but I

completed 11th grade.” Similarly, another respondent answered this question “10th grade but I do have a GED.” Interviewers selected “Grades 12 or GED” for both of these respondents. However, neither of these respondents was probed to see why they had difficulty with this question but they appeared to be unsure if they should report on the number of years in school they completed or the highest level of education they completed. Conversely, another respondent who also dropped out of high school but then later received a GED, did not indicate they he received a GED until later. This respondent initially answered this question “10th grade” and the interviewer selected the response option “grades 9 through 11.” Later in the interview he revealed that he received his GED but the interviewer did not probe to see why he did not disclose this information earlier.

Second, the category “some college, associate’s degree, or technical degree” is ambiguous. There were several cases where respondents took courses beyond high school that they did not include in their response. For example, one respondent initially answered this question “High school grad, 12th grade.” However, during probing he revealed that he took technical courses while in the military and earned a “diploma.” It was not clear if he should have selected “some college, associate’s degree or technical degree” because of these courses but if so, his response is invalid. Another respondent answered “12th” to this question, and confirmed that she has a high school diploma. However, she took courses at a community college that did not amount to a degree. She could not recall how many courses she took but it seems that she should have answered “Some college, associate’s degree of technical degree.” Similarly, another respondent answered “GED” to this question, but then added that she took one college course. This begs the question, how many courses must a respondent have taken to validly answer “some college”? It is also not clear how to account for people who have completed certificate programs. For example, one respondent answered “High school” but then later disclosed that has a bartending certificate and a pc application certificate. Should these types of programs be included under the response option “some college, associate’s degree, or technical degree”?

D6. What best describes your employment status? Are you:
[READ CHOICES. CHECK only ONE.]

- Employed full-time..... 01
- Employed part-time..... 02
- A homemaker..... 03
- A full-time student..... 04
- Retired..... 05
- Unable to work for health reasons 06
- Unemployed..... 07
- Other..... 08
- Refused to answer..... 77
- Don't know..... 99

All 25 respondents received this question and 18 of these respondents were probed on their response. Four respondents answered “employed full time,” seven respondents answered “employed part time,” seven answered “unable to work for health reasons,” five answered “unemployed,” and two answered “other.” Of the respondents who were probed on this question, the majority appeared to provide a valid response. However, some respondents had difficulty selecting from the options provided as they did not adequately fit their employment situations, and there were some answers that appeared to be invalid. Finally, many respondents answered this question prior to hearing all of the response options; however, this did not appear to lead to response error.

All of the respondents who answered “employed full time” were probed on their response. Three of these respondents discussed being employed in a job where they worked 40 hours a week. However, one respondent stated that he worked as many hours as he could a week, but he typically only worked about 30 hours a week. Because this respondent only works 30 hours a week, his response appears to be invalid, however, the line between full time and part time work in this question is ambiguous and should be made clear to both respondents and interviewers.

Five of the respondents who answered “employed part time” were probed on their responses. All of these respondents reported working less than 25 hours a week at a paid job.

Four of the respondents who answered “unable to work for health reasons” were probed on their response to this question. All of these respondents discussed having one or more medical conditions that prevent them from working, such as HIV, epilepsy, diabetes, pancreatitis, and mental health disorders. Three of these respondents indicated that they were receiving disability benefits.

Four of the respondents who answered “unemployed” were probed on their response. One of these respondents does seasonal work and is laid off during the winter months. Two other respondents stated that they have been unemployed for a couple of years however it was not determined through probing if they were looking for work. One respondent indicated that she has been unemployed for two years but receives disability benefits. She is, however, looking for a part time job. It’s not clear if her response is valid, since she is receiving disability. Additionally, there was one respondent who answered this question, “part time student and unemployed.” The interviewer selected “unemployed” for her and did not probe on her response.

Only one respondent who selected other was probed on his response to this question. This respondent had difficulty selecting a response that applied to his situation. He is not working and receives disability benefits and wanted to report that he is on disability. When first asked this question he stated, “I’m not working right now. I get disability. Well I’m waiting on a part time job. I’m doing the footwork.” The interviewer read him the category again and he said, “I don’t know. Which one you think? I’m not doing nothing right now but get disability. So which one you think it should be? The interviewer then asked if he had to choose one of the options provided which would he pick and he said, “The disability one. That’s the one I understand.” The interviewer then asked if he would select “unable to work for health reasons” and he replied “Yeah, I guess you could put that. I don’t know. I don’t know.” He then indicated again that he wanted to report that he receives disability. The interviewer ended up selecting “other” for him.

Finally, almost half of the respondents answered this question prior to hearing all of the response options. Typically this occurred when they heard the first response option that they felt applied to them. When this occurred the interviewers usually did not read the remaining response options. In cases where this occurred and respondents were probed it did not appear to lead to response error.

D7. What was your household income last year from all sources before taxes?

GIVE RESPONDENT FLASHCARD C. DO NOT read choices.

SAY: Please take a look at this card and tell me the letter that best corresponds to your monthly or yearly income.

Monthly Income	Yearly Income	
a. 0 to \$417.....	a. 0 to \$4,999.....	<input type="checkbox"/> 00
b. \$418 to \$833.....	b. \$5,000 to \$9,999.....	<input type="checkbox"/> 01
c. \$834 to \$1041.....	c. \$10,000 to \$12,499.....	<input type="checkbox"/> 02
d. \$1042 to \$1250.....	d. \$12,500 to \$14,999.....	<input type="checkbox"/> 03
e. \$1251 to \$1667.....	e. \$15,000 to \$19,999.....	<input type="checkbox"/> 04
f. \$1668 to \$2082.....	f. \$20,000 to \$24,999.....	<input type="checkbox"/> 05
g. \$2083 to \$2500.....	g. \$25,000 to \$29,999.....	<input type="checkbox"/> 06
h. \$2501 to \$2916.....	h. \$30,000 to \$34,999.....	<input type="checkbox"/> 07
i. \$2917 to \$3333.....	i. \$35,000 to \$39,999.....	<input type="checkbox"/> 08
j. \$3334 to \$4167.....	j. \$40,000 to \$49,999.....	<input type="checkbox"/> 09
k. \$4168 to \$4999.....	k. \$50,000 to \$59,999.....	<input type="checkbox"/> 10
l. \$5000 to \$6,250.....	l. \$60,000 to \$74,999.....	<input type="checkbox"/> 11
m. \$6251 or more.....	m. \$75,000 or more.....	<input type="checkbox"/> 12
Refused to answer.....		<input type="checkbox"/> 77
Don't know.....		<input type="checkbox"/> 99

All 25 respondents received this question. There were a lot of problems found with this question. First, this question was not administered correctly in 8 of the 25 interviews, and in some cases this possibly led to response error. Several respondents did not include income from all household members, and some respondents did not include income from all sources. Some respondents also had difficulty calculating their response and mapping it onto the response options provided. Additionally, one respondent did not adhere to the reference period (i.e., last year) when answering this question. These findings are described in more detail below.

The most prevalent problem found with this question was that interviewers did not read the question as worded. Most often, interviewers did not read the question itself, but just asked the instructions that follow (i.e., Please take a look at this card and tell me the letter that best corresponds to your monthly or yearly income.). However, in some cases the interviewer read the question and then did not read the instructions that follow as worded. Not reading either the question itself or the instructions following the question is problematic because both elements provide important information for the respondent regarding the intent of the question. In some cases it appears that this error on the part of the interviewer led to response error on the part of the respondent. This is discussed where applicable below.

Another problem that emerged during testing was that respondents did not always include the income of all household members in their response. Despite living together, one respondent excluded her fiancé and another respondent excluded his wife. One respondent also excluded her daughter whose home she lives in, and another respondent excluded a cousin with whom she lives. Finally, it was unclear to one respondent who to include when answering. Upon hearing this question for the first time, this respondent asked the interviewer if she should answer for just herself or if she should include her husband's income as well. After hearing the question for a second time, she included both her and her husband's income. In one case of interviewer error, the interviewer did not read the question but instead only read the instruction to the respondent, "Please take a look at this card and tell me the letter that best corresponds to your monthly or year income." The respondent looked at the card and said "G. And this is just mine, right?" The interviewer read the instruction again (and not the question) and the interviewer answered "G". However, because this question was not probed on it's not clear who the respondent ended up including in her response.

While most respondents include income from varying sources, such as paid work, disability benefits and life insurance, a couple of respondent excluded income sources or included sources that may be invalid. For example, one respondent included money from his personal savings that he uses to pay bills. Conversely, another respondent excluded income he receives through his disability benefits, as he perceived this question as asking about taxable income from paid work. When this respondent first heard this question he said, "I guess it would be zero. I get a check and don't work." This respondent receives \$674 a month from his disability benefits and he receives food stamps.

Additionally, a few respondents had difficulty calculating how much income they received last year. One respondent simply could recall and provided an estimate. Three other respondents knew how much income they made but had difficulty mapping this amount onto the options provided. For example, one respondent is a musician and gets paid for his performances and he also gets paid for doing "side jobs". He could recall that he was paid \$4,200 and \$2,000 for two separate performances last year but then had difficulty recalling what he made doing side jobs. He ultimately answered "B," stating, "I guess I made about, maybe... about, I would take a chance and say B. But I know I didn't make \$10,000." Another respondent knew he made \$107 a week but had difficulty calculating how much this would be a month. Some respondents did not fully understand how to use the handcard to provide their response. During probing it was revealed that one respondent used the monthly income column to report her yearly income. She answered "M" to this question but only makes \$674 a month, which would place her under response "B." Another respondent reported on her and her husband's combined income (L). However, when probed on whether she answered based on the monthly or yearly income she said

“yearly” and then added that her answer would have been different if she had used the monthly column. She said their monthly income varies by month because sometimes her husband will get three paychecks instead of two, and in these months their income would be “M”. In two other cases where respondents had difficulty using the handcard they were not read the instructions on how to do so. This may have led to confusion in at least one of these cases. In this case the respondent did not understand if he should say the letter of the response option, the range of numbers, or which column to report on – monthly or yearly.

One respondent reported on what he is currently making and not what he made last year. While the respondent confirmed that he made the same amount of money from his job last year as he does this year (or is projected to make this year), this is problematic if other respondents are reporting on their income for the current year, and they earned different incomes across years.

Finally one respondent did not provide a response to this question. The interviewer did not read the respondent the question but instead read the instructions. To which the respondent replied, “neither of these.” The interviewer did not push the respondent for a response and did not probe on her confusion. However, it’s likely that her confusion stemmed from not being read the question.

SAY: The next question is about having sex. Please remember your answers will be kept private. "Having sex" means vaginal sex - penis in the vagina; or anal sex - penis in the anus (butt).

E8. Have you had vaginal or anal sex with a *[insert “man” if respondent is female; insert “woman” if respondent is male]* in the past 12 months?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

All 25 respondents received this question. Eighteen respondents answered “yes” to this question and seven respondents answered “no.” Seven respondents were probed on their response to this question. A number of these respondents had difficulty comprehending this question and some provided invalid responses as a result. In fact, it was determined that five of the seven respondents probed on this question provided invalid responses.

Despite being read the definition of vaginal and anal sex prior to hearing this question, a number of respondents indicated that they did not know what the terms “vaginal sex” and “anal sex” meant. Three respondents did not know what the term vaginal sex meant. For example, upon hearing this question for the first time one respondent asked, “what’s vaginal?” The interviewer read the definition provided and the respondent replied, “I had sex but I don’t know about that other stuff.” Later during probing, when this respondent was read this question a second time, he once again asked “What’s vaginal?” Even after hearing the definition of vaginal

sex twice the respondent still did not know the meaning of vaginal sex. All three of the respondents who did not know the meaning of the term “vaginal sex” answered “no” to this question, which was incorrect.

Additionally, one respondent indicated that he did not know the meaning of the term “anal sex.” This respondent initially answered “no” to this question. Then during probing, after hearing the question for a second time he said, “Anal sex. What does that mean?” The interviewer then read the definition and the question again and the respondent replied, “I had it in the vagina. That’s it.” He then indicated that he didn’t really understand this question.

Like the respondent above some respondents did not indicate that they were having comprehension problems until probing on this question. That is, they provided a response without indicating that they didn’t fully understand the question. For example, one woman initially responded to this question, “no”. However, later during probing the interviewer probed to see if she had vaginal sex in the past year. To which the respondent replied, “No. What’s that?” The interviewer then read her the definition for a second time and she replied, “Oh yes. I have had that.” This is problematic because many respondents could give seemingly valid responses that are in fact incorrect.

One of the possible reasons why respondents are providing invalid responses to this question may be that respondents are not hearing or are only adhering to the term “anal sex” when answering this question, regardless of whether or not they understood this term. For example, upon hearing this question for the first time one respondent answered “no” and then asked, “Anal sex means in your butt, right?”

Furthermore, five respondents did not provide a yes/no response to this question but rather indicated that they had “vaginal sex”. For example, some respondents replied to this question, “vaginal.” In some cases respondents went further and indicated that they had not had “anal sex.” For example, one respondent replied to this question, “vaginal but not anal.” Similarly, another respondent answered “not anal but I have had sex in the past 12 months. Not anal sex just vaginal sex.” Based on these examples and the examples above, it appears that this question can be double barreled for some respondents.

Finally one respondent had trouble comprehending the intent of this question. Instead of interpreting this question as asking if he has engaged in sexual behaviors in the last 12 months, he interpreted it as asking how long ago it has been since he last engaged in sexual behaviors. Upon hearing this question for the first time this respondent stated, “Straight women and 12 months, no. I would say 5 months ago.” The interviewer then asked if he would say yes or no to this question. To which he replied, “Have I had sex? Yes, I have had sex. It was five months ago with a woman.”

NETWORK QUESTIONS (HET)

Although, the HET network questions were designed as a sequence, in which respondents first reported their overall network size, then their recent network size, followed by a breakdown of their recent network by sex, ethnicity and race, many respondents did not recognize or adhere to this sequencing when answering this series of questions. Instead these respondents shifted who

they considered throughout the series of questions. For example, one respondent who reported an overall network of 60 people, which included family members, neighbors, and friends with whom he is close. In question N2a this same respondent reported that he has seen 30 of these people in the last 30 days. In his response to N2a he includes friends only. When asked how many of these 30 people are male (N3a) he answered “40” and stated that he was thinking teenagers that live in his community. Then in question N4 he stated that four of the 30 people he knows and has seen in the past 30 days are Hispanic. When asked who he was thinking of here he discussed people who live in his neighborhood but he doesn’t consider himself close to. In question N5a he identifies 15 of the 25 people he knows who are not Hispanic as black, 10 as white and 1 as another race. Here he identifies the white people he knows as his social workers, his primary care physician, his psychologist, and his pharmacist. When asked who he considered when he said one person in his recent network is another race he said there are a couple “Chinese guys” who live in his neighborhood.

Even when respondents did adhere to the sequencing of these questions their responses were often invalid due to misinterpretation of aspects of the questions or recall problems. Although almost half of the respondents used the same criteria for including people in their overall and recent networks and the demographic breakdown of their recent network size (meaning they consistently thought of friends, family, people they were close to, etc), reporting error was found in at least one question, often more, for the majority of these respondents. In fact, only three respondents out of the 24 we interviewed used the same criteria when reporting their overall and recent networks and exhibited no response error.

Because the sample was so homogenous, it is difficult to make cross-group comparisons of these findings. However, we examined whether gender and age of the respondent had any impact on respondent interpretation of this question and response error. Age of respondent had no effect on how respondents interpreted and responded to this series of questions. However, women were slightly more likely than men to include children under the age of 18 in their response. There was also some gender differences in the types of people respondents considered when answering these questions. At both N1 and N2a, men considered friends more often than women. At N1, women were more likely to include their sex partners (this may be because of close to thing), but at N2a there was no difference in reporting by gender. Only men included associates and acquaintances in their responses to these questions.

Finally, one respondent was not administered questions N1, N1b, N2a, and N2d as worded and therefore data from this interview is not included in the analysis of this series of questions.

*(For N1-N2 auto-fill **project area** with “Washington, DC” or “Baltimore, MD” depending on county.)*

SAY: I’m going to start by asking you about other people you know in [*project area*] who you are close to.” [*Go to N1.*]

Overall network size

N1. Please tell me how many friends, relatives or people you are close to who are at least 18 years old, and live in *[project area]*. **[GIVE RESPONDENT FLASHCARD B.]**

[Refused= 7777, Don't Know= 9999] _____

Twenty-four respondents received this question and were probed on their response. Respondents' answers ranged greatly, with two respondents reporting an overall network of "one," one respondent reporting a network of "two," and one respondent reported a network of "three." The remaining respondents reported a network size larger than 3, which ranged anywhere from 4 to 2,500 people. This question proved to be a difficult task for many respondents, with some respondents simply not understanding what was being asked of them, and others reporting difficulty with formulating a response. The majority of responses given were estimates. Respondents adhered to different aspects of the question when responding, with some adhering to "family," "friends," "people you are close to," or some combination of these three. While most respondents adhered to the clause "at least 18 years old" when responding, some respondents did not and reported people they knew who were younger than 18 years old. Most respondents reported on people they know who live in the project area, which in all interviews was "Washington, DC." However, a few respondents included people they knew who lived outside of the Washington, DC area in their response. The phrase "live in Washington, DC" was also interpreted in two ways: the city of Washington, DC or the Washington, DC metro area, which caused some respondents to exclude people from their overall network who should have been included. Finally, respondents erroneously included or omitted people from their overall network for a variety of different reasons other than those mentioned above. These findings are described in greater detail below.

Initial Reaction

As mentioned above, many respondents found it difficult to provide a response to this question. Upon hearing the question for the first time, four respondents did not comprehend what this question was asking. These respondents all thought they were supposed to pick items listed on the handcard they were provided when answering. For example, upon hearing the question one respondent read the card and replied "friends, relatives... oh so pick one?" A couple of respondents had to have the question repeated several times before being able to provide a response to this question. For example, after hearing this question the first time one respondent answered "Friends." The interviewer then read the question again and the respondent replied "Basically my family. I'm close to my family." The interviewer then read the question a third time and the respondent asked "That I'm close to, right?" and then reviewed the handcard before stating "My friends or relatives... I'm closer to my family more, and there's a lot of them" The interviewer then asked the respondent to provide a number and the respondent replied, "Put down 20. It's more than that though." This respondent answered the remaining questions based on her family members only.

Several respondents also reported that it was difficult to calculate how many people they knew in Washington, DC. For example, upon hearing this question for the first time one respondent exclaimed, "You want to know how many friends I have? Oh God! That would take all day. I know a lot of people! How do you expect me to do that?" This respondent ultimately

answered 1,000. Not surprisingly respondents who had difficulty calculating a response gave estimates to this question and all of these estimates consisted of 100 or more people with the exception of one person who answered “32.”

Response Formation

Almost all of the respondents who received this question provided estimates. In fact, only four respondents provided exact counts. Respondents who were able to provide a count, all reported networks that were smaller than 5 people. A few respondents initially attempted to count the number of people they knew and then provided an estimate when they found this too difficult a task. For example, upon hearing this question, one respondent replied, “Wow! That’s a lot of people. Practically my whole family lives here. Let’s see, it’s about six in my grandmother’s house, and it’s four in my mother’s house. That’s 10. I’d go with about 30 or 35. Because I have six kids of my own and they have kids, and so on. So I’d say about 30 or 35.” When pushed for a single answer she said, “I would say 32, 18 (years old) and over.” When estimates were provided, some respondents considered their estimates to be “fair” or “accurate” estimates; however several respondents indicated that they probably know more people than they indicated. For example, a common response was “I’d say about 300... it might be more.” Estimates ranged anywhere from 6 to 2500 people. A few respondents admitted that they were providing random numbers. For example, when probed on her response of “50” one woman stated, “Oh that just came off the top of my head. But I know I know more than 50 people. (laughs) That just popped up. But I’m quite sure I know more than that.”

When formulating their response, respondents considered different factors and adhered to different aspects of the question. Most respondents adhered to the “people you are close to” clause when answering. For most respondents this included family members. However, this did not mean that respondents’ overall networks were mostly made up of family members. In only two cases did respondents think about family members only and in only three cases did respondents mostly consider family members. One respondent included only friends in her overall network, and two respondents included mostly friends. Respondents included different combinations of friends, family members, sexual partners, coworkers, employers, “associates” or “acquaintances,” neighbors, members of the community, or more generally, people they were “close to.” When probed on their interpretation of the term “close to,” respondents gave different interpretations of this term. Respondents most often described people they were close to as people who they give and receive support from, people they trust, and people with whom they socialize. A couple of respondents also interpreted “close to” as meaning they were compatible with the other person and one person interpreted as meaning someone who whom they had formed emotional ties.

However, some did not adhere to “close to” when providing a response to this question. One respondent indicated that she had moved to Washington, DC recently and there is no one in Washington, DC to whom she feels close. In her response to this question she included neighbors she has met since moving to the city and administrators to schools she is applying to. Another respondent discussed during probing how he included people in his overall network who he doesn’t know by first name and is not close to, but they are people who work in his community and he will say ‘hi’ to them out of respect.

Respondents were not consistently probed on whether their response included sex partners. However, we were able to determine that in six cases respondents included current sex partners in their response and in three cases respondents did not include current sex partners. In one case where a respondent excluded his sex partners from his response, this was done so because he did not realize he should include them. Upon probing he said “I just thought we were talking about friends. I probably got two friends who come over...” He was referring to two women he has sex with. Another respondent lives with his girlfriend, but he did not include her in his response to this question. It was not clear from probing why he excluded her. Finally, the third respondent, who excluded his sex partner when answering this question, did so intentionally. When asked why he did not include her he stated, “We’re not close. She’s just somebody to have sex with.” Although we don’t know for sure if other respondents included or excluded their current sex partners in their response to this question, we do know that all but one man and one woman who received the HET questionnaire has not had sex in the past 12 months.

One respondent included deceased persons and incarcerated persons in his response. This same respondent mentioned during probing that he was not sure if all the persons he included in his response even still lived in the Washington, DC area. These people probably should have been excluded from this response. One respondent mentioned in probing on N2a that she also has friends from church but she hasn’t seen them in a while because she started working Sundays. She did not include them in N2a, but it seems like they should have been included in this question.

While most respondents adhered to the clause “at least 18 years old,” some respondents did not and one respondent only included people who were 18 years old or close to that age, as he misinterpreted the clause. Respondents who did not adhere to this clause often included family members who were younger than 18. This could include children, grandchildren, nieces and nephews. However, one respondent considered the young people he knows in his community, such as the children in his neighborhood. In some cases this significantly affected the number of people they reported in their overall networks. For example, one respondent who included children under 18 stated that these children made up a full 1/3 of the respondents’ network size. Women were slightly more likely than men to include people under 18 years old in their response.

One respondent who misinterpreted the meaning of this clause and therefore only reported on people he knows that are close to 18 years old. Upon hearing this question for the first time this respondent stated, “Who are at least 18 years old? Oh, my nephew. He’s 19. That’s close.” In response to the follow up question (N1b) he stated, “18 years old? I’d say like two.” He was referring to a coworker and his nephew who are both 18. When asked if he only considered people who were 18 when answering (or around this age) he replied, “You want other ages? Older? I have other buddies. It kept saying 18, so I figured you wanted someone young or something like that.” He thought we were looking for someone around that age. Note, another respondent experienced a similar problem with this clause; however this did not lead to response error until question N2a.

Most respondents considered only people they knew in the project area when answering this question. However, three respondents included people in their overall networks who lived outside of the Washington DC metro area, including places such as North Carolina and Richmond, VA. Another respondent indicated that he did not know if all of the people he included in his response still reside in Washington, DC. Respondents who did include people

who lived in the project area, did not all interpret “Washington, DC” in the same way. About half of the respondents reported members of their network who lived within the city of Washington DC, while about half of the respondents reported on members of their network who lived in the greater Washington, DC area. Interestingly, one respondent included family members who live in Alexandria City and Fairfax County VA, which are part of the Washington, DC MSA, but excluded a friend who lives in Reston, VA, which he doesn’t consider to be part of the Washington DC metropolitan area. However, Reston, VA is in Fairfax County, (the same county his family members live in) which is part of the Washington, DC MSA.

Because of these problems identified above, respondents erroneously excluded individuals from their overall networks. For example, because a couple of respondents did not interpret “Washington, DC” to include all the counties identified under the Washington, DC MSA, they only answered based on people he knows who live in the city of Washington, DC. “When you said DC I was just thinking of DC, DC, which is the state of DC. But if you said DC area, you know, I know a lot of people in Virginia. I know people in Maryland. You know, most of my friends are in Maryland.” As mentioned above a couple of respondents excluded sexual partners because they were adhering to particular parts of the question, such as “friends” or “people you are close to” and did not consider them when answering. In one case of a respondent who did not understand the clause “at least 18 years old” only included people who were 18 years old.

Because respondents interpreted aspects of this question in unintended ways, these problems were carried over into their responses to the subsequent questions. For example, respondents included more people than they should have in their response to N1 (e.g., people under 18, people who are deceased, not living in MSA, or particular groups of people like sex partners, friends, or family members), and this had implications for their responses to subsequent questions. Conversely, respondents excluded people they knew in their response to N1, and in some cases these people were not included in their responses to subsequent questions. Although, as mentioned above, some respondents would recall people they forgot to include in N1 in later questions.

Finally, respondents also considered additional or different people as they moved through this series of questions. In some cases this is because they did not recall these people until later questions. As in the case of the woman mentioned above who discussed having friends from church that she has not seen in the past 30 days when probed on question N2a, however, she did not mention friends in probing on question N1. In some cases, this problem appeared result from the nature of the questions themselves. For example, when asked about the ethnicity and race of people they know in questions N4 and N5a-c respondents would sometimes recall individuals they know, who are Hispanic, white or another race, such as Asian, that they didn’t think about when answering this question. In other cases it was not always clear why they shifted who they considered as they moved through the series of questions.

If R reported Overall network size of 0:

N1a: You said you don’t have ANY friends, relatives or people you are close to who are at least 18 years old and live in [**insert project area**]. Is this correct?

No respondents received this question.

If R reported Overall network size of 1-3:

N1b: Do you have ANY OTHER friends, relatives or people you are close to who are at least 18 years old and live in *[insert project area]*?

Three respondents received this question. Two of these respondents answered “no” to this question and were not probed on their response. One respondent answered “yes” and reported an additional two people. When first asked this question this respondent replied, “18 years old? I’d say about two.” This respondent also misinterpreted the clause “at least 18 years old” in N1. Instead of thinking of people he knows who are at least 18 years old, he considered people who were 18 years old or at least close to that age. When asked this question he thought of his coworker who is 18 years old and his nephew who is 19. He described his relationship to both of these men as close. By close he meant they socialize together and he offers them support and advice. He did not think of these two men when he answered N1 but it was not clear why. When probed to see if he knew anyone older than 18 he said he did, but he only included people who were 18 or close to this age in his response. When asked why he said, “Because it said 18. I figured you wanted someone around that age.”

For Rs with Overall network size > 1 ask:

N2a. Of those _____ *[insert number from N1]* people, how many have you seen at least once in the past 30 days?

[Refused= 7777, Don’t Know= 9999] _____

Twenty-three respondents received this question and 22 of these respondents were probed on their response. The majority of respondents provided estimates when answering. Respondents most often included family members, followed by friends, neighbors, coworkers, and sex partners in their recent networks. There were several instances where respondents erroneously excluded people from their recent networks, and in some cases included people they should not have included, and in one case a respondent included a person who was not included in his overall network. In some cases invalid exclusion and inclusion of people in their recent network was caused by response error in the previous question. In other cases it was not clear why respondents did not include these people. Finally, some respondents indicated that who they included in their response to this question could vary by the time of year or by their level of social activity in a given month. These findings are discussed in more detail below.

As mentioned above the vast majority of respondents provided an estimate when answering this question. Among respondents who provided an estimate, responses ranged greatly from 3 to 1200 people. In a couple of cases respondents mentioned that they know they haven’t seen everyone they know in the past 30 days, so they provided a number smaller than their overall network size. In two cases respondents provided estimates but then when probed could

identify specific people to justify their response. However, in both of these cases respondents went on to discuss others that they had erroneously excluded from their response. One respondent attempted to count how many people he knows and has seen in the last 30 days but when this proved to be too difficult he provided an estimate. Six respondents did provide an exact count of the number of people they know and have seen in the past 30 days. As in N1, among respondents who provided a count, responses were no larger than five. In two cases where respondents provided counts they went on to discuss people they had not included in their response. This provides evidence to suggest that an exact count may not be better than an estimate.

Respondents thought of family members most often when providing a response, followed by friends. Respondents also considered coworkers, neighbors, sex partners, and more generally members of their community. Two respondents indicated that they were including only people they were close to when answering this question.

Respondents also used other strategies to formulate their response, such as, recalling different activities they have done in the past month and who participated in those activities with them or they recalled the people they see on a regular basis. For example one respondent reported an overall network of 1,000 people and a recent network of 250 people. When asked how he calculated his response to this question he said,

Because of that thousand people that 250 are individuals that I see on a constant, continual, consistent basis, at a minimum once or twice a month. And that's not even immediate family. That's people who I have developed a rapport and a relationship with who are possible coworkers, colleagues, friends, other family members, and I have a vast network of what you call, everybody has a surrogate family...I deal more with my surrogate family than I do my biological family.

Some respondents included persons they should not have in their response to this question. This occurred for a number of reasons. First, some reporting problems carried over from question N1 to this question. For example, most respondents who included people who were younger than 18 years old in N1, continued to do so here. Some respondents also included people in their response to this question that they should not have. A couple of people indicated that they included people who they have talked on the phone with but have not seen in person in the last 30 days. If respondents should exclude people they have only spoken on the phone with this should be made clear. In fact one respondent did ask for clarification during the interview. Two respondents also included people who they were not close in their response. In one of these cases, the respondent indicated that she is new to the Washington, DC area and there is no one that she has met since moving here that she considers herself to be "close to." The other respondent included people who he doesn't know by name but recognizes their face. "I run into people and a lot of times I swear to God people come up and say 'hey man...'" and we talk for about five minutes and I swear to God I don't have a clue where I met these people. But I recognize the face. I'm blank." As with respondents who excluded people from their response because of how they interpreted "Washington, DC," it's likely people continued to include people who live outside of the Washington, DC MSA in their response to this question.

Additionally, some respondents erroneously excluded friends or sex partners from question N1, and therefore excluded these people in their response to this question as well. For

example, one respondent forgot to include members of his church in question N1 and this question, and reported a recent network size of 30. When probed on this question he then recalled these people. “Oh! I forgot church. I go to church every Sunday. And we have about, I guess it’s about... gosh, I don’t know. I’d have to say about maybe 20-30 people.” When asked if he is close to these 20-30 people he said yes and wanted to include them in his recent network.

Yeah, I feel pretty close to them.... I forgot about church. I go there every Sunday.... I play at church... and they really embrace my playing, accepted my playing, the way I play. And that in itself is almost like, I look at playing music like an intimate thing... it’s like I’m bearing my soul and they’re just such sweet people.

One respondent could not recall how he answered this question when he was probed on his response and he wanted to change his response from 30 to 60. When probed on this question he said “I said all of them. I would estimate all of them.” When reminded that he indicated earlier that he has seen half of his overall network size he then said, “You could say half. Because some of them I may see twice a day depending on where we at and the rest of them I probably wouldn’t. So half is probably a good answer for that... it depends on the weeks, and the people, and the circumstance. So 30 would be right. It would be a real fair estimate.”

Finally, a couple of respondents mentioned that their response to this question could change on a weekly or monthly basis depending on the time of year and/or their activity level. In at least one case this led to response error. One respondent reported that he had seen 1,200 people he knows in the past 30 days. He came up with this answer because he recalled a party he hosted for his mother and mother-in-law in which there were between 800-1,000 guests. However, this party occurred outside of the reference period (two months prior to the interview). Similarly, another respondent formulated her response to this question by recalling a Christmas party she had thrown and how many guests she invited. Although the exact date of this party was not probed on, it is likely that this party occurred outside of the 30 day reference period. Two other respondents mentioned during the interview that the weather has been cold in Washington, DC and people, including themselves, are not out and about as much. Therefore they haven’t seen as many people as they would when the weather is warmer. Additionally, a couple of respondents reported that they were currently out of work and when they are working they see more people on a regular basis.

For Rs with Overall network size= 1 ask:

N2b. Have you seen this person at least once in the past 30 days?

- No..... 0 Go to Sexual Behavior Section
- Yes..... 1 Go to N6a.
- Refused to answer..... 7 Go to Sexual Behavior Section
- Don't know..... 9 Go to Sexual Behavior Section

One respondent received this question during the evaluation. During the administration of question N1 this respondent indicated that he was thinking of his “my mother” when answering, and in probing on question N1 he confirmed that he was thinking about his mother when answering. However, in probing on this question he said he was thinking of a woman with whom he had sex earlier that week. It was not clear why he began thinking of this woman during probing or if he was truly thinking of her when answering. When probed on the nature of his relationship to this woman he indicated that he is not close to her, and that she is someone with whom he strictly has sex and no other relationship. The term “close to” meant to him someone he could trust and rely on. He did confirm that he has seen his mother in the past 30 days. He goes over her house frequently. It’s not clear why this respondent shifted who he considered in this question, but clearly there is response error occurring.

If R reported Recent network size of 0 ask:

N2c: You said you don’t have ANY friends, relatives or people you are close to who are at least 18 years old, live in *[insert project area]*, and you have seen in the past 30 days. Is this correct?

No respondents received this question.

If R reported Recent network size of 1-3 ask:

N2d: Do you have ANY OTHER friends, relatives or people you are close to who are at least 18 years old, live in *[insert project area]*, and you have seen in the past 30 days?

Six respondents received this question during testing. One respondent was not administered this question due to interviewer error. Five of six respondents who received this question answered “no” and one answered “yes.” Four of the respondents who answered “no” were not probed on their response. Although this question is designed to prompt respondents to see if they can recall any additional people in their network, it did not work very effectively during question administration.

As mentioned above, one respondent reported a network size smaller than three, and then answered “no” to this question. This respondent later recognized his error in excluding people who were older than 18 in his response to N1 and N2a but not until he was probed on this question. Therefore during probing on this question he talked about having seen three of his seven “buddies” who are around the same age as him (50s) in the past month. These are all male friends. When probed to see if he had seen any women that he knew in the past 30 days he asked “you want women too?” It’s not clear why he was only thinking of men at this point, particularly after having talked about his sister, mother, and female friends in probing on question N1, and given the fact that he lives with a female relative.

The respondent who answered “yes” to this question initially answered “yes” to this question but when probed he said that he was thinking of people that he knows but he does not

hang out with or socialize with. He said these are people who he might see on his way to the bus stop. These are not people he feels close to. This respondent was then read question N2a again and he stated that he would like to stick with his original answer – that he has seen three people that he knows in the past 30 days – which consist of people he is friends with and considers himself close to. Without this further probing though this might not have been evident.

N3a. Of the _____ *[insert number from N2a]* people that you have seen in the past 30 days, how many are male?

[Refused= 7777, Don't Know= 9999] ____ _

Twenty-two respondents received this question. Upon hearing this question most respondents realized that they would need to break down their recent network by gender. Therefore, many respondents understood that the answers they provided to questions N3a and N3b should sum up to their response given for N2a. Often the numbers they provided in both N3a and N3b were estimates and respondents were often strategic about their reporting. One strategy was to consider that they know more females than males or conversely that they know more males than females and report estimates correspondingly. Similarly some respondents thought about the activities they engaged in over the past month and how many men and women participated in these activities with them, and then provided estimates based on that logic. Another strategy for respondents who were able to count up how many men or women they know and report that number in either question N3a or N3b and then simply subtract the rest and report that number for the corresponding question. In terms of calculating their response to this question respondents were fairly evenly split in terms of those who estimated and those who provided an exact count. This is because some respondents who estimated when answering question N2a, thought about specific men they knew here and counted them up to answer this question. Then on question N3b they provided an estimate or subtracted the remaining number of people they reported in N2a. While in most cases respondents understood that their responses to this question and the next should add up to the number of people in their recent network size. Examples of this are provided in findings from question N3b. Furthermore, although it was clear to some respondents that their numbers should add up, they flip flopped their numbers between question administration and probing of N3a and N3b. For example one respondent, with a recent network size of three people, answered “two” to question N3a and “one” to question N2a. However, during probing he reversed his answers and said that these three people consisted on one male and two females. It was not clear why this respondent reversed his response to these questions.

Other cases of response error were also found. For example, one respondent did not adhere to the number indicated in the question (his recent network size) and ended up reporting more people in this question than he did in question N2a. This respondent did not consider the number he reported for his recent network size (40) and instead consider how many males and females he knows in his overall network size (60). Furthermore, when he considered the people in his overall network size he thought of teenagers only despite discussing family, friends and neighbors who are at least 18 years old or older in questions N1 and N2a. When he was first

asked this question he said, “Maybe about 40 of them. I know more teenage boys than girls. I’m going to say about 40 out of the 60.” The interviewer then repeated the question and he said “Oh, okay all of them.” In the follow up question to this (N3a1) he answered “yes.” However, during probing he said that most of the people he knows are male. When asked why he reported on teenagers initially in this question he said “mostly because you said 18.” Not only is he excluding friends and family members who are women, but he is also excluding his wife and the woman he lives with, all of whom he has seen in the last 30 days.

The same problems exhibited in prior questions occurred here – respondents including people in their responses that they had not included in the prior questions. Some respondents also excluded people in their response to this question who should have been included. In most cases this was the result of not including these people in their responses to previous questions.

If N3a = N2a,

SAY: “So, all the friends, relatives, or people you are close to who are at least 18 years old, who live in *[insert project area]* and you have seen in the past 30 days are male?”

Two respondents received this question and two answered “yes.” One respondent answered question N3a incorrectly and thus was filtered into this question. However, in this question he continued to report incorrectly. When probed on this he maintained that he answered this way because he has seen more men than women that he knows in the past 30 days. The other respondent who received this question also misreported in question N3a and in this question. In question N3a this respondent answered based on how many men and women she knows overall (20 total) not how many men and women are in her recent network (10 total). Therefore when she was administered N3a she stated “10” and was then asked this question. However, instead of prompting her to realize that she was reporting that all members of her recent network were male she replied, “Yes and the other 10 are female.” Even after the interviewer explicitly pointed out to her that question N1 asked how many people she knows in Washington DC, and then question N2a asked of the people she knows how many she has seen in the past 30 days, and then question N3a asked of those people how many are male, she still didn’t understand her error. In the end what she wanted to report was about half the people she knows and has seen in the past 30 days are male and half are female. To make matters worse, in probing on question N3a she discussed people that she knows that she had not previously mentioned in questions N1 or N2a and which increased her overall and recent network sizes.

N3b. Of the _____ *[insert number from N2a]* people that you have seen in the past 30 days, how many are female?

[Refused= 7777, Don’t Know= 9999] _____

Twenty respondents received this question. One respondent was not administered this question due to interviewer error. As mentioned above, most respondents understood that their responses to questions N3a and N3b should sum up to the response they gave to question N2a, and respondents were strategic in how they got to this sum – some would consider that they know more of one sex and report a higher estimate for that one sex and a lower estimate for the other sex that would sum up to their response to question N2a or they would count up the number of men or women they knew and simply subtract that number from the number of people they reported in question N2a to provide a response to the corresponding question. However, problems that led to response error in the previous questions carried over into this question, producing invalid responses to questions N3a and N3b.

Some respondents could make their response to question N3a and this question sum up to their response to N2a but admittedly they were not accurate. For example one woman gave initial responses to this series of questions that appeared valid. However, during probing she realized that she mistakenly excluded people she should have included in her recent network count. Therefore, during probing on this question she reported that the number of females in her recent network size should have been higher.

Similarly another respondent provided responses that all appeared valid and summed up to his recent network size across this series of questions. However, upon probing he continued to think of more and more people as the probing of these questions continued, and who he considered changed across questions. Although all his responses were estimates it appears those estimates should have been significantly higher than what he originally reported for all questions.

One woman who did understand that her numbers should add up, however she did not report them in a way that would sum up to the number she reported in N2a. Upon hearing N3a she reported that $\frac{3}{4}$ of the people she knows and has seen in the past 30 days are male. She said $\frac{3}{4}$ because generally she knows more men than women. “Three fourths are male. Whatever $\frac{3}{4}$ of 50 is. I’m not good at math.” Then when asked N3a she stated “vice versa of the $\frac{3}{4}$, $\frac{1}{3}$.”

Similarly another respondent who had a recent network size of 275 answered “175” to question N3a because he knows and sees more men than women on a regular basis. However, then when he answered question N3b he said “125, 140 something like that.”

As mentioned above some respondents did not realize that their answers to questions N3a and N3b should sum up to their answer for N2a until after they answered N3a. Because she initially gave estimates, and it appears not very accurate estimates, when she was asked to break these estimates down and report the gender, race and ethnicity of these people the error in her reporting became more apparent. Upon hearing this question for the first time one respondent who reported a recent network size of 20 and indicated in 3a that 11 of these 20 are male, (realized she knows more than the number she would have to report for this answer to seem logical) stated “well it should be more. Well it’s more than- well okay nine because I said two but it’s a little more (laughing).” During probing this respondent indicated that her response to this question should have been around 22. As we talked about these questions she realized that she has seen more than 20 people in the last 30 days. Regarding that 20 she said “that’s just a number that popped in my mind for some reason. Because I didn’t know there was going to be a breakdown.” She said she is close to and has seen about 50 people in the past 3 months.

In another case, the respondent counted up the number of men she knows when answering N3a and then counted up the number of women she knows when asked question N3b. In both questions she included people that she had not reported on in question N2a and thus the sum of N3a and N3b was larger than the number she reported in N2a.

As mentioned in the discussion of question N3a, one respondent flipped his response to questions N3a and N3b between question administration and probing. When probed he said his recent network consisted of 1 male and 2 females. Furthermore, in answering question N2a he excluded his cousin who is a female from his response and thus did not include her in his response to this question.

Similarly, another respondent whose network consisted of three people reported that two of these people are male in question N3a and one of these people was female in question N3b. However, during probing he discussed in questions N2a how these people he was referencing were three males that he knows from his homeless shelter and never mentioned a woman that he knows from the homeless shelter. The first time she was mentioned or accounted for was in question N3b. Furthermore, in question N2a this respondent excluded coworkers in his response. Presumably some of these workers may be female.

N4. Of the ___ *[insert number from N2a]* people that you have seen in the past 30 days, how many are Latino or Hispanic?

[Refused= 7777, Don't Know= 9999] ___ ___ ___

Twenty-two respondents received this question. Eighteen respondents answered “none” to this question. Most people included family members in their recent network and when asked how they know none of these people are Hispanic they indicated that they just know because they are family. Similarly, others who included friends, neighbors or other people they are close to in their recent network stated things that indicated that they just know these people are not Hispanic, but couldn't give a definitive reason as to how they know. A few people did mention things like they have had discussion with family members or friends about race and ethnicity and therefore they know these people's race(s) and ethnicities. In a couple of cases respondents indicated this was because the person did not self identify as Hispanic.

In some cases although the person was of Hispanic origin they did not self-identify as such and thus the respondent did not report them as Hispanic. For example, one respondent reported that no one in his recent network is Hispanic. However, during probing he discussed two of his cousins (who he included in his recent network despite the fact that they live outside of the Washington, DC MSA) who are Hispanic and African American. He did not categorize them as Hispanic because they do not identify this way.

I'm assuming that they're not Latino or Hispanic. I mean I have two cousins myself that come up from North Carolina they have Spanish in their blood but they're considered black. They're last name is [Name of Hispanic origin]. Their father was Puerto Rican. But they consider- when they fill out their taxes out and they ask they, you know, 'are you Spanish or African American?' they going to say African American.

He said they never identify as Hispanic. He then went on to make an interesting point about assumptions regarding race and how we as a society categorize people.

I don't know if this is a myth or a fact. But most- because of what I heard, I don't know if it's a myth or a fact, but I believe that if you and I were to have a kid and you're Caucasian or whatever, the kid would be considered African American because they say the African American genes are stronger than any other gene. So that child would be considered African American. I don't know how true that is, but that might be the reason why my cousins don't consider themselves Puerto Rican.

Four respondents indicated that members of their recent network were Hispanic when answering this question. In two of these cases respondents thought of specific people in their networks who they perceive as Hispanic. In one case the respondent perceives this person to be Hispanic because of the person's accent. In another case, the respondent bases his perception on more indicators of Hispanic ethnicity, including the person's skin color, hair type, features, language they speak, their accent, and their names. In the other two cases the respondents provide estimates for how many people in their networks are Hispanic. In one case the respondent's reports on people that he included in his response to N3a, but not N2a or N1. In another case the respondent does not include people that he is close to who are Hispanic, but rather considers people he knows who are Hispanic. Subsequently these people were not included in his response to any of the preceding network questions.

A couple of respondents excluded people from their response that they should have included. In one case a respondent has friends who are Hispanic, and that she has seen in the past 30 days. However, because she interpreted "Washington DC" to mean the city of Washington, DC and these friends live in Arlington, VA she did not include them in her response to this series of questions. Another respondent did not include neighbors in her initial response to these questions, however, upon probing she wanted to include them. She indicated in probing on this question that one of her neighbors may be of Hispanic origin. She thinks this because this neighbor speaks Spanish and she has features that are characteristic of Hispanic people. However, she did indicate that she is not 100% certain that this person is Hispanic.

SAY: Now I would like for you to think about the *[insert N2a – N4]* people that you have seen in the past 30 days but who are not Latino or Hispanic. What are their racial backgrounds? That is...

N5a. How many are Black or African American? [*Refused= 7777, Don't Know= 9999*]

N5b. How many are white? [*Refused= 7777, Don't Know= 9999*]

N5c. How many are another race? [*Refused= 7777, Don't Know= 9999*]

Twenty-one respondents received this question. This question was not administered correctly and this case is not included in the analyses. All but one respondent were probed on

their response to this question. Respondents used different strategies to answer this question. Some respondents estimated and other counted how many people in their recent networks were black, white or another race. Most respondents reported that all the people in their recent networks were African American. When answering this question, a few respondents recalled people who they had not mentioned in the preceding question. As in question N4 it appeared by being asked if anyone in their recent network is white or another race, these respondents were primed to recall people they know who are white or another race. These findings are discussed in more detail below.

Respondents used different strategies to formulate this response to these questions. Similar to the strategies respondents used to answer question N3a and N3b, some respondents estimated what percentage of the people in their recent network were African American or white and then produced responses to these questions based on those percentages. In other cases respondents counted how many people they knew who were white and then subtracted that number from the number of people in their overall network size to determine how many are black.

Many respondents indicated that everyone in their recent network is African American. Following African American, white was the most common race of people in respondents' recent networks. Several respondents indicated that most of their recent network is African American. In terms of another race, respondents included people who are biracial, Asian, Trinidadian, Black & Hispanic.

One respondent did have a question on who to include in "another race." When first asked question 5a he answered "all of them," for question 5b and 5c he then answered "none of them." However, after answering 5c he asked "Does light skin count?" The interviewer asked him what he thought and he replied, "They're black. They're just light skinned. They're lighter than me."

Most people said that there was no one in their recent network that is biracial. In a couple of cases it appeared as people in their recent networks could be classified as biracial, however respondents did not classify them this way. In both cases these respondents indicated that these people did not self-identify as biracial, and this is why they did not classify them this way. For example, one respondent, who had a recent network of two people, indicated that both of these people are black when answering question N5a. However, during probing he revealed that one of these people is biracial- white and black.

He was adopted when he was like six months old. He's half African American and he's I believe part German or something. He's like, you can tell I mean by kind of looking at him. Sometimes people get him mixed up, ask him if he's Latino or something because they can't tell what he is. A lot of people ask, stop him on the street, 'are you this or are you that?' He always [says he is] African American. He's always related to that. He's always every application filled out or test he took he's always put African American... If you identify him any other way he gets upset.

When asked how they knew the race of the people in their recent network respondents gave different reasons. For people who answered for family members the most common reason was because they're family. When answering for friends, respondents often said they either "just

know,” or they know they person’s parents or family and/or they grew up with them so they know their race. Another common reason given was because that how the person self identifies. Others recognized characteristics the person possess as marking them as a particular race. This included things like skin color, appearance, and one person explained that the people in his network are “like” him. Therefore he labels them the same race he is. A few admitted that these were just assumptions that they made about the people in their network.

For the most part, respondents appeared to adhere to the part of the question which asks about people who they know and have seen in past 30 days when answering this question. In some cases respondents did not include people who they identified in question N1, who are black, white, or another race, because they have not seen them in the past 30 days.

When answering this question, a few respondents recalled people who they had not mentioned in the preceding question. As in question N4 it appeared by being asked if anyone in their recent network is white or another race, these respondents were primed to recall people they know who are white or another race. In some cases these are people they are close to and should have been included in their response to previous questions. For example, one respondent, who reported a recent network of 20 people, answered “Basically all of them” to question 5a. However, when asked question 5b she said “I know four white people.” During probing she revealed that she did not include these four white people when answering N2a, however she recalled them upon hearing this question and thought they should be included in her recent network as they have been to her home for social visits in the past 30 days. For other respondents this may not have been the case.

In one case a respondent recalled people he knew who are white, that he had not included in his responses to the preceding questions and did not consider himself close to. As mentioned in the summary of these questions above, one respondent, when asked question N5b indicated that he knows 10 white people, which include his social worker, his primary care physician, his psychologist, and his pharmacist. This may also be the case for one other respondent who gave responses to questions N4 and N5a-c did not add up to the response he gave to N2a, despite the fact that the question provides him with the number of people he reported in his recent network. This respondent reported in N2a a recent network size of 1,200. However, in question N4 he reported that none of these people are Hispanic and in N5a-c he reported that 1,200 are black, 20-22 are white and none are another race. During probing this respondent did not recognize his error and instead talked about how most of the people he knows are black and “a very small percentage” of the people he knows and has seen in the past 30 days are white.

In some cases respondents answers to N4 and N5a-c do sum up to the response they gave to N2a, however, it was clear that there was error in their response. In some cases this was because these respondents had erroneously excluded people from their recent network at question N2a and this error is carried over into their response to this question and thus they are not accounted for in this question.

In other cases, respondents misclassified the race of the people in their network. For example, one respondent identified two people in her recent network as “another race” because they are biracial; however she excludes her mother from this number even though she discussed how her mother is biracial in the interview. It was not clear why she did not identify her mother as biracial.

N6a. Is this person male or female?

- Male..... 1
- Female..... 2
- Refused to answer..... 7
- Don't know..... 9

Two people received this question. One respondent answered “female” and one respondent answered “male”. When the first respondent was probed on his response to this question he could not recall who he was thinking of when answered “female.” In the administration of question N1 he said his mother is the only person he is close to and lives in Washington, DC. However, during probing on question N2b he said he was answering about a recent sex partner who is female. It’s not clear why he shifted who he was considering but it appears there is some response error occurring across this series of questions. The other respondent, who answered “male,” also provided invalid responses. In question N1 this respondent only answered about people he knows who are 18 years old because he misinterpreted the clause “at least 18 years old.” In N2a he answered “one,” indicating that he had only seen one of the three 18 year olds he knows in the last 30 days. This was incorrect. In actuality he had seen all three in the past 30 days. It’s likely that response error occurring as a result of different comprehension problems is occurring across preceding questions, which is causing response error in this question.

N6b. Is this person Latino or Hispanic?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Two respondents received this question. Both of these respondents answered “no” to this question. Again because of the errors in reporting cited above these two respondents’ answers to this question were also invalid. However, these respondents both indicated that none of the people in their recent networks are Hispanic.

N6c. Is *[if N2b = 1, insert “this person”; if N2a > 1, insert “the person who is not Latino or Hispanic”]* Black, white, or another race?

- Black..... 1
- White..... 2
- Another race..... 3

Refused to answer..... 7

Don't know..... 9

Two respondents received this question. They both answered that the person in their recent network was black. Again because of the errors in reporting cited above these two respondents' answers to this question were also invalid. However, these respondents both indicated that none of the people in their recent networks are African American.

SEXUAL BEHAVIORS

SAY: The next question is about having sex. Please remember your answers will be kept private. I need to ask you all the questions, even if some may not apply to your situation.

For this question, oral sex means mouth on the vagina or penis; vaginal sex means penis in the vagina; and anal sex means penis in the anus (butt).

If E7=2 (if participant is female), skip to S2.

S1. In the past 12 months, that is, since *[interview month]* of last year, with how many different women have you had oral, vaginal, or anal sex?

___ ___ ___ ___ *[Refused = 7777, Don't know = 9999]*

Fourteen respondents received this question during the evaluation and 12 were probed on their response. For some respondents this question was easy to answer as they understood the terms used in the question and they had one or two female sexual partners in the past year. However, for some respondents this was not an easy to question to answer as they did not understand the terms and/or the intent of the question. One respondent also had difficulty formulating a response and ended up providing an estimate. These findings are discussed in more detail below.

As in question E8, some respondents did not understand the terms used in this question despite being provided a definition prior to hearing the question. One respondent, upon hearing this question for the first time, asked "what's oral" This same respondent had asked "what's vaginal" upon hearing question E8. He ended up answering both questions after hearing the definition a second time. During probing on this question he indicated that he all kinds of sex with one woman in the past year. So it appears that his response may be valid despite his comprehension problems. Another respondent replied to this question "What's the one with the vagina? It's really just one," After hearing the definition a second time, this respondent replied, "Oral, vaginal, or anal sex... the sex in the vagina. Which one is that?" After the interviewer

indicated that that was vaginal sex he confirmed that he has only had vaginal sex with one person in the past year. However, it was not clear if he had oral or anal sex with other women. Another respondent answered this question “None. No oral sex, no anal sex.” The interviewer then asked him if had vaginal sex, to which he replied “oh yeah.” Then during probing when he was asked this question again he answered “none.” The interviewer then asked him if he had any kind of sex in the past 12 months, to which he replied “I had vaginal.” He indicated that he had vaginal sex with two women in the past 12 months. Another respondent seemed to answer this question with no problems, however upon probing it was revealed that he didn’t know what anal sex was. During probing, he indicated that he had vaginal and oral sex with the three women he included in his response. However, when probed on whether he had anal sex with these or any other women he asked, “When you’re doing it from the back or the vagina? What is it?” After hearing the definition a second time, he indicated that he has not had that kind of sex.

Finally, instead of providing a sum of how many women they have had oral, vaginal or anal sex with in the past year, some respondents provided a response for each type of sex. For example, one respondent replied to this question, “Let’s say two. Two for vaginal, one for oral, and none for anal.” One of these respondents only initially answered based on how many women he had oral sex with in the past 12 months. This respondent initially replied to this question, “No oral. Well at least one oral and at least... 1, 2, 3... at least three women. One or more oral.” The interviewer then read the question again and he replied, “one I had oral and vaginal and two just vaginal.” The interviewer then read the question for a third time and he replied, “three.”

S2. In the past 12 months, that is, since *<interview month>* of last year, with how many different men have you had oral, vaginal, or anal sex?
____ _ [Refused = 7777, Don't know = 9999]

Ten respondents received this question during the evaluation and seven of these respondents were probed on this question. One respondent did not receive this question due to interviewer error. The respondents who were probed on this question did not exhibit any of the comprehension problems that emerged in the evaluation of question S1. All of the respondents who were probed understood the terms in the question and considered all the types of sex when answering. However, one respondent, who answered “two” to this question, indicated during probing that one of these sexual partners was a woman. It’s not clear why she made this error.

DRUG USE HISTORY

Injection Drug Use

SAY: The next questions are about injection drug use. This means injecting drugs yourself or having someone who isn't a health care provider inject you. Please remember your answers will be kept private.

11. Have you ever in your life shot up or injected any drugs other than those prescribed for you? By shooting up, I mean anytime you might have used drugs with a needle, either by mainlining, skin popping, or muscling.

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

All 25 respondents received this question. Twenty respondents answered “no” and five answered “yes.” Fifteen of the 25 respondents were probed on their response. Eleven respondents answered this question before the interviewer had completed reading it. As a result, most of these respondents were never administered the definition of shooting up. This did not seem to affect their ability to answer the question. Respondents who answered “no” and were probed on their response confirmed that they had never injected any type of drug other than those prescribed to them. Some of these respondents knew others and have witnessed others injecting drugs, such as heroin but they themselves have never injected these drugs. Additionally, a few respondents, who answered “no” to this question, have used other types of illicit drugs but have never injected them. Three of the respondents who answered “yes” to this question were probed on their response. All three of these respondents are now sober but in the past had injected drugs such as heroin, cocaine and Bam.

12. When was the last time you injected any drug? That is, how many days or months or years ago did you last inject?

[Interviewer: If respondent answers today, enter “000” in # of Days field]

of Days: ___ ___ ___
 # of Months: ___ ___ ___
 # of Years: ___ ___ ___

[Refused = 777, Don't know = 999]

Five respondents received this question. Three of the five respondents did not provide a response in the correct format but instead they attempted to provide the year that they last injected drugs and this was not easy for them to recall. For example, one respondent answered this question, “Possibly about 1998 or 1999, maybe.” The interviewer instructed him to provide a number of years and he answered that it was 11 years ago. Similarly, another respondent answered “back in the 80s. Maybe 1988.” When probed on his response he said it could have been either 1998 or 1999. He wasn’t sure but he knows he stopped sometime in the 1980s. Another respondent’s (who also did not provide a response in the appropriate format) answer was off by several years. This respondent first responded to this question, “Oh, it was like 1980. I used intravenous drugs for recreation in the 1980s.” The interviewer then asked her if she would say it was 30 years ago and she said “I’d say about 30 years, yeah.” However, during probing she recalled that the last time she used intravenous drugs was before her

daughter was born, which was in 1977. Of the two respondents who provided a response in the correct format, one recalled in both question administration and probing that she has not injected drugs in six years. However, the other respondent first answered 17 years during the question administration and then wanted to change his response to 16 ½ years.

HIV TESTING

SAY: Now I'm going to ask you a few questions about getting tested for HIV. An HIV test checks whether someone has the virus that causes AIDS.

H1. Have you ever been tested for HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Twenty-four respondents received this question and 23 of these respondents were probed on this question. One respondent was inadvertently not administered this section of the questionnaire. Twenty-two respondents answered “yes,” and two respondents answered “no.” All respondents appeared to give valid responses to this question; however two respondents did not provide a response in the correct format. Despite this, these respondents were still able to provide a valid response to this question.

Respondents who answered “yes” had often been tested more than once. Several respondents indicated that they are tested regularly. That is, they are tested once a year, every 90 days, or every six months. Some respondents indicated that they have been tested several times in their lifetime. However, some respondents indicated that they have only been tested one or two times in their lifetime. Sometimes this test was part of a routine checkup, but more often respondents went to testing sites just to determine their status. Respondents were tested for HIV at various sites, including doctor’s offices, hospitals, on mobile testing units, in prison, at health departments, and one respondent was tested as part of a research study and another respondent was tested for admission to the Navy. Respondents reported having blood drawn for testing and using an OraQuick test to determine their status.

Two respondents answered “no” to this question. One of these respondents acknowledged that it is good to be tested and to know your status but despite this, he has never been tested. This respondent also commented that he always uses protection when he has sex and therefore thinks he is safe. Similarly, another respondent thinks that he is not at risk for HIV and therefore has not been tested. When probed on this question he said, “I never had a reason to... I’ve always played it safe but I figure I’m okay.” Interestingly this respondent also mentioned that he gets physicals every year and asks for the “full Monte” and this made him wonder if they tested him for HIV during these physicals and did not tell him. He said it was possible that he has been tested for HIV and doesn’t know it.

Two respondents did not initially provide a yes/no response to this question. Upon hearing this question for the first time, one respondent stated, “A couple of times. A lot of times actually.” The interviewer did not prompt this respondent to provide a yes/no response but selected “yes” for him. During probing this respondent indicated that he has been tested for HIV several times in the past when he participated in a research study on a vaccine for HIV. Another respondent initially answered this question “I have HIV.” The interviewer then read the question again and he responded “yes.” During probing he indicated that he was tested twice in the past at his doctor’s office and both tests came back positive.

H2. When did you have your most recent HIV test?

[77/7777 = Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

Twenty-two respondents received this question during testing. Two respondents answered “no” to question H1 and were skipped out of this question. One respondent was inadvertently not administered this section of the questionnaire. Responses ranged from thirty years prior to the interview to the month of the interview. Most respondents reported being tested for HIV within the past year. Nineteen respondents were probed on their response to this question. Some respondents had no difficulty recalling the month and year they were last tested for HIV. However, many respondents did have difficulty recalling this information and often provided an estimate. Additionally, many respondents did not provide a response in the correct format. Interviewers often had to then prompt respondents to report a month and year. These findings are discussed in more detail below.

Some respondents had no difficulty recalling when their last HIV test occurred. They could recall with no apparent difficulty the month and year of their last test. They could also recall the reason for the test. Often this was part of a routine physical. Respondents could recall going to their doctor’s office or hospitals to be tested and one respondent could easily recall being tested while incarcerated. Often respondents’ most recent test was done using an OraQuick test; however, some respondents reported having blood drawn for the test. Two respondents who were HIV positive also commented that they could easily recall the date they were last tested because that was when they found out they were HIV positive.

For many respondents, it was not easy to remember when they had their most recent HIV test. Some respondents could recall having their last HIV test and where it took place, but could not recall the exact date. Sometimes these respondents were tested within the past year, other times they were last tested several years prior to the interview. In these cases, respondents provided estimates of when these tests took place. For example, one respondent could recall that he was last tested on a mobile unit in his neighborhood and that it was still warm out when he was last tested but could not remember exactly what month it was. He thought it was either in August or September of 2010. He ultimately answered that it was in September of 2010. Another respondent could recall last being tested for HIV during his admission physical for the Navy. However, he couldn’t remember exactly when this was. When asked this question he stated, “Probably 2005... I would have to say probably August.” Having tested positive for HIV in the past did not always make it easy for respondents to recall when they were last tested. For example, one respondent, who was HIV positive, had difficulty recalling the month she was last

tested for HIV. She could recall that she was last tested in 1990 while she was incarcerated but could not recall the month. She could also recall the year she was first diagnosed, which was 1985, but she could not recall the month.

Many respondents did not provide a response in the correct format. In some cases the respondents could recall when they were last tested but did not realize this question was looking for a month and year. For example, one respondent, who was HIV negative, answered this question “last month.” When prompted to provide a month and year he said “December 2010.” Another respondent who was HIV positive answered “What is this 2011? 26 years ago.” When prompted to provide a month and year he said “May 1985.” However, several respondents had difficulty recalling when they were last tested and also did not realize this question was asking for a month and year. For example, upon hearing this question for the first time one respondent replied, “I think it’s been less than four months.” When prompted to provide a month and year she said, “I think it was around November of 2010.” Most respondents would provide a month and year when prompted to do so, even if it was not accurate. However, one respondent could recall the year but not the month she was tested. This respondent initially answered this question “In 1982, I think.” Even after being prompted to provide a month, she was unable to do so.

There was also a case of interviewer error found with this question. In one interview, the interviewer read the question and then instructed the respondent to provide a month and year when answering. This respondent was not probed on this question so it could not be determined how this affected his comprehension of and response to this question.

There was also one case of clear response error. This respondent, who was HIV positive, answered this question “two years ago.” When prompted to provide a month and year she stated “March 2003.” However, this respondent became very emotional when probed on these questions and the reason for the discrepancy in her answers was not determined.

Finally, two respondents who were HIV positive thought this was a strange question to be asked. Upon hearing this question for the first time she stated the following, “My most recent? The only one I’ve had was in March 1996.” During probing she indicated that she would never forget this date because it was when she found out she was positive but did think it was strange to be asked about her most recent test when she has only been tested one time. Another respondent, who is HIV positive, also thought it was odd to be asked about his most recent test when he was only tested twice when he was first diagnosed and has not been tested since. This respondent stated the following after hearing this question for the first time: “I already know I have it. I take medicines. I don’t have to test. I go to my doctor to get my checkup.” The interviewer then repeated the question and he said “I don’t remember when.” After thinking about it for some time he answered “2005, I think.” Then when prompted to provide a month as well he said, “I’m going to say my birthday. January. Because I already have it.” During probing he indicated that he was tested twice sometime in the 1980s and both tests confirmed that he was HIV positive. It was clear however that he could not recall the exact date.

H3. What was the result of your most recent HIV test? *[DO NOT Read choices, check only ONE.]*

- Negative..... 1
- Positive..... 2
- Never obtained results*..... 3

- Indeterminate..... 4
- Refused to answer..... 7
- Don't know..... 9

Twenty-two respondents were administered this question. Two respondents who answered “no” to question H1 were skipped out of this question and one respondent was inadvertently not administered this section of the instrument. Seventeen answered “negative” and five answered “positive.” All respondents had received the results from their last HIV test and no respondents had test results that were indeterminate. Eighteen respondents were probed on this question.

Respondents who answered “negative” typically were administered an OraQuick test to determine their status. Most of the respondents waited about 20 minutes to receive their results. Some respondents reported having blood drawn during their last HIV test.

In this round of testing, most respondents who tested positive understood this question as asking about the last test they had that confirmed their HIV status. These respondents reported that they were tested once or twice in the past to determine their HIV status and these tests came back positive. Two of these respondents indicated that they had a blood test done to determine their status but the other three respondents did not indicate the type of test that was used.

Two respondents did not provide a response in the correct format. It was not clear exactly why these respondents were not answering positive or negative. In one case the respondent did not appear to be thinking about the test where his HIV status was determined, but rather he appeared to be thinking about the last test he had to determine his viral loads. Upon hearing this question for the first time one respondent stated, “I’m protective. The body’s doing well.” He then discussed his T-cell count. The interviewer read the question again and he said “I’m protected. Good. Just put good on there. Put good on there.” The interviewer then read him the response options and he stated “Whichever one means that I have it, negative or positive. I don’t understand which one it is. All I know is I have it. Put it like that.” It was clear that this respondent did not know the terminology used to describe one’s status. So his difficulty in answering this question could have stemmed from one or both of these two issues. Not knowing the proper terminology to describe one’s HIV status may have also caused another respondent to provide a response in an inappropriate format. This respondent initially responded to this question “It came out normal... wasn’t nothing wrong with me.” However, because the interviewer then selected “negative” for the respondent and didn’t probe on her interpretation of this question, it cannot be determined why she did not provide a response in the correct format.

- H3a. Before your test in ___/___/___ [*insert date from H2*], did you ever test positive for HIV?
- No..... 0 *skip to Instructions before H10*
 - Yes..... 1
 - Refused to answer..... 7 *skip to Instructions before H10*

Don't know..... 9 *skip to Instructions before H10*
 No respondents received this question during this round of the evaluation.

Questions for participants who have ever tested HIV+

H4. Have you ever been seen by a doctor, nurse, or other health care provider for a medical evaluation or care related to your HIV infection?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

All five respondents who received this question answered “yes.” All but four of the respondents indicated during probing that they see a doctor regularly in relation to their HIV infection. One respondent indicated that she hasn’t seen a doctor since 2003. Respondents who go to the doctor regularly all reported that they were on medications to treat their HIV and they have regular blood work done to check things such as their CD4, viral loads, and their red and white blood cell counts.

H5. When did you first go to your health care provider after learning you had HIV?

[77/7777=*Refused*, 99/9999 = *Don't know*] (M M / Y Y Y Y)

Five respondents received this question and four were probed on their response. Only of the respondents probed had no difficulty comprehending this question and providing a valid response. A couple of respondents had difficulty comprehending the intent of this question. A couple of respondents did not comprehend the intent and a couple of respondents had difficulty recalling this information. These findings are discussed in more detail below.

As mentioned above, one respondent had no difficulty answering this question. This is because she could recall receiving first receiving care a month after being diagnosed, and she could easily recall the month and year she was first diagnosed. However, other respondents did have difficulty answering this question.

A couple of respondents had difficulty comprehending the intent of this question. One respondent was not sure if this question was asking about the first time he went to his current health care provider or when he first went for care after being diagnosed. Upon hearing this question for the first time, he asked, “The current healthcare provider I have now? At the present time I was in the penal system.” He explained that he was first diagnosed while in prison and he received care within the prison system. He did not receive care from his current health care provider until after he was released from prison. He ended up answering about the first time he

received any kind of care for his HIV, which was June 1985. Another respondent also appeared to have difficulty comprehending the intent of this question. Instead of providing the month and year she first received care for her HIV, she answered how often she received care. Upon hearing this question for the first time this respondent said, “I went there every six months. He wanted me to come-.” The interviewer then repeated the question and she said, “1995.” The interviewer then asked for a month and year and she said, “April the 12th at 9:30.” This respondent was not probed on her response so it is not clear why she initially had comprehension problems.

Other respondents did not have difficulty comprehending the intent of the question, but had difficulty recalling this information. For example, upon hearing this question for the first time, one respondent stated, “When I first found out I went. In January.” When the interviewer prompted the respondent to provide a month and year and he said, “I found out in January. So, I guess it was in January when I seen [sic] the doctor.” When the interviewer asked him again if he knew the year he first received care, he asked the interviewer what his response to question H2 was. He then added, “It’s been so long I don’t remember all that stuff.” He ultimately was not able to provide a response to this question, and the interviewer ended up selecting “don’t know”. Later during probing this same respondent indicated that he was first diagnosed and treated for his HIV in 1985. At some point after this he stopped receiving treatment and did not receive treatment again until 2005. This is important to note that his response to question H2 was “January 2005.” If the interviewer had applied his response to H2 to this question, it would have been response error. Another respondent seemed unsure of her response when she initially answered. The answer she first gave was “1987.” However during probing she revealed that she was not sure when she was first diagnosed. She was incarcerated from 1985 to 1994. She said she thought she was diagnosed either in 1985 or 1987 but then at a different point in the interview said she was first diagnosed in 1990. She also said when she received care in 1990 they would not prescribe medication to her and she did not receive medication until 1997. It’s not clear which date is accurate. It’s clear, however, that she was diagnosed while in prison, and she appeared to receive care for her HIV infection while in prison, but it’s not clear when this care actually began.

H6. When did you last go to your health care provider for HIV care?

[77/7777=*Refused*, 99/9999 = *Don't know*] (M M / Y Y Y Y)

Five respondents received this question and all five were probed on this question. Some respondents found this question easy to answer; however others had difficulty recalling this information.

Two respondents recalled that they last went to their doctor for HIV care in December of 2010, and one recalled that she last went to her doctor in November of 2010. For two of these respondents this was a routine appointment, where they had blood work done and received refills on their prescriptions. One respondent had a recurring infection that was related to the HIV infection and was experiencing some side effects from his HIV medications. He addressed these issues with his doctor at his last appointment.

Two respondents appeared to have some difficulty responding to this question. One respondent initially only provided the year she last saw her healthcare provider and not the month. She initially responded to this question, “2003. Because he said that it’s undetectable. He said that the medicine is working good.” The interviewer then asked her for a month and year and she said, “I can say March of 2003.” During probing she again indicated that she hasn’t seen her doctor since 2003, but he continues to refill her prescriptions for her. However, this same respondent indicated in question H2 that she had her most recent HIV test two years ago and then when asked for a month and year stated, “March of 2003.” This respondent gave inconsistent answers throughout the interview and it’s not clear how accurate any of her responses were. Finally, one respondent indicated that he doesn’t keep track of his doctor’s visits, yet he still provided a response to this question which appeared to be accurate. When asked this question he said “I just go. I don’t remember dates and stuff. I just went last month for my blood work and to see my doctor.” Also, during probing he indicated that he goes to the doctor every two months to have his blood work done.

H7. Are you currently taking antiretroviral medicines to treat your HIV infection?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

All five respondents received this question and all five respondents answered “yes.” All respondents were probed on this question. These respondents have all been taking antiretroviral medications to treat their HIV for a number of years. Respondents were either prescribed these medications at the time of diagnosis or sometime thereafter to treat the infection.

Three respondents were probed on the term “antiretroviral medicines” in this question. One woman who was probed on this term said this is a term her doctor and her pharmacy use when they talk about the medication she is prescribed to treat her HIV infection. Another woman also indicated that her doctor uses this term when referring to the medication she is prescribed to treat her HIV, however, she herself refers to these medications as her HIV meds and doesn’t like the term “antiretroviral medicines.” “I just call it my HIV meds. I mean it means the same thing. I mean I don’t know why they want to use these big old words when it’s just HIV medicine.” She said antiretroviral is a word her doctor uses a lot and she asks her not to use that word when speaking to her. “I told her I wish she wouldn’t do that because it confused me. I mean just tell me my HIV meds are at the pharmacy. Don’t be using all these big words on me. She uses these doctor terms. I’m not a doctor. I just like her to be blunt with me.” Similarly, another respondent indicated that he refers to the medication he is prescribed to treat his HIV as his “medicine” and doesn’t use the term antiretroviral medicines. Despite this, these both appeared to understand that this question was asking if they take medications to treat their HIV infection.

Pre- and Post-exposure Prophylaxis Questions for HIV+ participants

SAY: Researchers are studying whether antiretroviral medicines could possibly be taken to prevent HIV infection.

H8. Before today, have you ever heard of people who do not have HIV taking antiretroviral medicines, to keep from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Five respondents received this question. Two respondents answered “yes” and three respondents answered “no.” Three of these respondents were probed on this question. Two respondents interpreted the term “antiretroviral medicines” to be referring to the same medications they use to treat their HIV infection and thought this question was asking if they had heard of people taking these medications to prevent them from contracting HIV. However, one respondent interpreted this question as asking about a different type of medication used to prevent the contraction of HIV. That is, not the medication he takes to treat his HIV. These findings are discussed in more detail below.

One respondent, who answered “yes” to this question, knows several people who have taken this type of medication. He said the people that he knows were all HIV negative and participated in a behavior that put them at risk for HIV. As a result they were prescribed by their doctor “a morning after pill” or were give a shot to prevent them from contracting HIV. He said this pill and the medicine that was injected had to be taken within a particular timeframe, which he thought was 7-14 days post exposure. He said both the pill and the injection contained the same type of medication persons who are HIV positive are prescribed. The other respondent who answered “yes” was not probed on her response.

Two of the respondents who answered “no” indicated during probing that they had never heard of people taking any type of medication to prevent them from contracting HIV. One of these respondents interpreted the term “antiretroviral medicines” as referring to the same types of medication she takes to treat her HIV infection. She did not think that people who are HIV negative should be taking these types of medications. “I don’t think they should take them if there’s nothing wrong with them. I don’t see the need. I mean I think they should save those pills for the people who really need them.” Conversely the other respondent, who answered “no” to this question interpreted the term “antiretroviral medicines” as referring to a different type of medication from the kind he is prescribed to treat his HIV infection. When probed on this term he said it was “some type of medicine that they think they going to take so they won’t contract it I guess. I don’t know of such a pill out there. If it was, I probably would have had some of it.” He said he’s never heard of anyone taking any kind of medication to prevent them from contracting HIV.

H9. In the past 12 months, have you given your antiretroviral medicines to a sex partner who was HIV-negative because you thought it might keep them from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Two respondents received this question during testing. All five respondents should have received this question but three respondents were skipped out of this question due to interviewer error. Interviewers may have misread the skip pattern following question H8 on the instrument. This skip read “If H7 is (0, 7, 9) skip to End.” However, interviewers likely read it as instructing them to skip to the end if respondents answered no, or don’t know or refused to answer question H8. This problem is not likely to occur in the CAPI instrument. The two respondents who received this question both answered “no.” Only one of these respondents was probed on this question. During probing this respondent indicated that he has never considered sharing his medication with people who are not HIV positive. He also added that he thinks it’s against the law and unethical. He has developed life threatening side effects from the medication he takes to treat his HIV and would not want to inflict that on another person.

Pre- and Post-exposure Prophylaxis Questions for participants who have not tested HIV+

SAY: Researchers are studying whether anti-HIV medicine -- a pill -- could possibly be taken to prevent HIV infection.

H10. Before today, have you ever heard of people who do not have HIV taking anti-HIV medicines, to keep from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Nineteen respondents received this question. Five respondents were skipped out because they were HIV positive and one respondent was inadvertently not administered this section of the questionnaire. One respondent answered “yes” to this question, and 18 respondents answered “no.” Eighteen respondents were probed on their response. Respondents had no knowledge of this type of medication and some respondents did not believe such a medication existed. These findings are discussed below.

The one respondent who answered “yes” was not probed on this question. Not surprisingly, respondents who answered “no” to this question all indicated during probing that they have never heard of people who are HIV negative taking medications to keep from getting HIV. Some respondents were curious about this medication. For example, one respondent, upon

hearing this question for the first time, stated, “I’ve never heard of it. This is a medicine that prevents HIV?” Similarly, another respondent stated the following after hearing this question for the first time, “I never knew they had that. They got a pill for that?”

Respondents were probed on their interpretations of the term “anti-HIV medicines.” Some respondents thought it was the same medication that is prescribed to people who are HIV positive. However, many respondents thought it was a different kind of medication than those prescribed to people who are HIV positive. Often this is because they interpreted this medication to be preventative and not a treatment for HIV. For example, when probed on his interpretation of anti-HIV medicines one respondent stated, “I think it would be different (than medication used to treat HIV) because medicine for people who have HIV keeps their immune system strong so it won’t go further.” He thought anti-HIV medicines would prevent you from contracting HIV in the first place. A couple of respondents indicated during probing that they did not know what the term anti-HIV medicine meant and were not sure if it would be the same or different from the types of medications that are prescribed to people who are HIV positive.

Some respondents were skeptical that this medication existed and some respondents were also skeptical that this would be an effective means of preventing the contraction of HIV. For example, one respondent, who interpreted anti-HIV medicines to be the same medications that are prescribed to HIV positive persons, stated the following when probed on anti-HIV medicines.

There’s no such thing. Why should you take HIV medicines if you don’t have HIV? HIV medicines is for people who get tested for HIV and they come up positive and then they prescribed medication for them. But if you take HIV test and you come back negative, they don’t give you medication... It’s like taking radiation and chemo when you don’t have it.

Other respondents also indicated that they were skeptical that such medications existed and were also skeptical that it would be effective. This included people who interpreted this question as asking about using medications that are prescribed to HIV positive persons, as well as people who interpreted this question as asking about a different type of medication that would prevent you from contracting the virus.

H11. In the past 12 months, have you taken anti-HIV medicines after sex because you thought it would keep you from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

H12. In the past 12 months, have you taken anti-HIV medicines before sex because you thought it would keep you from getting HIV?

- No..... 0

Yes..... 1
 Refused to answer..... 7
 Don't know..... 9

Nineteen respondent received questions H11 and H12. Five respondents skipped out of these questions because they were HIV positive and one respondent was inadvertently not administered this section of the questionnaire. Thirteen respondents were probed on their response to this question and questions H11 and H12 were probed on together. All of these respondents indicated that they have never taken any medication before or after sex to prevent the contraction of HIV. Respondents were not typically probed again on their interpretation of “anti-HIV medicines” but as discussed above, when respondents were probed on the use of this term in question H10, some respondents thought it was the same medication that is prescribed to people who are HIV positive. However, many respondents thought it was a different kind of medication than those prescribed to people who are HIV positive.

Once again in probing on questions H11 and H12 some respondents were skeptical that such a medication could be effective in preventing HIV. For example, one respondent who interpreted these questions as asking if she has taken the same medicines that are prescribed to treat HIV before or after sex, stated the following during probing, “There is no such thing. Why take it? I don’t have it. The question is kind of dumb. Everybody know that HIV medicine is for people who got- who test positive. If you test negative you not taking that.” Another respondent, who also thought these questions were asking if she has taken the same medicines that are prescribed to treat HIV before or after sex, commented during probing that it was a bad idea to take medicines to treat HIV when you do not have HIV.

I don’t think these are stupid questions, they’re just kind of odd... It’s like because I know how- I’m aware of how it’s contracted, that’s why... why would you even lie down with a person if you don’t know their status first of all? And then it’s like if you want to protect yourself from HIV or if you feel that... you want to be on the cautious side, why wouldn’t you use a contraceptive?

The interviewer asked her if she knew a sexual partner was HIV positive and there was a pill available that would prevent her from contracting HIV from this person, would she be willing to take it? She said,

If it was possible, yeah. But no study that I know of- I didn’t get the news flash. Had there been a study saying ‘well you can take this antiviral medicine and it was do this and that... and you would never catch it, then I think a lot of people would be hopping on the bandwagon. Just to take it- somebody’s medicine, I mean that could kill you. They have a virus in them. That means their cells are deformed and you know, they have things in them that you don’t have. That could kill you. It’s dangerous. Well I don’t know if it would kill you it may harm you. I mean even people who take the medicine get sick. You know, so what makes you think you’re just going to be fine and dandy, like roses. No, something’s going to happen. You’re going to feel some side effects and it’s probably going to be

worse than someone who has it because you're putting something in your body that will help your immune system fight something you don't have.

Respondents in the IDU sample also voiced similar concerns regarding the side effects of these medications.

Two respondents had difficulty comprehending the intent of these questions. One respondent interpreted these questions as asking if people who are HIV *positive* took HIV medications before and after sex, would it prevent them from contracting HIV. She answered "no" because she didn't think this would do anything since they were already infected with the virus. "By you taking it before you have sex is not going to make it not happen 'cause the virus is already immune into your body anyway. It's already in your body. You have to take it on schedule, like the doctor provided for you to take it.... You have to take it as prescribed." Finally, one respondent commented that it was confusing to receive questions H11 and H12 after he indicated in question H10 that he had never heard of people who do not have HIV taking anti-HIV medicines, to keep from getting HIV. "It's kind of confusing because it's almost contradictory. Like I said, you ask the average person and they'll tell you that they never heard of an 'anti-HIV' and then you got a question of whether you ever took it or not. So does it exist or doesn't it? It's kind of confusing... it's really confusing." Interviewers also commented that it felt odd to administer these questions when respondents answered "no" to question H10. However, this was the only respondent who gave any indication that this was an odd question to be asked given his response to previous questions.

H13. Please tell me if you got any of the anti-HIV medicines you took from the following people or places. Did you get them from...**[GIVE RESPONDENT FLASHCARD D. READ ALL CHOICES.]**

	No	Yes	Refused to answer	Don't know
a. Pharmacy or drug store.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
b. Doctor or other health care provider.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
c. Sex partner, friend, relative, or acquaintance.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
d. Internet.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
e. Some other place.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
(Specify _____)				

No respondents received this question during this round of testing.

H14. Would you be willing to take HIV medicines every day to lower your chances of getting HIV?

No..... 0

Yes..... 1

Refused to answer..... 7

Nineteen respondents received this question. Five respondents were skipped out of this question because they are HIV positive. One respondent was inadvertently not administered this entire section of this questionnaire. Thirteen respondents answered “no,” five answered “yes,” and one respondent answered “don’t know.” Several respondents had difficulty providing a definitive response to this question; however after thinking it through most of these respondents were able to select a response. Some respondents had comprehension problems with this question, which led to response error. These findings are discussed in more detail below.

As mentioned above several respondents had difficulty providing a definitive response to this question. Respondents gave a couple different reasons for why they could not provide a definitive response. First, some respondents did not think they were currently at risk for contracting HIV, however if it was an effective means of prevention they would consider it in the future. However, two of these respondents answered “no,” and one answered “yes.” The respondent who answered “no,” first gave this response and then added “If I found out that it plays a part in you not catching it, yeah I would.” However he still wanted to answer “no.” During probing he indicated he said “no” because he doesn’t think he is at risk for contracting HIV but if he did feel he was at risk, he would consider using these medications. It’s interesting to note that he actually is at risk because he does not use protection when he engages in sexual intercourse. Similarly, another respondent ultimately answered “no” to this question because he did not think he was at risk for contracting HIV. Upon hearing this question for the first time this respondent said, “I’m really not promiscuous like that. So- wait, this is take it every day so just in case you run into someone that might have HIV and that prevents you from getting it? That’s what it’s saying?” The interviewer repeated the question and he said, “No.” During probing he said he answered no because he doesn’t think he is at risk for contracting HIV. “I wouldn’t be in a situation where I would have to take it. I wouldn’t have unprotected sex.” The respondent who answered “yes” initially responded to this question, “Possibly, if I was sexually active and in a committed relationship. It would be something to consider.” When asked if she would say yes or no to this she answered “yes.” Later during probing she indicated that she is not currently sexually active, so she wouldn’t use this medication. However, she would still want access to this medication in case she did become sexually active.

Some respondents also indicated that they needed more information to make their decision. One of these respondents had difficulty providing a definitive answer to this question because he did not feel he had enough knowledge of these medications to make an informed decision. When first asked this question he said, “Well if it would help you, yes. But I never heard of it. I need to study up on that a little more.” When asked if he would say yes or no to this question he said “yes.” However, during probing he indicated that he would need more information before making a definitive decision. “I’d have to find out what it’s all about and get some more information on if it would help you in that situation... it would be interesting to try and hopefully you would get a good outcome but like I said, I’ve never heard of it and I wouldn’t know what I’m getting into.” He was also a little skeptical that it would be an effective means of prevention. Similarly, one respondent gave a conditional response to this question. Upon hearing this question for the first time this respondent stated, “If it was necessary yes.” During probing she said she would take this medication only if she was guaranteed that it would prevent her from catching HIV. Finally, one respondent initially answered this question “It depends. It

depends on the after effects and stuff like that.” The interviewer then offered her the don’t know and refused categories and she selected “don’t know.” During probing she indicated that she is concerned about the potential side effects of these medicines. She was also concerned that this medication would have to be taken every day. In the past when she was prescribed medicine that needed to be taken daily she often forgot to take it. She indicated that she would want to know the implications of missing a dose. Like other respondents she ultimately felt she did not have enough information to make a decision about whether she is willing to take this medicine or not.

Most respondents were able to provide definitive responses to this question. One respondent definitively answered “yes” to this question. This respondent reported that she answered “yes” because she is willing to do anything to prevent herself from contracting HIV. However she had some concerns that echoed the concerns of those who could not provide a definitive response. She indicated that she would also need a 100% guarantee that this medication would be effective in preventing her from contracting HIV; otherwise she would not take it.

Respondents who answered “no” to this question gave varying reasons for why they answered this way. Like the respondents above, many respondents indicated that they needed more information about this medication in order to be willing to take it. Often respondents were concerned about side effects from this medication. One respondent was also skeptical that this type of medication existed and was skeptical that it would be effective if it did. When probed on why he answered “no” to this he said,

There are certain things you cannot have an effect on. It’s just not feasible that they’ll come up with some kind of drug that’s going to stop you from getting (HIV)... I think when they come up with some type of cure- I don’t think they’ll come up with a deterrent, I think they’ll come up with a cure but I don’t think it would be delivered like that and I don’t think you would have to take it every day of your life.

Similar to the respondents above, some respondents felt that they were not at risk for contracting HIV and therefore answered “no” to this question. A couple of respondents also mentioned that they felt the prevention methods they use now are effective enough and therefore they do not need these medicines. One respondent also did not like the idea of having to take another medication. When asked why she answered “no” to this question she said, “I just don’t want no new medications in my body. I take high blood pressure pills. I take pain killers for my knee. I wouldn’t want no more pills. Because I have a hard time taking the ones I have.” Finally, like the respondent above, one respondent was concerned about having to take a pill every day for the rest of his life. Often respondents gave a combination of the reasons cited above for why they answered “no” to this question.

Only four respondents were probed specifically on their interpretation of the term “HIV medicines”. Three respondents interpreted this term to mean some kind of preventative medicine that would protect them from contracting HIV. These respondents did not think this was the same medication that was prescribed to be people who are HIV positive. However, one respondent did interpret “HIV medicines” to be the same medications that are prescribed to people who are HIV positive. Some respondents were also probed on their understanding of the term “antiretroviral medicines.” Most of these respondents indicated that they were not familiar with this term. However one respondent thought “antiretroviral medicines” were medicines used

to treat HIV and another respondent thought they were medicines used to either treat HIV or Chlamydia.

Finally, a couple of respondents misinterpreted the intent of this question. These respondents interpreted this question as asking if they were HIV positive would they be willing to take HIV medicines before and after sex. For example, one respondent answered “yes” to this question. When probed on why she answered “yes” she said, “If I had HIV or AIDS and the doctor said I had to take that medicine I would, you know, to make me feel that I might live a little longer.” When asked if she would take this medicine if she did not have HIV she said, “No. Because I figure I don’t have HIV or AIDS, so why should I have to take the medicine?”

MSM QUESTIONNAIRE

E1. What is your date of birth?

___ / ___ / _____
(M M / D D / Y Y Y Y)

This question was not probed on.

E6. What county do you currently live in? _____

*See Appendix B for list of eligible counties in Washington, DC and Baltimore MSAs.. For E6a auto-fill **project area** with “Washington, DC” or “Baltimore, MD” depending on county.)*

All 25 respondents received this question. Most respondents answered “Washington DC” or “District of Columbia.” One respondent indicated that he lived in “Montgomery County” and four respondents indicated they lived in “Prince Georges County”. No respondents were probed on this question. However, one respondent commented during question administration that he does not live in a county, but he lives in Washington, DC.

E6a. How long have you been living in [*project area*]? (*Interviewer:* If response is in months, enter 0 below and then enter the number of months in the next screen.)

Years ___

[*Refused = 777, Don't know = 999*]

E6b.

Number of months: ___

[*Refused = 77, Don't know = 99*]

range of values= 1-11

All 25 respondents received this question. Twenty were probed on this question. There were some interviewer administration problems with this question. However, they can easily be addressed using the CAPI instrument. When providing a response to this question respondents did not always provide a response in the correct format. Most respondents calculated the number of years they have lived in the project area; however some respondents provided an estimate. Although many respondents were able to provide a count of the number of years they lived in the project area, their calculations were not always accurate. As in the HET interviews, the insertion

of “Washington, DC” in as the project area was ambiguous and respondents did not always include all the cities and towns they lived in their response. Finally, respondents who were born in the project area but had moved away and returned at least once in their lifetime, reported on the number of years they have lived in the project area overall and not the number of years they have consecutively lived in the project area. These findings are discussed in more detail below.

Interviewer Administration Problems

In a couple of the interviews the interviewer did not fill the project area properly. Instead of asking respondents how many years they have lived in Washington DC, the interviewers asked how many years the respondent has lived in the county they reported on in question E6. For example, one interviewer asked “How long have you been living in Montgomery County?” Also as in the HET interviews, one interviewer gave a respondent the list of eligible counties to look at when answering the question. These problems will likely be resolved when the question is administered on a CAPI instrument.

Question Comprehension and Response Formation

As in the HET interviews, respondents in this round did not always provide a response in the correct format. Instead of providing the number of years they have lived in the project area, some respondents told the interviewer the year that they moved to the area. For example, one respondent answered this question “Since 1982.” Other respondents indicated that they have lived in the area their entire lives and gave responses such as “Born and reared here.” In these cases the interviewer would either prompt the respondent to provide a number of years or calculate how many years they have lived in the area based on their response.

The majority of respondents probed provided a count of the number of years they lived in the project area, however, a few respondents reported that they provided an estimate. Some respondents who counted the number of years they lived in the project area have lived in the area their entire lives and therefore this number was very easy to recall. Others could remember the year they moved to the project area and subtracted the number that date from the current to calculate their response. However, just because a respondent could count the number of years they lived in the project area, their calculation was not always correct. For example, when first administered this question one respondent replied, “Since 1979.” When prompted to provide a number of years he counted on his fingers the number of years between 1979 and 2011 and he came up with 30 years. If he did move to the project area in 1979, then his response should have been 32 years. Other respondents also made similar calculation errors.

As in the HET interviews, respondents who were born in Washington DC, but moved away from and came back to Washington DC at least once in their lifetime, counted or estimated the overall number of years they have lived in Washington DC and not the number of years since they last moved back. For example, when first asked this question one respondent stated, “Of my 52 years... I’ve lived in Philadelphia for five years, Miami for one year... Chicago... 46 years.” During probing it was revealed that he was born in Washington DC and lived there until he was 16. He then lived in Chicago for a year, after which he moved back to Washington DC. He then moved to Raleigh, NC for a year, after which he moved back to Washington DC for three years. Then he moved to Miami for one year, after which he once again moved back to Washington,

DC for nine months before moving to Philadelphia where he lived for five years. Based on this, it appears he has only lived in Washington, DC for around 24 years consecutively, not 46 years, but overall he has lived in Washington, DC for 45 years.

. Also as in the HET interview, reported on the number of years they lived within the city of Washington DC, and not the Washington, DC MSA. For example, when first asked this question one respondent answered that he has lived in Washington, DC since 1997. However, when probed on this he indicated that prior to living in Washington, DC he lived in Montgomery County and Alexandria and Arlington VA, which are all in the Washington, DC MSA. Therefore he should have reported that he lived in the project area for 22 years and not 14 years as he first reported. Similarly, another respondent had moved several times since moving to the area and was unsure how to answer this question. When first asked this question he said, “Since August 2010 but I was in the surrounding area, Montgomery County and before that Howard County. Do you consider Gaithersburg (to be) DC? I’ve been here officially eight months but living in the burbs of DC for two years.” He ended up answering “three years.” However, during probing he indicated that he moved to the area in 2007 and lived in Howard County for about nine months, which is in the Baltimore MSA. He then moved to Montgomery County and then to Washington, DC. Depending on what month he moved to the area, his response may be incorrect since the time spent in Howard County should not be included in his response.

E4. Do you consider yourself to be Hispanic or Latino/a?

No.....	0
Yes.....	1
Refused to answer.....	7
Don't know.....	9

All 25 respondents received this question and 12 of these respondents were probed on their response. All but one respondent answered “no” to this question. As in the HET interviews, respondents did not understand Hispanic to be an ethnicity separate from one’s race. Instead, respondents generally interpreted this question as asking about their race. However, one respondent understood this question as asking about his race or ethnicity. When asked why he answered “no” to this question he said, “I’m African American so I don’t fit in that ethnic group.” Another respondent interpreted this question as asking about his race and nationality. When asked why he answered “no” to this question he said “Because it’s not my race or nationality.” Most respondents, when asked why they answered “no” to this question discussed their race and their knowledge of their racial background. For example, when asked why he answered “no” to this question one respondent replied “My family are [sic] African American. I don’t have any Latino or Hispanic heritage that I know of.” In fact, most respondents relied on their knowledge of the familial background, but one respondent discussed how Hispanic and Latino people originate in particular areas of the world: “Latino is someone who comes or has ancestry in particular regions... Puerto Rico, Mexico, Dominican Republic...” One respondent also based his response to this question on the fact that he does not speak Spanish. When asked why he answered “no” he said, “I don’t speak the language.”

One respondent did answer “yes” to this question. When asked why he discussed having limited knowledge of Hispanic ancestry in his family. He was recently told by his aunt that he has distant relatives who are Hispanic; however, he does not know what relation they are to him. He does have physical features that he considers to be characteristic of Hispanic ethnicity and knowing that he has some Hispanic ancestry helps him make sense of these features. He has only known this information and identified as Hispanic for the last couple of years.

E5. **[GIVE RESPONDENT FLASHCARD A.]** Which racial group or groups do you consider yourself to be in? You may choose more than one option. **[READ CHOICES. CHECK ALL THAT APPLY.]**

American Indian or Alaska Native.....	1
Asian	2
Black or African American	3
Native Hawaiian or Other Pacific Islander.....	4
White	5
Refused to answer.....	7
Does not apply	8
Don't know.....	9

All twenty-five respondents received this question. Fifteen of these respondents were probed on their response. Sixteen respondents selected “Black or African American”, six selected “white,” and three respondents selected “Black or African American” and “American Indian or Alaska Native.” Respondents based their response on their ancestry and their personal identities. As in the HET interviews, some respondents with biracial family backgrounds only selected one race. A couple of respondents did not like the terms used in this question. Finally, there were also some administration problems with this question. These findings are discussed below.

During probing some respondents indicated that they based their response on their knowledge of their ancestry alone. For example, when asked why he responded the way he did, one respondent said, “Because I am of Caucasian lineage.” Similarly, another respondent also indicated that he bases his race on his ancestry. When asked why he answered “black or African American” this respondent stated, “My ancestors, my family are African American.” Others considered how they self-identify when selecting a response. For example, when asked why he answered “black or African American,” one respondent replied, “That’s how I was born and that’s how I was raised, how I identify. How I’ve lived my life for the past 36 years.”

As in the HET interviews, some respondents marked more than one race, however others did not include all races in this ancestry when answering. In all of these cases the respondent either had a great-grandparent or a grandparent who was a different race from how they self-identified. Often closer relatives in their lineage to the respondent also did not identify with this race. For example, one respondent, who answered “black or African American,” indicated during probing that his maternal great-grandmother was white, and his grandmother identified as biracial. However, he and his mother both identified as black. Interestingly one respondent,

whose mother was biracial (white and African American), only identifies as black and reported that he does so because that is how others view him.

A couple of respondents had problems with the terms used in the response options. One respondent, who answered “Black or African American” and “American Indian or Alaska Native” found the term “American Indian” offensive. “The only thing I would also take issue with, uh, American Indian because again coming from the mistake that Columbus thought he had discovered a new route to India, which is why the native people were called Indian, which is incorrect. The term I was actually looking for was Native American.” Another respondent thought the “white” response option should also include the term “Caucasian.”

Finally, as in the HET interviews, many respondents were not read the response options as instructed; however, these respondents were given the handcard. There was no indication that this affected respondents’ ability to comprehend and answer this question.

E7. What was your sex at birth? [*CHECK only ONE*]

- Male..... 1
- Female..... 2
- Intersex/ambiguous..... 3
- Refused to answer..... 7
- Don't know..... 9

All 25 respondents received this question and all 25 respondents answered “male”. Seventeen respondents were probed on their response to this question. In six of the interviews the interviewer read the response options during question administration. Respondents who were read the response options did not appear to interpret this question differently than those who were not read the response options. Respondents generally interpreted this question as asking about their biological sex. However, some respondents interpreted this question to be asking about their gender identity as well. Some respondents recognized that questions E7 and E8 could be used to determine if a person was transgender. Eighteen respondents were probed on their interpretation of the response option “intersex /ambiguous”. Many respondents were not familiar with the terms intersex and ambiguous. However, this did not appear to affect their interpretation of and response to this question. These findings are discussed in more detail below.

Most respondents interpreted this question as asking about their biological sex. When probed on why they answered the way they did these respondents often discussed the sex they were assigned at birth, their anatomy, as well as their biological and genetic makeup. For example, when asked why he answered “male” one respondent said “Well I was born with a penis and they filled out the birth certificate accordingly.” However, one respondent interpreted this as asking about his gender identity. When asked what he thought this question was asking he said, “You can’t really think when you’re a child but to a certain degree when you get older, do you still feel as you’re a boy, being a boy or a boy feeling like a girl?” He then discussed further whether or not you enact your gender role. Other respondents interpreted this question as asking

about both their biological sex and their gender identity. For example, when asked why he answered male one respondent replied, “I was born male. It says so on my birth certificate. I have a penis... I feel mannish. Just all boy. I enjoy being a man.” Another respondent said “Because I’m proud to be a man and I have a penis. I don’t act feminine. I might have my sassy moments but that’s just me being funny.” A couple of respondents discussed being socialized to enact a male gender role based on their biological sex. For example, when asked why he answered male one respondent stated, “Because I’m anatomically correct. That’s what we were taught. Little boys have this, little girls have this. I never felt any different. It’s there I might as well identify with it.” Another respondent discussed how biological sex could possibly be a continuous construct rather than a dichotomous one as we are taught. He said,

I suppose some scientists might say that there’s a continuum between males and females... something about your x and y chromosomes. But I don’t know. I suppose I’ve gotten used to defining myself as male. To an extent I suppose it’s a social definition as well as a scientific one... I’m a children of my times children of my society so I suppose those definitions are the ones that I have become habituated to.

Most respondents did see a difference between this question and question E8, which they interpreted as asking about one’s gender identity (see summary for E8). After hearing the question that follows (E8), some respondents interpreted this question and the following question as asking about one’s assigned sex at birth and the gender one identifies as now respectively, and that questions E7 and E8 could be used to determine if a person was transgender. For instance when probed on this question, one respondent indicated that he thought this was a strange question to ask but then said “I realize now where they were headed is ‘did you have a sex change?’” Similarly, when probed on this question, another respondent also said he interpreted this and the following question as determinants of transgender people. He said, “I know why they ask that question, ‘what was your sex at birth,’ because there are a lot of transgender people now who changed their sex. So I understood why they asked that question. So that’s what I was thinking when I answered it.”

No respondents selected the category “intersex/ambiguous” however most respondents were probed on their interpretation of these terms. Many respondents were unsure about the meaning of these terms but still provided interpretations. Most respondents interpreted or inferred that intersex and ambiguous meant the same thing. Some respondents thought both of these terms were used to describe someone who is a hermaphrodite. That is, a person with both sexual organs. For example, when probed on this response option one respondent interpreted these terms in the following way: “Well there are people who as I understand it... it’s people who have- then I don’t know if it always has to be a hermaphrodite. I probably know less about intersex than I do transgender- but intersex means that you could have mixed sex organs.” However, a couple of respondents interpreted these terms to mean a person who does not feel they are the gender they were assigned at birth. For example, when probed on this response option, one respondent described these terms in the following way: “When one is born female and she is mannish and she considers herself trapped in someone else’s body and wants to be a man, wants to be a boy. She gets offended when one says you pretty. She’s uncomfortable in her body as a woman, would prefer to be a boy, a man.” He said it could also be a man who wants to

be a woman. One respondent thought both of these terms meant that one was not born with a dominant sex. “It means that you weren’t born with one sex being dominant.” Another respondent thought these terms could mean that one was either a hermaphrodite or transgender.

Intersex and ambiguous. That’s like- when I think of that, I think of like a hermaphrodite [sic]. Someone that has both organs or someone who was born either male or female physically but mentally and spiritually they feel as if they are someone else, and they are. You know what I’m saying? The opposite sex. But they’re trapped in, with the organs of, you know what I’m saying? The opposite sex.

Some respondents interpreted the terms intersex and ambiguous to mean different things. Three respondents did not know what the term ambiguous meant but thought the term intersex was another word for hermaphrodite. A couple of respondents did not know what the term ambiguous meant, but thought the term intersex meant that one did not identify with the gender they were assigned at birth. Finally, one respondent did not know what the term intersex meant but thought the term ambiguous meant that it was unclear if one was male or female just by looking at their physical body. Understanding of these terms, or lack thereof, did not appear to affect respondents’ ability to comprehend and respond to this question, particularly since the response options were typically not read during question administration. Even when respondents were read the response options, it did not appear to affect how they interpreted and responded to this question.

E8. Do you consider yourself to be male, female, or transgender? [**CHECK only ONE**]

- Male..... 1
- Female 2
- Transgender 3
- Refused to answer..... 7
- Don't know..... 9

All 25 respondents received this question and all 25 respondents answered “male”. All of the respondents were probed on this question. Respondents generally interpreted this question as asking about a different construct than the previous question (E7). That is, most respondents interpreted this question as asking about their gender identification. Some respondents, who interpreted question E7 as asking about their gender identity, interpreted this question as asking about the same construct. However, after hearing both questions, some of these respondents recognized that responses to questions E7 and E8 could be different for transgender individuals. In fact, several respondents presumed that questions E7 and E8 were asked to measure

transgender individuals. Respondents were all familiar with the term transgender but defined the term in various ways. These findings are discussed in more detail below.

As mentioned above, most respondents interpreted this question as asking about their gender identification and discussed how one can choose their gender, versus biological sex, which is assigned at birth. For example, when probed on how he interpreted this question one respondent stated, “How I see myself at this point in time.” Although most of these respondents have always identified as male, they understood that others may not identify as the sex they were assigned at birth, as one respondent describes here, “If I had a choice to be male or female I would choose to be a male. I can’t imagine being a woman... Deep down inside I guess some people would question the fact or if I had a choice, what would I be?”

Most of these respondents viewed this question as asking about a different construct than question E7. “One’s talking about sex at birth. The other is about how you currently see yourself. So these are two totally different questions.” However, a few respondents interpreted questions E7 and E8 as asking about the same constructs, while still recognizing that others may not identify with their biological sex. That is, they interpreted both questions E7 and E8 as asking about their biological sex and their gender identity, which for them was the same but they recognized how others do not. For example, when probed on whether he thought these questions were asking about similar or different things one respondent stated, “The same thing as the first one. Some people might be physically male but they feel like they are women and vice versa. I was born a male and I am a male.”

One respondent interpreted this question as asking about his biological sex. When first probed on why he answered male he said, “Because that’s what I am. I’m a male. Physically I am a male. Anatomically I’m male.” However when probed to see if he thought question E7 and E8 were asking about the same or different constructs he did recognize a difference.

Well it’s slightly different because of the separation about the birth versus how do you consider yourself now because those could be two very different situations for an individual. There could be someone who was born one sex- that they don’t identify with the same sex they were born as or that they’ve physically had their sex altered.

Similarly, other respondents interpreted this question as asking about both their biological sex and their gender identity but still recognized a difference between questions E7 and E8. For example, when probed on his interpretation of this question one respondent stated, “I guess, well for both of them, I guess there’s the physical gender that you- parts you have and for some people they identify as male or female. That could be for either question.” When probed further on this he then said he thought the first question was asking about your sex at birth however this question asks about your gender identity. “[Question E7] sounds like what the doctor wrote down in the birth certificate. What was visible. The second seems like the person’s gender identity.” These respondents recognized that there was little difference in how they interpreted and responded to these questions, for transgender individuals these questions would be very distinctive. For example, when probed on why he answered male one respondent stated, “I would think that would go back to the previous question asking me if I was born a male.” However, when probed on whether he thought this question was similar or different from question E7 he said, “I think it’s about the same. It just breaks down. Actually it’s a little more defined and a

little more specific in regards to the first question. In asking if I was born a male, had I been transgender I would be able to break down the understanding of those two questions in that order.”

As mentioned in the summary of question E7, several respondents commented that they interpreted questions E7 and E8 as a way to measure whether or not a person is transgender. For example one respondent described these two questions as an indirect way to determine if a person is transgender. “If you talk about sex at birth or sexual identity now or how I see myself now versus at birth you are trying to be inclusive of or at least get at or open the door for discussion around transgender.” While all respondents were familiar with the term transgender their interpretations of the term transgender varied slightly.

Interpretations of Transgender

Respondents generally interpreted the term transgender as a way to describe a man or a woman who identifies as the opposite sex, and in some way take action to reconcile the disconnect between their biological sex and their gender identity. For example, when asked about his understanding of the term transgender, one respondent indicated that a transgender person “recognizes a disconnect of how I came into the world and how I see myself and going through the process of realigning myself.” However, respondents differed in how they thought transgender people addressed this disconnect.

Some respondents believed that transgender people dress and present themselves as the opposite sex, but do not necessarily alter their bodies in any way. For example, one respondent described a transgender person as “A male that dresses as a female and a female that dresses like a male. But not necessarily getting body parts changed.”

One respondent understood the term transgender to describe a person who dresses like the opposite sex and possibly takes hormones to alter the appearance of their body but has not had surgery to alter the body: “Transgender they are men... who want to have the look of being like a woman but not the organs... they just do the hormone process and they leave their natural functions, organs... intact.” Similarly, other respondents thought a transgender person could either be someone who dresses like the opposite sex or who either has plans to alter their body or has already physically altered their body to be the opposite sex. For example, when probed on his understanding of this term one respondent described a transgender person in the following way: “Someone who is either transitioning from male to female or female to male or I also think someone who actually just lives in drag of the other sex. Is not necessarily having the actual operation. I consider, you know, people that are living as the opposite sex as transgendered as well.”

Conversely some respondents thought this term only applied to people who have had surgery to alter their sex, and not to those who simply dress as the opposite sex or have plans to change their sex. For example, when asked to describe someone who is transgender one respondent stated, “Transgender is when you have an operation to change your sex organs to the opposite of what you are.” Similarly, another respondent interpreted the term transgender to refer to an individual “who has complete sexual reassignment surgery.” When asked to describe a transgender person he said, “Somebody that had- is post op transsexuals... That has changed so much over the years. Cross dresser now they want to call that transgender or acting as the opposite sex they want to call that transgender. I don’t agree with that.”

One respondent had a slightly different interpretation from other respondents. This respondent thought transgender was an individual who had been assigned one sex but had dominant traits of the other sex, and possibly presents themselves to others as the opposite sex. “Someone that is a male or a female and has the dominant traits of either or- at least physical dominant traits but not necessarily psychological traits and at the very least may portray externally the opposite sex of what they may be genetically.”

Finally, one respondent indicated during probing that he was not completely sure of the definition of transgender. He first described a transgender person as someone who has had a sex change. But then stated the following,

Maybe transgender is a cross dresser. But then said maybe it is a cross dresser. I don’t know the difference. I know transsexual is clearly someone who has had a sex change. Okay then transgender must be a cross dresser... I guess if you are transgender or transsexual you know which one you are. It’s okay I’m confused because it doesn’t apply to me.

This respondent raised an important point. Although respondents had slightly different understandings of the term transgender, there was no evidence that this affected how they interpreted and responded to this question.

D5. What is the highest level of education you completed?

[DO NOT read choices. Check only ONE.]

- Never attended school..... 00
- Grades 1 through 8..... 01
- Grades 9 through 11..... 02
- Grades 12 or GED..... 03
- Some college, Associate’s Degree, or
Technical Degree..... 04
- Bachelor’s Degree..... 05
- Any post graduate studies 06
- Refused to answer..... 77
- Don't know..... 99

All 25 respondents received this question and 14 respondents were probed on their response. Three respondents answered “Grades 12 or GED,” ten respondents answered “Some college, Associate’s Degree, or Technical degree,” six respondents answered “Bachelor’s Degree,” and six respondents answered “Any post graduate studies.” There were some cases of response error found. As in the HET interviews, the response option “some college, associate’s

degree or technical degree” was ambiguous. Some respondent also had difficulty mapping their response onto the options provided. These findings are described in more detail below.

First, as in the HET interviews, the category “some college, associate’s degree or technical degree” was ambiguous. One respondent answered this question “12 years of high school” and the interviewer selected “Grade 12 or GED”. However, when probed to see if he took classes beyond high school, he revealed that he completed 2 years of vocational school and received a certificate in food handling. Similarly, another respondent answered “High school diploma” and the interviewer selected “Grade 12 or GED.” However, when probed to see if he had taken classes beyond high school he revealed that he went to vocational school after high school and received certificates in travel agent training and computer hardware and software. It is not clear if these types of certificate programs count as “some college, associate’s degree or technical degree”. Respondents who gave answers that were categorized as “some college, associate’s degree or technical degree” often reported that they had completed anywhere between one semester and two years of college coursework.

Upon hearing this question for the first time, one respondent indicated that it would be “tricky” to select a response for him and wanted to view the response options. This respondent has an associate’s degree and he is working towards a bachelor’s degree. However, because the category “some college, associate’s degree or technical degree” includes both associate’s degree and some college, the interviewer selected this for him. Not knowing the response options also affected the way another respondent answered this question. Upon hearing this question he said, “Some college” and then added “Actually associate’s degree if that’s on there.” However, since associate’s degree and some college are combined in one category, this did not lead to response error.

Finally, there were some respondents who were currently enrolled in master’s programs but had not completed the degree. In one of these cases the respondent was unsure how to answer and stated, “I’ve started taking some classes for graduate work. Does that count? If it doesn’t count say college graduate.” The interviewer read him the response options and he selected “bachelor’s degree” for himself. However, in two other cases where respondents had not completed their graduate degrees, the interviewers selected “any post graduate studies” for them. In one case the respondent answered, “I have a BS degree. Beyond a BS degree I have like partial masters.” The interviewer then asked “so some post graduate work?” and the respondent answered “yes.” In the other case the respondent answered “I finished college then I went on for a masters and I didn’t complete it.” As with the previous respondent, the interviewer then asked “but you did have some post graduate studies?” To which the respondent replied “yes” and the interviewer selected this category for him. It’s not clear if this category should be selected if respondents have not completed a post graduate degree.

D6. What best describes your employment status? Are you:

[READ CHOICES. CHECK only ONE.]

Employed full-time..... 01

Employed part-time..... 02

A homemaker.....	<input type="checkbox"/>	03
A full-time student.....	<input type="checkbox"/>	04
Retired.....	<input type="checkbox"/>	05
Unable to work for health reasons	<input type="checkbox"/>	06
Unemployed.....	<input type="checkbox"/>	07
Other.....	<input type="checkbox"/>	08
Refused to answer.....	<input type="checkbox"/>	77
Don't know.....	<input type="checkbox"/>	99

All 25 respondents received this question and 18 of these respondents were probed on their response. Seven respondents answered “employed full time,” three answered “employed part time,” three answered “retired,” eight answered “unable to work for health reasons,” three answered “unemployed,” and one answered “other.” Some respondents had difficulty selecting a response as their employment situations did not adequately fit into the response options provided or there were multiple response options that could apply to their situation.

Five of the respondents who answered “employed full time” were probed on their response. All of these respondents discussed working 40 hours a week at a paid job.

Two of the respondents who answered “employed full time” were probed on their response. One of these respondents discussed working 20 hours a week at a paid job. The other respondent actually had difficulty providing a response to this question. When he was first asked this question he said, “I am employed but on an on call basis. So it’s part time, I guess.” This respondents works for two different employers on a per diem basis, and he said he has no average week in terms of hours, and he can often go for days without working. Also, later in the interview this respondent revealed that he is receiving disability benefits. Because of this it’s not clear if his response to this question is valid or not.

All three respondents who answered “retired” were probed on their response to this question. One respondent retired from his job as a school teacher three years prior to the interview. Another respondent reported that he is retired and is receiving disability benefits. The third respondent actually had difficulty selecting an appropriate response to this question. This respondent initially answered “retired” as soon as he heard this category, however, he then added, “But I still work. I’m a caregiver for a guy.” The interviewer then asked “of these options, employed full time or employed part time?” To which the respondent replied, “Just put retired. I’m taking social security but I still work.” Thus, it’s not clear which response is most valid for this respondent.

All seven respondents who answered “unable to work for health reasons” were probed on their response to this question. Most of these respondents had health problems that preventing them from working and most were receiving disability benefits. One respondent had difficulty answering this question as he felt he is both unable to work for health reasons and retired. The interviewer ended up selecting “unable to work for health reasons” for him.

Only one respondent who answered “unemployed” was probed on his response. This respondent is out of work but is currently looking for work.

The one respondent who selected “other” did so because the amount he works is sporadic. He considers himself to be employed and does work for pay, however, he only works on a per diem basis.

As in the HET interviews, there were some respondents who answered this question before all of the response options could be read, often after hearing the option that best represented their employment status. Often when this happened the interviewer did not read the remaining response options. In one case, the respondent answered “unemployed” prior to hearing any response options. The interviewer did not read the response options but asked, “unemployed full time, and “unemployed part time?” However, this did not appear to lead to response error.

D7. What was your **household income** last year from all sources before taxes?

GIVE RESPONDENT FLASHCARD C. DO NOT read choices.

SAY: Please take a look at this card and tell me the letter that best corresponds to your monthly or yearly income.

Monthly Income	Yearly Income	
a. 0 to \$417.....	a. 0 to \$4,999.....	<input type="checkbox"/> 00
b. \$418 to \$833.....	b. \$5,000 to \$9,999.....	<input type="checkbox"/> 01
c. \$834 to \$1041.....	c. \$10,000 to \$12,499.....	<input type="checkbox"/> 02
d. \$1042 to \$1250.....	d. \$12,500 to \$14,999.....	<input type="checkbox"/> 03
e. \$1251 to \$1667.....	e. \$15,000 to \$19,999.....	<input type="checkbox"/> 04
f. \$1668 to \$2082.....	f. \$20,000 to \$24,999.....	<input type="checkbox"/> 05
g. \$2083 to \$2500.....	g. \$25,000 to \$29,999.....	<input type="checkbox"/> 06
h. \$2501 to \$2916.....	h. \$30,000 to \$34,999.....	<input type="checkbox"/> 07
i. \$2917 to \$3333.....	i. \$35,000 to \$39,999.....	<input type="checkbox"/> 08
j. \$3334 to \$4167.....	j. \$40,000 to \$49,999.....	<input type="checkbox"/> 09
k. \$4168 to \$4999.....	k. \$50,000 to \$59,999.....	<input type="checkbox"/> 10
l. \$5000 to \$6,250.....	l. \$60,000 to \$74,999.....	<input type="checkbox"/> 11
m. \$6251 or more.....	m. \$75,000 or more.....	<input type="checkbox"/> 12
Refused to answer.....		<input type="checkbox"/> 77
Don't know.....		<input type="checkbox"/> 99

All 25 respondents received this question and 14 respondents were probed on this question. As in the HET interviews, several problems were found with this question. Once again

interviewers did not read this question as worded in 9 of the 25 interviews. Some respondents were unsure if they should include other household member's income in their response, and in one case a respondent did exclude a household member's income from his response. Respondents also erroneously excluded income from particular sources when answering. Finally, as in the HET interviews, some respondents did not adhere to the reference period in the question. Some respondents also had calculation problems. Some respondents were confused about how to use the handcard, and one respondent was not sure if his disability was taxable income. These findings are discussed in more detail below.

Once again, the most prevalent problem found with this question was that interviewers did not read the question as worded. Some interviewers only read the question and did not read the instructions that followed (or did not read them in their entirety or as worded) and other interviewers only read the instructions and did not read the question itself. As mentioned above not reading either part of this question is problematic as both the question and the instructions provide important information to the respondents regarding the intent of the question. There was not enough probing to determine if this affected how respondents' in this study interpreted these questions. However, in one case this did appear to affect how a respondent interpreted and responded to this question. This is discussed below.

Some respondents were unsure if they should include their own income or their own income combined with other household members' income when answering. Two respondents asked for clarification before answering and in both cases the interviewer repeated the question. One of these respondents ultimately included another household member's income in her response, and the other respondent excluded all other household members as he was unsure of their income. Another respondent did not ask for clarification but simply excluded other household member's income when answering. The household members he excluded contribute significant portions of their income toward bills for the home, including utilities and taxes.

While most respondents considered income from paid jobs and disability benefits, some respondents excluded income from these sources when answering. Two of these respondents only included income they received from their disability benefits and did not report on any of the money they earned from side jobs. Another respondent questioned what sources of income he should include in his response,

When you do this, do you count in the value of things like housing assistance, all that? Or what actually comes to me in cash? What comes to me in cash is F. That's the total of my social security. But then I get copays on my medication and I get, an amount a month is paid towards my rent.... My premiums are paid for medical coverage.

He said if he included all of these sources his answer would be J. However, he ultimately decided to only include income that he receives through social security as this is the only money that is actually filtered through him. All other subsidies he receives through the government are paid to a third person. For example his rental assistance is paid directly to his landlord. It is not clear if these other income sources should be included in his response or not. Note that when this respondent was administered this question he was not read the actual question, but just the instructions that follow.

Other respondent had difficulty formulating a response to this question. One respondent had yet to do his taxes for the previous year and he worked part time for part of the year, and full time the other part of the year. He also performed side jobs for money. Therefore he had a difficult time estimating his income. Another respondent answered this question but then asked if the monthly column on the handcard corresponded to the yearly column. Like other respondents he did not fully understand how to use the handcard when answering. Additionally, one respondent was confused over the reference period in this question. When he first heard this question, he asked “Are we talking about last year to today or 2010?” After hearing the question a second time he said “let’s be on the safe side, say J.” He ultimately answered based on his income from August 2010 to the day of the interview because he returned to work in August. He said if answered for 2010 alone his response would have been G. Finally, one respondent was not sure if his disability benefits were taxable or not. He ultimately decided that they were not taxable and provided an estimate of what he earned from that source in 2010. However, disability benefits can be taxable depending on one’s income level, and this may be problematic if other respondents are also unsure about this and report on their income from disability after taxes.

SEXUAL BEHAVIORS

SAY: Next, I'm going to ask you some questions about having sex. Please remember your answers will be kept private. I need to ask you all the questions, even if some may not apply to your situation.

S1. Have you ever had vaginal or anal sex with a woman?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

All 25 respondents received this question and 14 of these respondents were probed on their response. Sixteen respondents answered “yes” to this question and nine respondents answered “no.” Most respondents reported that they had only had vaginal sex with a women before and often these were isolated events that occurred a long time ago (i.e., as a teenager.). No respondents had difficulty comprehending the terms used in this question, however a couple of cases of response error were found. In one case the respondent answered “no” to this question because he thought the question was asking about anal sex only. During probing he revealed that as a teenager he had vaginal sex with a woman. Another respondent also provided an invalid response. This respondent answered “yes” to this question however during probing he revealed that he had engaged in oral sex with women in the past but gave no indication that he had engaged in vaginal or anal sex with women.

S2. In the past 12 months, that is, since *[interview month]* of last year, with how many different women have you had oral, vaginal, or anal sex?

____ _ [Refused = 7777, Don't know = 9999]

All 25 respondents received this question and 12 of these respondents were probed on their response to this question. All but one respondent had sex with a woman in the past 12 months. This respondent indicated that he had oral sex with two women in the past year. No respondents had comprehension issues with this question. However, one respondent pointed out that the definition read before this series of questions does not include a definition of oral sex and because of this he perceived this survey as not considering oral sex with women to be “sex.” This did not appear to affect his response to either this question or question S1. A couple of interviewers also noted that it is odd to ask respondents how many women they have had oral, vaginal, or anal sex with in the past year when they indicate in S1 that they had never had vaginal or anal sex with a woman. However, as S1 does not ask about oral sex it may be important to keep this question in order to increase coverage.

SAY: Now I'm going to ask you some questions about having sex with other men.

For these questions, "having sex" means oral or anal sex. Oral sex means he put his mouth on your penis or you put your mouth on his penis. Anal sex means you put your penis in his anus (butt) or he put his penis in your anus (butt).

S3. Have you ever had oral or anal sex with a man?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

All 25 respondents received this question however only five respondents were probed on their response. All five respondents indicated that they had both given and received oral and anal sex to/from a man.

S4. In the past 12 months, that is, since *<interview month>* of last year, with how many different men have you had oral or anal sex?

____ _ [Refused = 7777, Don't know = 9999]

All 25 respondents received this question and most were probed on their response. Respondents all appeared to consider men with whom they have engaged in oral or anal sex (either giving or receiving). When formulating their response some respondents provided a county, while others provided an estimate. Some respondents wanted to change their response after answering. At least one respondent included men with who he had engaged in sexual behaviors, other than oral and anal sex. These findings are discussed in more detail below.

Respondents who provided a count when answering typically gave answers smaller than 10, and most of these respondents gave answers smaller than 2. Most of these respondents counted these numbers in their head or aloud, however, one respondent, who answered “7,” wrote down all of the names of the men that he could recall having anal or oral sex with in the past 12 months and then counted them up. Some respondents did provide estimates when answering, and for some this was not an easy task. For example, one respondent, upon hearing this question for the first time replied, “Oh god! Maybe 15, yeah 15-20. I’m not sure. It’s 15-20.” When pushed to give a single number he answered “20.” Estimates ranged in size from 3-75. One respondent could not provide a response to this question. Upon hearing this question for the first time, he replied, “A lot. I can’t put a number on it. It’s a lot.” The interviewer offered him the refused and don’t know categories and he ultimately selected “don’t know.”

A couple of respondents wanted to change their response after answering. However, their new answers did not deviate far from their original ones. One respondent initially responded to this question “I would say approximately 10-15.” Then when asked to give a single number, he answered “12.” However, later during probing, as he began to talk about how he came up with his response, he wanted to change his answer to 15. He said this was not an exact count but a better estimate than 12. Another respondent initially answered “maybe three” to this question. During probing he said he was confident in his response. However, the more he thought about it during probing he recalled another person and wanted to change his answer to “four.”

Finally, a couple of respondents indicated that they excluded men with whom they only engaged in mutual masturbation, although, one respondent appeared to include these men in his response. Upon hearing this question for the first time this respondent replied, “Let’s see, we’re looking at about 1, 2, we’ll call it three.” However, during probing he said he had only engaged in “minor things” with two of these men, such as “hand jobs” and never gave any indication that he had engaged in oral or anal sex with them.

HIV TESTING

SAY: Now I’m going to ask you a few questions about getting tested for HIV. An HIV test checks whether someone has the virus that causes AIDS.

H1. Have you ever been tested for HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

All 25 respondents received this question during the evaluation and all respondents answered “yes” to this question. Twenty-one respondents were probed on this question. All of these respondents indicated that they have had tests to determine their HIV status. Most respondents had a test for HIV where blood was drawn; however a couple of respondents had oral swab tests. Twenty-three of the respondents in this sample have tested positive for HIV.

H2. When did you have your most recent HIV test?

[77/7777 = Refused, 99/9999 = Don't know] ___ ___ / ___ ___ ___ ___
 (M M / Y Y Y Y)

All 25 respondents received this question. Twenty-two respondents were probed on this question. A number of problems were found with this question. First the intent of this question was ambiguous for respondents who are HIV positive. It was not clear if these respondents should report on the month and year that they were last tested for HIV, or the month and year they last had blood work done to determine things like their blood count and viral loads. Often the difference between these two dates was large and there was also a wide discrepancy in responses between those who interpreted the question as asking about their last HIV test and those who interpreted it as asking about the date of their last blood work. Some respondents who interpreted this question as asking about the month and year of their last HIV test had difficulty recalling when this was and several cases of response error were found. Finally, most respondents did not provide a month and year when responding to this question and had to be prompted by the interviewer to provide a response in the correct format. These findings are described in more detail below.

The intent of this question was not clear. Half of the respondents interpreted this question as asking about the last time they had a test to determine whether or not they were HIV positive and the other half of the respondents interpreted this as asking about the last time they had blood work done to gather information on such things as the their “blood count,” “t-cell counts” “CD-4” “viral loads,” “cholesterol,” and triglycerides.”

Because this question was ambiguous, several respondents had to ask for clarification before answering. These respondents asked things like, “Does a blood count count as a test?”, “The most recent HIV test or the follow up?”, “You mean the test or getting the- what do you mean by that? Because I’m HIV positive.” Respondents who asked for clarification were all

HIV positive and all ultimately reported on the last time they had blood work done, not when they were last tested for HIV. These respondents all reasoned that it didn't make sense to ask a person who was HIV positive when they had their most recent HIV test, since they had not been tested for HIV per se, since they were diagnosed. But they all had blood work done to determine things like their blood counts and viral loads. One respondent initially provided the month and year that he last had his blood work done (February 2011) but then said "I'm sorry. Let's back up. Did you say when was I last tested for HIV?" He then indicated that the date he gave was the last time he had blood work done. He added, "Once you're positive you don't have another test to see if you're positive. Because once you are, you are. That's it." After hearing the question again he thought it was asking about when he last had an HIV test and said it was in 1984. As with this respondent there was often a large discrepancy between when respondents were last tested for HIV and when they last had their blood work done.

Other respondents, who were HIV positive, did not necessarily ask for clarification but did think this was an odd question to be asked. For example, upon hearing this question for the first time, one respondent who is HIV positive stated, "I haven't had one in a while. I don't get tested because I'm positive." He refused to provide a response to the question. He was tested for HIV in 1982 and he was diagnosed as positive. He has not been tested since. Likewise, another respondent also thought this was an odd question to be asked. One respondent replied to this question "I only have been tested when I found out and it was in 1994." He thought it was weird to be asked about his most recent test since he was only ever tested once. He asked, "Why would I keep getting tested?" These respondents did not have another HIV test after finding out they were positive, and in one case the respondent only ever had one test. Other respondents easily provided a response to this question but also commented that they did not think it applied to them.

When respondents who were HIV positive, interpreted this question as asking about the last time they were tested for HIV, they often gave a response which indicated they were last tested several years prior to the interview (i.e., 2004, 2002, 1994, 1992, etc.). However, a few respondents who were HIV positive participated in HIV screenings in more recent years (i.e., 2011, 2009) to obtain the incentives being offered or as part of a research study. The two respondents, who reported being HIV negative, both interpreted this question as asking about the last time they were tested for HIV and both had been tested recently (i.e., 2011 and 2010). All of the respondents who were HIV positive and interpreted this question as asking about the last time they had blood work done indicated that had blood work done either the month of the interview or within one to three months prior to the interview.

While most respondents had no problems recalling either the last time they had an HIV test or the last time they had blood work done, a few respondents did have difficulty recalling the month and year of their last HIV test. One respondent initially answered that it was in October or November of 2004. He could recall needing to have the test as part of a physical for a new job, which he started in November. He ultimately answered "November 2004." However, after thinking about it some more during the probing he reasoned that the test must have taken place in October because he actually started his job in November. Another respondent also had overt difficulty recalling when he was last tested for HIV. This respondent first replied to this question "I believe last year. I don't recall the month. I think it was summertime." When prompted by the interviewer to provide a month and year he said "2010, I guess July." However, during probing he recalled that he was tested at a men's health day at his church that took place father's day

weekend. Based on this recall he wanted to change his response to June of 2010. While these two respondents had difficulty remembering the exact month of when they were tested, one respondent had difficulty remembering the year. He first answered this question, “I don’ know. Maybe two years ago.” During probing he said he couldn’t actually recall when he was last tested for HIV, but thought it may have coincided with when he moved to the Washington DC area, which was two years prior to the interview. The interviewer never prompted him to provide a month. Another respondent did not indicate that he had difficulty recalling when he was last tested, however based on information that emerged during the probing it was determined that his answer was invalid. This respondent reported on the last time he had blood work done, not the last time he was tested for HIV. This respondent first answered “January the 27th.” However, when probed he indicated that he last had his blood work done in December and wanted to change his response.

Finally, in addition to the ambiguity of the question and recall problems mentioned above, most respondents provided a response that was not in the correct format (i.e., month and year). Examples of these responses included things like “About a month to two months ago,” “Two weeks ago,” “Last year,” “1994” and “January.” In most cases the interviewers then prompted the respondents to provide a response in the correct format. However in a few cases, such as when the respondent said “Last month,” or “Two weeks ago,” the interviewer filled in a response for the format. In some interviews the interviewer told the respondent that he needed a month and year before the respondent had a chance to respond to the question.

H3. What was the result of your most recent HIV test? *[DO NOT Read choices, check only ONE.]*

- Negative..... 1
- Positive..... 2
- Never obtained results..... 3
- Indeterminate..... 4
- Refused to answer..... 7
- Don't know..... 9

All 25 respondents received this question during the evaluation. Two respondents answered “negative,” 19 answered “positive,” one answered “indeterminate” and three respondents did not provide an appropriate response. This question was also found to be ambiguous. This is likely a carryover effect from question H2. Respondents who interpreted H2 as asking about the date they last had blood work done, wanted to report here on the results of their blood work. That is, they wanted to report on things like their blood count and viral load. However, respondents, who interpreted H2 as asking about the date of their last HIV test, understood they needed to report whether their status was positive or negative here. These findings are discussed in more detail below.

Some respondents, particularly those who answered question H2 based on the last time they had blood work done, asked for clarification when answering this question. For example,

after hearing this question for the first time one respondent, who reported on the date of his last blood work in H2, asked, “Like viral load and that sort of thing? Viral load is undetectable and T4 count, the T4 counts were 476 or 467... put 467.” The interviewer then read him the response options and he said “Oh well, positive. They knew I was positive.” He then explained that he was answering about the last time he had blood work done. Similarly, another respondent who also gave the date of his last blood work in H2, couldn’t figure out the intent of this question. Upon hearing this question for the first time he asked, “Like what do you mean? Undetectable. I’m HIV positive but undetectable means when you have your blood counts so low it doesn’t register, which is a good thing. I mean it’s still in your system.” Another respondent who needed clarification when answering question H2 but ultimately gave the date of his last HIV test, once again asked for clarification of this question. “As in my blood work or-? I mean I’m still positive. They only thing I would get is my CD4 and viral load.” The interviewer repeated question and he ended up answering “positive.”

Other respondents did not ask for clarification but appeared to interpret this question in the same way they interpreted question H2. That is, if they interpreted question H2 as asking about the date of their last HIV test then they reported on whether the results were positive or negative. However, if they interpreted question H2 as asking about the results of their last blood work then they reported on things like their blood counts and viral loads in this question or if they would say things like “positive undetectable.” For example, when first asked this question one respondent who interpreted H2 as asking about the date of his last blood work, said, “Okay I found out my CD4 count and viral load, my percentage. My CD was 389, my percentage is 24% and my viral load is less than 40.” The interviewer then read him the response options and he said, “Based on those options I would say positive. It’s still tricky because it goes back to the previous question. Because I would think that question would come before the last question. Because I could tell you the year I was diagnosed.”

In most cases where respondents provided the results of their blood work, the interviewer read the response options to the respondent and then the respondent selected positive. However, in one case the respondent answered “indeterminate.” This respondent initially answered this question, “My numbers were good” but then indicated he hadn’t actually received the results. The interviewer read him the response options and he replied, “Well, I got my results because I know I’m HIV positive. Let’s put indeterminate because I don’t know what my numbers are.” He was referring to the fact that he knows he is HIV positive, however, he has not received the results of his most recent blood work. It’s not clear why he didn’t select “never obtained results.” Another respondent who interpreted this question as asking about his more recent HIV test to determine his status, had not actually received the results of his test, however he answered “positive.” This was because he has had multiple tests in the past that have come back positive and he assumed that the most recent test would as well. Finally, in three cases the respondents provided the results of their most recent blood work and the interviewer did not read the response options. In one case the respondent answered “undetectable.” In the second case the respondent answered “My percentages were 13.9, it’s a ratio of something or other. It should be between 20 and 30 desirably.” The third respondent answered, “My viral load was undetectable. My CD4 was like 312.” In sum this question (and question H2) needs clarification. In terms of this question, reading the response options may help improve comprehension.

H3a. Before your test in ___/___/___ [*insert date from H2*], did you ever test positive for HIV?

- No..... 0 *skip to Instructions before H10*
- Yes..... 1
- Refused to answer..... 7 *skip to Instructions before H10*
- Don't know..... 9 *skip to Instructions before H10*

Only one respondent received this question during the evaluation. He answered “yes.” This respondent interpreted questions H2 and H3 as asking about the last time he had blood work done to determine things like his blood count and his viral load. He had answered H3 “indeterminate” because he has not yet received his results from this most recent blood work. In the past he has tested positive for HIV.

Questions for participants who have ever tested HIV+

H4. Have you ever been seen by a doctor, nurse, or other health care provider for a medical evaluation or care related to your HIV infection?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Twenty-three respondents received this question during the evaluation. All but one respondent answered “yes” to this question. Eighteen respondents were probed on this question. For the most part respondents had no difficulty interpreting this question and during probing they indicated that they received regular care from a physician. However, a couple of respondents had difficulty comprehending the intent of this question and in one case this led to response error. These findings are discussed below.

Respondents who answered “yes” to this question all receive regular care for their HIV. That is, they are seen by a doctor anywhere between once a month to once every six months. Most reported seeing a doctor every three months. Respondents received care from primary care providers, infectious disease doctors, internists, and doctors who specialize in HIV. During these visits, respondents often went over their blood work with their doctor, discussed medications and received refills, had health screenings, and discussed any health issues they were experiencing.

However, a couple of respondents had difficulty comprehending the intent of this question. For one respondent this difficulty stemmed from the word “evaluation.” After hearing this question for the first time he asked,

Medication evaluation, what is that? Like being a side effect?" I don't know if this counts or not. I have high cholesterol and this is more recent... I got my regular three month thingy... and my cholesterol was high... When I think of medical evaluation I think hospitalized and sit in a doctor's office and monitor you.

The interviewer read him the question again and he answered "no." He added that he didn't think his cholesterol screening was related to his HIV care. He then said, "I would probably say don't know. Until next week I will find out if it's related to the HIV." He ultimately kept his response of "no." This is response error however because he receives care for his HIV every 2-3 months and has been doing so since he was diagnosed in 2009. Another respondent also had difficulty comprehending this question. Upon hearing this question for the first time he asked the interviewer "Do you mean do I have a doctor?" To which the interviewer replied "yes." The respondent then answered "yes." This respondent was not probed on this question however he indicated elsewhere in the interview that he receives care every three months and has regular blood work done.

H5. When did you first go to your health care provider after learning you had HIV?

[77/7777=Refused, 99/9999 = Don't know] __ __ / __ __ __ __
(M M / Y Y Y Y)

Twenty-two respondents received this question during the evaluation and 19 of these respondents were probed on this question. Only three respondents appeared to comprehend this question and provide a valid response to this question. Three significant problems were identified during the evaluation of this question. First, some respondents had difficulty comprehending the intent of this question. Second, some respondents had difficulty recalling when they first received care for their HIV. Finally, most respondents did not provide a response in the correct format. These findings are discussed in more detail below.

For three respondents this was an easy question to answer and they provided a response in the correct format without needing any prompting from the interviewer. Two of these respondents could recall receiving care a month following their diagnosis and one respondent recalled receiving care the day after being diagnosed. Recalling the month and year they first received care was easy for these respondents because they could remember the exact date of their diagnoses and they could recall how long they waited to get care. However, other respondents had a much more difficult time answering this question.

Comprehension problems

First, some respondents had difficulty comprehending the intent of this question and asked for clarification before answering. Upon hearing this question for the first time these respondents asked things like, “How long ago?”, “When?”, “First?” Similar to these respondents, another respondent was also confused about whether this question was asking about the date of when he first went to a health care provider or the duration of time between being diagnosed and seeing a health care provider. When he was first administered this question he asked, “You mean the duration of the time from testing to otherwise? From the time you tested to the time you saw the doctor?” The interviewer repeated the question and he said, “Well it was pretty much immediately.” He then indicated that he was initially unsure whether this question was asking for an exact date or duration of time. He had difficulty recalling the exact date but thought he saw a doctor either in 1986 or 1987. Additionally, one respondent was unsure whether this question was asking about when he first received care from his current health care provider or any health care provider for his HIV. When he was first administered this question he asked, “My current provider or my provider at the time I was HIV?” After hearing the question a second time he said, “I assume that would be the first HIV test. I think it was like a month after.”

Recall difficulty

Like the respondent above, some respondents had difficulty recalling the month and year they first went to their health care provider for care. For example, one respondent took some time to think about his response, and then said “That was a long time ago actually. After I initially found out I went probably four months after the fact.” The interviewer asked when this was and he said, ‘The year was 1988 when I first found out and I went to a doctor four months later so we’re talking probably the month of August.’ However, when probed on this question he said he first went to the doctor four years after finding out he was positive but it was not determined why this discrepancy in his recall occurred. All of the respondents who had difficulty recalling this information changed their response after answering. In one case the respondent changed his response by one year, in other cases the respondents changed their response by 2 or 3 years. In a couple of these cases the respondents could not recall the exact year they were diagnosed as HIV positive, and therefore could not recall when they first received care. In one case the respondent’s difficulty recalling this information appeared to stem from the fact that there was no treatment plan established when he was first diagnosed. When he was first asked this question he said, “I found out in 1984. It seemed like it was not long- it was about that time. There were no drugs. I mean I started taking HIV drugs in ’87 but ’84-’87 there was nothing- there was no regimen. So probably, well specific to HIV probably ’87. I don’t know.” When the interviewer verified that he was answering 1987 he said,

Well now in ’84 at [name of health clinic] everyone was being tested at that time. And I was going to a doctor. I mean I had a regular doctor I saw but I didn’t go to him for HIV. I went to [name of health clinic] to be tested and I think I was referred to a doctor in Capitol Hill, I don’t know, at the time... in ’85, ’84, ’85 something like that. I remember [I] started taking HIV meds, AZT in ’87 and that was with that doctor that I started seeing.

Response formation

One respondent had difficulty comprehending the intent of this question. This respondent initially answered this question “two weeks ago” and then asked for the question repeated. After hearing the question for a second time he asked,

Now is that specifically for HIV care or for anything that could be HIV related because that’s different also. The difference is that you’ll have an infectious disease doctor for your HIV specifically but you can have other things related to HIV that you go see different specialists for. Like you could have a skin condition related to HIV, you go to your dermatologist. Technically that would be HIV care. That’s not your HIV doctor... If you want to know the last time I saw a doctor for any HIV thing or care, I saw a doctor Tuesday of last week. I saw my ID doctor the week prior.

While most respondents probed reported on their routine care visits with the doctor who primarily treats their HIV, this respondent raises an important question. Should respondents include any doctor they see for any health problem or condition related to their HIV? This may need to be specified in the question. Additionally, a couple of respondents interviewed are involved in medical studies related to their HIV care. One respondent did not report on his last appointment with health professionals related to this research but rather reported on his last routine care appointment with his primary care doctor. Another respondent’s doctor is a researcher engaged in a medical study on HIV medications and he did report on his last visit to his doctor’s office where he had blood work done to see if he is eligible for the study. It’s not clear if these types of scenarios should be included in responses to this question.

Recall difficulty

A couple of respondents had difficulty recalling this information. One respondent initially reported that he last saw his doctor in January of 2011. However during probing he said it was around the end of January and the beginning of February but he wasn’t sure what month it was. In the other case the respondent answered December 2010. However, during probing he said he actually saw his doctor last in January of 2011.

Response formation

As in the previous question, many respondents did not provide a response in the correct format. Instead these respondents said things like “last month,” “last week,” “two weeks ago,” “yesterday,” and “today.” One respondent indicated the month of his last appointment but did not provide the year: “The end of December. Right after Christmas.” In these cases the interviewer calculated the month and year of the respondent’s last appointment based on the information the respondent provided and the date of the interview. Additionally, in one interview the interviewer instructed the respondent to provide a month and year before the respondent had a chance to respond.

Finally, there was one other case of potential response error found. When answering this question, this respondent answered “February 2011”. However, during probing he indicated that

he blood drawn for testing in February but has not seen the doctor yet to receive his results. It was clear if having blood drawn should count as being seen by a health care provider.

H7. Are you currently taking antiretroviral medicines to treat your HIV infection?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Twenty-two respondents received this question during the evaluation and 18 respondents were probed on this question. All but one respondent answered “yes” to this question. The majority of respondents had no difficulty comprehending this question and all appeared to provide a valid response. However, one respondent did difficulty comprehending this question.

The respondent who answered “no” to this question was on antiretroviral medications but stopped taking them recently because they were causing liver inflammation. Respondents who answered “yes” were taking a variety of antiretroviral medications, including Atripla, Truvada, Reyataz, Norvir, Ziagen, and Isentress. Many of respondents had been on antiretrovirals medications consistently since they were diagnosed or some period of time after they were diagnosed. However, some respondents reported going on and off these medications for periods of time since being prescribed them. Respondents reported going off these medications for a number of reasons, such as medical complications, loss of insurance, or drug holidays, which they described as periods of time where they felt healthy and didn’t think they needed to continue taking them.

All respondents were familiar with the term “antiretroviral medicines. Some respondents indicated that they did not use this term to describe their medications. Instead they referred to them as “my meds” or their “drug regimen.”

As mentioned above, one respondent did have some difficulty comprehending this question. This respondent initially answered “yes” to this question but during probing he stated the following,

Are they only interested in antiretrovirals? Because I think if you take a combination therapy, one’s not an antiretroviral. You take two antiretrovirals and something else... but the answer would still be yes because I’m taking antiretrovirals. So you might want to say are you taking antiretrovirals or are you on a combination therapy?

Because he is taking an antiretroviral medication his response of “yes” was still valid, and as this respondent indicates, other respondents who are on combination therapies should still be able to provide a valid response to this question.

Pre- and Post-exposure Prophylaxis Questions for HIV+ participants

SAY: Researchers are studying whether antiretroviral medicines could possibly be taken to prevent HIV infection.

H8. Before today, have you ever heard of people who do not have HIV taking antiretroviral medicines, to keep from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Twenty-three respondents received this question and all 23 respondents were probed on this question. Twelve respondents answered “no” and 11 answered “yes.” Respondents who answered “no” had no knowledge of post-exposure prophylaxis (PEP) or pre-exposure prophylaxis (PrEP). Respondents who answered “yes” had heard of PEP and PrEP but most did not know anyone who had used PEP or PrEP. The intent of this question was not clear to a couple of respondents. These respondents did not know if the question was asking if they have heard of PEP/PrEP or if they personally know people who have taken it. Finally, one respondent misinterpreted this question, which caused him to provide an invalid response. These findings are discussed in more detail below.

Respondents who answered “no” often reported that they had never heard of people who did not have HIV taking antiretroviral medications until hearing it stated in this question. For example, when probed on his response one respondent stated, “That’s completely foreign to me. It’s a first.”

Respondents who answered “yes” discussed having knowledge of PEP, and a couple of respondents had knowledge of PrEP. Some respondents who had knowledge of PEP use had heard of this treatment through the media (i.e., fictional television shows, television news reports, magazines, internet, and research journals). Also, one respondent reported learning of it through a support group and another learned of it through his doctor. Respondents often had limited knowledge of PEP but understood it to be a medication individuals who were HIV negative could take after discrete or ongoing events which potentially exposed them to HIV, such as engaging in unprotected sex (consensual and nonconsensual), experiencing condom breakage during sex, or experiencing a finger prick from a needle.

Respondents who had heard of PrEP discussed how individuals who are HIV negative can take this medication prior to engaging in risky behavior. For example, when asked about his knowledge of PrEP one respondent replied, “Prep in terms of prophylaxis. If you know you’re engaging in risky behavior and are HIV negative it’s an option you could discuss with your doctor.” When asked to describe who might use PrEP this respondent said someone who is HIV negative and engages in sex with an HIV positive partner, or someone who is HIV negative and unwillingly has sex with someone who is HIV positive, or sex workers who engage in unprotected sex as a means to make more money.

Most respondents had only heard of PEP/PrEP through media or medical sources. In fact, only two respondents reported knowing someone personally who has used PEP/PrEP. One respondent reported knowing two people who had used PEP. One of these people is HIV negative and was a victim of sexual assault and used PEP, and the other person used PEP as a precaution after experiencing a “finger stick.” Another respondent discussed having a “promiscuous” friend who was HIV negative but obtained antiretroviral medications through someone they knew who was HIV positive and was taking them as a means to protect himself from contracting HIV.

The intent of this question was not clear to a couple of respondents. One person was unsure how to respond to this question because it was not clear to him if this question was asking if he has heard of PEP/PrEP before or if he knows someone who has used PEP/PrEP. Upon hearing this question he asked, “When you say heard of, I’ve heard of it but I’ve never known anyone personally.” Ultimately he ended up answering “yes” to this question as he has heard of PEP/PrEP through articles he has read and through health care providers but he has never known anyone who has used it. Another respondent was also unsure how to answer this question. When first asked this question he stated “I’ve heard about studies or theories.” When pushed to give a response he answered “yes.” During probing he said that he has read in magazines that people who have never tested positive for HIV can take antiretrovirals to prevent themselves from getting HIV, but he doesn’t know anyone personally who has done this. However, he does know someone who was tested for HIV and their test result came back indeterminate and this person’s doctor prescribed him antiretroviral medication. It was not clear to this respondent what type of information this question was eliciting – whether he has heard of this or if he knows someone who has taking these medications – and if the situation his friend experienced should count.

There was one case of clear response error. This respondent misinterpreted this question and answered “yes” despite having no knowledge of PEP/PrEP prior to taking this survey. He interpreted this question as asking if had ever heard of someone who was HIV positive not taking antiretroviral medications. He does know people who are HIV positive who do not take antiretrovirals, and therefore he answered “yes” to this question. However, after hearing the question a second time during probing he realized how he had misinterpreted this question: “How I took that was more like [someone who is] HIV positive but not taking their medications.” He then asked, “Does that even exist?” He has never heard of PEP/PrEP before and has never known anyone who was HIV negative taking antiretroviral medications. It was not clear what caused this respondent to misinterpret this question in this way. Finally, as in the HET interviews, a couple of respondents voiced disbelief regarding the effectiveness of PEP/PrEP.

H9. In the past 12 months, have you given your antiretroviral medicines to a sex partner who was HIV-negative because you thought it might keep them from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Thirteen respondents received this question. All 13 respondents answered “no”. Twelve were probed on this question. As in the HET interviews, six respondents were skipped out of this question due to interviewer error. This is likely due to the skip instructions following question H8, which read “If H7 is (0, 7, 9) skip to End.” Interviewers likely read it as instructing them to skip to the end if respondents answered no, or don’t know or refused to answer question H8. This problem is not likely to occur in the CAPI instrument. During probing all respondents indicated that they have never shared their antiretroviral medicines with sex partners.

Respondents gave various reasons for why they answered “no” to this question. All respondents verified during probing that they had never shared their HIV medications with sex partners. Some respondents knew others who had done this, but often they had never heard of anyone who was HIV positive sharing their medications with sexual partners who were HIV negative. One respondent indicated that he answered “no” because is morally opposed to giving people who are HIV negative antiretroviral medications as a preventative measure because it may encourage risky behaviors. He was also doubtful that this would be an effective means of protection. A couple of respondents also commented that this sounded like a bad idea and were skeptical that this would be an effective means of prevention. One of these respondents raised concerns of side effects from these medications and thought there were other methods of prevention that are known to be effective. “That’s just odd to me because I feel like these medicines, unless you’re positive, they can have some crazy side effects that could trigger things. I’m like use a freaking condom.” One respondent also indicated that he already practices safe sex and therefore there is no need to share his medication with HIV negative sex partners. Finally, a couple of respondents believed only certain types of HIV medications could be used to prevent people who are HIV negative from contracting HIV. One of these respondents indicated that the type of the medication he is on is not a medication that can be used for this purpose; one respondent was unsure if the medication he was on could be used for this purpose.

Pre- and Post-exposure Prophylaxis Questions for participants who have not tested HIV+

SAY: Researchers are studying whether anti-HIV medicine -- a pill -- could possibly be taken to prevent HIV infection.

H10. Before today, have you ever heard of people who do not have HIV taking anti-HIV medicines, to keep from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7

Don't know..... 9

Only two respondents received this question and both respondents were probed on this question. Both respondents answered “no” to this question. One respondent indicated that he said “no” because he has never heard of someone who was HIV negative taking medications to prevent them from contracting HIV. This respondent interpreted “anti-HIV” to mean medications that would prevent you from contracting HIV if you had sex with someone who was HIV positive. The other respondent who answered “no” to this question had heard of PEP/PrEP before but he does not know anyone personally who has taken this medication. During probing he said that he has heard of studies where people who are HIV negative are given “antiviral” medications as a preventative method to stop them from contracting the disease. He said he answered “no” to this question because he does not know anyone who has participated in these studies or taken “antiviral” medications as a preventative measure. However, he does know people who were HIV negative and were exposed to HIV and went to their doctor who prescribed them medication to prevent them from contracting HIV. He did not know what kind of medication they were prescribed though. He knew it was important for them to take the medication within a certain time frame and they only had to take the medication for a short period of time. It seems he interpreted this question as asking about PrEP only, and did not consider the fact that he has friends who have used PEP.

H11. In the past 12 months, have you taken anti-HIV medicines after sex because you thought it would keep you from getting HIV?

No..... 0
Yes..... 1
Refused to answer..... 7
Don't know..... 9

H12. In the past 12 months, have you taken anti-HIV medicines before sex because you thought it would keep you from getting HIV?

No..... 0
Yes..... 1
Refused to answer..... 7
Don't know..... 9

Two respondents received questions H11 and H12. Both of these respondents were probed on this question, and questions H11 and H12 were probed on together. Both respondents

answered “no” to questions H11 and H12. One respondent indicated that he had never taken any type of medication before or after sex because he thought it would keep him from contracting HIV. These questions also assume that a respondent has had sex in the past 12 months, which in the case of one respondent, was not true. Because he has not had sex in the past 12 months, he has not taken any medications before or after sex to keep from getting HIV. When asked why he answered “no” to question H11 he replied, “Because I haven’t had sex. I would say... in a couple of decades... 20 years. The last time I had sexual intercourse was 1978. I was 28.” This respondent thought it was very odd that he would be asked these questions when he had already indicated in the survey that he had not had sex in the past year.

H13. Please tell me if you got any of the anti-HIV medicines you took from the following people or places. Did you get them from...**[GIVE RESPONDENT FLASHCARD C. READ ALL CHOICES.]**

	No	Yes	Refused	Don't
	to answer know			
a. Pharmacy or drug store.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
b. Doctor or other health care provider.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
c. Sex partner, friend, relative, or acquaintance.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
d. Internet.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
e. Some other place.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
(Specify _____)				

No respondents received this question during testing.

H14. Would you be willing to take HIV medicines every day to lower your chances of getting HIV?

No.....	<input type="checkbox"/> 0
Yes.....	<input type="checkbox"/> 1
Refused to answer.....	<input type="checkbox"/> 7
Don't know.....	<input type="checkbox"/> 9

Two respondents received this question and both were probed on this question. Like respondents in the HET interviews, both respondents had difficulty providing a definitive response to this question. When first asked this question one respondent asked, “Is this just a yes or no?” This respondent thought about his response for a while and ultimately answered “no”. When asked why he answered “no” he stated that he did not feel enough research has been done

to know about the side effects an HIV negative person might experience from these medications. He also stated that he is now married but if he was still single he would be more apt to say “yes” to this question. The other respondent also struggled to provide a yes or no response to this question. When first asked this question he stated, “If I were having sex I would. Otherwise I would not.” When prompted to select yes or no he stated, “Yes to lower my chances.” During probing he stated that if researchers could prove that taking HIV medicines everyday would prevent you from contracting HIV he would be willing to take them. However, after hearing the question a second time during probing he took issue with the clause “lower your chances” in this question. He believed that this indicated that there could still be a chance he would contract HIV while taking these medications and he would want to know what his odds of contracting it would be. He then stated that when he initially answered this question he interpreted it as asking ‘would you be willing to take HIV medicines every day to *prevent* you from getting HIV,’ which he views as very different from ‘lowering your chances.’ He then wanted to change his response to “no.” He stated that after hearing this question a second time it seemed like this question was referring to a vaccine, much like a flu shot that would lower your chances of contracting the disease but could not guarantee that you would not contract it. He said ultimately his willingness to take such a medication would depend on his sexual activity level (and right now he is not sexually active) and to what percentage it would lower his chances of contracting HIV. Because he is not sexually active and it is not clear how effective this medication is he wanted to change his response to “no.” It is also important to note that when probed on his interpretation of the term “HIV medicines,” this respondent indicated that he interpreted it to mean a vaccine that is different from the types of medications prescribed to treat HIV. He discussed how people who are HIV positive take antiretroviral medication to keep their viral load low and to prevent the HIV from mutating and to counteract the symptoms of the HIV.

IDU QUESTIONNAIRE

E1. What is your date of birth?

$\frac{\text{M}}{\text{M}} / \frac{\text{D}}{\text{D}} / \frac{\text{Y}}{\text{Y}} \frac{\text{Y}}{\text{Y}} \frac{\text{Y}}{\text{Y}}$

This question was not probed on.

E6. What county do you currently live in? _____

*See Appendix B for list of eligible counties in Washington, DC and Baltimore MSAs.. For E6a auto-fill **project area** with “Washington, DC” or “Baltimore, MD” depending on county.)*

All 25 respondents received this question and all but one respondent answered “Washington, DC”. This question was not probed extensively; however, a couple of respondents had difficulty answering this question. As in previous rounds one respondent was confused by this question because he lives in the city of Washington DC, which is not governed by a county. Another respondent also had difficulty answering this question because he does not have a permanent residence at the current time. When asked this question he said “Maryland...DC... I don’t know.” He indicated that he lives part of the time with his sister and part of the time with his friend. The interviewer entered “Washington, DC” for him and used Washington, DC as the project area in all subsequent questions. This raises an important question of what to do with respondents who are homeless or transient between MSAs.

E6a. How long have you been living in [*project area*]? (*Interviewer:* If response is in months, enter 0 below and then enter the number of months in the next screen.)

Years ___ ___

[Refused = 777, Don't know = 999]

If E6a= 1-99, 777, or 999, skip to Q2a

E6b.

Number of months: ___ ___
range of values= 1-11

[Refused = 77, Don't know = 99]

All 25 respondents received this question. This question was not probed on extensively, however a number of problems were found. The majority of respondents in this round have lived in the Washington, DC their entire lives. In fact the 11 out of the 25 respondents indicated this by answering “all my life,” “life,” or “since birth” instead of providing a number of years. Interviewers either then probed to see how many years that was or simply filled in the respondent’s age. As in previous rounds, two respondents have moved away from and returned

to Washington, DC multiple times in their lives. While one respondent took this into account and reported on the number of months he has been living in Washington, DC since he last returned, another respondent provided a number that represented how many years he has lived in Washington, DC overall. This respondent indicated that he has lived in Washington, DC off and on his entire life. He most recently moved back in December of 2010. Instead of answering four months, he answered that he's been living in Washington, DC for 24 years.

- E4. Do you consider yourself to be Hispanic or Latino/a?
- No.....0
 - Yes.....1
 - Refused to answer.....7
 - Don't know.....9

All 25 respondents received this question and all 25 respondents answered “no.” Only four respondents were probed on their understanding of this question. As in the HET and MSM interviews, respondents did not understand Hispanic to be an ethnicity separate from one’s race. Three respondents in this round interpreted this question as asking about their race, and indicated that they answered “no” because they are African American. As in the HET and MSM interviews, one respondent relied on his knowledge of his familial background when answering. When asked why he answered no he said, “Because my mother and father are both black. We have no Hispanics in our family.” One respondent interpreted this question as asking about his nationality. When asked why he answered “no” to this question he said, “Because I’m American.”

- E5. **[GIVE RESPONDENT FLASHCARD A.]** Which racial group or groups do you consider yourself to be in? You may choose more than one option. **[READ CHOICES. CHECK ALL THAT APPLY.]**
- American Indian or Alaska Native..... 1
 - Asian 2
 - Black or African American 3
 - Native Hawaiian or Other Pacific Islander.....4
 - White5
 - Refused to answer.....7
 - Does not apply8
 - Don't know.....9

All twenty-five respondents received this question, however only three respondents were probed on their response. All but one respondent selected “black or African American” only. One respondent selected “black or African American” and “American Indian or Alaska Native.” Respondents who were probed on this question indicated that they based their response to this question on their ancestry and discussions they have had with others regarding their race. As in the HET and MSM interviews, there were some administration problems with this question. These findings are discussed below.

The three respondents who were probed on their response indicated that they based their race on their ancestry and discussions they have had with family members regarding their race. For example, when asked why she identified as “black or African American” one respondent stated, “That’s what I’ve always been told [by] my parents.” One respondent indicated that it’s possible that there were other races in her family background but as far as she knew everyone was African American. When asked why she answered the way she did she replied, “Because that’s what my family, basically that’s what we are. We don’t have any mixed races. I’m sure there are some Indians way back in the day, great-great grandmas and stuff but I don’t know about that.”

One respondent did select more than one race. This respondent identified as “black or African American” and “American Indian or Alaska Native” because his great grandmother was American Indian. “I consider myself black or African American and I consider myself part American Indian because my great grandmother was American Indian. Although there’s no paperwork for that because there is some literacy problems with my grandmother who told me about my great grandmother.” He went on to discuss that this is folklore in his family however he still identifies as American Indian.

Finally, as in the HET and MSM interviews there were some administration problems with this question. In 15 of the interviews the interviewer did not read the response options to the respondent, however the handcard was provided. Respondents often answered before the interviewer could finish reading the question portion or before the response options could be read. Additionally in one interview the respondent answered once she heard a response option that applied to her, and in another interview the respondent refused to look at the handcard when answering. There was no indication that these administration problems affected these respondents’ ability to provide a valid response to this question.

E7. Do you consider yourself to be male, female, or transgender? [*CHECK only ONE*]

- Male..... 1
- Female 2
- Transgender 3
- Refused to answer..... 7
- Don't know..... 9

All 25 respondents received this question. Twelve respondents answered “female” and thirteen respondents answered “male.” Most respondents were probed on this question. The majority of respondents interpreted this question as asking about their biological sex. Respondents were also probed on their interpretation of the response category “transgender.” There were no differences in how men and women interpreted this term, however men were more likely than women to report that they were unsure of the meaning of this term. These findings are discussed in more detail below.

Most of the respondents probed on their response to this question indicated that they were thinking about their biological sex, and discussed such things as the sex they were assigned at birth and their anatomy. Some respondents also discussed identifying with their biological sex,

and gender presentations. For example, one woman stated, “I was born a female. I consider myself as a female and I live my life as a female.” One respondent also indicated he answered male because he was born a male and socialized to be a man: “Because I was raised and born as a man.”

Some respondents recognized the fluidity of sex and gender during probing on this question. For example, one respondent recognized the ability to have an ambiguous sex. When asked why she answered “female” one of the reasons she gave was “I don’t have two body parts... I have just a vagina.” Other respondents commented that they have never wanted to change their sex or gender. For example when asked why she answered “female” one woman stated, “I was born female. That’s all I’ve ever been.” Recognition of the fluidity of sex/gender when interpreting and responding to this question may have been due to the inclusion of the term “transgender” in the response options. The respondents from this sample were also recruited from a needle exchange clinic which offers programs for transgender individuals and these respondents may have more experience with this population than other groups of respondents (such as those in the HET sample).

Often respondents conflated the constructs biological sex and sexuality. For example, when asked why he answered “male” one man stated, “Because I’m straight up man. I don’t go outside that. I ain’t doin’ no none of that gay stuff.” Similarly, another respondent stated the following when asked why he answered “male,” “Because I feel that I only have women as sexual partners. I never did anything with a male. So I think that changes your gender- not your gender but your way of considering yourself, transsexual, homosexual.” The inclusion of the term transgender in this question may have led respondents to conflate biological sex and sexuality. For example, when probed on the term transgender this same respondent stated,

Transgender means that I think you one who considers their self to be versatile, a man and a woman. I guess you have inner feelings that you can feel like you are a woman sometimes and feel like you are a man other times. I think that’s something that has to do with transgender. I think that’s the one who goes both ways... deal with males and females- homosexual partners.

However, a couple of respondents did distinguish between sex and sexuality when discussing why they selected the response they did. One woman, who identified as a lesbian in question 8b discussed here how she identifies as a female but how others often characterize her as “manly,”

Because regardless of my sexual preference, I’m still a woman first and that will never change... Physically my body I’m a woman. You know but, everybody else says my aggressiveness is more manly. But physical being is a woman. Mentally I think like a guy sometimes... I present myself as a lady all the time... I’m a woman. I don’t care how I act. I’m always that first.

Similarly, one man initially answered this question, “I consider myself to be male but I also consider myself to be queer, which is not really transgender. It’s a whole ‘nother genre. I’ll just say male.” When probed on his initial response to this question he said,

Because I'm not like a regular gay guy. You know this new gay guy with the overpriced jeans and the kids and everything is a lot for me to absorb. Even thought I might just be getting old... I'm the kind of guy who has never done drag and I would never do drag. Not because I don't like women. I love women. I love lesbians around me, homosexual women, the mental state of women. But the male part of me is very male and I don't look like a woman... I don't have this problem with being masculine, you know, and being with another man.... And people see me as a man. And sometimes people see me a straight man, which is really scary.

Transgender

Respondents were also probed on their interpretations of the term transgender. Most respondents had some familiarity with this term however some were unsure of the meaning. Respondents generally understood this term as referring to a person who wants to be the opposite sex and who presents themselves as the opposite sex. When probed on this term some respondents interpreted this term as referring to a person who dresses like the opposite sex. For example, when asked how she interpreted this term one woman stated "A man who dresses up like a woman or a woman who presents herself as a man." Others interpreted this term to mean someone who not only dresses like the opposite sex but has altered their body in some way. For example, one woman interpreted a transgender as "a male that has a female reproduction organs and is walking around wanting to be a female... might take stimulants to have breasts and a butt. Other respondents also discussed how the individual identified as the opposite sex and had a desire to change their sex. For example, when asked about her interpretation of this term, one woman stated, "Transgender is a male or female that, you know, doesn't feel that they are that particular sex. They seek a doctor or whatever, take hormone shots and literally change their sex."

As in the HET interviews, some respondents conflated the terms transgender and sexuality. For example, when probed on her interpretation of this term one woman stated, "It's kind of sort of like a man that like to dress as a female or a gay person. Something like that." Similarly, another respondent said a transgender person is "someone that's the opposite of what they were born." He then added that he would just refer to these people as gay.

Some respondents did report being unsure of the meaning of this term. And often the same respondents who were unsure of the meaning of this term were the same ones who conflated transgender with sexuality. For example, one woman said she was unsure what this term meant. When asked what she thought it could mean she said, "Whether you could go for a male or a female. Say like some women, they're women but they act like men." Another respondent thought the term transgender meant "gay or your sexual preference, whether your gay or lesbian." She then added that she wasn't sure if this term only meant a person was gay or lesbian but she does have a male cousin who is transgender. She described him as gay and but stated that he presents himself as a man.

One respondent interpreted transgender as referring to a person who was born with ambiguous genitalia:

Transgender to me means somebody that's born with both sexes and they have one removed and they can have more features of the other than they do- like they

could have more features of a man than they do a woman. But they might have the vagina but not the penis. Sometimes I think they'll crossover. If you're born with both sexes that if you're a man he's gonna be a woman. He can have it replaced or something like that. I think there a surgery. I know people who have had surgeries for that kind of thing.

Finally, one respondent appeared to be uncomfortable with this question. Upon hearing this question for the first time he said, "I know you didn't just ask me that! I'm straight up dude."

D5. What is the highest level of education you completed?

[DO NOT read choices. Check only ONE.]

- Never attended school..... 00
- Grades 1 through 8..... 01
- Grades 9 through 11..... 02
- Grades 12 or GED..... 03
- Some college, Associate's Degree, or
Technical Degree..... 04
- Bachelor's Degree..... 05
- Any post graduate studies 06
- Refused to answer..... 77
- Don't know..... 99

All 25 respondents received this question and 11 were probed on their response. There were some cases of response error found. Similar to the HET and MSM interviews, there was some ambiguity surrounding the category "some college, associate's degree or technical degree". There were a couple of cases where respondents received certificates from technical schools but answered "grade 12 or GED." One respondent received certificates in computer training, such as how to use Microsoft office and another respondent received certificates through Project Empowerment Plus, a jobs training program for returning offenders. As in the HET interviews, there were some respondents who dropped out of high school but later earned a GED who had difficulty answering this question. One respondent initially answered this question "10th grade. I got my GED" and the interviewer selected "Grades 12 or GED" for him and did not probe further. In two other cases however, the respondents both responded "11th grade" to this question, however, later revealed that they earned GEDs. Interviewers did not probe on why they did not initially report the GED. More testing is needed to determine why these errors occurred.

D6. What best describes your employment status? Are you:

[READ CHOICES. CHECK only ONE.]

- Employed full-time..... 01
- Employed part-time..... 02

A homemaker.....	<input type="checkbox"/>	03
A full-time student.....	<input type="checkbox"/>	04
Retired.....	<input type="checkbox"/>	05
Unable to work for health reasons	<input type="checkbox"/>	06
Unemployed.....	<input type="checkbox"/>	07
Other.....	<input type="checkbox"/>	08
Refused to answer.....	<input type="checkbox"/>	77
Don't know.....	<input type="checkbox"/>	99

All 25 respondents received this question. No respondents in this round of testing selected “employed full time,” three answered “employed part time,” one answered “a homemaker,” three answered “retired,” five answered “unable to work for health reasons,” eleven answered “unemployed,” and 2 answered “other.” This question was not probed on extensively. While some respondents appeared to provide valid responses to this question, there were some indications of problems. In particular, some respondents had difficulty mapping their response onto the categories provided. In some interviews, the respondents were not read the response options as instructed. These findings are discussed in more detail below.

Many respondents appeared to provide valid responses to this question. Only one respondent who answered “employed part time” was probed on this question. This respondent works per diem and when he works it is only a couple of hours a day and it is not a job he works at every day. Two of the respondents who selected “unable to work for health reasons” were probed on their response to this question. Both of these respondents indicated that they had health and/or mental health problems that prevented them from working and both are applying for disability benefits. Five of the respondents who answered “unemployed” were probed on this question. Four of these respondents are currently looking for work and one of these four has also applied for disability benefits. One respondent has been unemployed for 2 ½ years and has stopped looking for work. One of these respondents also mentioned during probing that he does “side work” restoring old homes but this work is sporadic.

However, some respondents provided responses that did not appear to be valid. One respondent who answered “retired” indicated during probing that he stopped working following a heart attack, however he collects SSI. It’s not clear if this respondent should have selected “unable to work for health reasons.” Some respondents had difficulty selecting a response that best fit their employment status. One respondent initially responded to this question, “I’m self employed” before hearing all of the response options. The interviewer read the rest of the options and the respondent replied, “I guess other.” When probed on her employment status she indicated that she gets paid for hair braiding and how much she works on any given week could vary a lot. Another respondent indicated that multiple response options could describe his current employment status. This respondent, upon hearing this question for the first time, stated the following,

You could put me under unemployment, unable to work for health reasons, and other. Because I make paintings but I don’t charge my friends but my friends do a

lot of things for me. You know, like they give me money and they accept mail, and they let me stay at their houses. So they do a lot of things for me. So I really can't charge them for my paintings.

He ultimately ended up selecting other and gave the following reason, "My life is some other... it can't really be put into a box."

Finally as in the HET and MSM interviews, several respondents answered this question before hearing all of the response options, and often they answered after hearing the option that best reflected their employment status. Often interviewers did not read the remaining response options. In one case the respondent answered "unemployed" as the interviewer was reading the second response option. However, he then added that he does work for a person who owns his own business. The interviewer did not read the remaining response options, but rather asked the respondent "would you say employed full time, employed part time?" To which the respondent replied, "I would say employed part time." Another respondent answered "unemployed" before hearing any of the response options. The interviewer then read the response categories and he changed his answer to "unable to work for health reasons". The interviewer did not probe further to determine why these respondents changed their responses after hearing the categories. Finally, one respondent answered "unemployed" before any of the response options were read and the interviewer did not continue to read the list. During probing this respondent revealed that she was applying for disability benefits. It's possible that this respondent could have been categorized as "unable to work for health reasons." However, this option was never offered to the respondent.

D7. What was your household income last year from all sources before taxes?

GIVE RESPONDENT FLASHCARD C. DO NOT read choices.

SAY: Please take a look at this card and tell me the letter that best corresponds to your monthly or yearly income.

Monthly Income	Yearly Income	
a. 0 to \$417.....	a. 0 to \$4,999.....	<input type="checkbox"/> 00
b. \$418 to \$833.....	b. \$5,000 to \$9,999.....	<input type="checkbox"/> 01
c. \$834 to \$1041.....	c. \$10,000 to \$12,499.....	<input type="checkbox"/> 02
d. \$1042 to \$1250.....	d. \$12,500 to \$14,999.....	<input type="checkbox"/> 03
e. \$1251 to \$1667.....	e. \$15,000 to \$19,999.....	<input type="checkbox"/> 04
f. \$1668 to \$2082.....	f. \$20,000 to \$24,999.....	<input type="checkbox"/> 05
g. \$2083 to \$2500.....	g. \$25,000 to \$29,999.....	<input type="checkbox"/> 06
h. \$2501 to \$2916.....	h. \$30,000 to \$34,999.....	<input type="checkbox"/> 07
i. \$2917 to \$3333.....	i. \$35,000 to \$39,999.....	<input type="checkbox"/> 08

- j. \$3334 to \$4167..... j. \$40,000 to \$49,999..... 09
- k. \$4168 to \$4999..... k. \$50,000 to \$59,999..... 10
- l. \$5000 to \$6,250..... l. \$60,000 to \$74,999..... 11
- m. \$6251 or more.....m. \$75,000 or more..... 12
- Refused to answer..... 77
- Don't know..... 99

All 25 respondents received this question and 12 respondents were probed on this question. As in the HET and MSM interviews, a lot of problems were found with this question during this round of testing. As in the previous rounds this question was not administered correctly in 11 of the 25 interviews. Several respondents excluded the income of other household members when answering. One respondent did not include income she received from all sources and one respondent could not map his response onto the options provided in the handcard. Finally, two respondents were unsure what their household incomes were for the past year. One provided a response and the other answered “don’t know.” These findings are discussed in more detail below.

As in the previous rounds of testing, the most prevalent problem found with this question was that interviewers did not read the question as worded. In this round, interviewers most often did not read the instructions following the question as worded, however, in a couple of cases the interviewers did not read the instructions at all and in one interview the interviewer did not read the question or the instructions as worded. In this round in particular, interviewers significantly changed the wording of the instructions and in some cases provided information to the respondent on how to use the handcard. Interviewers changes to these instructions ranged from making them more concise, “Tell me whatever category works” to making them more elaborate “You can tell me here, instead of coming up with an exact number, you can tell me the letter. You see how they have letters. You can tell the letter than corresponds to your income, either monthly or yearly. However it’s easier for you to think about it.” In one interview, the interviewer did not read the question or the instructions as worded but said, “If you can just look at this here and just tell the letter than best describes.” This is problematic in terms of evaluating the question because we know from other rounds that some respondents had difficulty using the handcard, and this perhaps limited the evidence we found for this problem in this round of testing. Also, in this last case the interviewer is encouraging the respondent to estimate, rather than providing an exact amount. However, this question was not probed thoroughly enough to determine if these interviewer errors contributes to response error.

Several respondents did not include the income of other household members when answering, even when other household members contributed to the expense of the home and the household. For example, one respondent answered “C” but reported that she was only included income she herself received last year. However, she considers herself to be in a common law marriage and did not include her partner’s income in her response. If she had included him in her response she would have answered “H.” While it wasn’t always clear why these respondents excluded income from these household members, one respondent indicated that she did so because she does not know her partner’s income.

Likewise, a couple of respondents found this question difficult to answer as they were unsure of their own income for the past year. One respondent estimated that his income was around “D” or “E” last year and ultimately settled on “D”. Another respondent ended up answering “don’t know” as her sister and her husband pay all of the bills and she does not know what their income is.

While most respondents considered income from paid jobs, disability and social security benefits, one respondent did not include income from all sources, however it wasn’t clear if this was response error or not. This respondent included in her response money she earned but she did not include food stamps that she received in her response.

Finally, one respondent could not map his response onto the response options listed on the handcard. After reviewing the handcard he said, “I didn’t make none of that.” He continued to look at the card and say that he couldn’t find what he made. He then said “On my W2 I got \$2,800”. However, he could not determine what category that amount would fit under.

E8. Have you ever in your life shot up or injected any drugs other than those prescribed for you? By shooting up, I mean anytime you might have used drugs with a needle, either by mainlining, skin popping, or muscling.

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

All 25 respondents received this question and all 25 answered “yes”. Twenty-two of the respondents were probed on their response. Some respondents provided a response before hearing the entire question. Some respondents did not provide a yes/no response to this question and some respondents appeared to be unfamiliar with the terms used in this question. Despite these problems, most respondents appeared to provide a valid response to the question. These findings are discussed in more detail below.

Question Administration

Six respondents answered before hearing the entire question. In most cases the respondents answered “yes” to this question after hearing the question and the interviewer did not continue to read the definition of “shooting up” and their response appeared to be valid. However, in one case the respondent answered “no” after hearing the question but before the interviewer could read the definition. The interviewer then read the definition of “shooting up” and the respondent changed his answer to “yes.” This finding suggests that reading the entire question is important for respondents’ comprehension of the question. However, some respondents exhibited comprehension problems with this question when it was read it was not read in its entirety as well as when it was.

The most common problem we found was respondents did not always provide a response in the appropriate format. This happened when the question was administered

correctly and when it was not. For example, in one case the interviewer only read the question and did not read the definition of “shooting up” that follows the question. This respondent indicated that he did not know what this question was asking him. The interviewer then read the entire question (question and definition) and instead of providing a yes/no response the respondent indicated the last time he injected drugs. Other respondents who were administered the question correctly, indicated how they inject drugs, as if the definition provided was a list to select from. For example, a couple of respondents, instead of answering yes or no, answered “skin popping”. Similarly, when asked this question two respondents did not answer yes or no, but indicated that they inject into their veins.

Another common problem found was some respondents were unfamiliar with the terms used in the question. That is, several respondents indicated during probing that they did not know the meaning of “mainlining,” “muscling” and “skin popping”. However a couple of respondents inferred the meaning of the terms from the context of the question. For example, when probed on the term “mainlining” one respondent said she did not know what it meant but then asked, “Like with the vein, right?” Another respondent, who stated that she did not know the meaning of “muscling” inferred that this meant you inject drugs directly into a muscle.

Other respondents indicated that they were familiar with these terms but gave varying interpretations of their meaning. Most respondents understood the term “mainlining” to mean when you inject drugs into a vein. One respondent stated that mainlining is when you “find a line in your skin”. Respondents also had varying interpretations of the term “skin popping” but the most consistent interpretation was when you stick the needle in your body without looking for a vein and inject. For example, one respondent interpreted this term to mean as referring to when you are not looking for a vein to inject the drugs into but you stick the needle into your arm and inject the drugs. Respondents mentioned that this is sometimes done when one can no longer find a vein to inject into. Some respondents indicated that this meant one injected the drug right under the skin or when you “pop the skin” and inject without bringing any blood back into the needle. A couple of respondents had interpretations that deviated from these interpretations. One respondent interpreted “skin popping” to mean when a person injects intravenously and then shares the needle with someone else. Another respondent provided a more vague interpretation that didn’t appear to relate to injecting drugs. He said that “skin popping” is when you have bubbles on your skin and you pop them. Most respondents who said they were familiar with the term muscling interpreted this term to mean when one injects drugs into a muscle. Most respondents indicated that this was intentional. However, one respondent said muscling is “if you’re skin popping you may hit a muscle.” One respondent interpreted this term to mean when you stick the needle into the muscle in your vagina, specifically, when you can no longer find a vein to inject into. A couple of respondents had interpretations of this term that deviated from other respondents’ interpretations. One respondent interpreted this to mean when people inject hormones into their muscles but didn’t know if this term would also apply to injecting illicit drugs. Another respondent interpreted this term as meaning when your muscles get cramped, and gave no indication that this had anything to do with injecting drugs.

Despite having problems comprehending the terms used in this question, all of the respondents, who were probed, appeared to give valid responses to this question. As mentioned above all respondents answered “yes” to this question and of those probed, all indicated that they had injected some kind of drug in the past 12 months. The most common drug these respondents

they injected was heroin. However, some respondents also indicated that they inject Bam, Oxycontin, cocaine, cocaine mixed with heroin, crack cocaine and crystal meth. Most respondents indicated that they have been injecting drugs for five years or more, often for over 10 years. However, some respondents indicated that they have been injecting drugs for less than five years, and most of these respondents indicated that they began injecting in the past year. Frequency of injecting varied for respondents. Some respondents indicated that they inject on a regular basis (i.e., at least once a day, or at least once every other day), while others described themselves as less frequent users. A couple of women indicated that they have injected drugs five times or less in their entire lifetime.

Respondents who were less frequent users provided several reasons for why they did not inject more frequently. Some respondents indicated that they used other means to get drugs into their bodies, such as snorting drugs or smoking drugs. Some of these respondents described themselves as “snorters” and typically snort drugs to get high. However, when they are not able to get high from snorting drugs, they will inject. For example, one woman stated, “Because basically I snort drugs. If I just can’t seem to get it right (meaning get high), I resort to shooting up but I try to avoid that because I don’t like- I just don’t like being associated in that way.” Other respondents indicated that they had tried injecting drugs as a temporary fix to problems they were experiencing in life or to experiment and did not get addicted to it. For example, one woman said that this was something she did for recreation. “(It’s) not anything I wanted to become habitual.” Other respondents indicated that they were trying to not inject as frequently or were trying to get sober.

Finally, respondents mentioned other terms for injecting drugs into the body during the interview that were not included in this question. For example, one woman mentioned that she does not do “booty pumping,” which she described as injecting drugs into one’s “booty.” Another respondent discussed “pulse hitting,” which he described when you find a pulse point on your body, like in your elbow, armpit, or neck and you put the needle directly into that. This same respondent also mentioned “hot shots,” which he described in the following way:

When you go past the regular vein and you go into another vein. Now when you go into this vein this is not a normal vein so when you push the drugs in you what’s going to happen is first your body going to feel like it’s on fire. That’s why they call ‘em hotshots. First your body going to feel like it’s on fire. I see people’s arms swell up this big... It’s dangerous.

Several respondents also mentioned that they can no longer find veins to inject drugs into. Therefore they have others inject drugs into their neck for them. No respondents gave a specific name for this behavior but it came up in several interviews.

E9. When was the last time you injected any drug? That is, how many days or months or years ago did you last inject?

[Interviewer: Enter the number below. If today, enter 0]

Number ___ ___ ___ *[Refused = 777, Don't know = 999]*

If E9 is (777, 999), skip to Instructions at beginning of Network Questions.

E9a. Interviewer: Was this days or months or years? [*If today, enter “days”*]

Days..... ₁

Months..... ₂

Years..... ₃

All 25 respondents received this question and 23 of these respondents were probed on this question. Four respondents indicated that they had injected the day of the interview, three indicated they had injected the day before the interview, the remaining respondents had last injected anywhere between 2 weeks prior to the interview to one year prior to the interview.

Respondents who had injected the day of the interview or the day before the interview had no difficulty recalling this. When asked this question, these respondents typically responded “today,” or “two hours ago” “yesterday evening.” Additionally, it was also easy for other respondents to recall when they last injected even if this was several months ago. These respondents could recall injecting during life events. For example, one respondent could recall he last injected after a move, while another could recall that she last injected during a time when her family was in crisis and her daughter was hospitalized, and others recalled they last injected on their birthday day or around a holiday, and still one other could recall he last injected before going into rehab. However, other respondents had difficulty recalling precisely the last time they injected drugs. When asked this question they would provide answers like “It’s been about a year,” “probably two months ago,” Sometimes when respondents could not recall when they last injected drugs their answers would shift. For example, one respondent first indicated that he has last injected 8 months prior to the interview. Then during probing he changed his response to “about a year.” Like respondents for whom this was easy to recall, some respondents who had difficulty recalling tried to think about other events that occurred around or during the same time they last injected drugs. However, this wasn’t always effective in improving their recall. For example, one respondent could recall that he last injected when he had travelled to visit friends. He first answered this question “about three weeks ago or many a month,” when pushed to give a single response he said, “We’ll say 26 days ago. That’s far enough.” Another respondent stated that he couldn’t recall exactly the last time he injected drugs. He ended up answering “about a year.” While trying to recall this he said he thought it was winter the last time he injected and therefore answered “about a year.” However, during probing he said that they last time he injected was summer.

Finally, there was one case of clear response error found. This respondent initially answered “daily” to this question but was actually referring to how often she snorts drugs, not how often she injects. When read the question a second time, she answered “maybe 6 months ago.” She said she typically injects around a holiday or when she is celebrating something.

NETWORK QUESTIONS (IDU)

This series of questions appeared to work better as a sequence than did the heterosexual network questions. There were fewer incidents of response error and respondents appeared to include similar types of people in their networks both across questions and across interviews. However, response error was still found. In particular, more interviewer error emerged with this set of questions. Also, some respondents included people they did not know by name in their networks and others did not, even when instructed to do so. As in the heterosexual network questions, some respondents included people they should not have, such as people who were incarcerated, deceased, or sober. And they excluded some people who they should have included, such as people they do not see regularly and people with whom they do not have a close relationship, or those who they did not initially recall for unknown reasons.

*(For N1-N2 auto-fill **project area** with “Washington, DC” or “Baltimore, MD” depending on county.)*

SAY: I'm going to start by asking you about people you know in *[project area]* who inject.”
[Go to N1.]

Overall network size

N1. How many people in *[project area]* do you know who inject? (*By “know,” I mean you know their name **OR** you see them around even if you don’t know their name*).

[Refused= 7777, Don’t Know= 9999] _____

Twenty-five respondents received this question and all were probed on their response. Interviewers were instructed to read the definition of know in parentheses for 12 of the interviews and the respondents in the 13 remaining interviews did not receive this definition. Interviewers are often unsure if and when they should read question text that is in a different format from the question, such as when it is placed in parentheses. Often in the field this text is not uniformly read by all interviewers. Therefore we wanted to see how the question would perform both with and without this additional instruction. Responses to this question ranged from 2-1,000. However, only three respondents reported an overall network smaller than three people. As in question HET N1, the majority of respondents provided estimates when answering this question. Answering this question did not appear to be as difficult a task as question HET N1, however some respondents needed clarification before providing an answer and some respondents did have difficulty formulating a response to this question. Hearing the definition of “know” appeared to have little impact on whether or not respondents included or excluded people whose names they did not know. Some respondents included these types of people and others did not. Overall respondents were pretty similar in who they included in their response and often the people they included were some combination of friends, associates, acquaintances, and people they knew through their drug use only. Some respondents limited their answer further by only reporting on people they see regularly and people they have known for a long time. There were some cases where respondents erroneously excluded and included people from/in their response. Unlike question HET N1, respondents appeared to only include people they

knew in the Washington DC MSA. Our recruitment strategy may have had an effect on this however. These findings are described in more detail below.

As mentioned above respondents answered ranged from 2-1,000. The majority of respondents provided a response of 50 or smaller, and only three respondents provided a response that was smaller than three. Based on probing, we could determine whether 19 of the 25 respondents were providing a count versus an estimate when answering. Only four respondents counted when formulating their response and all of these respondents reported an overall network size of 5 or less. Estimates ranged from 7-1,000, with 10 being the most commonly given response.

This question did present some challenges to respondents but did not appear to be as difficult as task as question HET N1. Some respondents asked for clarification after hearing the question for the first time. Examples of asking for clarification included: “The whole total?”; “How many people I know?”; “How many people?” One respondent asked for clarification on whom to include in her response. “You mean that I know still do it now or used to?” After hearing the question a second time, she stated, “That would be mean still. They say inject, they got to do it now.” This respondent then based her response on those people who she knows are current injecting drug users.

Additionally, some respondents indicated that this was a difficult task. For example, upon hearing this question for the first time one respondent stated, “Wow, that’s a hard question. Because it’s a lot.” When prompted to give a number she said, “I know at least... put 25.” Similarly, another respondent stated, “I couldn’t give you a count. If I had to come up with a number I would say maybe 300.” A couple of other respondents had similar reactions to this question but all were able to provide an estimate fairly quickly. For example, one respondent’s initial reaction indicated that this was a difficult task but he was then able to provide a response. “I mean the whole total? Oh, shit. It’s a lot. We’ll go with, oh 15.” The estimates these respondents gave ranged anywhere from 5-300.

In addition to these problems, some respondents did not provide a response in the required format. Instead they said things like, “A lot,” “I know a quite a few,” or “8-10”. When prompted all of these respondents were also able to provide a response in the correct format.

In 12 of the interviews, the interviewer read the definition of “know” in parentheses and in 13 of the interviews, interviewers did not read this definition (i.e., ‘By “know,” I mean you know their name **OR** you see them around even if you don’t know their name.’). All but six respondents were then probed to determine if they adhered to this definition when answering. Having heard the definition appeared to have little bearing on whether respondents considered both injecting drug user whose names they know and those whose names they do not know. Of the eight respondents, who were read the definition of know and who were probed on who they considered when answering, six of these respondents only considered injecting drug users whose names they knew. For example, despite receiving this definition and acknowledging that she knows people by name and by face only who inject, one respondent still only included those she knew by name when responding. “I know a whole lot. By name, some by name, some I don’t.” When prompted to give a number this respondent replied, “5 by name.” Conversely, one respondent considered both injecting drug users whose names she knew and those who names she did not know, and one respondent only reported on injecting drug users whose names he did not know.

Interestingly, respondents who did not receive the clause were more likely than those who did to consider both injecting drug users whose names they know and those whose names they do not know. Twelve of the 13 respondents who did not receive this clause were probed on who they considered when answering this question. Nearly half of the respondents (n=6) who did not receive the clause considered both injecting drug users whose names they knew and those whose names they did not know. The remaining six respondents who did not receive this clause only considered injecting drug users whose names they knew.

When respondents were probed on their relationship to the people they reported on in this question the most commonly given relationship were friends, and people they knew through their drug use, including people from whom they purchased drugs, people to whom they sold drugs, people with whom they injected drugs, and people whom they have witnessed buying drugs to inject and/or injecting drugs. Respondents also included injecting drug users who are family members, significant others, fellow gang members, people they met in prison and associates or acquaintances in their response. Associates and acquaintances were described by respondents as people who they did not consider to be their friends but who they know through other people or through their drug use. Often they did not know these people's names or they may know them by a nickname. Often respondents reported on some combination of these relationships.

When asked how they knew these people injected drugs, respondents provided different reasons. These included, having witnessed these people inject drugs, having shared drugs together (either going in together on a purchase or shooting up together), having bought drugs from these people, sold drugs to these people, been told by these people that they inject drugs, or having heard from others that these people inject drugs. Some respondents were also probed to see if they included their drug dealers in their response. Of those who were probed, five respondents reported that they did include their drug dealers in their response. However, four respondents did not include their drug dealers in their response. In two of these cases it was because they were not sure if their drug dealers were themselves injecting drug users, however the reason for exclusion of drug dealers from their response was not determined in the other two cases.

In addition to the strategies discussed above, many respondents further limited their response to include only those people who they see on a regular basis. This is problematic because they do not report on their entire overall network. For example, upon hearing this question for the first time one respondent stated, "I know a lot of people in Washington but I only know two people right now that would be injecting people that I know, like that I would come in contact with, that I have their phone number and like visit them, something like that." Upon further probing this respondent stated that there were actually more than two people that he knows inject and live in Washington DC but because he does not see these people on a regular basis he did not include them in his response. "But then I thought about that as this was going down and there are two other people but I don't really see them. I mean I have both of their phone numbers and I saw one of them, you know, in the last month. But I don't really see them anymore but I know they're in DC somewhere." Additionally, a few others limited their response to those who they have known a long time and with whom they are close. As a result they excluded people they should have included in their response, such as people whose names they did not know, or people whose names they know but with whom they are not close.

In addition to excluding people whose names they did not know, people they do not see regularly, and people that they do not know well, one respondent also excluded the people he

knows from his drug rehab program, and people he sees through his volunteer work with injecting drug users. However, it was not determined why he excluded these people. It is also possible that these people are no longer injecting drug users.

The vast majority of respondents appeared to include only those injecting drug users who live in the Washington DC MSA, and most respondents only knew injecting drug users who live in the city of Washington DC. However, a few respondents included people they know in MD and VA, and appear to be in the MSA. One respondent did properly exclude people that he knows who inject drugs, and with whom he recently injected drugs, because they live in an area of Virginia which is outside the Washington DC MSA. However, when asked question IDU N1b, he included them after some deliberation. This is discussed more below. Additionally, as in HET N1, two respondents included people in their response who have passed away, people who are currently in prison, and people who have moved out of the Washington DC MSA area. One of these respondents also included people who are no longer injecting drug users in her response. These respondents may be considering all the people they have ever known who have injected drugs. For example, one woman who answered 1,000 discussed how she considered all the people she has known in the past 40 years who have injected drugs in her response:

A lot of them dead. A lot of people I did time with. All the oral joints they had in Washington DC, I knew about them... Different people's houses where they open up their house for you to go in there and use drugs. All the joints in DC I knew where they were at...abandon buildings where people don't live at no more... Every area NE, SE, SW... You might find 20 or 30 people in those joints. Sometimes you might find 8 or 9. Sometimes you find 4 or 5 it all depends. Some oral joints be more crowded than others... people that I basically know in the last 40 years and I'm 50. I started going to oral joints when I was like 10 or 11 years old. I used to go in there with my aunt and grandma, who died from HIV... I don't have to know all of them names but I know them when I see them and they know me when I see them and I've been there with them and I'm telling you I know a lot of them. I've been around 50 years and I know a lot of them and I started out early... There are people that I know personally... I bought drugs from them. Sold drugs for them. Went to jail behind them and vice versa. Shared needles with them and all that.

In sum, this question appeared to be more manageable for respondents than question HET N1. There were fewer cases of respondents who exhibited comprehension problems and problems with formulating a response. Additionally, respondents considered similar types of people when answering. However, some respondents did have difficulty answering this question and there were some incidents of response error found.

If R reported Overall network size of 0:

N1a: You said you don't know anyone in *[insert project area]* who injects. Is this correct? Remember, by "know," I mean you know their name **OR** you see them around even if you don't know their name.

No respondents received this question during the evaluation.

If R reported Overall network size of 1-3:

N1b: Is there anyone else you know in *[insert project area]* who injects? Remember, by “know,” I mean you know their name **OR** you see them around even if you don’t know their name.

Three respondents received this question during the evaluation. This question was not effective in increasing these respondents’ report of their overall network size. Two of these respondents were read the definition of “know” that followed the question (“Remember, by “know,” I mean you know their name **OR** you see them around even if you don’t know their name.”). One of these respondents answered “no” and stated that the only people he knows who inject are the two people he injected drugs with 10 months prior to the interview. One of these two people he knows by name and the other he does not. However, this same respondent attends drug rehab and also does volunteer work with people who are injecting drug users and he did not include any people he knows from these activities in his response. Another respondent, who also received the sentence defining “know,” replied to this question “I don’t know their names.” Despite being instructed to include people whose names he did not know in his response to questions N1 and the current question, this respondent only considered people who inject drugs that he knows by name. Finally, the third respondent who received this question was not read the definition of “know,” and he also only thought of people who inject drugs that he knows by name when answering this question. This respondent also exhibited a different type of response problem from the others. Upon hearing this question for the first time, this respondent stated, “I know some people in Virginia but that isn’t DC. So that would be two, three more people. But they’re in Virginia...” After debating whether to include these respondents in his response, he ended up including them and stated, “They’re my friends. They might come to D.C. to see me or something like that so that’s the only reason I included them.” However, these people should not have been included in his response as they live in an area of Virginia that is outside of the Washington DC MSA. It should also be noted that during probing on question N1, this respondent recalled two additional people who live in Washington DC that he knows inject drugs that he did not include in his initial response to N1 and this question did not prompt him to recall these people.

Recent Network Size

For Rs with Overall network size > 1:

N2a. Of those _____ *[insert number from N1]* people who live in *[project area]* and you know inject, how many have you seen at least once in the past 30 days? (*Again by “know,” I mean you know their name OR you see them around even if you don’t know their name*).

[Refused= 7777, Don’t Know= 9999] ___ ___ ___

All twenty-five respondents received this question. Responses ranged from 0 to 300, with two respondents reporting none and most respondents reporting a recent network size of 10 or

less. Several respondents asked for clarification upon hearing this question for the first time and a few interviewers had difficulty administering this question. Respondents, once they understood what this question was asking, did not appear to have difficulty providing a response. Interviewers were neither instructed to read nor not read the definition of know in parentheses, and as a result only the definition was only read in three interviews. Of those probed, about half of the respondents provided an estimate when answering this question. As in question IDU N1, respondents considered friends, associates or acquaintances, family, significant others, and neighbors when answering. Several respondents also included people they knew through their drug use, including people they purchased drugs from, people they sold drugs to, people with whom they injected drugs, people whom they have witnessed buying or using injectable drugs, and people with whom they have shared drugs or to whom they have sold drugs. Often respondents considered some combination of these relationships when answering. As in question N1, there were some cases where respondents erroneously excluded and included people from their response. These findings are discussed in more detail below.

As mentioned above respondents answered ranged from 0-300. The majority of respondents provided a response of 10 or smaller, and eight respondents provided a response that was smaller than three. Based on probing we could determine whether 18 of the 25 respondents were providing a count versus an estimate when answering. Eight respondents counted when formulating their response and all of these responses reported a recent network size 6 or less. Estimates ranged from 5-300, with an average response of 12 (with 300 removed from calculation).

While most respondents comprehended this question as intended and were able to provide a valid response, there were a number of problems with this question. A few interviewers had difficulty administering this question correctly. Neither of these interviewers read the question correctly. One interviewer changed the wording of the question only slightly. Instead of asking, "Of those 25 people who live in Washington DC and you know inject how many have you seen at least once in the past 30 days?" this interviewer asked "Of these 25 people you know from DC, and you know inject, how many have you seen at least once in the past 30 days?" This did not appear to affect the respondent's comprehension of the question as the respondent appeared to interpret the question as intended. However, another interviewer had great difficulty reading the question as worded. This interviewer initially asked the respondent, "Of those, you said 5-6 people, who live in Washington DC and you know inject, how many times have you seen at least once in the past 30 days?" The respondent then asked for clarification, "How many times have I seen them?" To which the interviewer responded, "yeah, so of those 5 or 6 people who live in DC and you know inject, how many times have you seen at least, how many times have you seen them at least once in the past 30 days? The respondent then answered "at least twice a day." In one interview, the interviewer also neglected to combine the respondent's answers to questions N1 and N1b when inserting the number of the overall network size in this question. Instead of asking about the five people he knows who inject the interviewer only asked about two people who he knows inject.

Additionally, several respondents had difficulty comprehending the question, even when the question was read correctly. Most of these respondents asked for some sort of clarification before answering the question. This typically included things like, "How many of them?" or "How many have I seen?" Other respondents provided responses in the incorrect format, despite being read the question correctly. For example, one respondent replied to question "everyday."

The interviewer then asked the respondent if he saw all seven people that he reported on in question N1 everyday and the respondent answered “yes.” Similarly, another respondent replied to this question “at least once, yeah.” The interviewer then asked “how many?” and he asked, “How many have I seen? Six or seven of them.” He ultimately settled on seven.

As mentioned above, only three respondents received the definition of “know” in parentheses during the evaluation of this question. One of these respondents appeared to be under the influence of drugs during the interview and therefore we were not able to successfully probe on his comprehension of this question. The other two respondents who received the definition appeared to only consider people whose names they knew but this was likely because they were both thinking about people that they see and inject with on a regular basis. One of these respondents answered “about 3,” stating that she sees her cousins and her one friend, all with whom she injects drugs. The other respondent who received this definition answered “about 10,” and stated that they are the people who she has interacted with and bought drugs with recently. “These are people that I have- we went and got the stuff together, and we went to the same place...and picked up the drugs.”

When respondents were probed on their relationship to the people they reported on in this question the most commonly given relationships were friends and people they knew through their drug use, including people from whom they purchased drugs, people to whom they sold drugs, people with whom they injected drugs, people that they witnessed buying or injecting drugs, and people with whom they have shared drugs. Respondents also considered associates or acquaintances, family members, significant others, and neighbors who inject drugs when answering. Often respondents considered some combination of these relationships when answering this question.

When asked how they knew these people injected drugs, respondents provided different reasons. These included, having witnessed them inject drugs, having shared drugs with them in the past (either going in together on a purchase or shooting up together), bought drugs from these people, sold drugs to these people, and one person stated that she could tell from their appearance alone that they are injecting drug users.

There were five cases where it was clear respondents were erroneously excluding people from their response that should have been included. However, there may be more cases that when undetected. Two of these five excluded people that they don’t know well, and people whose names they didn’t know. One respondent excluded a neighbor who should have been included in her response. As discussed above, one respondent attends drug rehab and also does volunteer work with people who are injecting drug users and he did not include any people he knows from these activities in his response to this question. Finally, one respondent only reported injecting drug users who she had seen the day of the interview and excluded five of her neighbors who she knows inject drugs. She did recall these people when prompted by question N2a. This same respondent did not include her drug dealer in the recent network. However, this respondent did not know if her drug dealer is an injecting drug user.

Some respondents also included people they should not have in their response. One respondent included people who are incarcerated and people who no longer inject drugs. Similarly, another respondent included people who she knows injected at one time, however, she was not sure if they continue to do so. Finally, one respondent included injecting drug users who she had talked on the phone with in the past 30 days but had not seen. “My cousins, we family...I talk to them. My girlfriend, I see her on a regular basis, not reg- talk on the phone. Of

the five that I gave you, yes, there the one's I've seen in the last 30 days or talked to them over the phone or something like that.”

Respondents were not probed extensively on whether or not they were only including people who they know inject and live within the Washington DC MSA. However, this was not a problem identified in the evaluation of N1, and in probing on N2a, respondents often talked about the people they have seen in the last 30 days live in Washington DC or they have seen them in their neighborhoods or specific areas of Washington DC.

Finally, respondents' own behaviors had direct implications for their recent network size, and for some of them, their behavior did not appear to be consistent – meaning it could vary week to week or month to month. There were a couple of respondents who were trying to get sober and were not injecting drugs as frequently as they had in the past. Therefore they haven't seen as many people in the past month as they normally do. One person was recently released from prison and he discussed not having seen as many people around since being released. One person also discussed how he has not been 'out and about' as much due to the weather and therefore has not seen as many people who he knows inject in the past month as he typically does.

For Rs with Overall network size= 1:

N2b. Have you seen this person at least once in the past 30 days?

- No..... 0 Go to Sexual Behavior Section
- Yes..... 1 Go to N6a.
- Refused to answer..... 7 Go to Sexual Behavior Section
- Don't know..... 9 Go to Sexual Behavior Section

No respondents received this question during the evaluation.

If R reported Recent network size of 0:

N2c: You said you don't know anyone in *[insert project area]* who injects and who you've seen at least once in the past 30 days. Is this correct? Remember, by "know," I mean you know their name **OR** you see them around even if you don't know their name.

Two respondents received this question during the evaluation. Interviewers were neither instructed to read nor to skip the sentence that defines "know" following the question. In one of the interviews the definition was read and in the other interview it was not. Both of the respondents who received this question are attempting to get clean and have not injected drugs in several months. The intent of this question was not clear to these respondents and they could not provide a straightforward yes or no response. Instead both respondents attempted to explain their current situation and discussed how they have not seen any of the injecting drug users that they know, regardless if they know their name or not.

Upon hearing this question for the first time, one respondent replied "I don't know the person per se. Someone directed me to them." He was referring to the person who sold him the drugs the last time he injected, which was 10 months prior to the interview. This respondent then asked "Do you consider also the booty bum that [sic] injections?" He was referring to when the

needle is removed from the syringe and the drugs are injected into the anus. He said he has done this in the past it was over a year ago. Through probing he confirmed that in the past year he had injected drugs using a needle, and in the more distant past had injected using “booty bum injections.” He also confirmed that he has not seen anyone in the past 30 days who he knows injects drugs and lives in Washington DC. However, could be response error as he was only thinking of those persons with whom he had shared drugs and who sold drugs to him when answering and did not include injecting drug users who he knew through his drug rehab program or through his volunteer work. Although we do not know if these people are current injecting drug users. This respondent was not read the definition of “know.”

The second respondent was not read the definition of know initially, but was read it after she attempted to make sense of the question. Upon hearing the question for the first time, this respondent replied, “No. I know at least 10 people that inject in Washington DC but I haven’t seen any of them in the last 30 days.” The interviewer then read the definition of “know” and she said that there are people who inject whose names she knows and others who she just recognizes their face but she hasn’t seen any of them in the past 30 days. Although the respondent did not provide a response in the correct format, the interviewer was able to select a valid response for her based on her narrative.

If R reported Recent network size of 1-3:

N2d: Is there anyone else you know in [*insert project area*] who injects and who you’ve seen at least once in the past 30 days? Remember, by “know,” I mean you know their name **OR** you see them around even if you don’t know their name.

Six respondents received this question during the evaluation. Interviewers were neither instructed to read nor to skip the definition of know in parentheses. This definition was read in three of the six interviews. However, this sentence did not appear to make a difference in what types of people the respondents considered when answering.

Of these six respondents, three answered “no” to this question. None of these respondents considered people who they see around but don’t know their name. Only one of these respondents was read the sentence that defined “know” following the question but this did not change his response. After hearing this sentence he replied, “The people I know, I actually know.” He was only considering people who he sees on a regular basis and whose phone numbers he knows, despite the question’s instruction to consider those he may see around but know their name. The other two respondents who answered “no” did not receive the sentence defining know. One respondent explained that she uses drugs only when by herself, and she is not usually “on the street using”. She said she usually goes out gets her drugs and injects by herself in her home. The other respondent who answered “no” stated that she hasn’t injected in about 10 months and during that time she has only seen one other person who she knows injects (who she reported on in question N2a). She ran into this person while shopping.

Three respondents did recall additional people upon hearing this question. One of these respondents was read the definition of “know” during the administration of this question. This respondent answered “yes” to this question, and reported on one additional person. This person is her neighbor who she is friends with and has known about 14 years. She has witnessed this person injecting drugs in the past. In question N2a she only recalled her boyfriend. It’s not clear why she did not recall her neighbor or others when answering N2a. Another respondent

considered five additional people who were neighbors of hers. She does not consider these people to be close friends but she does know their names. When asked how she knows they inject drugs, she said she could tell from their appearance and she has seen them buy drugs to inject.. Despite the fact that question N2a instructs respondents to consider people that have seen at least once in the past 30 days, this respondent only considered the people she had seen the day of the interview who she knows injects, and therefore did not consider these others until this question. This respondent was not read the definition of “know.” Finally, one respondent recalled one additional person. This respondent was read the sentence that defined “know,” however, he appears to be answering based on two people whose names he knew. It was not clear why he did not initially recall this person in N2a.

N3a. Of the _____ *[insert number from N2a]* people who inject that you have seen in the past 30 days, how many are male?

[Refused= 7777, Don't Know= 9999] ___ ___ ___

Twenty-one respondents received this question during the evaluation. Two of these respondents were not probed on their response. For most respondents this was not a difficult task and respondents used similar strategies to determine their response. Additionally, most respondents' answers to this question and to question N3b summed up to the response they gave to question N2a.

While some respondents based their response on counts of how many people they know who inject, live in Washington DC, they have seen in the last 30 days and are male, most respondents provided an estimate when responding. Regardless of whether respondents provided a count or an estimate to this question, these numbers were often based off an estimate they had provided when responding to question IDU QN2a. For example, one respondent estimated that he knew “10” people who inject drugs when answering IDU QN1, and then, when answering question IDU QN2a, estimated that he had seen “about 5” in the past 30 days. Then when asked the current question he reported that he only sees one male on a “regular basis,” and the rest of the injecting drug users that he sees regularly are female. Therefore he answered “1” to this question and “4” to question IDU QN3b. In fact thinking about how many males they know versus females was a commonly used strategy when answering this question. In addition to the person cited above, five other respondents reported that they know or have seen more men who inject drugs than women. For example, one respondent estimated in N2a that he has seen “about 30” people in the last 30 days who inject and live in Washington DC, and when asked this question he said “maybe 21” because he thinks he knows more men than women who inject. Like the respondent above, some respondents reported that they only know one man or one woman who inject and therefore they simply subtracted one from the number they gave in question N2a.

For a few respondents this was not an easy task. Sometimes this was because they had difficulty responding to the previous questions, and therefore that made this question more cognitively challenging. For example, one woman reported in IDU QN1 that she knows “at least 25” people in Washington DC who inject, and then in IDU N2a she said that she had see “about 10” of them in the past 30 days. Then when asked how many of these people are male she had to think about it for some time before responding. She eventually said “I guess it would be about...

about half... six... 60/40.” This respondent reported that she knows more men than women, but coming up with an exact number was not easy.

Others limited who they considered to those people who they see regularly, those whose names they know, or those with whom they are close when answering. This appeared to make it easier for them to provide a response. For example, one woman reported on 8 people between questions N2a and N2d. These were all friends or people she had known from the neighborhood where she grew up. While she had no problem identifying how many of these people were men and women, when asked to do it for all the people she knows who inject, live in Washington DC and has seen in the past 30 days regardless if she knows their name or not, it proved to be too difficult of a task. “I don’t know. It’s too many to count! I see different people on a daily basis. It’s hard to count.” Similarly, another respondent also only reported on people who inject and whose names she knew when answering questions N2a, N3a and N3b. When asked to consider all the people she knows who inject, live in Washington DC, and she has seen in the past 30 days, regardless of whether or not she knows their names she stated, “It’s hard to put it in a number. I can’t. I wasn’t sitting around there while they were doing it. I can’t just count them. That’s not something I keep track of.”

Because some respondents excluded people in their responses to preceding questions, these people were thus excluded from their response to this question and question N3b, which lowered their actual reports. For example one respondent reported that there are five people she whose names she knows, who inject, live in Washington DC, and she has seen in the past 30 days, and when asked how many were male she initially stated “none.” During probing on this series of questions, it was revealed that she has seen more than these five people in the past 30 days, however, she had a hard time determining how many. She estimated that she has seen at least 10 in total regardless of whether or not she knows their names. After this discussion she then wanted to change her response to this question to “2” and her response to question N3b to “8”.

There were two respondents who responses to N3a and N3b did not exactly sum up to their response to N2a. In one case this is because the respondent provided an estimate to all three questions. She answered “about 300 of them” to question N2a, and to this question she answered “about 150” and then provided a range to question N3b “125-150”. Another respondent answered “6” to question N2a and then answered “4” to this question and “3” to question N3b. The interviewer was not able to determine why this error occurred.

There was also one case where interviewer error caused an undercount in questions N3a and N3b. This respondent initially answered “3” to N2a and then in N2d answered “5.” Then instead of inserting the number “8” into questions N3a and N3b, the interviewer inserted “5.” This problem is the result of the mode in which the question was tested and should be resolved when fielded on the CAPI system.

Finally, because respondents provided invalid responses (either due to over or under reporting) in the previous questions, they then provided invalid responses to this question. For example, respondents who erroneously excluded people they don’t know well, or whose names they don’t know, or people who they know by name but excluded for other reasons from their responses to N2a, continued to exclude these people from their response to this question. Additionally, respondents who erroneously included people in their response to N2a and other questions, such as people who are incarcerated, sober, or they had not seen in the past 30 days, continued to include these people in their response to this question.

If N3a = N2a,

SAY: “So, all the people you know who inject and that you have seen in the past 30 days are male?”

Only two respondents received this question during the evaluation. Both respondents confirmed that all of the people they know who inject drugs, live in Washington DC, and they have seen in the past 30 days are male. Both of these respondents did consider those whose names they knew and those whose names they did not know when answering. One of these respondents clearly provided estimates when answering this series of questions and the other respondent appeared to provide a more exact answer to both questions N2a and N3a.

N3b. Of the _____ *[insert number from N2a]* people who inject that you have seen in the past 30 days, how many are female?

[Refused= 7777, Don't Know= 9999] _____

Seventeen respondents received this question. Respondents engaged in similar strategies to answer this question as they did when answering question N3a. Most respondents provided an estimate and others provided a count. As in question N3a, some of these counts were based on estimates given in prior questions (N2a, N3a, and others). For the most part respondents understood that their responses to questions N3a and N3b should sum up to their response to question N2a. Therefore in order to provide a response to this question most simply subtracted the response they provided to question N3a from the response they provided to question N2a. Because respondents often gave an estimate to N2a, and then estimated how many men they had seen in the past 30 days (N3a) either by deducing that they know more men than women (or vice versa) or thinking about whether they had seen more of one sex in the past 30 days, the answers they provided to this question were often simply the remainder from subtracting their estimate to N3a from N2a. For example, one respondent reported in N2a that he has seen “about 30” people who inject and live in Washington DC in the past 30 days, and then in question N3a he reported that 21 of this 30 were male. When asked this question he responded “apparently 9,” as he understood that his responses to N3a and this question should sum up to his response given to question N2a.

The problem with estimation is that respondents may then only give a response to this question that makes their responses to N3a and this question sum up to N2a, regardless of whether or not they are accurate. For example, one respondent estimated in N2a that he saw 20 people in the past 30 days who inject and live in Washington DC and then in question N3a he estimated that 15 of these people are male, and in N3b stated that 5 were female. However, when probed on his response to this question he stated that he really only has seen three females in the past 30 days who inject drugs and live in Washington DC. Therefore, knowing that one’s responses to N3a and N3b should sum up to N2a, or being prompted to make them sum up to their response N3a will not necessarily lead to accurate reports.

In a couple of cases respondents’ answers to questions N3a and N3b did not sum up to their response to question N2a. As mentioned in question N3a one respondent responded “six” to question N2a and then answered “four” to question N3a and “three” to question N3b. However,

the interviewer was not able to ascertain why this discrepancy in reports occurred. In the other case, the respondent estimated “300” when answering question N2a, and then estimated in question N3a that “150” of these people were male. But when this respondent answered N3b she stated, “Probably 125, 150 something like that.”

In addition to the problems mentioned above, there were three cases of interviewer error. In one case the respondent initially answered “three” to N2a and then in N2d answered “five.” Then instead of inserting the number “eight” into question N3a and N3b, the interviewer inserted “five,” and thus produced an undercount for this question. This is a problem that is reflective of the mode of administration used during testing and will likely be resolved when the question is administered on the CAPI system. However, in two other cases the interviewer did not administer this question but instead subtracted the responses the respondents gave to question N3a from the response they gave to question N2a and entered the remainder as a response for those respondents. This is problematic because it assumes that the respondent is going to provide a response to this question that can be added to their response to N3a that will then sum up to their response to question N3a, which we know from this evaluation is not always the case. The use of a different mode of administration, such as a CAPI system, will not resolve this type of interviewer error. Finally, because respondents provided invalid responses (either due to over or under reporting) in the previous questions, they then provided invalid responses to this question.

N4. Of the ____ *[insert number from N2a]* people who inject that you have seen in the past 30 days, how many are Latino/a or Hispanic?

[Refused= 7777, Don't Know= 9999] ____

Twenty-one respondents received this question during the evaluation. The vast majority of respondents answered “zero.” One respondent answered “one,” another answered “seven” and one respondent answered “13.” Respondents were not probed extensively on this question. However, most of the respondents who answered “zero,” were probed and confirmed that all of the people that they know who inject, and live in Washington DC, and they saw in the past 30 days were not of Hispanic descent. In fact, many of these respondents reported that they did not know anyone who was of Hispanic descent and who injected drugs or they did not know anyone who was Hispanic in general. The respondent who answered “one” was not probed on her response. The respondent who answered “seven” was probed to see how he knew these people were Hispanic and this respondent got defensive and stated that he “just knows,” adding “I know the difference between a Latino and a black, an African or whatever.” The respondent who answered “13” appeared to provide an invalid response as his response to question N2a was “six,” however the interview did not probe on this question.

There were also a couple of cases where respondents gave inappropriate responses to this question. In one of these cases the respondent replied “neither,” appearing to have heard the question as asking if the people who inject that he has seen in the past 30 days are Hispanic or Latino, rather than ‘how many are Latino or Hispanic.’ Another respondent replied to this question “American.” The interviewer then prompted him to answer in the appropriate format by asking “How many” and he replied “All of them are American, African American.”

Finally, there was also a case of interviewer error in this administration of this question. The interviewer did not insert the respondent's answer from question N2a when administering this question, but instead asked, "Of the people who inject that you have seen in the past 30 days, how many are Latino or Hispanic?" However, this may not have affected his response as he answered "zero."

SAY: Now I would like for you to think about the *[insert N2a – N4]* people who inject that you have seen in the past 30 days who are not Latino or Hispanic. What are their racial backgrounds? That is...

N5a. How many are Black or African American? [*Refused= 7777, Don't Know= 9999*]

N5b. How many are white? [*Refused= 7777, Don't Know= 9999*] _____

N5c. How many are another Race? [*Refused= 7777, Don't Know= 9999*] _____

Twenty-one respondents received this series of questions during the evaluation. The vast majority of respondents reported that all the people in their recent network were African American. In fact 19 out of the 21 respondents who received this question stated that everyone in their recent network was African American. Only three respondents reported that people in their recent network were white and no respondents reported that people in their recent network were another race.

It was not clear to interviewers if responses to questions N5a, 5b, and 5c should be mutually exclusive or if respondents could identify people in their recent network as biracial or multiracial. Interviewers often treated the categories as being mutually exclusive, and this affected the way in which they administered this series of questions. This may be due to the fact that Hispanic ethnicity (N4) is separated out from race and treated as a separate race category rather than an ethnicity. Interviewers should be clearly instructed on how to administer this series of questions and given examples of what are valid responses.

In fact, the biggest problem that emerged with this question was interviewer difficulty/error. In nearly half the cases, interviewers did not read this question as worded. In a couple of cases, when the respondents indicated in question N5a that all of the people in their recent network were African American, the interviewer did not read questions N5b or N5c, and simply entered zero for those questions. In doing so, the interviewers assumed that there are no biracial or multiracial people in the respondents' recent networks. In another case, the respondent reported that all the people in her recent network are African American. The interviewer instead of reading questions 5b and 5c as worded then asked "No white and no other race?" This, again, makes an assumption that these categories are mutually exclusive and that no one in the respondent's recent network are biracial or multiracial.

In other cases the respondent interrupted the administration of these questions, which then lead the interviewer to not read all of the questions as worded. In one case the respondent answered "African American" before the interviewer could finish reading question N5a. The interviewer then confirmed that all 10 people in this respondent's recent network were African American and then asked questions 5b and 5c. In another case, the respondent answered how

many were people in his recent network were white and how many were black when answering question 5a “I would say maybe 19 may be black and four might be white.” The interviewer then did not ask question 5b and instead skipped to question 5c. Similarly, when another respondent answered that all of the people in his recent network were African American, a different interviewer asked “So no white and no other race?” instead of asking questions 5b and 5c as worded. In yet another case the respondent stated that all the people he had seen in the past 30 days were African American in response to question N4. The interviewer then did not ask questions 5a-c but rather filled the answer for 5a in as “seven.” Other interviewers never asked questions 5a-5c as worded but instead asked respondents to describe the racial backgrounds of people in their recent networks. In one case, the interviewer only read the introduction to the question “Now I would like for you to think about those five people who inject that you have seen in the past 30 days who are not Latino or Hispanic. What are their racial backgrounds?” Another interviewer didn’t read the question at all but rather asked “if you had to describe the racial backgrounds of the people?” In another interview this interviewer asked “And what are the racial backgrounds of those who...” Similarly, another interviewer did not read questions N5a-c as worded, but instead asked, “Think about the people who inject that you saw in the past 30 days that are not Latino or Hispanic, what is their racial backgrounds? So for example, like how many were black? How many were white?” Finally, as in previous questions, one interviewer did not insert the correct number into this question when administering it to the respondent. This respondent had initially answered “three” to question NHBSIDUN2a and then when asked question IDU N2a she answered “five” meaning her recent network consisted of eight people total. Instead of inserting “eight” the interviewer inserted “five.”

In addition to interviewer errors, there was also one case of response error on the part of a respondent. This respondent reported that she had an overall network size of five people and when she initially received questions 5a-c she reported that all five were African American, and none were white or another race. However, when she was probed on her response to this question she recalled that she knows some people who are white and inject drugs and she has seen in the last 30 days. “I know some white people now that I think about it... it’s about five, six white people that I know.” She could name all of their names and she has seen four of them in the past 30 days. She did not recall these individuals until probed on this question and therefore these four people are excluded from her responses to previous questions. Finally, because respondents provided invalid responses (either due to over or under reporting) in the previous questions, they then provided invalid responses to question N4 and N5a-c.

- N6a. Is this person male or female?
- Male..... 1
 - Female..... 2
 - Refused to answer..... 7
 - Don't know..... 9

Two respondents received this question during the evaluation. One of these respondents was thinking about his ex-lover, who was a male. He also correctly reported on this person in N1 and N2a. The other respondent who received this question could not provide a response to the question. This is because the person who she reported on in question N2a is transgendered.

When first asked this question this respondent answered “transgender,” and would not select male or female for this person. This person was born a male but now presents as a woman. She has never had any surgery to alter her body but she does inject hormones to alter her body.

N6b. Is this person Latino or Hispanic?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Two respondents received this question during the evaluation. Both of these respondents answered “no” to this question. This question was not extensively probed on. However, both respondents confirmed during probing that these people were not Latino or Hispanic. One respondent indicated that the person was white and the other respondent indicated that the person was African American.

N6c. Is [*if N2b = 1, insert “this person”; if N2a > 1, insert “the person who is not Latino or Hispanic”*] Black, white, or another race?

- Black..... 1
- White..... 2
- Another race..... 3
- Refused to answer..... 7
- Don't know..... 9

Two respondents received this question. One respondent answered “white” and the other respondent answered “black.” This question was not probed on.

SEXUAL BEHAVIORS

SAY: The next question is about having sex. Please remember your answers will be kept private.

For this question, oral sex means mouth on the vagina or penis; vaginal sex means penis in the vagina; and anal sex means penis in the anus (butt).

If E7=2 (if participant is female), skip to S3.

S1. Have you ever had vaginal or anal sex with a woman?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If S1 is (0, 7, 9), skip to HIV Testing Section

Thirteen respondents received this question however, only five were probed on their response. Only one respondent appeared to understand this question and provide a valid response. This respondent answered “no” to this question as he has never had any kind of sex with a woman. Other respondents all appeared to have some level of comprehension problems. In one case this comprehension problem may have been due to interviewer error. These findings are described in more detail below.

Upon hearing this question for the first time, one respondent answered “Not anal, no.” It appears that he only heard or adhered to the last part of this question. He confirmed during probing that he has had vaginal sex with women in the past. Similarly, another respondent answered “no” to this question however, during probing he revealed that he has had vaginal sex with a woman but he has never had anal sex. As with the previous respondent, he likely only heard or adhered to the last part of this question where it asks about anal sex.

In one interview the interviewer did not read the definition that preceded the question. When the respondent was asked the question, he replied “What’s that?” indicating that he didn’t know what vaginal or anal sex was. The interviewer said there wasn’t a definition but was able to probe the respondent to see if he had ever engaged in vaginal or anal sex with a woman and determined he had, and thus answered “yes” for him.

Finally, in one interview the definition that preceded the question may have confused the respondent more than it helped. After hearing the definition and then this question, this respondent replied, “You say oral sex? I do straight sex. That’s it.” The interviewer read the question again and he seemed to think aloud to himself about what anal sex meant. He then said again, “I do straight sex like you are supposed to have sex. No man on man stuff. Straight sex, make love. Put it that way.” The interviewer ended up selecting “yes” for him.

S2. In the past 12 months, that is, since *[interview month]* of last year, with how many different women have you had oral, vaginal, or anal sex?

____ _ [Refused = 7777, Don't know = 9999]

Eleven respondents received this question. One respondent was correctly skipped out of this question because he has never had vaginal or anal sex with a woman, and the other respondent was skipped out of this question due to response error in his response to question S1. Only four respondents were probed on their response to this question. All four of the respondents appeared to provide valid responses to this question, as their understanding of the terms used in this question matched the definition they were provided, and all of these respondents could readily recall how many women with whom they had engaged in oral, vaginal, or anal sex in the past 12 months. However, one respondent appeared to provide an estimate. When asked this

question he replied, “About three or four.” He ended up settling on four and said he was confident in his response.

One respondent, who was not probed on this question, did experience comprehension problems. After hearing this question for the first time this respondent asked, “How many times?” The interviewer repeated the part of the question ‘with how many different women have you had?’ The respondent then asked, “In the last month?” The interviewer then said “in the past 12 months” and then read the entire question again. The respondent then answered “about 7. Although this question was not probed on, it was clear that the respondent was having difficulty encoding all aspects of the question.

- S3. Have you ever had vaginal or anal sex with a man?
- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

All 12 women in this round of testing received this question, however only four were probed on their response. Eleven respondents answered “yes” to this question and one respondent answered “don’t know.” Three of these respondents appeared to provide valid responses to this question. Two of these women confirmed that they have had vaginal sex with a man before and one woman has had both vaginal and anal sex with a man. One respondent had difficulty comprehending this question. When first asked this question she said, “Anal sex with a man... no.” The interviewer then read the question again to which she responded, “What do you mean? Have I ever stuck something in a man’s butt?” She then indicated that she has engaged in oral sex with a man and she has had “sex” but she never “stuck anything in a man’s butt.” The interviewer selected “don’t know” for her. When probed on this question she was asked to describe in her own words the types of sex she has engaged in and she said “I have regular sex, oral sex, vaginal sex. Tried the anal sex. Didn’t like it. So I don’t do that at all.” Besides only adhering to the term “anal sex” when first asked this question, this respondent only understood this question as asking if she had inserted something into a man’s anus, rather than a man inserting his penis into her anus. Finally, as in previous rounds of testing, three respondents did not provide a yes/no response to this question but rather answered “vaginal.”

- S4. In the past 12 months, that is, since <interview month> of last year, with how many different men have you had oral, vaginal, or anal sex?
 ____ ____ ____ ____ [Refused = 7777, Don't know = 9999]

All 12 women who participated in this round of testing received this question and seven of these respondents were probed on their response. Most respondents were able to provide valid responses. These women considered all types of sex they engaged in during the past 12 months (i.e., oral, vaginal, or anal), and most were able to recall and count up how many men they

engaged in these behaviors with. However, one woman had difficulty comprehending this question. This respondent did not understand that this question was asking her with how many men she had engaged in oral, vaginal or anal sex. Instead, she replied to this question, “oral and vaginal. I don’t do anal.” After hearing the question a second time she appeared to understand the intent of the question as she answered “I’d say 10,” and then discussed how she has engaged in these different types of sex with 10 different men over the past year.

HIV TESTING

SAY: Now I’m going to ask you a few questions about getting tested for HIV. An HIV test checks whether someone has the virus that causes AIDS.

- H1. Have you ever been tested for HIV?
- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If H1 is (0, 7, 9), skip to instructions before H10

All 25 respondents received this question and all respondents answered “yes” to this question. Twenty-two of the 25 respondents were probed on their response. Most respondents reported that they are tested for HIV on a regular basis. This ranged anywhere from once every three months to once a year. However, most respondents reported being tested at least once every six months. Four respondents indicated that they do not get tested on a regular basis but have been tested anywhere from two times in their lifetime to four times in their lifetime. Most respondents were tested using the OraQuick oral fluid test the last time they were tested. Respondents received these tests at needle exchange clinics, doctor’s offices, on mobile testing units and while incarcerated. Often respondents in this sample received HIV testing at the needle exchange clinic where the interviews took place.

- H2. When did you have your most recent HIV test?

[77/7777 = Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

All 25 respondents received this question and 19 of these respondents were probed on their response. Many respondents had difficulty recalling the month and year they had their last HIV test and the vast majority of respondents did not provide a response in the appropriate format. These findings are discussed in more detail below.

Many respondents had difficulty recalling the date of their last HIV test. Respondents could often provide a rough estimate of how long it had been since their last HIV test, but often couldn't come up with an exact month or year. For example, when first asked this question one respondent replied, "It's probably been about a year. When I lived out on the west coast I had a lot of tests. Maybe it's been two years." Similarly, another respondent first answered "About four months ago. Four or five." He could not recall the exact month. He ended up settling on January of 2010, which was four months prior to the interview. However, during probing he then said it was three months prior the interview and said that this was a "ballpark" number. It was common for these respondents to change their initial response. Often they would only want to change their response by a month or two. Respondents' ability to recall the exact date of their last HIV test was not related to how long ago they were last tested. Some respondents reported being tested as recently as two or three weeks prior to the interview, while other reported it was a year or more before the interview, with most respondents reporting they were tested around four months prior to the interview.

However, for some respondents this was very easy to recall. In some cases this was because they were tested recently (i.e., a month or less before the interview). In other cases it was because they get tested on a regular basis (i.e., yearly, quarterly) and knew when they were next due for a test. In other cases it was because they could recall an exact date because it was tied to another life event. For example, a couple of woman could recall the date of their last HIV test because it coincided with being released from prison. For example, one respondent initially answered "December the 3rd (2010)." When asked how she could recall this exact date she said it was the date she was released from prison.

In most cases respondents did not know that they needed to report the month and year of their most recent HIV test. Typical responses to this question included statements like, "Last month," "A year ago," "Yesterday," or "Last summer." When this occurred, interviewers often prompted the respondent to provide a month and year, however in some cases they did not. Instead the interviewers themselves calculated a month and year based on the respondent's initial response to the question. Not only does this introduce interviewer burden but it may affect the validity of the data. For example, in one interview, the respondent answered "like two months ago" and the interviewer did not probe for a month and year but instead entered "January 2010," which was two months prior to the date of the interview. In another case the respondent responded to this question "a year ago." However, when the interviewer asked her for a month and year she said it was in September of 2010, which was actually six months prior to the interview. Had this interviewer calculated a response for the respondent instead of asking for a month and year, this respondent's answer would have been March of 2010. Providing a response in the incorrect format was not related to respondents' ability to recall the date of their last HIV test.

H3. What was the result of your most recent HIV test? *[DO NOT Read choices, check only ONE.]*

- Negative..... 1
- Positive..... 2
- Never obtained results*..... 3

- Indeterminate..... 4
- Refused to answer..... 7
- Don't know..... 9

All 25 respondents received this question. Twenty-four respondents answered “negative” and one respondent answered “positive.” Eighteen of the respondents were probed on their response. Respondents did not have difficulty comprehending this question and all responses appeared to be valid. Some respondents did not provide a response in the appropriate format but through probing, interviewers were able to determine their status.

Most respondents reported that they were last tested using an OraQuick test. They recalled having their mouths swabbed and then waiting 20-30 minutes to receive the results. Most respondents were given verbal confirmation that they were negative and also received written documentation indicating that they were negative. The majority of these respondents have been tested multiple times in the past and none of them ever had a test result that was positive or indeterminate. The one respondent who tested positive, received first received these results 15 years ago. He was tested again this past November and the results came back positive.

Some respondents did not give a response in the format listed in the response options. Upon hearing this question, one respondent answered “It was good,” another answered “It was clean,” and two respondents indicated that their result was “nonreactive.” In these interviews, interviewers then probed to see what they meant by these responses. In all cases the respondents indicated that their results were negative.

- H3a. Before your test in ___/___ [insert date from H2], did you ever test positive for HIV?
- No..... 0 *skip to Instructions before H10*
 - Yes..... 1
 - Refused to answer..... 7 *skip to Instructions before H10*
 - Don't know..... 9 *skip to Instructions before H10*

No respondents received this question during the evaluation.

Questions for participants who have ever tested HIV+

- H4. Have you ever been seen by a doctor, nurse, or other health care provider for a medical evaluation or care related to your HIV infection?
- No..... 0
 - Yes..... 1
 - Refused to answer..... 7

Don't know..... 9

Only one respondent received this question during the evaluation. This respondent answered “yes” but was not probed on his response.

H5. When did you first go to your health care provider after learning you had HIV?

[77/7777=Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

Only one respondent received this question during this round of testing. Like respondents in the previous rounds of testing, this respondent did not provide a response in the appropriate format, but instead answered “15 years ago.” The interviewer did not prompt him to provide a response in the appropriate format and he was not probed on his response.

H6. When did you last go to your health care provider for HIV care?

[77/7777=Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

Only one respondent received this question during this round of testing. This respondent answered “November.” The interviewer did not prompt him to provide a year and did not probe on his response.

H7. Are you currently taking antiretroviral medicines to treat your HIV infection?

No..... 0

Yes..... 1

Refused to answer..... 7

Don't know..... 9

Only one respondent received this question during this round of testing. He answered “yes” to this question. During probing he indicated that he takes Combivir and Crixivan. He takes these medications daily.

Pre- and Post-exposure Prophylaxis Questions for HIV+ participants

SAY: Researchers are studying whether antiretroviral medicines could possibly be taken to prevent HIV infection.

H8. Before today, have you ever heard of people who do not have HIV taking antiretroviral medicines, to keep from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

One respondent received this question during this round of testing. He answered “no” but he was not probed on his response.

H9. In the past 12 months, have you given your antiretroviral medicines to a sex partner who was HIV-negative because you thought it might keep them from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

One respondent received this question during this round of testing. This respondent answered “no” but was not probed on his response.

Pre- and Post-exposure Prophylaxis Questions for participants who have not tested HIV+

SAY: Researchers are studying whether anti-HIV medicine -- a pill -- could possibly be taken to prevent HIV infection.

H10. Before today, have you ever heard of people who do not have HIV taking anti-HIV medicines, to keep from getting HIV?

- No..... 0
- Yes..... 1

Refused to answer..... 7
Don't know..... 9

Twenty-four respondents received this question during this round of testing. Only two of these respondents answered “yes” to this question. Twenty of the 24 respondents were probed on their response. Most respondents had never heard of people who are HIV negative taking medications to keep from getting HIV and most respondent though that “anti-HIV medicines” would be different from the types of medications prescribed to those who are HIV positive. These findings are discussed in more detail below.

Most respondents who answered “no” to this question indicated that they had never heard of people who do not have HIV taking medications to prevent them from contracting HIV. As in the HET interviews, some respondents seemed surprised by this and asked such things as “There is an anti-HIV medicine,” and “Is there such a pill?” Others indicated that they wanted to know more about this. However, there were some cases where respondents answered “no” to this question and then during probing discussed having heard about similar types of preventative strategies. For example, one respondent, who answered “no” to this question, said he has heard of a vaccine for HIV. “I’ve heard of a vaccine that they’re testing. I know they have a cure in Thailand and in Germany but I don’t know of any evidence of these cures.” This same respondent also mentioned that he has heard of people taking antibiotics because they believed it would prevent them from contracting HIV, a strategy that he thinks is “ridiculous.” Another respondent answered “no” to this question, but then during probing recalled having seen a commercial on TV for a type of medication a pregnant woman who was HIV positive could take to prevent transmitting the virus to her unborn child. He answered “no” to this question because he believed it was asking about people who are HIV negative taking a medication to prevent from getting it, and didn’t think this situation applied. In another case, a respondent answered “no” to this question but then later discussed how his wife had talked with him about a medication that could be used to prevent HIV. He wasn’t sure where she had learned this information and did not consider it when answering this question.

Respondents, who answered “no” and were probed on their interpretation of the term anti-HIV medicines, typically thought this was a medication that was different from the types of medications people who are HIV positive take. Some of these respondents believed it was different because it was a preventative medicine that would stop you from contracting the virus in the first place. One respondent believed that “anti-HIV medicines” would be different from the medications used to treat HIV because she believed there are different medications for different stages of the virus. Another respondent thought anti-HIV medicines had to be different from the medications to treat HIV because if not, this medication would be able to cure those who are HIV positive. For example, when asked if she thought anti-HIV medicines were the same as or different from the medications prescribed to those who are HIV positive she said, “I think it would be something different. Because if it was the same thing, why is it not curing the ones that already got it?” Finally one respondent thought this must be an experimental medication, different from the types of medication used to treat HIV, and was concerned about whether it was approved by the FDA and that drug makers would be using people as guinea pigs

to test it. A few respondents did not know what “HIV medicines” were and did not know if they were the same or different from the types of medications people who are HIV positive take.

As mentioned above two respondents answered “yes” to this question. One respondent indicated during probing that she had a friend who was rape victim and was administered these medications. It was determined after the rape that the assailant was HIV positive and therefore, the victim was prescribed these medications to treat herself and her unborn child. This respondent was unsure whether the medication she was prescribed was the same or different from the types of medications used to treat HIV among those who test positive. The other respondent who answered “yes” to this question initially answered “I actually have” to this question. When probed on this she said she has heard of people talk about a medication that people who are HIV negative can take to prevent them from contracting HIV. She does not believe this would be an effective prevention strategy and thinks it may weaken your immunity to HIV over time. She doesn’t know anyone who has used this prevention strategy but she has heard other talk about it and she said they compared it to taking a “morning after pill” to prevent pregnancy. She thinks people who use this strategy use the same medications people who are HIV positive take and that they obtain these medications from people who are HIV positive and take these medications to treat their HIV.

H11. In the past 12 months, have you taken anti-HIV medicines after sex because you thought it would keep you from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

H12. In the past 12 months, have you taken anti-HIV medicines before sex because you thought it would keep you from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Twenty-four respondents received questions H11 and H12. All of these respondents answered “no” to both questions H11 and H12. Fourteen of these respondents were probed on their response, and questions H11 and H12 were probed on together. Most respondents indicated that they had never heard of this type of medication before and none of the respondents probed have ever taken a medication to prevent them from contracting HIV. As in probing on question H10, some respondents were curious about this type of medication. Upon hearing question H12, one respondent replied, “There is an anti-HIV medicine?” When probed on her interpretation of the term “anti-HIV medicines” she said, “I wouldn’t know. I wouldn’t have a clue. It must be a pill.” As in H10, one respondent indicated that he was skeptical that such a medication would be

effective in preventing the spread of HIV. During probing this respondent said that this medication “sounds crazy,” and then added,

I don't think taking HIV medicines can stop you from getting HIV. And why would you try to take HIV medicine if you didn't think that you were- it's like suicidal... why would you take HIV medicine to prevent you from getting HIV so that mean you're getting ready to have a sexual thing getting ready to go on with a person you assume or think may already have HIV. Why would you even set yourself up to do something like that? So it's kind of crazy to me.

Note that this respondent was not probed on question H10 but here he interprets anti-HIV medicines to be the same medications people who are HIV positive take to treat the virus.

As in the MSM interviews, one respondent had a problem with this question because he said it assumes that one is sexually active. Upon hearing question H11 for the first time he asked “You have to have sex, right?” This respondent has not had sexual relations in over a year and he didn't think either question H11 or H12 applied to him.

Finally, some interviewers felt awkward administering questions H11 and H12 to respondents who indicated in question H10 that they have never heard of anyone taking anti-HIV medicines to stop the contraction of HIV. However, all respondents were able to provide a response that appeared to be valid and didn't indicate that they were burdened by these questions.

H13. Please tell me if you got any of the anti-HIV medicines you took from the following people or places. Did you get them from...**[GIVE RESPONDENT FLASHCARD C. READ ALL CHOICES.]**

	No	Yes	Refused to answer	Don't know
a. Pharmacy or drug store.....	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 9
b. Doctor or other health care provider.....	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 9
c. Sex partner, friend, relative, or acquaintance.....	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 9
d. Internet.....	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 9
e. Some other place.....	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7	<input type="checkbox"/> 9

(Specify _____)

No respondents received this question during this round of testing.

H14. Would you be willing to take HIV medicines every day to lower your chances of getting HIV?

No.....	<input type="checkbox"/> 0
Yes.....	<input type="checkbox"/> 1
Refused to answer.....	<input type="checkbox"/> 7

Twenty-four respondents received this question during this round of testing. Fifteen respondents answered “no” to this question, eight respondents answered “yes” and one respondent answered “don’t know.” However, two of the respondents who answered “no” and one of the respondents who answered “yes” had difficulty providing a definitive response. Respondents’ answers to this question were generally tied to their perceived risk of contracting HIV, their beliefs about and use of preventative strategies, and their comfort level with medications. In contrast to questions H10, H11, and H12 (which use the term anti-HIV medicines), the majority of respondents interpreted this question (which uses the term HIV medicines) as asking about the same types of medications used to treat HIV. These findings are discussed in more detail below.

The most common reason why respondents answered “no” to this question was because they did not perceive themselves to be at risk for contracting HIV. Interestingly, one respondent who gave this reasons for why he answered no also disclosed during probing that he recently had a scare and had to be tested for HIV.

Many respondents who answered “no” also had concerns about taking medications. This included concerns about side effects they may experience from these medicines. Additionally, two respondents had friends who were HIV positive and took medications to treat their HIV and had adverse side effects from their medications. Respondents were also concerned about the effectiveness of these medications in preventing HIV. Like respondents in previous rounds of testing, one respondent did not think this would be an effective preventative measure. Some respondents were also concerned about developing immunity to the medications over time. One respondent also indicated that she would need a guarantee that this medication would prevent the transmission of HIV, and that there are no side effects before she would be willing to use it. A couple of respondents mentioned that they preferred to use and do use other preventative measures. Another respondent said that he takes enough medications as it is and does not want to take anymore. Finally, one respondent who answered “no” to this question stated that this question also assumes that he is sexually active, and he is not. It appears that this respondent is only considering sexual behavior as a means to contracting HIV.

Respondents who answered “yes” to this question did so for a number of reasons. One respondent believed that any type of preventative measure is good and therefore would be willing to take these medications. Other respondents also indicated that they were concerned about contracting this virus and would want to take precautionary measures to prevent themselves from doing so. Interestingly one respondent did not perceive themselves to be at risk for contracting HIV but still would be willing to take this medication. One respondent is knowledgeable about HIV medicines and would be interested in taking them if they would prevent her from contracting the virus. In contrast to respondents who answered no, a couple of these respondents interpreted this question as asking about medications that are different from those who are HIV positive take. As in previous rounds, one respondent interpreted “HIV medicines” asked about in this question to be vaccine, similar to the flu vaccine. Another respondent also thinks it is different from the medications that HIV positive people take.

Finally, some respondents could not say with certainty whether or not they would be willing to take these medicines. However, two respondents answered “no” one answered “yes” and only one respondent answered “don’t know.”

One respondent answered “no” but was a little unsure about his response. When first asked this question he stated the following,

I mean I don’t know. That’s kind of a hard one. I mean if you saying if I take that medicine knowing- I mean you take the medicine and you know it’s going to stop you from getting HIV, would I take the medicine every day? I probably would. But I don’t know. Because I mean I wouldn’t want to take no- I would not want to take medicine every day. Because that could affect your kidneys, liver, do more damage than you know what I’m saying? I’d rather just use condoms... why would I take some medicine that if I don’t have it? Then there ain’t no sense in me taking the medicine at that time. ‘Cause if you do come in- I mean so happen to get it then you might- the medicine might- your system might be immune to it so then that medicine might not even work. ‘Cause you taking it every day and your system getting immune to it so if you do come in contact with it, the medicine probably won’t even work.

Like other respondents he felt if the medicine was effective he would be willing to take it but he had concerns about the side effects of the medication and becoming immune to the medicine over time. Another respondent initially answered “yes” and “no” to this question but then settled on “no.” He said if he thought he was at risk for contracting HIV then he would answer “yes.” However, he does not feel he is currently at risk for contracting HIV and therefore he answered “no.” One respondent answered “yes” to this question. However, she then voiced concern about her ability to remember to take a medication every day. She also wondered what would happen if she stopped taking these medications during periods of time when she wasn’t engaging in risky behaviors, like during periods when she was not injecting drugs.

Finally, the respondent who answered “don’t know” initially answered “I’m not sure” to this question and indicated she couldn’t say yes or no to this question. During probing she stated that she would need more information about this medication before saying yes or no to this question.

Because I would have to find out the side effects and things. You can’t just say you going to take a medicine and you don’t know what it’s going to do to us. So I’m not sure. I can’t say no that I wouldn’t because of course if it would lower my chances or whatever, but I could lower my own chances by just don’t have, you know, the risky behavior. But I can’t say no that I wouldn’t and I can’t say yeah that I would because I don’t know anything about it.

Like other respondents she was concerned about the side effects of this medication, and she also believed there were other measures she could take, besides medication, to prevent herself from contracting HIV.

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NHBS QUESTIONS FOR COGNITIVE TESTING – Interviewer protocol

Heterosexual Sample

Introduction to the Cognitive Interview:

Thank you for agreeing to participate in this study today. You have read the Informed Consent and you have chosen to take part in this research study. Is that correct? [Interviewer waits for verbal acknowledgment]. You have given your permission for me to tape record your interview today, and to play it to other people working on this study. Is that correct? [Interviewer waits for verbal acknowledgment].

I have in front of me a questionnaire that asks about behaviors that may put someone at risk for contracting HIV, the virus that causes AIDS. These questions will be used on large-scale surveys to help us understand more about patterns of HIV transmission in the United States. Before they are used on these surveys, we are testing the questions out to see whether they are phrased well, whether they are too difficult to answer, and whether they make sense to people.

In a minute, I will ask you these questions, and I will also ask you questions about how you interpreted some of the questions and how you came up with your answers. I'd also like it if you could tell me if any question seems strange or confusing.

Do you understand what I am asking you to do? (Explain again if needed). Do you have any (more) questions? (If no questions) OK, let's begin.

E1. What is your date of birth?

(M M / D D / Y Y Y Y)

E6. What county do you currently live in? _____

*See Appendix B for list of eligible counties in Washington, DC and Baltimore MSAs.. For E6a auto-fill **project area** with “Washington, DC” or “Baltimore, MD” depending on county.)*

E6a. How long have you been living in [**project area**]? (**Interviewer:** If response is in months, enter 0 below and then enter the number of months in the next screen.)

Years ___

[Refused = 777, Don't know = 999]

If E6a= 1-99, 777, or 999, skip to Q2a

E6b.

Number of months: __ __
range of values = 1-11

[Refused = 77, Don't know = 99]

Q2a What are the names of the people living in your home? (Record each name)

Q2b [Give Respondent Flashcard 1.] How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

Q3a. What is your current marital status? Mark (X) ONE box.

- Now married
- In a registered domestic partnership or civil union
- Widowed
- Divorced
- Separated
- Never married

- E4. Do you consider yourself to be Hispanic or Latino/a?
 No.....0
 Yes.....1
 Refused to answer.....7
 Don't know.....9

- E5. **[GIVE RESPONDENT FLASHCARD A.]** Which racial group or groups do you consider yourself to be in? You may choose more than one option. **[READ CHOICES. CHECK ALL THAT APPLY.]**
 American Indian or Alaska Native..... 1
 Asian 2
 Black or African American 3
 Native Hawaiian or Other Pacific Islander.....4
 White5
 Refused to answer.....7
 Does not apply8
 Don't know.....9

- E7. Do you consider yourself to be male, female, or transgender? **[CHECK only ONE]**
 Male..... 1
 Female 2
 Transgender 3
 Refused to answer..... 7
 Don't know..... 9

If E7 = 1 (if respondent is male) ask D8a. Otherwise skip to D8b.

- D8a. Do you currently consider yourself to be: **[READ CHOICES. CHECK ONLY ONE.]**
 Heterosexual or "Straight"..... 1
 Homosexual or Gay 2
 Bisexual..... 3
 Other..... 4
 Refused to answer..... 7
 Don't know..... 9

Question D8a Help:

If R is unfamiliar with the terms “heterosexual” or “straight” say:

A heterosexual or straight man is someone who sees himself as forming intimate or loving relationships with women. He may also think of himself as being attracted to, or primarily attracted to, women. He might also engage in sexual behaviors with women.

If R is unfamiliar with the terms “homosexual or gay” say:

A homosexual or gay man is someone who sees himself as forming intimate or loving relationships with other men. He may also think of himself as being attracted to, or primarily attracted to, men. He might also engage in sexual behavior with other men. He might also form political, social, or cultural connections with a community of other homosexual men.

If R is unfamiliar with the term “bisexual” say:

A bisexual man is someone who sees himself as forming intimate or loving relationships with either men or women. He may think of himself as being attracted to both men and women, and he might engage in sexual behavior with either men, women, or with both men and women.

Skip to D5

If E7 = 2 (if respondent is female) ask D8b.

D8b. Do you currently consider yourself to be: *[READ CHOICES. CHECK ONLY ONE.]*

- Heterosexual or "Straight"..... 1
- Homosexual or lesbian..... 2
- Bisexual..... 3
- Other..... 4
- Refused to answer..... 7
- Don't know..... 9

Question D8b Help:

If R is unfamiliar with the terms “heterosexual” or “straight” say:

A heterosexual or straight woman is someone who sees herself as forming intimate or loving relationships with men. She may also think of herself as being attracted to, or primarily attracted to, men. She might also engage in sexual behavior with men.

If R is unfamiliar with the terms “homosexual” or “lesbian” say:

A homosexual or lesbian woman is someone who sees herself as forming intimate or loving relationships with women. She also may think of herself as being attracted to, or primarily attracted to, women and who might engage in sexual behavior with women. She might also form political, social, or cultural connections with a community of other lesbians.

If R is unfamiliar with the term “bisexual” say:

A bisexual woman is someone who sees herself as forming intimate or loving relationships with either men or women. She may think of herself as being attracted to both men and women, and who might engage in sexual behavior with either men or women.

D5. What is the highest level of education you completed?
[DO NOT read choices. Check only ONE.]

- Never attended school..... 00
- Grades 1 through 8..... 01
- Grades 9 through 11..... 02
- Grades 12 or GED..... 03
- Some college, Associate’s Degree, or
Technical Degree..... 04
- Bachelor’s Degree..... 05
- Any post graduate studies 06
- Refused to answer..... 77
- Don't know..... 99

D6. What best describes your employment status? Are you:
[READ CHOICES. CHECK only ONE.]

- Employed full-time..... 01
- Employed part-time..... 02
- A homemaker..... 03
- A full-time student..... 04

- Retired..... 05
- Unable to work for health reasons 06
- Unemployed..... 07
- Other..... 08
- Refused to answer..... 77
- Don't know..... 99

D7. What was your household income last year from all sources before taxes?

GIVE RESPONDENT FLASHCARD C. DO NOT read choices.

SAY: Please take a look at this card and tell me the letter that best corresponds to your monthly or yearly income.

- | Monthly Income | Yearly Income | |
|---------------------------|------------------------------|-----------------------------|
| a. 0 to \$417..... | a. 0 to \$4,999..... | <input type="checkbox"/> 00 |
| b. \$418 to \$833..... | b. \$5,000 to \$9,999..... | <input type="checkbox"/> 01 |
| c. \$834 to \$1041..... | c. \$10,000 to \$12,499..... | <input type="checkbox"/> 02 |
| d. \$1042 to \$1250..... | d. \$12,500 to \$14,999..... | <input type="checkbox"/> 03 |
| e. \$1251 to \$1667..... | e. \$15,000 to \$19,999..... | <input type="checkbox"/> 04 |
| f. \$1668 to \$2082..... | f. \$20,000 to \$24,999..... | <input type="checkbox"/> 05 |
| g. \$2083 to \$2500..... | g. \$25,000 to \$29,999..... | <input type="checkbox"/> 06 |
| h. \$2501 to \$2916..... | h. \$30,000 to \$34,999..... | <input type="checkbox"/> 07 |
| i. \$2917 to \$3333..... | i. \$35,000 to \$39,999..... | <input type="checkbox"/> 08 |
| j. \$3334 to \$4167..... | j. \$40,000 to \$49,999..... | <input type="checkbox"/> 09 |
| k. \$4168 to \$4999..... | k. \$50,000 to \$59,999..... | <input type="checkbox"/> 10 |
| l. \$5000 to \$6,250..... | l. \$60,000 to \$74,999..... | <input type="checkbox"/> 11 |
| m. \$6251 or more..... | m. \$75,000 or more..... | <input type="checkbox"/> 12 |
| Refused to answer..... | | <input type="checkbox"/> 77 |
| Don't know..... | | <input type="checkbox"/> 99 |

SAY: The next question is about having sex. Please remember your answers will be kept private. "Having sex" means vaginal sex - penis in the vagina; or anal sex - penis in the anus (butt).

E8. Have you had vaginal or anal sex with a *[insert "man" if respondent is female; insert "woman" if respondent is male]* in the past 12 months?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

NETWORK QUESTIONS

(For N1-N2 auto-fill **project area** with “Washington, DC” or “Baltimore, MD” depending on county.)

SAY: I’m going to start by asking you about other people you know in [**project area**] who you are close to.” [**Go to N1.**]

Overall network size

N1. Please tell me how many friends, relatives or people you are close to who are at least 18 years old, and live in [**project area**]. [**GIVE RESPONDENT FLASHCARD B.**]

[**Refused= 7777, Don’t Know= 9999**] ____ ____ ____

If R reported Overall network size of 0:

N1a: You said you don’t have ANY friends, relatives or people you are close to who are at least 18 years old and live in [**insert project area**]. Is this correct?

If R reported Overall network size of 1-3:

N1b: Do you have ANY OTHER friends, relatives or people you are close to who are at least 18 years old and live in [**insert project area**]?

C.I. PROBES:

- Do participants count people in their networks the same way?
- Who do participants count as in their network? What are the demographic characteristics of these people? What proportion are friends/family/sex partners?

If, after probing once, N1 = 0, 7777 or 9999, skip to SEXUAL BEHAVIOR section.

If, after probing once, N1 = 1, go to N2b.

Else, go to N2a.

Recent Network Size

For Rs with Overall network size > 1 ask:

N2a. Of those _____ *[insert number from N1]* people, how many have you seen at least once in the past 30 days?

[Refused= 7777, Don't Know= 9999] ___ ___ ___

For Rs with Overall network size= 1 ask:

N2b. Have you seen this person at least once in the past 30 days?

- No..... 0 Go to Sexual Behavior Section
- Yes..... 1 Go to N6a.
- Refused to answer..... 7 Go to Sexual Behavior Section
- Don't know..... 9 Go to Sexual Behavior Section

If R reported Recent network size of 0 ask:

N2c: You said you don't have ANY friends, relatives or people you are close to who are at least 18 years old, live in *[insert project area]*, and you have seen in the past 30 days. Is this correct?

If R reported Recent network size of 1-3 ask:

N2d: Do you have ANY OTHER friends, relatives or people you are close to who are at least 18 years old, live in *[insert project area]*, and you have seen in the past 30 days?

If N2a = 1 OR N2b = 1, skip to N6a.

If N2a is (0, 7777, 9999), OR N2b is (0, 7777, 9999), skip to SEXUAL BEHAVIOR section.

Else (i.e., N2a > 1, after probing once with either N2c or N2d), go to N3a.

N3a. Of the _____ *[insert number from N2a]* people that you have seen in the past 30 days, how many are male?

[Refused= 7777, Don't Know= 9999] ____ ____ ____

If N3a = N2a,

SAY: “So, all the friends, relatives, or people you are close to who are at least 18 years old, who live in *[insert project area]* and you have seen in the past 30 days are male?”

If correct: go to N4

If incorrect: go to N3a, ask again, and enter correct response. Then go to N3b.

N3b. Of the _____ *[insert number from N2a]* people that you have seen in the past 30 days, how many are female?

[Refused= 7777, Don't Know= 9999] ____ ____ ____

N4. Of the ____ *[insert number from N2a]* people that you have seen in the past 30 days, how many are Latino or Hispanic?

[Refused= 7777, Don't Know= 9999] ____ ____ ____

If N4 = N2a, skip to SEXUAL BEHAVIOR section.

If N2a – N4 = 1, skip to N6c.

SAY: Now I would like for you to think about the *[insert N2a – N4]* people that you have seen in the past 30 days but who are not Latino or Hispanic. What are their racial backgrounds? That is...

N5a. How many are Black or African American? **[Refused= 7777, Don't Know= 9999]**
____ ____ ____

N5b. How many are white? **[Refused= 7777, Don't Know= 9999]** ____ ____ ____

N5c. How many are another race? **[Refused= 7777, Don't Know= 9999]** ____ ____ ____

Go to SEXUAL BEHAVIOR section

N6a. Is this person male or female?

- Male..... 1
- Female..... 2
- Refused to answer..... 7
- Don't know..... 9

N6b. Is this person Latino or Hispanic?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

N6c. Is [*if N2b = 1, insert “this person”; if N2a > 1, insert “the person who is not Latino or Hispanic”*] Black, white, or another race?

- Black..... 1
- White..... 2
- Another race..... 3
- Refused to answer..... 7
- Don't know..... 9

SEXUAL BEHAVIORS

SAY: The next question is about having sex. Please remember your answers will be kept private. I need to ask you all the questions, even if some may not apply to your situation.

For this question, oral sex means mouth on the vagina or penis; vaginal sex means penis in the vagina; and anal sex means penis in the anus (butt).

If E7=2 (if participant is female), skip to S2.

S1. In the past 12 months, that is, since *[interview month]* of last year, with how many different women have you had oral, vaginal, or anal sex?

___ ___ ___ ___ *[Refused = 7777, Don't know = 9999]*

Skip to Injection Drug Use.

S2. In the past 12 months, that is, since *<interview month>* of last year, with how many different men have you had oral, vaginal, or anal sex?

___ ___ ___ ___ *[Refused = 7777, Don't know = 9999]*

DRUG USE HISTORY

Injection Drug Use

SAY: The next questions are about injection drug use. This means injecting drugs yourself or having someone who isn't a health care provider inject you. Please remember your answers will be kept private.

- I1. Have you ever in your life shot up or injected any drugs other than those prescribed for you? By shooting up, I mean anytime you might have used drugs with a needle, either by mainlining, skin popping, or muscling.

No..... 0

Yes..... 1

Refused to answer..... 7

Don't know..... 9

If I1 is (0, 7, 9), skip to HIV Testing Section

- I2. When was the last time you injected any drug? That is, how many days or months or years ago did you last inject?

[Interviewer: If respondent answers today, enter "000" in # of Days field]

of Days: ___ ___ ___

of Months: ___ ___ ___

of Years: ___ ___ ___

[Refused = 777, Don't know = 999]

HIV TESTING

SAY: Now I'm going to ask you a few questions about getting tested for HIV. An HIV test checks whether someone has the virus that causes AIDS.

- H1. Have you ever been tested for HIV?
- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If H1 is (0, 7, 9), skip to instructions before H10

- H2. When did you have your most recent HIV test?
- [77/7777 = Refused, 99/9999 = Don't know]* (M M / Y Y Y Y)

- H3. What was the result of your most recent HIV test? *[DO NOT Read choices, check only ONE.]*
- Negative..... 1
- Positive..... 2
- Never obtained results*..... 3
- Indeterminate..... 4
- Refused to answer..... 7
- Don't know..... 9

If H3 is (1, 7, 9), skip to Instructions before H10.

If H3 = 2, skip to H4.

- H3a. Before your test in ___/___ *[insert date from H2]*, did you ever test positive for HIV?
- No..... 0 *skip to Instructions before H10*
- Yes..... 1
- Refused to answer..... 7 *skip to Instructions before H10*
- Don't know..... 9 *skip to Instructions before H10*

Questions for participants who have ever tested HIV+

H4. Have you ever been seen by a doctor, nurse, or other health care provider for a medical evaluation or care related to your HIV infection?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If H4 is (0, 7, 9), skip to Instructions before H8.

H5. When did you first go to your health care provider after learning you had HIV?

[77/7777=Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

H6. When did you last go to your health care provider for HIV care?

[77/7777=Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

H7. Are you currently taking antiretroviral medicines to treat your HIV infection?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Pre- and Post-exposure Prophylaxis Questions for HIV+ participants

SAY: Researchers are studying whether antiretroviral medicines could possibly be taken to prevent HIV infection.

H8. Before today, have you ever heard of people who do not have HIV taking antiretroviral medicines, to keep from getting HIV?

- No..... 0
Yes..... 1
Refused to answer..... 7
Don't know..... 9

If H7 is (0, 7, 9) skip to End.

H9. In the past 12 months, have you given your antiretroviral medicines to a sex partner who was HIV-negative because you thought it might keep them from getting HIV?

- No..... 0
Yes..... 1
Refused to answer..... 7
Don't know..... 9

Skip to END.

CIPROBES:

- How do HIV-positive (HET) participants interpret the term “antiretroviral medicines?” Would providing examples of other ways to refer to antiretrovirals (e.g., “HAART” or “anti-HIV medicines”) help ensure complete and accurate reporting by HET participants who are HIV-positive?
- How do participants interpret H8? Specifically, does it seem to ask if R personally knows people who did this? Or is it interpreted more generally, as R’s awareness of Pre- and Post-exposure prophylaxis as prevention strategies?
- What does a “Yes” response to H8 mean? In what context have they heard of HIV-negative people taking ARVs (i.e., post-exposure only or both pre- and post- exposure)?
- If H9 did not specify “sex partner,” would R’s response be different? In what way and why?

Pre- and Post-exposure Prophylaxis Questions for participants who have not tested HIV+

SAY: Researchers are studying whether anti-HIV medicine -- a pill -- could possibly be taken to prevent HIV infection.

H10. Before today, have you ever heard of people who do not have HIV taking anti-HIV medicines, to keep from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

H11. In the past 12 months, have you taken anti-HIV medicines after sex because you thought it would keep you from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

H12. In the past 12 months, have you taken anti-HIV medicines before sex because you thought it would keep you from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If H11 = 0, 7, OR 9 AND H12 = 0, 7, or 9, skip to H14.

H13. Please tell me if you got any of the anti-HIV medicines you took from the following people or places. Did you get them from...**[GIVE RESPONDENT FLASHCARD D. READ ALL CHOICES.]**

	No	Yes	Refused to answer	Don't know
a. Pharmacy or drug store.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
b. Doctor or other health care provider.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
c. Sex partner, friend, relative, or acquaintance.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
d. Internet.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
e. Some other place.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9

(Specify _____)

H14. Would you be willing to take HIV medicines every day to lower your chances of getting HIV?

No.....	<input type="checkbox"/> 0
Yes.....	<input type="checkbox"/> 1
Refused to answer.....	<input type="checkbox"/> 7
Don't know.....	<input type="checkbox"/> 9

CLPROBES:

- How do HIV-negative participants, especially those for whom HIV is less salient (e.g., heterosexuals) interpret the term “antiretroviral medicines?”
- Should we use the same phrase for both HIV-positive and HIV-negative participants, or would another term, such as “anti-HIV medicines” be clearer and improve accuracy of reporting among HIV-negative participants?
- How do participants interpret H10? Specifically, does it seem to ask if R personally knows people who did this? Or is it interpreted more generally, as R’s awareness of Pre- and Post-exposure prophylaxis as prevention strategies?
- What does a “Yes” response to H10 mean? In what context have they heard of HIV-negative people taking ARVs (i.e., post-exposure only or both pre- and post- exposure)?
- How do participants interpret and understand the category “pharmacy or drug store” (question H13)? How would participants who order prescription medications from on-line pharmacies respond to a question like H13? How can we make clear that the category “internet” should not include pharmacies that required a prescription from a health care provider? Or, is this category not necessary, since we also ask about doctors or other health care providers?
- Is the yes/no dichotomy too restrictive for H14?

End interview.

Appendix A. Flashcards

Flashcard 1

Husband/wife/spouse
Unmarried partner
Biological son or daughter
Adopted son or daughter
Stepson or stepdaughter
Brother or sister
Father or mother
Grandchild

Parent-in-law
Son-in-law or daughter-in-law
Other relative
Roomer or boarder
Housemate or roommate
Foster child
Other nonrelative

FLASHCARD A

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

FLASHCARD B

How many people do you know who are:

- Friends, relatives, or other people you are close to, AND
- Who are at least 18 years old, AND
- Who live in *[insert project area]*

FLASHCARD C

<u>MONTHLY INCOME</u>	<i>OR</i>	<u>YEARLY INCOME</u>
A. \$0 to \$417		A. \$0 to \$4,999
B. \$418 to \$833		B. \$5,000 to \$9,999
C. \$834 to \$1,041		C. \$10,000 to \$12,499
D. \$1,042 to \$1,250		D. \$12,500 to \$14,999
E. \$1,251 to \$1,667		E. \$15,000 to \$19,999
F. \$1,668 to \$2,082		F. \$20,000 to \$24,999
G. \$2,083 to \$2,500		G. \$25,000 to \$29,999
H. \$2,501 to \$2,916		H. \$30,000 to \$34,999
I. \$2,917 to \$3,333		I. \$35,000 to \$39,999
J. \$3,334 to \$4,167		J. \$40,000 to \$49,999
K. \$4,168 to \$4,999		K. \$50,000 to \$59,999
L. \$5,000 to \$6,250		L. \$60,000 to \$74,999
M. \$6,251 or more		M. \$75,000 or more

FLASHCARD D

- Pharmacy or drug store
- Doctor or other health care provider
- Sex partner, friend, relative, or acquaintance
- Internet
- Some other place

Appendix B.
Eligible counties and cities of residence

Washington, DC	Baltimore, MD
District of Columbia	Baltimore City
Montgomery County, MD	Anne Arundel
Prince Georges County, MD	Baltimore County
Calvert County, MD	Carroll
Charles County, MD	Hartford
Alexandria City, VA	Howard
Fairfax City, VA	Queen Anne's
Falls Church City, VA	
Fredericksburg City, VA	
Manassas City, VA	
Manassas Park City, VA	
Arlington County, VA	
Clarke County, VA	
Fairfax County, VA	
Fauquier County, VA	
Loudon County, VA	
Prince William County, VA	
Spotsylvania County, VA	
Stafford County, VA	
Warren County, VA	
Jefferson County, WV	

NHBS QUESTIONS FOR COGNITIVE TESTING – Interviewer Protocol

MSM Sample

Introduction to the Cognitive Interview:

Thank you for agreeing to participate in this study today. You have read the Informed Consent and you have chosen to take part in this research study. Is that correct? [Interviewer waits for verbal acknowledgment]. You have given your permission for me to tape record your interview today, and to play it to other people working on this study. Is that correct? [Interviewer waits for verbal acknowledgment].

I have in front of me a questionnaire that asks about behaviors that may put someone at risk for contracting HIV, the virus that causes AIDS. These questions will be used on large-scale surveys to help us understand more about patterns of HIV transmission in the United States. Before they are used on these surveys, we are testing the questions out to see whether they are phrased well, whether they are too difficult to answer, and whether they make sense to people.

In a minute, I will ask you these questions, and I will also ask you questions about how you interpreted some of the questions and how you came up with your answers. I'd also like it if you could tell me if any question seems strange or confusing.

Do you understand what I am asking you to do? (Explain again if needed). Do you have any (more) questions? (If no questions) OK, let's begin.

E1. What is your date of birth?

$\frac{\text{M}}{\text{M}} / \frac{\text{D}}{\text{D}} / \frac{\text{Y}}{\text{Y}} \text{---} \frac{\text{Y}}{\text{Y}}$

E6. What county do you currently live in? _____

*See Appendix B for list of eligible counties in Washington, DC and Baltimore MSAs.. For E6a auto-fill **project area** with “Washington, DC” or “Baltimore, MD” depending on county.)*

E6a. How long have you been living in [**project area**]? (**Interviewer:** If response is in months, enter 0 below and then enter the number of months in the next screen.)

Years ___

[Refused = 777, Don't know = 999]

If E6a= 1-99, 777, or 999, skip to Q2a

E6b.

Number of months: __ __
range of values = 1-11

[Refused = 77, Don't know = 99]

Q2a What are the names of the people living in your home? (Record each name)

Q2b [Give Respondent Flashcard 1.] How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

Q3a. What is your current marital status? Mark (X) ONE box.

- Now married
- In a registered domestic partnership or civil union
- Widowed
- Divorced
- Separated
- Never married

E4. Do you consider yourself to be Hispanic or Latino/a?
 No.....0
 Yes.....1
 Refused to answer.....7
 Don't know.....9

E5. **[GIVE RESPONDENT FLASHCARD A.]** Which racial group or groups do you consider yourself to be in? You may choose more than one option. **[READ CHOICES. CHECK ALL THAT APPLY.]**
 American Indian or Alaska Native..... 1
 Asian 2
 Black or African American 3
 Native Hawaiian or Other Pacific Islander.....4
 White5
 Refused to answer.....7
 Does not apply8
 Don't know.....9

E7. What was your sex at birth? **[CHECK only ONE]**
 Male..... 1
 Female..... 2
 Intersex/ambiguous..... 3
 Refused to answer..... 7
 Don't know..... 9

E8. Do you consider yourself to be male, female, or transgender? **[CHECK only ONE]**
 Male..... 1
 Female 2
 Transgender 3
 Refused to answer..... 7
 Don't know..... 9

D8a. Do you currently consider yourself to be: **[READ CHOICES. CHECK ONLY ONE.]**

- Heterosexual or "Straight"..... 1
- Homosexual or Gay 2
- Bisexual..... 3
- Other..... 4
- Refused to answer..... 7
- Don't know..... 9

Question D8a Help:

If R is unfamiliar with the terms “heterosexual” or “straight” say:

A heterosexual or straight man is someone who sees himself as forming intimate or loving relationships with women. He may also think of himself as being attracted to, or primarily attracted to, women. He may also engage in sexual behaviors with women.

If R is unfamiliar with the terms “homosexual or gay” say:

A homosexual or gay man is someone who sees himself as forming intimate or loving relationships with other men. He may also think of himself as being attracted to, or primarily attracted to, men. He may also engage in sexual behavior with other men. He might also form political, social, or cultural connections with a community of other homosexual men.

If R is unfamiliar with the term “bisexual” say:

A bisexual man is someone who sees himself as forming intimate or loving relationships with either men or women. He may also think of himself as being attracted to both men and women, and he may also engage in sexual behavior with either men, women, or with both men and women.

D5. What is the highest level of education you completed?

[DO NOT read choices. Check only ONE.]

- Never attended school..... 00
- Grades 1 through 8..... 01
- Grades 9 through 11..... 02
- Grades 12 or GED..... 03
- Some college, Associate's Degree, or
Technical Degree..... 04
- Bachelor's Degree..... 05

- Any post graduate studies 06
- Refused to answer..... 77
- Don't know..... 99

D6. What best describes your employment status? Are you:
[READ CHOICES. CHECK only ONE.]

- Employed full-time..... 01
- Employed part-time..... 02
- A homemaker..... 03
- A full-time student..... 04
- Retired..... 05
- Unable to work for health reasons 06
- Unemployed..... 07
- Other..... 08
- Refused to answer..... 77
- Don't know..... 99

D7. What was your **household income** last year from all sources before taxes?

GIVE RESPONDENT FLASHCARD C. DO NOT read choices.

SAY: Please take a look at this card and tell me the letter that best corresponds to your monthly or yearly income.

- | Monthly Income | Yearly Income | |
|--------------------------|------------------------------|-----------------------------|
| a. 0 to \$417..... | a. 0 to \$4,999..... | <input type="checkbox"/> 00 |
| b. \$418 to \$833..... | b. \$5,000 to \$9,999..... | <input type="checkbox"/> 01 |
| c. \$834 to \$1041..... | c. \$10,000 to \$12,499..... | <input type="checkbox"/> 02 |
| d. \$1042 to \$1250..... | d. \$12,500 to \$14,999..... | <input type="checkbox"/> 03 |
| e. \$1251 to \$1667..... | e. \$15,000 to \$19,999..... | <input type="checkbox"/> 04 |
| f. \$1668 to \$2082..... | f. \$20,000 to \$24,999..... | <input type="checkbox"/> 05 |
| g. \$2083 to \$2500..... | g. \$25,000 to \$29,999..... | <input type="checkbox"/> 06 |
| h. \$2501 to \$2916..... | h. \$30,000 to \$34,999..... | <input type="checkbox"/> 07 |

i \$2917 to \$3333.....	i \$35,000 to \$39,999.....	<input type="checkbox"/>	08
j. \$3334 to \$4167.....	j. \$40,000 to \$49,999.....	<input type="checkbox"/>	09
k. \$4168 to \$4999.....	k. \$50,000 to \$59,999.....	<input type="checkbox"/>	10
l. \$5000 to \$6,250.....	l. \$60,000 to \$74,999.....	<input type="checkbox"/>	11
m. \$6251 or more.....	m. \$75,000 or more.....	<input type="checkbox"/>	12
Refused to answer.....		<input type="checkbox"/>	77
Don't know.....		<input type="checkbox"/>	99

SEXUAL BEHAVIORS

SAY: Next, I'm going to ask you some questions about having sex. Please remember your answers will be kept private. I need to ask you all the questions, even if some may not apply to your situation.

- S1. Have you ever had vaginal or anal sex with a woman?
No..... 0
Yes..... 1
Refused to answer..... 7
Don't know..... 9

- S2. In the past 12 months, that is, since *[interview month]* of last year, with how many different women have you had oral, vaginal, or anal sex?

____ _ *[Refused = 7777, Don't know = 9999]*

SAY: Now I'm going to ask you some questions about having sex with other men.

For these questions, "having sex" means oral or anal sex. Oral sex means he put his mouth on your penis or you put your mouth on his penis. Anal sex means you put your penis in his anus (butt) or he put his penis in your anus (butt).

- S3. Have you ever had oral or anal sex with a man?
No..... 0
Yes..... 1
Refused to answer..... 7
Don't know..... 9

- S4. In the past 12 months, that is, since *<interview month>* of last year, with how many different men have you had oral or anal sex?

____ _ *[Refused = 7777, Don't know = 9999]*

HIV TESTING

SAY: Now I'm going to ask you a few questions about getting tested for HIV. An HIV test checks whether someone has the virus that causes AIDS.

- H1. Have you ever been tested for HIV?
- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If H1 is (0, 7, 9), skip to instructions before H10

- H2. When did you have your most recent HIV test?

[77/7777 = Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

- H3. What was the result of your most recent HIV test? **[DO NOT Read choices, check only ONE.]**

- Negative..... 1
- Positive..... 2
- Never obtained results**..... 3
- Indeterminate..... 4
- Refused to answer..... 7
- Don't know..... 9

If H3 is (1, 7, 9), skip to Instructions before H10.

If H3 = 2, skip to H4.

If H3 is (3 or 4), ask H3a.

- H3a. Before your test in ___/___ *[insert date from H2]*, did you ever test positive for HIV?

- No..... 0 *skip to Instructions before H10*
- Yes..... 1
- Refused to answer..... 7 *skip to Instructions before H10*
- Don't know..... 9 *skip to Instructions before H10*

Questions for participants who have ever tested HIV+

H4. Have you ever been seen by a doctor, nurse, or other health care provider for a medical evaluation or care related to your HIV infection?

- No..... 0
 Yes..... 1
 Refused to answer..... 7
 Don't know..... 9

If H4 is (0, 7, 9), skip to Instructions before H8.

H5. When did you first go to your health care provider after learning you had HIV?

[77/7777=Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

H6. When did you last go to your health care provider for HIV care?

[77/7777=Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

H7. Are you currently taking antiretroviral medicines to treat your HIV infection?

- No..... 0
 Yes..... 1
 Refused to answer..... 7
 Don't know..... 9

Pre- and Post-exposure Prophylaxis Questions for HIV+ participants

SAY: Researchers are studying whether antiretroviral medicines could possibly be taken to prevent HIV infection.

H8. Before today, have you ever heard of people who do not have HIV taking antiretroviral medicines, to keep from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If H7 is (0, 7, 9) skip to End.

H9. In the past 12 months, have you given your antiretroviral medicines to a sex partner who was HIV-negative because you thought it might keep them from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Skip to END.

C.I. PROBES:

- How do participants interpret H8? Specifically, does it seem to ask if R personally knows people who did this? Or is it interpreted more generally, as R’s awareness of Pre- and Post-exposure prophylaxis as prevention strategies?
- What does a “Yes” response to H8 mean? In what context have they heard of HIV-negative people taking ARVs (i.e., post-exposure only or both pre- and post- exposure)?

Pre- and Post-exposure Prophylaxis Questions for participants who have not tested HIV+

SAY: Researchers are studying whether anti-HIV medicine -- a pill -- could possibly be taken to prevent HIV infection.

H10. Before today, have you ever heard of people who do not have HIV taking anti-HIV medicines, to keep from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

H11. In the past 12 months, have you taken anti-HIV medicines after sex because you thought it would keep you from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

H12. In the past 12 months, have you taken anti-HIV medicines before sex because you thought it would keep you from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If H11 = 0, 7, OR 9 AND H12 = 0, 7, or 9, skip to H14.

H13. Please tell me if you got any of the anti-HIV medicines you took from the following people or places. Did you get them from...[**GIVE RESPONDENT FLASHCARD C. READ ALL CHOICES.**]

	No	Yes	Refused to answer	Don't know
a. Pharmacy or drug store.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
b. Doctor or other health care provider.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
c. Sex partner, friend, relative, or acquaintance.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
d. Internet.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
e. Some other place.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9

(Specify _____)

H14. Would you be willing to take HIV medicines every day to lower your chances of getting HIV?

No.....	<input type="checkbox"/> 0
Yes.....	<input checked="" type="checkbox"/> 1
Refused to answer.....	<input type="checkbox"/> 7
Don't know.....	<input type="checkbox"/> 9

C.I. PROBES:

- How do HIV-negative participants, especially those for whom HIV is less salient (e.g., heterosexuals) interpret the term “antiretroviral medicines?”
- Should we use the same phrase for both HIV-positive and HIV-negative participants, or would another term, such as “anti-HIV medicines” be clearer and improve accuracy of reporting among HIV-negative participants?
- How do participants interpret H10? Specifically, does it seem to ask if R personally knows people who did this? Or is it interpreted more generally, as R’s awareness of Pre- and Post-exposure prophylaxis as prevention strategies?
- What does a “Yes” response to H10 mean? In what context have they heard of HIV-negative people taking ARVs (i.e., post-exposure only or both pre- and post- exposure)?
- How do participants interpret and understand the category “pharmacy or drug store” (question H13)? How would participants who order prescription medications from on-line pharmacies respond to a question like H13? How can we make clear that the category “internet” should not include pharmacies that required a prescription from a health care provider? Or, is this category not necessary, since we also ask about doctors or other health care providers?
- Is the yes/no dichotomy too restrictive for H14?

End interview.

Appendix A. Flashcards

Flashcard 1

Husband/wife/spouse

Unmarried partner

Biological son or daughter

Adopted son or daughter

Stepson or stepdaughter

Brother or sister

Father or mother

Grandchild

Parent-in-law

Son-in-law or daughter-in-law

Other relative

Roomer or boarder

Housemate or roommate

Foster child

Other nonrelative

FLASHCARD A

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

FLASHCARD B

<u>MONTHLY INCOME</u>	<i>OR</i>	<u>YEARLY INCOME</u>
A. \$0 to \$417		A. \$0 to \$4,999
B. \$418 to \$833		B. \$5,000 to \$9,999
C. \$834 to \$1,041		C. \$10,000 to \$12,499
D. \$1,042 to \$1,250		D. \$12,500 to \$14,999
E. \$1,251 to \$1,667		E. \$15,000 to \$19,999
F. \$1,668 to \$2,082		F. \$20,000 to \$24,999
G. \$2,083 to \$2,500		G. \$25,000 to \$29,999
H. \$2,501 to \$2,916		H. \$30,000 to \$34,999
I. \$2,917 to \$3,333		I. \$35,000 to \$39,999
J. \$3,334 to \$4,167		J. \$40,000 to \$49,999
K. \$4,168 to \$4,999		K. \$50,000 to \$59,999
L. \$5,000 to \$6,250		L. \$60,000 to \$74,999
M. \$6,251 or more		M. \$75,000 or more

FLASHCARD C

- Pharmacy or drug store
- Doctor or other health care provider
- Sex partner, friend, relative, or acquaintance
- Internet
- Some other place

Appendix B.
Eligible counties and cities of residence

Washington, DC	Baltimore, MD
District of Columbia	Baltimore City
Montgomery County, MD	Anne Arundel
Prince Georges County, MD	Baltimore County
Calvert County, MD	Carroll
Charles County, MD	Hartford
Alexandria City, VA	Howard
Fairfax City, VA	Queen Anne's
Falls Church City, VA	
Fredericksburg City, VA	
Manassas City, VA	
Manassas Park City, VA	
Arlington County, VA	
Clarke County, VA	
Fairfax County, VA	
Fauquier County, VA	
Loudon County, VA	
Prince William County, VA	
Spotsylvania County, VA	
Stafford County, VA	
Warren County, VA	
Jefferson County, WV	

NHBS QUESTIONS FOR COGNITIVE TESTING – Interviewer Protocol

IDU Sample

Introduction to the Cognitive Interview:

Thank you for agreeing to participate in this study today. You have read the Informed Consent and you have chosen to take part in this research study. Is that correct? [Interviewer waits for verbal acknowledgment]. You have given your permission for me to tape record your interview today, and to play it to other people working on this study. Is that correct? [Interviewer waits for verbal acknowledgment].

I have in front of me a questionnaire that asks about behaviors that may put someone at risk for contracting HIV, the virus that causes AIDS. These questions will be used on large-scale surveys to help us understand more about patterns of HIV transmission in the United States. Before they are used on these surveys, we are testing the questions out to see whether they are phrased well, whether they are too difficult to answer, and whether they make sense to people.

In a minute, I will ask you these questions, and I will also ask you questions about how you interpreted some of the questions and how you came up with your answers. I'd also like it if you could tell me if any question seems strange or confusing.

Do you understand what I am asking you to do? (Explain again if needed). Do you have any (more) questions? (If no questions) OK, let's begin.

E1. What is your date of birth?

(M M / D D / Y Y Y Y)

E6. What county do you currently live in? _____

*See Appendix B for list of eligible counties in Washington, DC and Baltimore MSAs.. For E6a auto-fill **project area** with “Washington, DC” or “Baltimore, MD” depending on county.)*

E6a. How long have you been living in [**project area**]? (**Interviewer:** If response is in months, enter 0 below and then enter the number of months in the next screen.)

Years ___

[Refused = 777, Don't know = 999]

If E6a= 1-99, 777, or 999, skip to Q2a

E6b.

Number of months: __ __
range of values = 1-11

[Refused = 77, Don't know = 99]

Q2a What are the names of the people living in your home? (Record each name)

Q2b [Give Respondent Flashcard 1.] How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

How is [fill name] related to you? Mark (X) ONE box.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Husband/wife/spouse | <input type="checkbox"/> Parent-in-law |
| <input type="checkbox"/> Unmarried partner | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Adopted son or daughter | <input type="checkbox"/> Roomer or boarder |
| <input type="checkbox"/> Stepson or stepdaughter | <input type="checkbox"/> Housemate or roommate |
| <input type="checkbox"/> Brother or sister | <input type="checkbox"/> Foster child |
| <input type="checkbox"/> Father or mother | <input type="checkbox"/> Other nonrelative |
| <input type="checkbox"/> Grandchild | |

Q3a. What is your current marital status? Mark (X) ONE box.

- Now married
- In a registered domestic partnership or civil union
- Widowed
- Divorced
- Separated
- Never married

- E4. Do you consider yourself to be Hispanic or Latino/a?
 No.....0
 Yes.....1
 Refused to answer.....7
 Don't know.....9

- E5. **[GIVE RESPONDENT FLASHCARD A.]** Which racial group or groups do you consider yourself to be in? You may choose more than one option. **[READ CHOICES. CHECK ALL THAT APPLY.]**
 American Indian or Alaska Native..... 1
 Asian 2
 Black or African American 3
 Native Hawaiian or Other Pacific Islander.....4
 White5
 Refused to answer.....7
 Does not apply8
 Don't know.....9

- E7. Do you consider yourself to be male, female, or transgender? **[CHECK only ONE]**
 Male..... 1
 Female 2
 Transgender 3
 Refused to answer..... 7
 Don't know..... 9

If E7 = 1 (if respondent is male) ask D8a. Otherwise skip to D8b.

- D8a. Do you currently consider yourself to be: **[READ CHOICES. CHECK ONLY ONE.]**
 Heterosexual or "Straight"..... 1
 Homosexual or Gay 2
 Bisexual..... 3
 Other..... 4

Refused to answer..... 7
 Don't know..... 9

Question D8a Help:

If R is unfamiliar with the terms “heterosexual” or “straight” say:

A heterosexual or straight man is someone who sees himself as forming intimate or loving relationships with women. He may also think of himself as being attracted to, or primarily attracted to, women. He may also engage in sexual behaviors with women.

If R is unfamiliar with the terms “homosexual or gay” say:

A homosexual or gay man is someone who sees himself as forming intimate or loving relationships with other men. He may also think of himself as being attracted to, or primarily attracted to, men. He may also engage in sexual behavior with other men. He might also form political, social, or cultural connections with a community of other homosexual men.

If R is unfamiliar with the term “bisexual” say:

A bisexual man is someone who sees himself as forming intimate or loving relationships with either men or women. He may also think of himself as being attracted to both men and women, and he may also engage in sexual behavior with either men, women, or with both men and women.

Skip to D5

If E7 = 2 (if respondent is female) ask D8b.

D8b. Do you currently consider yourself to be: **[READ CHOICES. CHECK ONLY ONE.]**

Heterosexual or "Straight"..... 1
 Homosexual or lesbian..... 2
 Bisexual..... 3
 Other..... 4
 Refused to answer..... 7
 Don't know..... 9

Question D8b Help:

If R is unfamiliar with the terms “heterosexual” or “straight” say:

A heterosexual or straight woman is someone who sees herself as forming intimate or loving relationships with men. She may also think of herself as being attracted to, or primarily attracted to, men. She may also engage in sexual behavior with men.

If R is unfamiliar with the terms “homosexual” or “lesbian” say:

A homosexual or lesbian woman is someone who sees herself as forming intimate or loving relationships with women. She may also think of herself as being attracted to, or primarily attracted to, women and she may engage in sexual behavior with women. She might also form political, social, or cultural connections with a community of other lesbians.

If R is unfamiliar with the term “bisexual” say:

A bisexual woman is someone who sees herself as forming intimate or loving relationships with either men or women. She may also think of herself as being attracted to both men and women, and she may also engage in sexual behavior with either men or women.

D5. What is the highest level of education you completed?

[DO NOT read choices. Check only ONE.]

- Never attended school..... 00
- Grades 1 through 8..... 01
- Grades 9 through 11..... 02
- Grades 12 or GED..... 03
- Some college, Associate’s Degree, or
Technical Degree..... 04
- Bachelor’s Degree..... 05
- Any post graduate studies 06
- Refused to answer..... 77
- Don't know..... 99

D6. What best describes your employment status? Are you:

[READ CHOICES. CHECK only ONE.]

- Employed full-time..... 01
- Employed part-time..... 02
- A homemaker..... 03
- A full-time student..... 04
- Retired..... 05

- Unable to work for health reasons 06
- Unemployed..... 07
- Other..... 08
- Refused to answer..... 77
- Don't know..... 99

D7. What was your household income last year from all sources before taxes?

GIVE RESPONDENT FLASHCARD C. DO NOT read choices.

SAY: Please take a look at this card and tell me the letter that best corresponds to your monthly or yearly income.

- | Monthly Income | Yearly Income | |
|---------------------------|------------------------------|-----------------------------|
| a. 0 to \$417..... | a. 0 to \$4,999..... | <input type="checkbox"/> 00 |
| b. \$418 to \$833..... | b. \$5,000 to \$9,999..... | <input type="checkbox"/> 01 |
| c. \$834 to \$1041..... | c. \$10,000 to \$12,499..... | <input type="checkbox"/> 02 |
| d. \$1042 to \$1250..... | d. \$12,500 to \$14,999..... | <input type="checkbox"/> 03 |
| e. \$1251 to \$1667..... | e. \$15,000 to \$19,999..... | <input type="checkbox"/> 04 |
| f. \$1668 to \$2082..... | f. \$20,000 to \$24,999..... | <input type="checkbox"/> 05 |
| g. \$2083 to \$2500..... | g. \$25,000 to \$29,999..... | <input type="checkbox"/> 06 |
| h. \$2501 to \$2916..... | h. \$30,000 to \$34,999..... | <input type="checkbox"/> 07 |
| i. \$2917 to \$3333..... | i. \$35,000 to \$39,999..... | <input type="checkbox"/> 08 |
| j. \$3334 to \$4167..... | j. \$40,000 to \$49,999..... | <input type="checkbox"/> 09 |
| k. \$4168 to \$4999..... | k. \$50,000 to \$59,999..... | <input type="checkbox"/> 10 |
| l. \$5000 to \$6,250..... | l. \$60,000 to \$74,999..... | <input type="checkbox"/> 11 |
| m. \$6251 or more..... | m. \$75,000 or more..... | <input type="checkbox"/> 12 |
| Refused to answer..... | | <input type="checkbox"/> 77 |
| Don't know..... | | <input type="checkbox"/> 99 |

E8. Have you ever in your life shot up or injected any drugs other than those prescribed for you? By shooting up, I mean anytime you might have used drugs with a needle, either by mainlining, skin popping, or muscling.

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

E9. When was the last time you injected any drug? That is, how many days or months or years ago did you last inject?

[Interviewer: Enter the number below. If today, enter 0]

Number ___ ___ ___ *[Refused = 777, Don't know = 999]*

If E9 is (777, 999), skip to Instructions at beginning of Network Questions.

E9a. Interviewer: Was this days or months or years? *[If today, enter "days"]*

- Days..... 1
- Months..... 2
- Years..... 3

NETWORK QUESTIONS

(For N1-N2 auto-fill **project area** with “Washington, DC” or “Baltimore, MD” depending on county.)

SAY: I'm going to start by asking you about people you know in **[project area]** who inject.”
[Go to N1.]

Overall network size

N1. How many people in **[project area]** do you know who inject? (By “know,” I mean you know their name **OR** you see them around even if you don't know their name).

[Refused= 7777, Don't Know= 9999] ____ _

If R reported Overall network size of 0:

N1a: You said you don't know anyone in **[insert project area]** who injects. Is this correct? Remember, by “know,” I mean you know their name **OR** you see them around even if you don't know their name.

If R reported Overall network size of 1-3:

N1b: Is there anyone else you know in **[insert project area]** who injects? Remember, by “know,” I mean you know their name **OR** you see them around even if you don't know their name.

If, after probing once, N1 = 0, 7777, or 9999, skip to SEXUAL BEHAVIOR Section

If, after probing once, N1=1, go to N2b.

Else, go to N2a.

Recent Network Size

For Rs with Overall network size > 1:

N2a. Of those _____ *[insert number from N1]* people who live in *[project area]* and you know inject, how many have you seen at least once in the past 30 days? (*Again by “know,” I mean you know their name **OR** you see them around even if you don’t know their name*).

[Refused= 7777, Don’t Know= 9999] _____

For Rs with Overall network size= 1:

N2b. Have you seen this person at least once in the past 30 days?

- No..... 0 Go to Sexual Behavior Section
- Yes..... 1 Go to N6a.
- Refused to answer..... 7 Go to Sexual Behavior Section
- Don't know..... 9 Go to Sexual Behavior Section

If R reported Recent network size of 0:

N2c: You said you don’t know anyone in *[insert project area]* who injects and who you’ve seen at least once in the past 30 days. Is this correct? Remember, by “know,” I mean you know their name **OR** you see them around even if you don’t know their name.

If R reported Recent network size of 1-3:

N2d: Is there anyone else you know in *[insert project area]* who injects and who you’ve seen at least once in the past 30 days? Remember, by “know,” I mean you know their name **OR** you see them around even if you don’t know their name.

If N2a = 1 OR N2b = 1, skip to N6a.

If N2a = 0, 7777, 9999, OR N2b = 0, 7, or 9, skip to SEXUAL BEHAVIOR Section

Else (i.e., N2a > 1, after probing once with either N2c or N2d), go to N3a.

C.I. PROBES:

- Do participants count people in their networks the same way? Do participants who are IDU perceive ‘knowing someone’ as another IDU in the same way?
- Who do participants include in their network? i.e., do they include those that they share drugs with? Other users they have seen around? Drug dealers? Who else do they include in their network?

- Do the probes help clarify what is meant by ‘knowing someone’ as another IDU? Do the probes help participants more accurately count their network size? Are there better probes?

N3a. Of the _____ *[insert number from N2a]* people who inject that you have seen in the past 30 days, how many are male?

[Refused= 7777, Don't Know= 9999] ____ ____ ____

If N3a = N2a,

SAY: “So, all the people you know who inject and that you have seen in the past 30 days are male?”

If correct: go to N4

If incorrect: go to N3a, ask again, and enter correct response. Then go to N3b.

N3b. Of the _____ *[insert number from N2a]* people who inject that you have seen in the past 30 days, how many are female?

[Refused= 7777, Don't Know= 9999] ____ ____ ____

N4. Of the ____ *[insert number from N2a]* people who inject that you have seen in the past 30 days, how many are Latino/a or Hispanic?

[Refused= 7777, Don't Know= 9999] ____ ____ ____

If N4 = N2a, skip to SEXUAL BEHAVIOR Section

If N2a – N4 = 1, skip to N6c

SAY: Now I would like for you to think about the *[insert N2a – N4]* people who inject that you have seen in the past 30 days who are not Latino or Hispanic. What are their racial backgrounds? That is...

N5a. How many are Black or African American? *[Refused= 7777, Don't Know= 9999]*

____ ____ ____

N5b. How many are white? *[Refused= 7777, Don't Know= 9999]* ____ ____ ____

N5c. How many are another Race? [*Refused= 7777, Don't Know= 9999*] _____

Go to SEXUAL BEHAVIOR Section

- N6a. Is this person male or female?
- Male..... 1
 - Female..... 2
 - Refused to answer..... 7
 - Don't know..... 9

- N6b. Is this person Latino or Hispanic?
- No..... 0
 - Yes..... 1
 - Refused to answer..... 7
 - Don't know..... 9

- N6c. Is [*if N2b = 1, insert "this person"; if N2a > 1, insert "the person who is not Latino or Hispanic"*] Black, white, or another race?
- Black..... 1
 - White..... 2
 - Another race..... 3
 - Refused to answer..... 7
 - Don't know..... 9

SEXUAL BEHAVIORS

SAY: The next question is about having sex. Please remember your answers will be kept private.

For this question, oral sex means mouth on the vagina or penis; vaginal sex means penis in the vagina; and anal sex means penis in the anus (butt).

If E7=2 (if participant is female), skip to S3.

- S1. Have you ever had vaginal or anal sex with a woman?
- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If S1 is (0, 7, 9), skip to HIV Testing Section

- S2. In the past 12 months, that is, since *[interview month]* of last year, with how many different women have you had oral, vaginal, or anal sex?

___ ___ ___ ___ ***[Refused = 7777, Don't know = 9999]***

Skip to HIV Testing Section.

- S3. Have you ever had vaginal or anal sex with a man?
- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If S3 is (0, 7, 9), skip to HIV Testing Section

- S4. In the past 12 months, that is, since *<interview month>* of last year, with how many different men have you had oral, vaginal, or anal sex?

___ ___ ___ ___ ***[Refused = 7777, Don't know = 9999]***

HIV TESTING

SAY: Now I'm going to ask you a few questions about getting tested for HIV. An HIV test checks whether someone has the virus that causes AIDS.

- H1. Have you ever been tested for HIV?
- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If H1 is (0, 7, 9), skip to instructions before H10

- H2. When did you have your most recent HIV test?

[77/7777 = Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

- H3. What was the result of your most recent HIV test? **[DO NOT Read choices, check only ONE.]**

- Negative..... 1
- Positive..... 2
- Never obtained results**..... 3
- Indeterminate..... 4
- Refused to answer..... 7
- Don't know..... 9

If H3 is (1, 7, 9), skip to Instructions before H10.

If H3 = 2, skip to H4.

If H3 is (3 or 4), ask H3a.

- H3a. Before your test in ___/___ *[insert date from H2]*, did you ever test positive for HIV?

- No..... 0 *skip to Instructions before H10*
- Yes..... 1
- Refused to answer..... 7 *skip to Instructions before H10*
- Don't know..... 9 *skip to Instructions before H10*

Questions for participants who have ever tested HIV+

H4. Have you ever been seen by a doctor, nurse, or other health care provider for a medical evaluation or care related to your HIV infection?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If H4 is (0, 7, 9), skip to Instructions before H8.

H5. When did you first go to your health care provider after learning you had HIV?

[77/7777=Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

H6. When did you last go to your health care provider for HIV care?

[77/7777=Refused, 99/9999 = Don't know] (M M / Y Y Y Y)

H7. Are you currently taking antiretroviral medicines to treat your HIV infection?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Pre- and Post-exposure Prophylaxis Questions for HIV+ participants

SAY: Researchers are studying whether antiretroviral medicines could possibly be taken to prevent HIV infection.

H8. Before today, have you ever heard of people who do not have HIV taking antiretroviral medicines, to keep from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If H7 is (0, 7, 9) skip to End.

H9. In the past 12 months, have you given your antiretroviral medicines to a sex partner who was HIV-negative because you thought it might keep them from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

Skip to END.

C.I. PROBES:

- How do HIV-positive participants interpret the term “antiretroviral medicines?” Would providing examples of other ways to refer to antiretrovirals (e.g., “HAART” or “anti-HIV medicines”) help ensure complete and accurate reporting by participants who are HIV-positive?
- How do participants interpret H8? Specifically, does it seem to ask if R personally knows people who did this? Or is it interpreted more generally, as R’s awareness of Pre- and Post-exposure prophylaxis as prevention strategies?
- What does a “Yes” response to H8 mean? In what context have they heard of HIV-negative people taking ARVs (i.e., post-exposure only or both pre- and post- exposure)?
- If H9 did not specify “sex partner,” would R’s response be different? In what way and why?

Pre- and Post-exposure Prophylaxis Questions for participants who have not tested HIV+

SAY: Researchers are studying whether anti-HIV medicine -- a pill -- could possibly be taken to prevent HIV infection.

H10. Before today, have you ever heard of people who do not have HIV taking anti-HIV medicines, to keep from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

H11. In the past 12 months, have you taken anti-HIV medicines after sex because you thought it would keep you from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

H12. In the past 12 months, have you taken anti-HIV medicines before sex because you thought it would keep you from getting HIV?

- No..... 0
- Yes..... 1
- Refused to answer..... 7
- Don't know..... 9

If H11 = 0, 7, OR 9 AND H12 = 0, 7, or 9, skip to H14.

H13. Please tell me if you got any of the anti-HIV medicines you took from the following people or places. Did you get them from...**[GIVE RESPONDENT FLASHCARD C. READ ALL CHOICES.]**

	No	Yes	Refused to answer	Don't know
a. Pharmacy or drug store.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
b. Doctor or other health care provider.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
c. Sex partner, friend, relative, or acquaintance.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
d. Internet.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9
e. Some other place.....	<input type="checkbox"/> 0.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> 9

(Specify _____)

H14. Would you be willing to take HIV medicines every day to lower your chances of getting HIV?

No..... 0

Yes..... 1

Refused to answer..... 7

Don't know..... 9

C.I. PROBES:

- How do HIV-negative participants, especially those for whom HIV is less salient (e.g., heterosexuals) interpret the term “antiretroviral medicines?”
- Should we use the same phrase for both HIV-positive and HIV-negative participants, or would another term, such as “anti-HIV medicines” be clearer and improve accuracy of reporting among HIV-negative participants?
- How do participants interpret H10? Specifically, does it seem to ask if R personally knows people who did this? Or is it interpreted more generally, as R’s awareness of Pre- and Post-exposure prophylaxis as prevention strategies?
- What does a “Yes” response to H10 mean? In what context have they heard of HIV-negative people taking ARVs (i.e., post-exposure only or both pre- and post- exposure)?
- If H11 and H12 asked about injecting instead of sex, would the responses be different?
- How do participants interpret and understand the category “pharmacy or drug store” (question H13)? How would participants who order prescription medications from on-line pharmacies respond to a question like H13? How can we make clear that the category “internet” should not include pharmacies that required a prescription from a health care provider? Or, is this category not necessary, since we also ask about doctors or other health care providers?
- Is the yes/no dichotomy too restrictive for H14?

End interview.

Appendix A. Flashcards

Flashcard 1

Husband/wife/spouse

Unmarried partner

Biological son or daughter

Adopted son or daughter

Stepson or stepdaughter

Brother or sister

Father or mother

Grandchild

Parent-in-law

Son-in-law or daughter-in-law

Other relative

Roomer or boarder

Housemate or roommate

Foster child

Other nonrelative

FLASHCARD A

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

FLASHCARD B

<u>MONTHLY INCOME</u>	<i>OR</i>	<u>YEARLY INCOME</u>
A. \$0 to \$417		A. \$0 to \$4,999
B. \$418 to \$833		B. \$5,000 to \$9,999
C. \$834 to \$1,041		C. \$10,000 to \$12,499
D. \$1,042 to \$1,250		D. \$12,500 to \$14,999
E. \$1,251 to \$1,667		E. \$15,000 to \$19,999
F. \$1,668 to \$2,082		F. \$20,000 to \$24,999
G. \$2,083 to \$2,500		G. \$25,000 to \$29,999
H. \$2,501 to \$2,916		H. \$30,000 to \$34,999
I. \$2,917 to \$3,333		I. \$35,000 to \$39,999
J. \$3,334 to \$4,167		J. \$40,000 to \$49,999
K. \$4,168 to \$4,999		K. \$50,000 to \$59,999
L. \$5,000 to \$6,250		L. \$60,000 to \$74,999
M. \$6,251 or more		M. \$75,000 or more

FLASHCARD C

- Pharmacy or drug store
- Doctor or other health care provider
- Sex partner, friend, relative, or acquaintance
- Internet
- Some other place

Appendix B.
Eligible counties and cities of residence

Washington, DC	Baltimore, MD
District of Columbia	Baltimore City
Montgomery County, MD	Anne Arundel
Prince Georges County, MD	Baltimore County
Calvert County, MD	Carroll
Charles County, MD	Hartford
Alexandria City, VA	Howard
Fairfax City, VA	Queen Anne's
Falls Church City, VA	
Fredericksburg City, VA	
Manassas City, VA	
Manassas Park City, VA	
Arlington County, VA	
Clarke County, VA	
Fairfax County, VA	
Fauquier County, VA	
Loudon County, VA	
Prince William County, VA	
Spotsylvania County, VA	
Stafford County, VA	
Warren County, VA	
Jefferson County, WV	