



UNC CFAR Social and Behavioral Science Research Core SABI Database

INSTRUMENT TITLE: *HIVNET Baseline Risk Assessment (BRA-1)*

SOURCE ORGANIZATION: Koblin, B. A., Chesney, M. A., Husnik, M. J., Bozeman, S., Celum, C. L., Buchbinder, S., et al. (2003). High-risk behaviors among men who have sex with men in 6 US cities: Baseline data from the EXPLORE study. *American Journal of Public Health*, 93(6), 926.

RESPONSE OPTIONS AND SURVEY ITEMS: Attached

TERMS OF USE:

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Koblin, B. A., Chesney, M. A., Husnik, M. J., Bozeman, S., Celum, C. L., Buchbinder, S., et al. (2003). High-risk behaviors among men who have sex with men in 6 US cities: Baseline data from the EXPLORE study. *American Journal of Public Health*, 93(6), 926.

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HIVNET 015 (EXPLORE 040)

Baseline Risk Assessment (051)

Screening Visit (0111)

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Baseline Risk Assessment

Visit Date

mm dd yy

SOCIAL ACTIVITY QUESTIONS

These questions ask about social activities you may have participated in over the last six months.

A1. Which of the following types of activities or groups have you participated in during the last six months?

	yes	no
Meetings of organizations (political, social, etc.) for gays and/or lesbians	<input type="checkbox"/>	<input type="checkbox"/>
Community events (e.g., parade, fair, fund-raiser, etc.) for gays and/or lesbians	<input type="checkbox"/>	<input type="checkbox"/>
Volunteer work for an organization for gays and/or lesbians	<input type="checkbox"/>	<input type="checkbox"/>
Called a help line for men who have sex with men	<input type="checkbox"/>	<input type="checkbox"/>

ATTITUDE QUESTIONS

Using the scale on this card, please indicate how much you agree or disagree with each of the following statements.

Show Card #2.

strongly disagree somewhat disagree slightly disagree slightly agree somewhat agree strongly agree

A2. Most gay men I meet only engage in safer sex practices. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A3. I have trouble letting a sex partner know that I want to have safer sex.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A4. I am able to avoid behavior that may put me at risk of HIV infection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A5. My friends think it is important to use condoms.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A6. I can choose safer sex with a man I have sex with regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A7. I find it difficult to have safer sex with a man I have very strong sexual feelings for.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A8. I find it difficult to have safer sex when high or drunk.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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	<i>strongly disagree</i>	<i>somewhat disagree</i>	<i>slightly disagree</i>	<i>slightly agree</i>	<i>somewhat agree</i>	<i>strongly agree</i>
A9. I am less concerned about having anal sex without a condom now that new anti-HIV drug combination treatments are available.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A10. I never lose sight of what I consider safer sex, no matter what I am feeling.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A11. My friends use condoms.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A12. I feel confident that I will never slip from safer sex.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A13. Someone can talk me out of safer sex by persuading me they are HIV-negative.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A14. Most gay men are using condoms these days.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A15. If I ever did something risky, I am confident that I would go back to having safer sex right away.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A16. I find it difficult telling a sex partner not to do something I think is risky.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A17. I can avoid situations that I consider sexually risky.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A18. I am confident that I can have safer sex even if my partner really doesn't want to.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A19. I find it difficult telling a sex partner I won't have anal intercourse without a condom.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A20. I can choose safer sex with a man I have never had sex with before.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A21. By taking the new drug combinations, an HIV-positive man decreases the chances that he will infect his partner with HIV.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A22. I can use condoms with any sexual partner I might have.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A23. My friends encourage me to practice safer sex.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Using the scale on this card, please indicate how much you **enjoy** or **think you might enjoy** doing the following activities with a man. Please answer for each sexual activity whether you have done it or not.

Show Card #3.

	<i>dislike very much</i>	<i>dislike somewhat</i>	<i>enjoy somewhat</i>	<i>enjoy very much</i>
A24. You have insertive anal sex with your partner and you don't use a condom.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A25. You have receptive anal sex with your partner and he does not use a condom.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A26. You have oral sex with your partner and he comes in your mouth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Next is a list of ways you may have felt or behaved last week. How often have you felt this way during the past week? Please use the scale on this card. **Show Card #4.**

A27. How often during the past week did you...

	<i>never or rarely</i>	<i>sometimes (1-2 days)</i>	<i>often (3-4 days)</i>	<i>mostly or always (5-7 days)</i>
feel like you couldn't shake off the blues even with help from your family or friends?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
have trouble keeping your mind on what you were doing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel that everything you did was an effort?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
have trouble sleeping?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel lonely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel sad?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel like you just couldn't "get going"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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PEP QUESTIONS

The following set of questions refer to anti-HIV medications people might try to use to prevent HIV infection after a high-risk exposure. Anti-HIV medications include drugs such as AZT, 3TC, ddi, d4T, nevirapine, and protease inhibitors. Using anti-HIV drugs this way is sometimes referred to as post-exposure prevention, PEP, or morning after pills.

B1. Have you read or heard about the idea of HIV-negative people taking anti-HIV medications right before or after a high-risk exposure, such as anal sex without a condom, in order to keep from getting infected with HIV?..... yes no [] [] -> If no, go to question B2.

B1a. Using this card, tell me, how did you hear about it? Mark all that apply.

Show Card #5.

- [] health care provider [] public meeting [] TV/radio newscast [] advertisement [] friend/word-of-mouth [] other [] newspaper/newsletter article

B1b. Do you personally know any HIV-negative persons who have taken anti-HIV medications to prevent HIV infection? yes no [] []

B1c. Have you ever used anti-HIV medications to prevent HIV infection either before or after a high-risk sexual or drug use exposure? [] []

B2. If you had unprotected receptive anal sex with an HIV-positive partner, how likely would you be to try anti-HIV medications to prevent HIV infection?..... very likely somewhat likely not at all likely [] [] []

B3. If you had a high-risk exposure and wanted to get anti-HIV medications to try to prevent HIV infection and cost was not an issue, do you think you would be able to easily obtain the drugs? yes no [] []

Using the scale on this card, please indicate how much you agree or disagree with the following statement.

Show Card #2.

B4. Easy access to PEP will increase unsafe sex among people I know. strongly disagree somewhat disagree slightly disagree slightly agree somewhat agree strongly agree [] [] [] [] [] [] []

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SUBSTANCE USE AND SEX QUESTIONS

The next set of questions is about alcohol and drug use. Please remember that this information will not be disclosed to any agency, program, or individual. All data are strictly confidential and participants are protected by our Certificate of Confidentiality.

- C1. In the last six months, about how often did you get high or have a few drinks immediately before or during sex? *never* *occasionally* *often* *all the time*
-
- **If never, go to question C3.**
- C2. In the last six months, about how often would you say that alcohol or drug use made it more difficult for you to have safer sex? *never* *occasionally* *often* *all the time*
-

ALCOHOL USE QUESTIONS

- C3. Using this card, tell me, on average how often have you had a drink containing alcohol in the last six months? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.

Show Card #6.

<i>Total # days in six months</i>	<i>0</i>	<i>1-25</i>	<i>26-52</i>	<i>53-156</i>	<i>>156</i>
	<i>never</i>	<i>less than once a week</i>	<i>1-2 days a week</i>	<i>3-6 days a week</i>	<i>every day</i>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

→ **If never, go to question C4.**

- C3a. How many drinks containing alcohol did you have on a typical day when you were drinking in the last six months? *number of drinks*
- C3b. On how many days in the last six months did you have five drinks or more? *number of days*
- C3c. Think now about the last 30 days only. On how many of those days did you have an alcoholic drink? *number of days*
- yes* *no*
- C4. Have you ever felt you ought to cut down on your drinking?.....
- C5. Have people annoyed you by criticizing your drinking?
- C6. Have you ever felt bad or guilty about your drinking?
- C7. Have you ever had a drink first thing in the morning to steady your nerves or get rid of a hangover?
- C8. Have you ever had a drinking problem?

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- C9. Have you ever received alcohol treatment? This does not include self-help programs such as Alcoholics Anonymous. **yes** **no** → *If no, go to question C11.*
- C10. Are you in alcohol treatment now? **yes** **no**
- C11. In the last six months, have you attended a self-help program for alcohol problems, such as Alcoholics Anonymous? **yes** **no**

DRUG USE QUESTIONS

Next are questions about drug use. Again, please remember that this information will not be disclosed to any agency, program, or individual. All data are strictly confidential and participants are protected by our Certificate of Confidentiality.

C12. Using the choices on this card, in the last six months, how often have you... Show Card #6.

Total times in six months	0	1-25	26-52	53-156	>156
---------------------------	---	------	-------	--------	------

	never	less than once a week	1-2 days a week	3-6 days a week	every day
used marijuana or hashish?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
used poppers or inhaled nitrites, including ampules?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
smoked crack or rock cocaine?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
snorted or sniffed cocaine?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
swallowed, snorted, or smoked amphetamines such as speed, crystal, or crank?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
snorted or smoked heroin?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
used hallucinogens such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
used any other non-injectable drugs to get high?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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C13. In the last six months, have you used a needle to inject any drugs, including steroids, under your skin or into a vein? yes no → **If no, go to question C17.**

C14. Using the choices on this card, please tell me how often you have injected drugs in the last six months.

Show Card #1.

Total times in six months	1-11	12-51	52-182	>182
	<i>less than twice per month</i>	<i>2-8 x per month</i>	<i>2-7 x per week</i>	<i>more than once per day</i>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C15. In the last six months, with how many different people did you share needles or works?

none 1 other person more than one person

If none, go to question C17.

C15a. In the last six months, did you ever share a needle with someone you knew to be HIV-positive? yes no

SEXUAL EXPERIENCE QUESTIONS

These next questions are about sexual experiences you might have had before you turned 17.

C16. Before you turned 13 years old, did you have any sexual experience with someone who was five years or more older than you? By sexual experience we mean both non-contact experience like indecent exposure and contact experiences like kissing, fondling or intercourse. Include any sexual experience with a person who was five years or more older than you, whether or not you wanted it to occur. yes no

C17. Between the time you turned 13 and your 17th birthday, did you have any sexual experiences with someone who was ten years or more older than you? yes no

If both no, go to question D1.

C18. Did you consider the experience(s) to be sexual abuse?..... yes no

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SEXUAL BEHAVIOR WITH MEN

The following questions ask about your sexual behavior with male partners who are HIV-positive and HIV-negative, as well as partners whose HIV status is unknown to you. Again, these questions refer to the last six months.

D1. How many male sex partners have you had in the last six months? Include only men with whom you had anal or oral sex, with or without a condom, and with or without ejaculation.

→ If 0, go to question F1, page 27.

D2. How many of your male sex partners were HIV positive?

D3. How many of your male sex partners told you they were HIV-negative and you had **no reason** to doubt it?

D4. How many of your male sex partners never told you their HIV status, or told you they were negative and you **have reason** to doubt it?

Interviewer: Adjust numbers of partners in D1 if appropriate.

D5. Were you in a primary relationship with a male sex partner in the last six months? This would be someone you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.

yes no

→ If no, go to Introduction below.

D5a. What is your primary partner's HIV status?

positive negative not sure

D5b. Has a primary relationship ended in the last six months?

yes no

INTRODUCTION

Some of the next questions refer to sexual behaviors where you or your partner may have used a condom. Sex with a condom means that a condom was put on before penetration and used throughout. It includes times when a condom was used but then broke or slipped off. However, if penetration started without a condom, then a condom was put on and you continued, count this as sex without a condom.

INSTRUCTION 1: If subject reported no HIV-positive sex partners in question D2, go to Instruction 2 on page 9.



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HIV-POSITIVE PARTNERS

The next group of questions asks about the sexual contacts you had in the last six months with your HIV-positive male partner(s).

D6. How many times did this/ these partner(s) ejaculate or come in your mouth without a condom?

[] [] []

D7. How many times did you have anal sex with this/these partner(s) when his/ their penis was in your rectum? This would be with or without a condom and whether or not he/they ejaculated.

[] [] []

→ If 0, go to question D8.

D7a. How many of these times did your partner(s) use a male condom or did you use an anal condom (Reality® condom)?

[] [] []

→ If 0, go to question D8.

D7a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

[] [] []

D8. How many times did you have anal sex with your HIV-positive partner(s) when your penis was in his/their rectum? This would be with or without a condom and whether or not you ejaculated

[] [] []

→ If 0, go to Instruction 2.

D8a. How many of these times did you use a male condom or did your partner(s) use an anal condom (Reality® condom)?

[] [] []

→ If 0, go to Instruction 2.

D8a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

[] [] []

INSTRUCTION 2: If participant reported no HIV-negative male sex partners in question D3, go to Instruction 3 on page 10.



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HIV-NEGATIVE PARTNERS

The next group of questions asks about the sexual contact you had in the last six months with your HIV-negative male partner(s).

D9. How many times did this/these partner(s) ejaculate or come in your mouth without a condom?.....

□ □ □

D10. How many times did you have anal sex with this/these partner(s) when his/their penis was in your rectum? This would be with or without a condom and whether or not he/they ejaculated.....

□ □ □

→ If 0, go to question D11.

D10a.How many of these times did your partner(s) use a male condom or did you use an anal condom (Reality® condom)?.....

□ □ □

→ If 0, go to question D11.

D10a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

□ □ □

D11. How many times did you have anal sex with your HIV-negative partner(s) when your penis was in his/their rectum? This would be with or without a condom and whether or not you ejaculated.....

□ □ □

→ If 0, go to Instruction 3.

D11a.How many of these times did you use a male condom or did your partner(s) use an anal condom (Reality® condom)?.....

□ □ □

→ If 0, go to Instruction 3.

D11a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

□ □ □

INSTRUCTION 3: If participant reported no partners of unknown status in question D4, go to page 12.



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HIV-STATUS UNKNOWN PARTNERS

The next group of questions asks about the sexual contact you had with your male partner(s) partners whose HIV status you are not sure of.

D12. How many times did this/these partner(s) ejaculate or come in your mouth without a condom?

□ □ □

D13. How many times did you have anal sex with this/these partner(s) when his/their penis was in your rectum? This would be with or without a condom and whether or not he/they ejaculated

□ □ □

→ If 0, go to question D14.

D13a. How many of these times did your partner(s) use a male condom or did you use an anal condom (Reality® condom)?

□ □ □

→ If 0, go to question D14.

D13a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

□ □ □

D14. How many times did you have anal sex with this/these partner(s) whose HIV status you are not sure of, when your penis was in his/their rectum? This would be with or without a condom and whether or not you ejaculated.

□ □ □

→ If 0, go to question D15.

D14a. How many of these times did you use a male condom or did your partner(s) use an anal condom (Reality® condom)?

□ □ □

→ If 0, go to question D15.

D14a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

□ □ □



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Baseline Risk Assessment

PARTNER BY PARTNER QUESTIONS

Interviewer: Record the number of partners reported in question D1.

You will now be asked more detailed questions about your most recent male sex partner(s) in the last six months, up to a maximum of three partners.

D15. Think about your most recent male sex partner. Could you give me initials, a first name, or nickname that I can use to refer to him? This does not need to be his real name or initials.

_____ → If only 1 partner in last six months, go to Instruction 4 on page 13.

D16. Think about your next most recent male sex partner. Could you give me initials, a first name, or nickname that I can use to refer to him? This does not need to be his real name or initials.

_____ → If only 2 partners in last six months, go to Instruction 4 on page 13.

D17. Think about your next most recent male sex partner. Could you give me initials, a first name, or nickname that I can use to refer to him? This does not need to be his real name or initials.



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INSTRUCTION 4: Record "most recent partner's" initials/name from question D15.

The following questions will be about _____.

Ea1. Is this person a... Mark only one.

- primary partner? This would be someone that you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.
steady, non-primary partner? This would be a partner with whom you had sex three or more times in the past, but don't consider your primary partner.
non-steady partner? This would be a partner with whom you had sex less than three times in the past.

Ea2. How desirable did you find this partner?

attractive enough very desirable extremely desirable

Ea3. How old is this partner? years

Ea4. How long have you been having sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. Show Card #8.

- less than a week
more than a week but less than a month
one to six months
seven to 12 months
more than a year

Ea5. How many times have you had sex with this partner in the last six months? That is, anal or oral sex, with or without a condom, and with or without ejaculation.....



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yes no don't know

Ea6. Has _____ (most recent partner) ever had an HIV test?

If no or don't know, go to Introduction on page 15.

Ea6a. What was his most recent HIV test result?

HIV-positive → If positive, go to question Ea6b.

HIV-negative → If negative, go to question Ea6c.

not sure → If not sure, go to Introduction below.

Ea6b. Is _____ (most recent partner) taking any anti-HIV medications?.....

yes no don't know

— —

If yes, no or don't know, go to Introduction on page 15.

Ea6c. How confident are you that _____ (most recent partner) is HIV-negative?

Show Card #9.

<i>very confident</i>	<i>somewhat confident</i>	<i>slightly confident</i>	<i>not at all confident</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



HIVNET 015 (EXPLORE 040)

Baseline Risk Assessment (065)

Screening Visit (0111)

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Participant ID

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Baseline Risk Assessment

INTRODUCTION

The next group of questions asks about the most recent time you had sex with this partner.

Ea7. When did you last have sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. mm yy

Ea8. Using the choices on this card, during the most recent time you had sex with this partner, where did you have sex?

Show Card #10.

- | | |
|--|--|
| <input type="checkbox"/> your house or apartment or his house or apartment | <input type="checkbox"/> porn theater/video arcade |
| <input type="checkbox"/> hotel | <input type="checkbox"/> public bathroom |
| <input type="checkbox"/> sex club or bath | <input type="checkbox"/> other public place, such as beach, park, woods, street, car, or van |
| <input type="checkbox"/> bar, night club, or dance club | <input type="checkbox"/> other |
| <input type="checkbox"/> health club or gym | |

Ea9. During the most recent time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom? yes no

Ea10. During the most recent time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated. → **If no, go to question Ea11.**

Ea10a. Did your partner use a male condom or did you use an anal condom (Reality® condom)? → **If no, go to question Ea11.**

Ea10a1. Did the condom slip off, tear, break, or otherwise fail?

Ea11. During the most recent time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated. → **If no, go to question Ea12.**

Ea11a. Did you use a male condom or did your partner use an anal condom (Reality® condom)? → **If no, go to question Ea12.**

Ea11a1. Did the condom slip off, tear, break, or otherwise fail?

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HIVNET 015 (EXPLORE 040)

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Participant ID

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Site Number Participant Number Chk

Baseline Risk Assessment

Ea12. Were you drinking alcohol within two hours before or during the most recent time you had sex with this partner?

yes no

→ **If no, go to question Ea13.**

Ea12a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.

number of drinks

Ea13. Was your partner drinking within two hours before or during the most recent time you had sex?

yes no don't know

Ea14. Did you use drugs either immediately before or during the most recent time you had sex with this partner?

→ **If no, go to question Ea15.**

Ea14a. Which drugs? *Mark all that apply.*

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Ea15. Did your partner use drugs either immediately before or during the most recent time you had sex with him?

yes no don't know



HIVNET 015 (EXPLORE 040)

Baseline Risk Assessment (067)

Screening Visit (0111)

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Participant ID

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Participant Number

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Baseline Risk Assessment

INSTRUCTION 5: Review the participant's response to question D1, page 8.

- If the participant reported having only one male partner and reported having more than one episode of sex with the partner in question Ea5, continue with questions Ea16 -Ea24.
• If the participant reported having more than one male partner, go to Instruction 6, page 19.
• If the participant reported having only one male partner and reported having only one episode of sex with the partner in question Ea5, go to question F1, page 27.

The next group of questions are similar, but refer to the next to last time you had sex with your partner, (use name as reported on question D15, page 12).

mm yy

Ea16. When was the next to last time that you had sex with your partner? That is anal or oral sex, with or without a condom, and with or without ejaculation.

Ea17. Using the choices on this card, during the next to last time you had sex with this partner, where did you have sex? Show Card #10.

- your house or apartment or his house or apartment
hotel
sex club or bath
bar, night club, or dance club
health club or gym
porn theater/video arcade
public bathroom
other public place, such as beach, park, woods, street, car, or van
other

Ea18. During the next to last time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom? yes no

Ea19. During the next to last time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated. If no, go to question Ea20.

Ea19a. Did your partner use a male condom or did you use an anal condom (Reality® condom)? If no, go to question Ea20.

Ea19a1. Did the condom slip off, tear, break or otherwise fail?

Ea20. During the next to last time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated. If no, go to question Ea21.

Ea20a. Did you use a male condom or did your partner use an anal condom (Reality® condom)? If no, go to question Ea21.

Ea20a1. Did the condom slip off, tear, break, or otherwise fail?

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Baseline Risk Assessment

Ea21. Were you drinking alcohol within two hours before or during the next to last time you had sex with this partner?.....

yes

no

→ If no, go to question Ea22.

Ea21a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.

[] []

number of drinks

Ea22. Was your partner drinking within two hours before or during the next to last time you had sex?

yes

no

don't know

Ea23. Did you use drugs either immediately before or during the next to last time you had sex with this partner?

→ If no, go to question Ea24.

Ea23a. Which drugs? Mark all that apply.

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Ea24. Did your partner use drugs either immediately before or during the next to last time you had sex with him?

yes

no

don't know

→ Go to question F1, page 27.

Interviewer: Go to question F1, page 27.



HIVNET 015 (EXPLORE 040)

Baseline Risk Assessment (069)

Screening Visit (0111)

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Baseline Risk Assessment

INSTRUCTION 6: Record "next most recent partner" name/initials from question D16.

The following questions will be about _____.

Eb1. Is this person a... Mark only one.

- primary partner? This would be someone that you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.
steady, non-primary partner? This would be a partner with whom you had sex three or more times in the past, but don't consider your primary partner.
non-steady partner? This would be a partner with whom you had sex less than three times in the past.

Eb2. How desirable did you find this partner?

attractive enough [] very desirable [] extremely desirable []

Eb3. How old is this partner? [] [] years

Eb4. How long have you been having sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. Show Card #8.

- less than a week
more than a week but less than a month
one to six months
seven to 12 months
more than a year

Eb5. How many times have you had sex with him in the last six months? That is, anal or oral sex, with or without a condom, and with or without ejaculation.....

[] [] []



HIVNET 015 (EXPLORE 040)

Baseline Risk Assessment (070)

Screening Visit (0111)

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Participant ID

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Baseline Risk Assessment

yes no don't know

Eb6. Has _____ (next most recent partner) ever had an HIV test?

If no, or don't know go to Introduction, page 21.

Eb6a. What was his most recent HIV test result?

- HIV-positive → If positive, go to question Eb6b.
- HIV-negative → If negative, go to question Eb6c.
- not sure → If not sure, go to Introduction, page 21.

Eb6b. Is _____ (next most recent partner) taking any anti-HIV medications?

yes no don't know

— —

If yes, no or don't know, go to Introduction on page 21.

Eb6c. How confident are you that _____ (next most recent partner) is HIV-negative?

Show Card #9.

very confident	somewhat confident	slightly confident	not at all confident
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



HIVNET 015 (EXPLORE 040)

Baseline Risk Assessment (071)

Screening Visit (0111)

Page 21 of 27

Participant ID

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Site Number

Participant Number

Chk

Baseline Risk Assessment

INTRODUCTION

The next group of questions asks about the most recent time you had sex with this partner.

Eb7. When did you last have sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation mm yy

Eb8. Using the choices on this card, during the most recent time you had sex with this partner, where did you have sex? Show Card #10.

- your house or apartment or his house or apartment
hotel
sex club or bath
bar, night club, or dance club
health club or gym
porn theater/video arcade
public bathroom
other public place, such as beach, park, woods, street, car, or van
other

Eb9. During the most recent time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom? yes no

Eb10. During the most recent time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated. If no, go to question Eb11.

Eb10a. Did your partner use a male condom or did you use an anal condom (Reality® condom)? If no, go to question Eb11.

Eb10a1. Did the condom slip off, tear, break, or otherwise fail?

Eb11. During the most recent time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated. If no, go to question Eb12.

Eb11a. Did you use a male condom or did your partner use an anal condom (Reality® condom)? If no, go to question Eb12.

Eb11a1. Did the condom slip off, tear, break, or otherwise fail?

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Baseline Risk Assessment (072)

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Site Number

Participant Number

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Baseline Risk Assessment

Eb12. Were you drinking alcohol within two hours before or during the most recent time you had sex with this partner?.....

yes no

→ If no, go to question Eb13.

Eb12a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.

number of drinks

Eb13. Was your partner drinking within two hours before or during the most recent time you had sex?

yes no don't know

Eb14. Did you use drugs either immediately before or during the most recent time you had sex with this partner?

yes no

→ If no, go to question Eb15.

Eb14a. Which drugs? Mark all that apply.

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Eb15. Did your partner use drugs either immediately before or during the most recent time you had sex with him?.....

yes no don't know



HIVNET 015 (EXPLORE 040)

Baseline Risk Assessment (073)

Screening Visit (0111)

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Participant ID

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Participant Number

Chk

Baseline Risk Assessment

INSTRUCTION 7: If participant had only two male partners reported in question D15, go to question F1, page 27. Otherwise, record "third most recent partner" name/initials from question D17.

The following questions will be about _____.

Ec1. Is this person a... Mark only one.

- primary partner? This would be someone that you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.
steady, non-primary partner? This would be a partner with whom you had sex three or more times in the past, but don't consider your primary partner.
non-steady partner? This would be a partner with whom you had sex less than three times in the past.

Ec2. How desirable did you find this partner?

attractive enough very desirable extremely desirable

Ec3. How old is this partner? years

Ec4. How long have you been having sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. Show Card #8.

- less than a week
more than a week but less than a month
one to six months
seven to 12 months
more than a year

Ec5. How many times have you had sex with him in the last six months? That is, anal or oral sex, with or without a condom, and with or without ejaculation.....



HIVNET 015 (EXPLORE 040)

Baseline Risk Assessment (074)

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Participant ID

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Site Number Participant Number Chk

Baseline Risk Assessment

Ec6. Has _____ (third most recent partner) ever had an HIV test? yes no don't know

Ec6a. What was his most recent HIV test result?

HIV-positive **→ If positive, go to question Ec6b.**

HIV-negative **→ If negative, go to question Ec6c.**

not sure **→ If not sure, go to Introduction, page 25.**

→ If no or don't know, go to Introduction, page 25.

Ec6b. Is _____ (third most recent partner) taking any anti-HIV medications?

yes no don't know

— —

→ If yes, no or don't know, go to Introduction on page 25.

Ec6c. How confident are you that _____ (third most recent partner) is HIV-negative?

Show Card #9.

<i>very confident</i>	<i>somewhat confident</i>	<i>slightly confident</i>	<i>not at all confident</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



HIVNET 015 (EXPLORE 040)

Baseline Risk Assessment (075)

Screening Visit (0111)

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Participant ID

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Site Number

Participant Number

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Baseline Risk Assessment

INTRODUCTION

The next group of questions asks about the most recent time you had sex with this partner.

Ec7. When did you last have sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation.....

mm yy

Ec8. Using the choices on this card, during the most recent time you had sex with this partner, where did you have sex?

Show Card #10.

- your house or apartment or his house or apartment
hotel
sex club or bath
bar, night club, or dance club
health club or gym
porn theater/video arcade
public bathroom
other public place, such as beach, park, woods, street, car, or van
other

Ec9. During the most recent time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom?

yes no

Ec10. During the most recent time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated.

If no, go to question Ec11.

Ec10a. Did your partner use a male condom or did you use an anal condom (Reality® condom)?.....

If no, go to question Ec11.

Ec10a1. Did the condom slip off, tear, break, or otherwise fail?

Ec11. During the most recent time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated.

If no, go to question Ec12.

Ec11a. Did you use a male condom or did your partner use an anal condom (Reality® condom)?.....

If no, go to question Ec12.

Ec11a1. Did the condom slip off, tear, break, or otherwise fail?



HIVNET 015 (EXPLORE 040)

Baseline Risk Assessment (076)

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Participant ID

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Site Number

Participant Number

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Baseline Risk Assessment

Ec12. Were you drinking alcohol within two hours before or during the most recent time you had sex with this partner?.....

yes

no

➔ If no, go to question Ec13.

Ec12a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.....

number of drinks

Ec13. Was your partner drinking within two hours before or during the most recent time you had sex?

yes

no

don't know

Ec14. Did you use drugs either immediately before or during the most recent time you had sex with this partner?.....

yes

no

➔ If no, go to question Ec15.

Ec14a. Which drugs? Mark all that apply.

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Ec15. Did your partner use drugs either immediately before or during the most recent time you had sex with him?

yes

no

don't know



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Baseline Risk Assessment (077)

Screening Visit (0111)

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Participant ID

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Site Number

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Baseline Risk Assessment

SEXUAL BEHAVIOR WITH WOMEN

The following questions ask about any female partners with whom you have had sex in the last six months.

F1. How many female sex partners have you had in the last six months? Include only women with whom you had vaginal, anal, or oral sex, with or without a condom, and with or without ejaculation.

[] [] []

→ If 0, go to Conclusion.

F2. How many of your female sex partners were HIV-positive?

[] [] []

F3. How many of your female sex partners told you they were HIV-negative and you had no reason to doubt it?

[] [] []

F4. How many of your female sex partners never told you their HIV status, or told you they were negative and you have reason to doubt it?

[] [] []

Interviewer: Adjust numbers of partners in F1 if appropriate.

F5. Were you in a primary relationship with a female sex partner in the last six months? This would be someone you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.

yes no [] []

→ If no, go to Conclusion.

F5a. What is your primary partner's HIV status?

positive negative not sure [] [] []

F5b. Has a primary relationship ended in the last six months?

yes no [] []

CONCLUSION

This concludes the questionnaire. We will ask similar questions six months from now during one of your regularly scheduled study visits. This important information will help us learn about what happens to participants during this study. Again, thank you for your help and cooperation.

**SAMPLE: DO NOT
FAX TO DATAFAX**



Visit Code

1

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HIVNET 015 (EXPLORE 040)

Months 6 and 12 Follow-up Risk Assessment (081)

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Participant ID

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Site Number Participant Number Chk

**Months 6 and 12
Follow-up Risk Assessment**

Visit Date

mm dd yy

SOCIAL ACTIVITY QUESTIONS

These questions ask about social activities you may have participated in since your last interview, that is since _____.

A1. Which of the following types of activities or groups have you participated in since your last interview?

	yes	no
Meetings of organizations (political, social, etc.) for gays and/or lesbians	<input type="checkbox"/>	<input type="checkbox"/>
Community events (e.g., parade, fair, fund-raiser, etc.) for gays and/or lesbians	<input type="checkbox"/>	<input type="checkbox"/>
Volunteer work for an organization for gays and/or lesbians	<input type="checkbox"/>	<input type="checkbox"/>
Called a help line for men who have sex with men	<input type="checkbox"/>	<input type="checkbox"/>

ATTITUDE QUESTIONS

Using the scale on this card, please indicate how much you agree or disagree with each of the following statements.

Show Card #2.

strongly somewhat slightly slightly somewhat strongly
disagree disagree disagree agree agree agree

A2. Most gay men I meet only engage in safer sex practices. .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A3. I have trouble letting a sex partner know that I want to have safer sex.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A4. I am able to avoid behavior that may put me at risk of HIV infection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A5. My friends think it is important to use condoms.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A6. I can choose safer sex with a man I have sex with regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A7. I find it difficult to have safer sex with a man I have very strong sexual feelings for.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A8. I find it difficult to have safer sex when high or drunk.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

June 21, 2000

0 1
Language

Staff ID

SAMPLE: DO NOT FAX TO DATAFAX



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HIVNET 015 (EXPLORE 040)

Months 6 and 12 Follow-up Risk Assessment (082)

Participant ID

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Months 6 and 12 Follow-up Risk Assessment

Table with 7 columns: Item, strongly disagree, somewhat disagree, slightly disagree, slightly agree, somewhat agree, strongly agree. Rows A9-A23.

[][][][] June 21, 2000

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**SAMPLE: DO NOT
FAX TO DATAFAX**



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HIVNET 015 (EXPLORE 040)

Months 6 and 12 Follow-up Risk Assessment (083)

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**Months 6 and 12
Follow-up Risk Assessment**

Using the scale on this card, please indicate how much you **enjoy** or **think you might enjoy** doing the following activities with a man. Please answer for each sexual activity whether you have done it or not.

Show Card #3.

	<i>dislike very much</i>	<i>dislike somewhat</i>	<i>enjoy somewhat</i>	<i>enjoy very much</i>
A24. You have insertive anal sex with your partner and you don't use a condom.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A25. You have receptive anal sex with your partner and he does not use a condom.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A26. You have oral sex with your partner and he comes in your mouth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Next is a list of ways you may have felt or behaved last week. How often have you felt this way during the past week? Please use the scale on this card. **Show Card #4.**

A27. How often during the past week did you...

	<i>never or rarely</i>	<i>sometimes (1-2 days)</i>	<i>often (3-4 days)</i>	<i>mostly or always (5-7 days)</i>
feel like you couldn't shake off the blues even with help from your family or friends?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
have trouble keeping your mind on what you were doing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel that everything you did was an effort?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
have trouble sleeping?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel lonely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel sad?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel like you just couldn't "get going"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Language

Staff ID

**SAMPLE: DO NOT
FAX TO DATAFAX**



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HIVNET 015 (EXPLORE 040)

Months 6 and 12 Follow-up Risk Assessment (084)

Participant ID

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 Site Number Participant Number Chk

**Months 6 and 12
Follow-up Risk Assessment**

PEP QUESTIONS

The following set of questions refer to anti-HIV medications people might try to use to prevent HIV infection after a high-risk exposure. Anti-HIV medications include drugs such as AZT, 3TC, ddi, d4T, nevirapine, and protease inhibitors. Using anti-HIV drugs this way is sometimes referred to as post-exposure prevention, PEP, or morning after pills.

- B1. Since your last interview, have you used anti-HIV medications to prevent HIV infection either before or after a high-risk sexual or drug use exposure? yes no
- B2. If you had unprotected receptive anal sex with an HIV-positive partner, how likely would you be to try anti-HIV medications to prevent HIV infection? very likely somewhat likely not at all likely
- B3. If you had a high-risk exposure and wanted to get anti-HIV medications to try to prevent HIV infection and cost was not an issue, do you think you would be able to easily obtain the drugs? yes no

Using the scale on this card, please indicate how much you agree or disagree with the following statement.

Show Card #2.

- B4. Easy access to PEP will increase unsafe sex among people I know. strongly disagree somewhat disagree slightly disagree slightly agree somewhat agree strongly agree

SAMPLE: DO NOT FAX TO DATAFAX



Visit Code [][][][]

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HIVNET 015 (EXPLORE 040)

Months 6 and 12 Follow-up Risk Assessment (085)

Participant ID

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Months 6 and 12 Follow-up Risk Assessment

SUBSTANCE USE AND SEX QUESTIONS

The next set of questions is about alcohol and drug use. Please remember that this information will not be disclosed to any agency, program, or individual. All data are strictly confidential and participants are protected by our Certificate of Confidentiality.

- C1. Since your last interview, about how often did you get high or have a few drinks immediately before or during sex? ... never occasionally often all the time
C2. Since your last interview, about how often would you say that alcohol or drug use made it more difficult for you to have safer sex? ... never occasionally often all the time

ALCOHOL USE QUESTIONS

- C3. Using this card, tell me, on average how often have you had a drink containing alcohol since your last interview? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor. Show Card #6.

Total # days in six months: 0, 1-25, 26-52, 53-156, >156. never, less than once a week, 1-2 days a week, 3-6 days a week, every day. If never, go to question C4.

- C3a. How many drinks containing alcohol did you have on a typical day when you were drinking since your last interview? ... number of drinks
C3b. On how many days since your last interview did you have five drinks or more? ... number of days
C3c. Think now about the last 30 days only. On how many of those days did you have an alcoholic drink? ... number of days

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- C4. Since your last interview, have you received alcohol treatment? This does not include self-help programs such as Alcoholics Anonymous. **yes** **no** *→ If no, go to question C6.*
- C5. Are you in alcohol treatment now? **yes** **no**
- C6. Since your last interview, have you attended a self-help program for alcohol problems, such as Alcoholics Anonymous? **yes** **no**

DRUG USE QUESTIONS

Next are questions about drug use. Again, please remember that this information will not be disclosed to any agency, program, or individual. All data are strictly confidential and participants are protected by our Certificate of Confidentiality.

C7. Using the choices on this card, since your last interview, how often have you... Show Card #6.

<i>Total times in six months</i>	0	1-25	26-52	53-156	>156
----------------------------------	---	------	-------	--------	------

	never	less than once a week	1-2 days a week	3-6 days a week	every day
<i>used marijuana or hashish?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>used poppers or inhaled nitrites, including ampules?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>smoked crack or rock cocaine?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>snorted or sniffed cocaine?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>swallowed, snorted, or smoked amphetamines such as speed, crystal, or crank?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>snorted or smoked heroin?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>used hallucinogens such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>used any other non-injectable drugs to get high?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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C8. Since your last interview, have you used a needle to inject any drugs, including steroids, under your skin or into a vein?

yes no

→ **If no, go to question D1.**

C9. Using the choices on this card, please tell me how often you have injected drugs since your last interview.

Show Card #7.

<i>Total times in six months</i>	1-11	12-51	52-182	>182
	<i>less than twice per month</i>	<i>2-8 x per month</i>	<i>2-7 x per week</i>	<i>more than once per day</i>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C10. Since your last interview, with how many different people did you share needles or works?

none 1 other person more than one person

↓
If none, go to question D1.

C10a. Since your last interview, did you ever share a needle with someone you knew to be HIV-positive?

yes no

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SEXUAL BEHAVIOR WITH MEN

The following questions ask about your sexual behavior with male partners who are HIV-positive and HIV-negative, as well as partners whose HIV status is unknown to you. Again, these questions refer to the time period since your last interview.

D1. How many male sex partners have you had since your last interview? Include only men with whom you had anal or oral sex, with or without a condom, and with or without ejaculation.

→ If 0, go to question F1, page 27.

D2. How many of your male sex partners were HIV positive?

D3. How many of your male sex partners told you they were HIV-negative and you had **no reason** to doubt it?

D4. How many of your male sex partners never told you their HIV status, or told you they were negative and you **have reason** to doubt it?

Interviewer: Adjust numbers of partners in D1 if appropriate.

D5. Were you in a primary relationship with a male sex partner since your last interview? This would be someone you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.....

yes no

→ If no, go to Introduction below.

D5a. What is your primary partner's HIV status?

positive negative not sure

D5b. Has a primary relationship ended since your last interview?

yes no

INTRODUCTION

Some of the next questions refer to sexual behaviors where you or your partner may have used a condom. Sex with a condom means that a condom was put on before penetration and used throughout. It includes times when a condom was used but then broke or slipped off. However, if penetration started without a condom, then a condom was put on and you continued, count this as sex without a condom.

INSTRUCTION 1: If subject reported no HIV-positive sex partners in question D2, go to Instruction 2 on page 9.

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HIV-POSITIVE PARTNERS

The next group of questions asks about the sexual contacts you had since your last interview with your HIV-positive male partner(s).

D6. How many times did this/ these partner(s) ejaculate or come in your mouth without a condom?

D7. How many times did you have anal sex with this/these partner(s) when his/ their penis was in your rectum? This would be with or without a condom and whether or not he/they ejaculated.

If 0, go to question D8.

D7a. How many of these times did your partner(s) use a male condom or did you use an anal condom (Reality® condom)?

If 0, go to question D8.

D7a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

D8. How many times did you have anal sex with your HIV-positive partner(s) when your penis was in his/their rectum? This would be with or without a condom and whether or not you ejaculated.

If 0, go to Instruction 2.

D8a. How many of these times did you use a male condom or did your partner(s) use an anal condom (Reality® condom)?

If 0, go to Instruction 2.

D8a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

INSTRUCTION 2: If participant reported no HIV-negative male sex partners in question D3, go to Instruction 3 on page 10.

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HIV-NEGATIVE PARTNERS

The next group of questions asks about the sexual contact you had since your last interview with your HIV-negative male partner(s).

D9. How many times did this/these partner(s) ejaculate or come in your mouth without a condom?

D10. How many times did you have anal sex with this/these partner(s) when his/their penis was in your rectum? This would be with or without a condom and whether or not he/they ejaculated.

→ If 0, go to question D11.

D10a. How many of these times did your partner(s) use a male condom or did you use an anal condom (Reality® condom)?

→ If 0, go to question D11.

D10a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

D11. How many times did you have anal sex with your HIV-negative partner(s) when your penis was in his/their rectum? This would be with or without a condom and whether or not you ejaculated.

→ If 0, go to Instruction 3.

D11a. How many of these times did you use a male condom or did your partner(s) use an anal condom (Reality® condom)?

→ If 0, go to Instruction 3.

D11a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

INSTRUCTION 3: If participant reported no partners of unknown status in question D4, go to page 12.

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HIV-STATUS UNKNOWN PARTNERS

The next group of questions asks about the sexual contact you had since your last interview with your male partner(s) whose HIV status you are not sure of.

D12. How many times did this/these partner(s) ejaculate or come in your mouth without a condom?

D13. How many times did you have anal sex with this/these partner(s) when his/their penis was in your rectum? This would be with or without a condom and whether or not he/they ejaculated.

➔ If 0, go to question D14.

D13a. How many of these times did your partner(s) use a male condom or did you use an anal condom (Reality® condom)?

➔ If 0, go to question D14.

D13a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

D14. How many times did you have anal sex with this/these partner(s) whose HIV status you are not sure of, when your penis was in his/their rectum? This would be with or without a condom and whether or not you ejaculated.

➔ If 0, go to question D15.

D14a. How many of these times did you use a male condom or did your partner(s) use an anal condom (Reality® condom)?

➔ If 0, go to question D15.

D14a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

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PARTNER BY PARTNER QUESTIONS

Interviewer: Record the number of partners reported in question D1.

You will now be asked more detailed questions about your most recent male sex partner(s) since your last interview, up to a maximum of three partners.

D15. Think about your most recent male sex partner. Could you give me initials, a first name, or nickname that I can use to refer to him? This does not need to be his real name or initials.

➔ **If only 1 partner since your last interview, go to Instruction 4, page 13.**

D16. Think about your next most recent male sex partner. Could you give me initials, a first name, or nickname that I can use to refer to him? This does not need to be his real name or initials.

➔ **If only 2 partners since your last interview, go to Instruction 4, page 13.**

D17. Think about your next most recent male sex partner. Could you give me initials, a first name, or nickname that I can use to refer to him? This does not need to be his real name or initials.

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INSTRUCTION 4: Record "most recent partner's" initials/name from question D15.

The following questions will be about _____.

Ea1. Is this person a... *Mark only one.*

- primary partner? This would be someone that you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.*
- steady, non-primary partner? This would be a partner with whom you had sex three or more times in the past, but don't consider your primary partner.*
- non-steady partner? This would be a partner with whom you had sex less than three times in the past.*

Ea2. How desirable did you find this partner?

<i>attractive enough</i>	<i>very desirable</i>	<i>extremely desirable</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ea3. How old is this partner?

<i>≤ 18 years</i>	<i>19-24 years</i>	<i>25-29 years</i>	<i>30-34 years</i>	<i>35-39 years</i>	<i>40-44 years</i>	<i>45-49 years</i>	<i>≥ 50 years</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ea4. How long have you been having sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. **Show Card #8.**

- less than a week*
- more than a week but less than a month*
- one to six months*
- seven to 12 months*
- more than a year*

Ea5. How many times have you had sex with this partner since your last interview? That is, anal or oral sex, with or without a condom, and with or without ejaculation.

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yes no don't know

Ea6. Has _____ (most recent partner) ever had an HIV test?

If no or don't know, go to Introduction, page 15.

Ea6a. What was his most recent HIV test result?

HIV-positive

→ **If positive, go to question Ea6b.**

HIV-negative

→ **If negative, go to question Ea6c.**

not sure

→ **If not sure, go to Introduction, page 15.**

Ea6b. Is _____ (most recent partner) taking any anti-HIV medications?

yes no don't know

If yes, no, or don't know, go to Introduction, page 15.

Ea6c. How confident are you that _____ (most recent partner) is HIV-negative?

Show Card #9.

very confident

somewhat confident

slightly confident

not at all confident

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INTRODUCTION

The next group of questions asks about the most recent time you had sex with this partner. The following questions will be about _____.

Ea7. When did you last have sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. mm yy [][] [][]

Ea8. Using the choices on this card, during the most recent time you had sex with this partner, where did you have sex?

Show Card #10.

- your house or apartment or his house or apartment
hotel
sex club or bath
bar, night club, or dance club
health club or gym
porn theater/video arcade
public bathroom
other public place, such as beach, park, woods, street, car, or van
other

Ea9. During the most recent time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom? yes no [][] [][]

Ea10. During the most recent time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated. If no, go to question Ea11. [][] [][]

Ea10a. Did your partner use a male condom or did you use an anal condom (Reality® condom)? If no, go to question Ea11. [][] [][]

Ea10a1. Did the condom slip off, tear, break, or otherwise fail? [][] [][]

Ea11. During the most recent time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated. If no, go to question Ea12. [][] [][]

Ea11a. Did you use a male condom or did your partner use an anal condom (Reality® condom)? If no, go to question Ea12. [][] [][]

Ea11a1. Did the condom slip off, tear, break, or otherwise fail? [][] [][]

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Ea12. Were you drinking alcohol within two hours before or during the most recent time you had sex with this partner?

yes

no

→ If no, go to question Ea13.

Ea12a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.

[][]

number of drinks

Ea13. Was your partner drinking within two hours before or during the most recent time you had sex?

yes

no

don't know

Ea14. Did you use drugs either immediately before or during the most recent time you had sex with this partner?

→ If no, go to question Ea15.

Ea14a. Which drugs? Mark all that apply.

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Ea15. Did your partner use drugs either immediately before or during the most recent time you had sex with him?

yes

no

don't know

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INSTRUCTION 5: Review the participant's response to question D1, page 8.

- If the participant reported having only one male partner **and** reported having more than one episode of sex with the partner in question Ea5, continue with questions Ea16 -Ea24.
- If the participant reported having more than one male partner, go to Instruction 6, page 19.
- If the participant reported having only one male partner **and** reported having only one episode of sex with the partner in question Ea5, go to question F1, page 27.

The next group of questions are similar, but refer to the **next to last time** you had sex with your partner, _____ (use name as reported on question D15, page 12).

mm yy

Ea16. When was the next to last time that you had sex with your partner? That is anal or oral sex, with or without a condom, and with or without ejaculation.

Ea17. Using the choices on this card, during the next to last time you had sex with this partner, where did you have sex? **Show Card #10.**

- | | |
|--|--|
| <input type="checkbox"/> your house or apartment or his house or apartment | <input type="checkbox"/> porn theater/video arcade |
| <input type="checkbox"/> hotel | <input type="checkbox"/> public bathroom |
| <input type="checkbox"/> sex club or bath | <input type="checkbox"/> other public place, such as beach, park, woods, street, car, or van |
| <input type="checkbox"/> bar, night club, or dance club | <input type="checkbox"/> other |
| <input type="checkbox"/> health club or gym | |

Ea18. During the next to last time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom? yes no

Ea19. During the next to last time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated. → **If no, go to question Ea20.**

Ea19a. Did your partner use a male condom or did you use an anal condom (Reality® condom)? → **If no, go to question Ea20.**

Ea19a1. Did the condom slip off, tear, break or otherwise fail?

Ea20. During the next to last time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated. yes no → **If no, go to question Ea21.**

Ea20a. Did you use a male condom or did your partner use an anal condom (Reality® condom)? → **If no, go to question Ea21.**

Ea20a1. Did the condom slip off, tear, break, or otherwise fail?

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Ea21. Were you drinking alcohol within two hours before or during the next to last time you had sex with this partner?.....

yes

no

If no, go to question Ea22.

Ea21a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.

[][]

number of drinks

Ea22. Was your partner drinking within two hours before or during the next to last time you had sex?

yes

no

don't know

Ea23. Did you use drugs either immediately before or during the next to last time you had sex with this partner?

If no, go to question Ea24.

Ea23a. Which drugs? Mark all that apply.

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Ea24. Did your partner use drugs either immediately before or during the next to last time you had sex with him?

yes

no

don't know

Go to question F1, page 27.

Interviewer: Go to question F1, page 27.

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INSTRUCTION 6: Record "second most recent partner" name/initials from question D16.

The following questions will be about _____.

Eb1. Is this person a... Mark only one.

- primary partner? This would be someone that you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.
- steady, non-primary partner? This would be a partner with whom you had sex three or more times in the past, but don't consider your primary partner.
- non-steady partner? This would be a partner with whom you had sex less than three times in the past.

Eb2. How desirable did you find this partner?

<i>attractive enough</i>	<i>very desirable</i>	<i>extremely desirable</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Eb3. How old is this partner?

<i>≤ 18 years</i>	<i>19-24 years</i>	<i>25-29 years</i>	<i>30-34 years</i>	<i>35-39 years</i>	<i>40-44 years</i>	<i>45-49 years</i>	<i>≥ 50 years</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Eb4. How long have you been having sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. Show Card #8.

- less than a week
- more than a week but less than a month
- one to six months
- seven to 12 months
- more than a year

Eb5. How many times have you had sex with him since your last interview? That is, anal or oral sex, with or without a condom, and with or without ejaculation.

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yes no don't know

Eb6. Has _____ (second most recent partner) ever had an HIV test?

If no or don't know, go to Introduction, page 21.

Eb6a. What was his most recent HIV test result?

HIV-positive → **If positive, go to question Eb6b.**

HIV-negative → **If negative, go to question Eb6c.**

not sure → **If not sure, go to Introduction, page 21.**

Eb6b. Is _____ (second most recent partner) taking any anti-HIV medications?

yes no don't know

If yes, no, or don't know, go to Introduction, page 21.

Eb6c. How confident are you that _____ (second most recent partner) is HIV-negative?

Show Card #9.

very confident

somewhat confident

slightly confident

not at all confident

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INTRODUCTION

The next group of questions asks about the most recent time you had sex with this partner. The following questions will be about _____.

Eb7. When did you last have sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. mm yy [][] [][]

Eb8. Using the choices on this card, during the most recent time you had sex with this partner, where did you have sex? Show Card #10.

- your house or apartment or his house or apartment
hotel
sex club or bath
bar, night club, or dance club
health club or gym
porn theater/video arcade
public bathroom
other public place, such as beach, park, woods, street, car, or van
other

Eb9. During the most recent time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom? yes no [] []

Eb10. During the most recent time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated. [] [] -> If no, go to question Eb11.

Eb10a. Did your partner use a male condom or did you use an anal condom (Reality® condom)? [] [] -> If no, go to question Eb11.

Eb10a1. Did the condom slip off, tear, break, or otherwise fail? [] []

Eb11. During the most recent time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated. [] [] -> If no, go to question Eb12.

Eb11a. Did you use a male condom or did your partner use an anal condom (Reality® condom)? [] [] -> If no, go to question Eb12.

Eb11a1. Did the condom slip off, tear, break, or otherwise fail? [] []

SAMPLE: DO NOT FAX TO DATAFAX



Visit Code [][] . []

1

1

HIVNET 015 (EXPLORE 040)

Months 6 and 12 Follow-up Risk Assessment (102)

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Participant ID

[][] - [][][][] - []
Site Number Participant Number Chk

Months 6 and 12 Follow-up Risk Assessment

Eb12. Were you drinking alcohol within two hours before or during the most recent time you had sex with this partner?.....

yes

no

If no, go to question Eb13.

Eb12a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.

[][]

number of drinks

Eb13. Was your partner drinking within two hours before or during the most recent time you had sex?

yes

no

don't know

Eb14. Did you use drugs either immediately before or during the most recent time you had sex with this partner?

yes

no

If no, go to question Eb15.

Eb14a. Which drugs? Mark all that apply.

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Eb15. Did your partner use drugs either immediately before or during the most recent time you had sex with him?

yes

no

don't know

SAMPLE: DO NOT FAX TO DATAFAX



Visit Code [][][][]

1

1

HIVNET 015 (EXPLORE 040)

Months 6 and 12 Follow-up Risk Assessment (103)

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Participant ID

[][][] - [][][][][] - []
Site Number Participant Number Chk

Months 6 and 12 Follow-up Risk Assessment

INSTRUCTION 7: If participant had only two male partners reported in question D15, go to question F1, page 27. Otherwise, record "third most recent partner" name/initials from question D17.

The following questions will be about _____.

Ec1. Is this person a... Mark only one.

- [] primary partner? This would be someone that you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.
[] steady, non-primary partner? This would be a partner with whom you had sex three or more times in the past, but don't consider your primary partner.
[] non-steady partner? This would be a partner with whom you had sex less than three times in the past.

Ec2. How desirable did you find this partner?

attractive enough very desirable extremely desirable
[] [] []

Ec3. How old is this partner?

≤ 18 years 19-24 years 25-29 years 30-34 years 35-39 years 40-44 years 45-49 years ≥ 50 years
[] [] [] [] [] [] [] []

Ec4. How long have you been having sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. Show Card #8.

- [] less than a week
[] more than a week but less than a month
[] one to six months
[] seven to 12 months
[] more than a year

Ec5. How many times have you had sex with him since your last interview? That is, anal or oral sex, with or without a condom, and with or without ejaculation.

[][][]

[][][] June 21, 2000

01 Language

Staff ID [][]

SAMPLE: DO NOT FAX TO DATAFAX



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HIVNET 015 (EXPLORE 040)

Months 6 and 12 Follow-up Risk Assessment (104)

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Participant ID

- -
Site Number Participant Number Chk

Months 6 and 12 Follow-up Risk Assessment

Ec6. Has _____ (third most recent partner) ever had an HIV test? yes no don't know

If no or don't know, go to Introduction, page 25.

Ec6a. What was his most recent HIV test result?

- HIV-positive → **If positive, go to question Ec6b.**
- HIV-negative → **If negative, go to question Ec6c.**
- not sure → **If not sure, go to Introduction, page 25.**

Ec6b. Is _____ (third most recent partner) taking any anti-HIV medications? yes no don't know

If yes, no, or don't know, go to Introduction, page 25.

Ec6c. How confident are you that _____ (third most recent partner) is HIV-negative?

Show Card #9.

- | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| very
confident | somewhat
confident | slightly
confident | not at all
confident |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**SAMPLE: DO NOT
FAX TO DATAFAX**



Visit Code

HIVNET 015 (EXPLORE 040)

Months 6 and 12 Follow-up Risk Assessment (105)

Page 25 of 27

Participant ID

- -
Site Number Participant Number Chk

**Months 6 and 12
Follow-up Risk Assessment**

INTRODUCTION

The next group of questions asks about the most recent time you had sex with this partner.

The following questions will be about _____.

Ec7. When did you last have sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation.....
mm yy

Ec8. Using the choices on this card, during the most recent time you had sex with this partner, where did you have sex?

Show Card #10.

- | | |
|--|--|
| <input type="checkbox"/> your house or apartment or his house or apartment | <input type="checkbox"/> porn theater/video arcade |
| <input type="checkbox"/> hotel | <input type="checkbox"/> public bathroom |
| <input type="checkbox"/> sex club or bath | <input type="checkbox"/> other public place, such as beach, park, woods, street, car, or van |
| <input type="checkbox"/> bar, night club, or dance club | <input type="checkbox"/> other |
| <input type="checkbox"/> health club or gym | |

Ec9. During the most recent time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom?
yes no

Ec10. During the most recent time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated.
 → **If no, go to question Ec11.**

Ec10a. Did your partner use a male condom or did you use an anal condom (Reality® condom)?.....
 → **If no, go to question Ec11.**

Ec10a1. Did the condom slip off, tear, break, or otherwise fail?

Ec11. During the most recent time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated.
 → **If no, go to question Ec12.**

Ec11a. Did you use a male condom or did your partner use an anal condom (Reality® condom)?.....
 → **If no, go to question Ec12.**

Ec11a1. Did the condom slip off, tear, break, or otherwise fail?

June 21, 2000

Language

Staff ID

SAMPLE: DO NOT FAX TO DATAFAX



Visit Code [][] . []

[1]

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HIVNET 015 (EXPLORE 040)

Months 6 and 12 Follow-up Risk Assessment (106)

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Participant ID

[][][] - [][][][][] - []
Site Number Participant Number Chk

Months 6 and 12 Follow-up Risk Assessment

Ec12. Were you drinking alcohol within two hours before or during the most recent time you had sex with this partner?

yes

no

→ If no, go to question Ec13.

Ec12a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.....

[][]

number of drinks

Ec13. Was your partner drinking within two hours before or during the most recent time you had sex?

yes

no

don't know

Ec14. Did you use drugs either immediately before or during the most recent time you had sex with this partner?

yes

no

→ If no, go to question Ec15.

Ec14a. Which drugs? Mark all that apply.

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Ec15. Did your partner use drugs either immediately before or during the most recent time you had sex with him?

yes

no

don't know

SAMPLE: DO NOT FAX TO DATAFAX



Visit Code [][] . []

[1]

[1]

HIVNET 015 (EXPLORE 040)

Months 6 and 12 Follow-up Risk Assessment (107)

Participant ID

[][] - [][][][] - []
Site Number Participant Number Chk

Months 6 and 12 Follow-up Risk Assessment

SEXUAL BEHAVIOR WITH WOMEN

The following questions ask about any female partners with whom you have had sex since your last interview.

F1. How many female sex partners have you had since your last interview? Include only women with whom you had vaginal, anal, or oral sex, with or without a condom, and with or without ejaculation.

[][]

If 0, go to Conclusion.

F2. How many of your female sex partners were HIV-positive?

[][]

F3. How many of your female sex partners told you they were HIV-negative and you had no reason to doubt it?

[][]

F4. How many of your female sex partners never told you their HIV status, or told you they were negative and you have reason to doubt it?

[][]

Interviewer: Adjust numbers of partners in F1 if appropriate.

F5. Were you in a primary relationship with a female sex partner since your last interview? This would be someone you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.

yes

no

[]

[]

If no, go to Conclusion.

positive

negative

not sure

F5a. What is your primary partner's HIV status?

[]

[]

[]

yes

no

F5b. Has a primary relationship ended since your last interview?.....

[]

[]

CONCLUSION

This concludes the questionnaire. We will ask similar questions six months from now during one of your regularly scheduled study visits. This important information will help us learn about what happens to participants during this study. Again, thank you for your help and cooperation.

**SAMPLE: DO NOT
FAX TO DATAFAX**



Visit Code

HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up
Risk Assessment (181)

Participant ID

- -
Site Number Participant Number Chk

**Months 18 through 48
Follow-up Risk Assessment**

Visit Date

mm dd yy

SOCIAL ACTIVITY QUESTIONS

These questions ask about social activities you may have participated in since your last interview, that is since _____.

A1. Which of the following types of activities or groups have you participated in since your last interview?

- | | yes | no |
|---|--------------------------|--------------------------|
| Meetings of organizations (political, social, etc.) for gays and/or lesbians | <input type="checkbox"/> | <input type="checkbox"/> |
| Community events (e.g., parade, fair, fund-raiser, etc.) for gays and/or lesbians | <input type="checkbox"/> | <input type="checkbox"/> |
| Volunteer work for an organization for gays and/or lesbians | <input type="checkbox"/> | <input type="checkbox"/> |
| Called a help line for men who have sex with men | <input type="checkbox"/> | <input type="checkbox"/> |

ATTITUDE QUESTIONS

Using the scale on this card, please indicate how much you agree or disagree with each of the following statements.

Show Card #2.

strongly disagree somewhat disagree slightly disagree slightly agree somewhat agree strongly agree

- | | | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| A2. Most gay men I meet only engage in safer sex practices. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A3. I have trouble letting a sex partner know that I want to have safer sex..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A4. I am able to avoid behavior that may put me at risk of HIV infection. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A5. My friends think it is important to use condoms..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A6. I can choose safer sex with a man I have sex with regularly. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A7. I find it difficult to have safer sex with a man I have very strong sexual feelings for. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8. I find it difficult to have safer sex when high or drunk. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

SAMPLE: DO NOT FAX TO DATAFAX



Visit Code [][] . []

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HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up Risk Assessment (182)

Participant ID

[][][] - [][][][][] - []
Site Number Participant Number Chk

Months 18 through 48 Follow-up Risk Assessment

Table with 7 columns: Item, I am less concerned about having anal sex without a condom now that new anti-HIV drug combination treatments are available, I never lose sight of what I consider safer sex, no matter what I am feeling, My friends use condoms, I feel confident that I will never slip from safer sex, Someone can talk me out of safer sex by persuading me they are HIV-negative, Most gay men are using condoms these days, If I ever did something risky, I am confident that I would go back to having safer sex right away, I find it difficult telling a sex partner not to do something I think is risky, I can avoid situations that I consider sexually risky, I am confident that I can have safer sex even if my partner really doesn't want to, I find it difficult telling a sex partner I won't have anal intercourse without a condom, I can choose safer sex with a man I have never had sex with before, By taking the new drug combinations, an HIV-positive man decreases the chances that he will infect his partner with HIV, I can use condoms with any sexual partner I might have, My friends encourage me to practice safer sex. Columns 2-7: strongly disagree, somewhat disagree, slightly disagree, slightly agree, somewhat agree, strongly agree.

[][][][] June 21, 2000

[0] [1]
Language

Staff ID [][][]

**SAMPLE: DO NOT
FAX TO DATAFAX**



Visit Code

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1

HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up
Risk Assessment (183)

Participant ID

- -

Site Number Participant Number Chk

**Months 18 through 48
Follow-up Risk Assessment**

Using the scale on this card, please indicate how much you **enjoy** or **think you might enjoy** doing the following activities with a man. Please answer for each sexual activity whether you have done it or not.

Show Card #3.

	<i>dislike very much</i>	<i>dislike somewhat</i>	<i>enjoy somewhat</i>	<i>enjoy very much</i>
A24. You have insertive anal sex with your partner and you don't use a condom.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A25. You have receptive anal sex with your partner and he does not use a condom.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A26. You have oral sex with your partner and he comes in your mouth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Next is a list of ways you may have felt or behaved last week. How often have you felt this way during the past week? Please use the scale on this card. **Show Card #4.**

A27. How often during the past week did you...

	<i>never or rarely</i>	<i>sometimes (1-2 days)</i>	<i>often (3-4 days)</i>	<i>mostly or always (5-7 days)</i>
feel like you couldn't shake off the blues even with help from your family or friends?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
have trouble keeping your mind on what you were doing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel that everything you did was an effort?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
have trouble sleeping?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel lonely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel sad?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel like you just couldn't "get going?"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SAMPLE: DO NOT
FAX TO DATAFAX**



Visit Code

HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up
Risk Assessment (184)

Participant ID

- -
Site Number Participant Number Chk

**Months 18 through 48
Follow-up Risk Assessment**

PEP QUESTIONS

The following set of questions refer to anti-HIV medications people might try to use to prevent HIV infection after a high-risk exposure. Anti-HIV medications include drugs such as AZT, 3TC, ddi, d4T, nevirapine, and protease inhibitors. Using anti-HIV drugs this way is sometimes referred to as post-exposure prevention, PEP, or morning after pills.

- B1. Since your last interview, have you used anti-HIV medications to prevent HIV infection either before or after a high-risk sexual or drug use exposure? yes no
- B2. If you had unprotected receptive anal sex with an HIV-positive partner, how likely would you be to try anti-HIV medications to prevent HIV infection? very likely somewhat likely not at all likely
- B3. If you had a high-risk exposure and wanted to get anti-HIV medications to try to prevent HIV infection and cost was not an issue, do you think you would be able to easily obtain the drugs? yes no

Using the scale on this card, please indicate how much you agree or disagree with the following statement.

Show Card #2.

- B4. Easy access to PEP will increase unsafe sex among people I know. strongly disagree somewhat disagree slightly disagree slightly agree somewhat agree strongly agree

**SAMPLE: DO NOT
FAX TO DATAFAX**



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HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up
Risk Assessment (185)

Participant ID

- -
Site Number Participant Number Chk

**Months 18 through 48
Follow-up Risk Assessment**

SUBSTANCE USE AND SEX QUESTIONS

The next set of questions is about alcohol and drug use. Please remember that this information will not be disclosed to any agency, program, or individual. All data are strictly confidential and participants are protected by our Certificate of Confidentiality.

- C1. Since your last interview, about how often did you get high or have a few drinks immediately before or during sex?
 never occasionally often all the time

 If never, go to question C3.
- C2. Since your last interview, about how often would you say that alcohol or drug use made it more difficult for you to have safer sex?
 never occasionally often all the time

ALCOHOL USE QUESTIONS

- C3. Using this card, tell me, on average how often have you had a drink containing alcohol since your last interview? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor. Show Card #6.

Total # days in six months	0	1-25	26-52	53-156	>156
	never	less than once a week	1-2 days a week	3-6 days a week	every day
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If never, go to question C4.

- C3a. How many drinks containing alcohol did you have on a typical day when you were drinking since your last interview? number of drinks
- C3b. On how many days since your last interview did you have five drinks or more? number of days
- C3c. Think now about the last 30 days only. On how many of those days did you have an alcoholic drink? number of days

**SAMPLE: DO NOT
FAX TO DATAFAX**



Visit Code

HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up
Risk Assessment (186)

Participant ID

- -
Site Number Participant Number Chk

**Months 18 through 48
Follow-up Risk Assessment**

- C4. Since your last interview, have you received alcohol treatment? This does not include self-help programs such as Alcoholics Anonymous. **yes** **no** *→ If no, go to question C6.*
- C5. Are you in alcohol treatment now? **yes** **no**
- C6. Since your last interview, have you attended a self-help program for alcohol problems, such as Alcoholics Anonymous? **yes** **no**

DRUG USE QUESTIONS

Next are questions about drug use. Again, please remember that this information will not be disclosed to any agency, program, or individual. All data are strictly confidential and participants are protected by our Certificate of Confidentiality.

- C7. Using the choices on this card, since your last interview, how often have you... Show Card #6.

<i>Total times in six months</i>	0	1-25	26-52	53-156	>156
----------------------------------	---	------	-------	--------	------

	never	less than once a week	1-2 days a week	3-6 days a week	every day
<i>used marijuana or hashish?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>used poppers or inhaled nitrites, including ampules?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>smoked crack or rock cocaine?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>snorted or sniffed cocaine?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>swallowed, snorted, or smoked amphetamines such as speed, crystal, or crank?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>snorted or smoked heroin?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>used hallucinogens such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>used any other non-injectable drugs to get high?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>used Viagra or another Viagra-like prescribed medication?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SAMPLE: DO NOT
FAX TO DATAFAX**



Visit Code

HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up
Risk Assessment (187)

Participant ID

- -
Site Number Participant Number Chk

**Months 18 through 48
Follow-up Risk Assessment**

C8. Since your last interview, have you used a needle to inject any drugs, including steroids, under your skin or into a vein? *yes* *no* **→ If no, go to question D1.**

C8a. Have you injected...

	<i>yes</i>	<i>no</i>
heroin by itself?.....	<input type="checkbox"/>	<input type="checkbox"/>
cocaine by itself?	<input type="checkbox"/>	<input type="checkbox"/>
cocaine and heroin, or speedball?	<input type="checkbox"/>	<input type="checkbox"/>
amphetamines, such as uppers, speed, meth, or crank?	<input type="checkbox"/>	<input type="checkbox"/>
dilaudid?.....	<input type="checkbox"/>	<input type="checkbox"/>
barbiturates?	<input type="checkbox"/>	<input type="checkbox"/>
methadone?	<input type="checkbox"/>	<input type="checkbox"/>
steroids?	<input type="checkbox"/>	<input type="checkbox"/>
any other drugs?.....	<input type="checkbox"/>	<input type="checkbox"/>

C9. Using the choices on this card, please tell me how often you have injected drugs since your last interview.

Show Card #7.

<i>Total times in six months</i>	<i>1-11</i>	<i>12-51</i>	<i>52-182</i>	<i>>182</i>
	<i>less than twice per month</i>	<i>2-8 x per month</i>	<i>2-7 x per week</i>	<i>more than once per day</i>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C10. Since your last interview, with how many different people did you share needles or works?

none *one other person* *more than one person*

**↓
If none, go to question D1.**

C10a. Since your last interview, did you ever share a needle with someone you knew to be HIV-positive? *yes* *no*

**SAMPLE: DO NOT
FAX TO DATAFAX**



Visit Code

HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up
Risk Assessment (188)

Participant ID

- -
Site Number Participant Number Chk

**Months 18 through 48
Follow-up Risk Assessment**

SEXUAL BEHAVIOR WITH MEN

The following questions ask about your sexual behavior with male partners who are HIV-positive and HIV-negative, as well as partners whose HIV status is unknown to you. Again, these questions refer to the time period since your last interview.

D1. How many male sex partners have you had since your last interview? Include only men with whom you had anal or oral sex, with or without a condom, and with or without ejaculation.

If 0, go to question F1, page 27.

D2. How many of your male sex partners were HIV positive?

D3. How many of your male sex partners told you they were HIV-negative and you had **no reason** to doubt it?.....

D4. How many of your male sex partners never told you their HIV status, or told you they were negative and you **have reason** to doubt it?

Interviewer: Adjust numbers of partners in D1 if appropriate.

D5. Were you in a primary relationship with a male sex partner since your last interview? This would be someone you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.....

yes no

If no, go to Introduction below.

D5a. What is your primary partner's HIV status?

positive negative not sure

D5b. Has a primary relationship ended since your last interview?.....

yes no

INTRODUCTION

Some of the next questions refer to sexual behaviors where you or your partner may have used a condom. Sex with a condom means that a condom was put on before penetration and used throughout. It includes times when a condom was used but then broke or slipped off. However, if penetration started without a condom, then a condom was put on and you continued, count this as sex without a condom.

INSTRUCTION 1: If subject reported no HIV-positive sex partners in question D2, go to Instruction 2 on page 9.

**SAMPLE: DO NOT
FAX TO DATAFAX**



Visit Code

HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up
Risk Assessment (189)

Participant ID

- -
Site Number Participant Number Chk

**Months 18 through 48
Follow-up Risk Assessment**

HIV-POSITIVE PARTNERS

The next group of questions asks about the sexual contacts you had since your last interview with your HIV-positive male partner(s).

D6. How many times did this/ these partner(s) ejaculate or come in your mouth without a condom?

D7. How many times did you have anal sex with this/these partner(s) when his/ their penis was in your rectum? This would be with or without a condom and whether or not he/they ejaculated.

If 0, go to question D8.

D7a. How many of these times did your partner(s) use a male condom or did you use an anal condom (Reality® condom)?

If 0, go to question D8.

D7a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

D8. How many times did you have anal sex with your HIV-positive partner(s) when your penis was in his/their rectum? This would be with or without a condom and whether or not you ejaculated.

If 0, go to Instruction 2.

D8a. How many of these times did you use a male condom or did your partner(s) use an anal condom (Reality® condom)?

If 0, go to Instruction 2.

D8a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

INSTRUCTION 2: If participant reported no HIV-negative male sex partners in question D3, go to Instruction 3 on page 10.

**SAMPLE: DO NOT
FAX TO DATAFAX**



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HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up
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**Months 18 through 48
Follow-up Risk Assessment**

HIV-NEGATIVE PARTNERS

The next group of questions asks about the sexual contact you had since your last interview with your HIV-negative male partner(s).

D9. How many times did this/these partner(s) ejaculate or come in your mouth without a condom?

D10. How many times did you have anal sex with this/these partner(s) when his/their penis was in your rectum? This would be with or without a condom and whether or not he/they ejaculated.

→ If 0, go to question D11.

D10a. How many of these times did your partner(s) use a male condom or did you use an anal condom (Reality® condom)?

→ If 0, go to question D11.

D10a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

D11. How many times did you have anal sex with your HIV-negative partner(s) when your penis was in his/their rectum? This would be with or without a condom and whether or not you ejaculated.

→ If 0, go to Instruction 3.

D11a. How many of these times did you use a male condom or did your partner(s) use an anal condom (Reality® condom)?

→ If 0, go to Instruction 3.

D11a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

INSTRUCTION 3: If participant reported no partners of unknown status in question D4, go to page 12.

**SAMPLE: DO NOT
FAX TO DATAFAX**



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HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up
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**Months 18 through 48
Follow-up Risk Assessment**

HIV-STATUS UNKNOWN PARTNERS

The next group of questions asks about the sexual contact you had since your last interview with your male partner(s) whose HIV status you are not sure of.

D12. How many times did this/these partner(s) ejaculate or come in your mouth without a condom?

D13. How many times did you have anal sex with this/these partner(s) when his/their penis was in your rectum? This would be with or without a condom and whether or not he/they ejaculated.

➔ If 0, go to question D14.

D13a. How many of these times did your partner(s) use a male condom or did you use an anal condom (Reality® condom)?

➔ If 0, go to question D14.

D13a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

D14. How many times did you have anal sex with this/these partner(s) whose HIV status you are not sure of, when your penis was in his/their rectum? This would be with or without a condom and whether or not you ejaculated.

➔ If 0, go to question D15.

D14a. How many of these times did you use a male condom or did your partner(s) use an anal condom (Reality® condom)?

➔ If 0, go to question D15.

D14a1. How many of these times did a condom slip off, tear, break, or otherwise fail?

**SAMPLE: DO NOT
FAX TO DATAFAX**



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Follow-up Risk Assessment**

PARTNER BY PARTNER QUESTIONS

Interviewer: Record the number of partners reported in question D1.

You will now be asked more detailed questions about your most recent male sex partner(s) since your last interview, up to a maximum of three partners.

D15. Think about your most recent male sex partner. Could you give me initials, a first name, or nickname that I can use to refer to him? This does not need to be his real name or initials.

➔ **If only 1 partner since your last interview, go to Instruction 4, page 13.**

D16. Think about your next most recent male sex partner. Could you give me initials, a first name, or nickname that I can use to refer to him? This does not need to be his real name or initials.

➔ **If only 2 partners since your last interview, go to Instruction 4, page 13.**

D17. Think about your next most recent male sex partner. Could you give me initials, a first name, or nickname that I can use to refer to him? This does not need to be his real name or initials.

**SAMPLE: DO NOT
FAX TO DATAFAX**



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**Months 18 through 48
Follow-up Risk Assessment**

INSTRUCTION 4: Record "most recent partner's" initials/name from question D15.

The following questions will be about _____.

Ea1. Is this person a... *Mark only one.*

- primary partner? This would be someone that you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.*
- steady, non-primary partner? This would be a partner with whom you had sex three or more times in the past, but don't consider your primary partner.*
- non-steady partner? This would be a partner with whom you had sex less than three times in the past.*

Ea2. How desirable did you find this partner?

<i>attractive enough</i>	<i>very desirable</i>	<i>extremely desirable</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ea3. How old is this partner?

<i>≤ 18 years</i>	<i>19-24 years</i>	<i>25-29 years</i>	<i>30-34 years</i>	<i>35-39 years</i>	<i>40-44 years</i>	<i>45-49 years</i>	<i>≥ 50 years</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ea4. How long have you been having sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. Show Card #8.

- less than a week*
- more than a week but less than a month*
- one to six months*
- seven to 12 months*
- more than a year*

Ea5. How many times have you had sex with this partner since your last interview? That is, anal or oral sex, with or without a condom, and with or without ejaculation.

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FAX TO DATAFAX**



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**Months 18 through 48
Follow-up Risk Assessment**

Ea6. Has _____ (most recent partner) ever had an HIV test? yes no don't know

If no or don't know, go to Introduction, page 15.

Ea6a. What was his most recent HIV test result?

HIV-positive → **If positive, go to question Ea6b.**

HIV-negative → **If negative, go to question Ea6c.**

not sure → **If not sure, go to Introduction, page 15.**

Ea6b. Is _____ (most recent partner) taking any anti-HIV medications? yes no don't know

If yes, no, or don't know, go to Introduction, page 15.

Ea6c. How confident are you that _____ (most recent partner) is HIV-negative?

Show Card #9.

very confident *somewhat confident* *slightly confident* *not at all confident*

**SAMPLE: DO NOT
FAX TO DATAFAX**



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Risk Assessment (195)

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**Months 18 through 48
Follow-up Risk Assessment**

INTRODUCTION

The next group of questions asks about the most recent time you had sex with this partner. The following questions will be about _____.

Ea7. When did you last have sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. ^{mm} ^{yy}

Ea8. Using the choices on this card, during the most recent time you had sex with this partner, where did you have sex?

Show Card #10.

- | | |
|--|--|
| <input type="checkbox"/> your house or apartment or his house or apartment | <input type="checkbox"/> porn theater/video arcade |
| <input type="checkbox"/> hotel | <input type="checkbox"/> public bathroom |
| <input type="checkbox"/> sex club or bath | <input type="checkbox"/> other public place, such as beach, park, woods, street, car, or van |
| <input type="checkbox"/> bar, night club, or dance club | <input type="checkbox"/> other |
| <input type="checkbox"/> health club or gym | |

Ea9. During the most recent time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom? ^{yes} ^{no}

Ea10. During the most recent time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated. → **If no, go to question Ea11.**

Ea10a. Did your partner use a male condom or did you use an anal condom (Reality® condom)? → **If no, go to question Ea11.**

Ea10a1. Did the condom slip off, tear, break, or otherwise fail?

Ea11. During the most recent time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated. → **If no, go to question Ea12.**

Ea11a. Did you use a male condom or did your partner use an anal condom (Reality® condom)? → **If no, go to question Ea12.**

Ea11a1. Did the condom slip off, tear, break, or otherwise fail?

**SAMPLE: DO NOT
FAX TO DATAFAX**



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**Months 18 through 48
Follow-up Risk Assessment**

Ea12. Were you drinking alcohol within two hours before or during the most recent time you had sex with this partner?

yes

no

If no, go to question Ea13.

Ea12a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.

number of drinks

Ea13. Was your partner drinking within two hours before or during the most recent time you had sex?

yes

no

don't know

Ea14. Did you use drugs either immediately before or during the most recent time you had sex with this partner?

If no, go to question Ea15.

Ea14a. Which drugs? *Mark all that apply.*

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Ea15. Did your partner use drugs either immediately before or during the most recent time you had sex with him?

yes

no

don't know

**SAMPLE: DO NOT
FAX TO DATAFAX**



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Risk Assessment (197)

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**Months 18 through 48
Follow-up Risk Assessment**

INSTRUCTION 5: Review the participant's response to question D1, page 8.

- If the participant reported having only one male partner **and** reported having more than one episode of sex with the partner in question Ea5, continue with questions Ea16 -Ea24.
- If the participant reported having more than one male partner, go to Instruction 6, page 19.
- If the participant reported having only one male partner **and** reported having only one episode of sex with the partner in question Ea5, go to question F1, page 27.

The next group of questions are similar, but refer to the **next to last time** you had sex with your partner, _____ (use name as reported on question D15, page 12).

mm yy

Ea16. When was the next to last time that you had sex with your partner? That is anal or oral sex, with or without a condom, and with or without ejaculation.

Ea17. Using the choices on this card, during the next to last time you had sex with this partner, where did you have sex? **Show Card #10.**

- | | |
|--|--|
| <input type="checkbox"/> your house or apartment or his house or apartment | <input type="checkbox"/> porn theater/video arcade |
| <input type="checkbox"/> hotel | <input type="checkbox"/> public bathroom |
| <input type="checkbox"/> sex club or bath | <input type="checkbox"/> other public place, such as beach, park, woods, street, car, or van |
| <input type="checkbox"/> bar, night club, or dance club | <input type="checkbox"/> other |
| <input type="checkbox"/> health club or gym | |

Ea18. During the next to last time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom? yes no

Ea19. During the next to last time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated. → **If no, go to question Ea20.**

Ea19a. Did your partner use a male condom or did you use an anal condom (Reality® condom)? → **If no, go to question Ea20.**

Ea19a1. Did the condom slip off, tear, break or otherwise fail?

Ea20. During the next to last time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated. yes no → **If no, go to question Ea21.**

Ea20a. Did you use a male condom or did your partner use an anal condom (Reality® condom)? → **If no, go to question Ea21.**

Ea20a1. Did the condom slip off, tear, break, or otherwise fail?

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Ea21. Were you drinking alcohol within two hours before or during the next to last time you had sex with this partner?.....

yes

no

→ **If no, go to question Ea22.**

Ea21a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.

number of drinks

Ea22. Was your partner drinking within two hours before or during the next to last time you had sex?

yes

no

don't know

Ea23. Did you use drugs either immediately before or during the next to last time you had sex with this partner?

→ **If no, go to question Ea24.**

Ea23a. Which drugs? *Mark all that apply.*

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Ea24. Did your partner use drugs either immediately before or during the next to last time you had sex with him?

yes

no

don't know

→ **Go to question F1, page 27.**

Interviewer: Go to question F1, page 27.

**SAMPLE: DO NOT
FAX TO DATAFAX**



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**Months 18 through 48
Follow-up Risk Assessment**

INSTRUCTION 6: Record "second most recent partner" name/initials from question D16.

The following questions will be about _____.

Eb1. Is this person a... *Mark only one.*

- primary partner? This would be someone that you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.*
- steady, non-primary partner? This would be a partner with whom you had sex three or more times in the past, but don't consider your primary partner.*
- non-steady partner? This would be a partner with whom you had sex less than three times in the past.*

Eb2. How desirable did you find this partner?

<i>attractive enough</i>	<i>very desirable</i>	<i>extremely desirable</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Eb3. How old is this partner?

<i>≤ 18 years</i>	<i>19-24 years</i>	<i>25-29 years</i>	<i>30-34 years</i>	<i>35-39 years</i>	<i>40-44 years</i>	<i>45-49 years</i>	<i>≥ 50 years</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Eb4. How long have you been having sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. Show Card #8.

- less than a week*
- more than a week but less than a month*
- one to six months*
- seven to 12 months*
- more than a year*

Eb5. How many times have you had sex with him since your last interview? That is, anal or oral sex, with or without a condom, and with or without ejaculation.

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HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up Risk Assessment (200)

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Participant ID

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**Months 18 through 48
Follow-up Risk Assessment**

Eb6. Has _____ (**second most recent partner**) ever had an HIV test?

yes no don't know

If no or don't know, go to Introduction, page 21.

Eb6a. What was his **most recent** HIV test result?

- HIV-positive → **If positive, go to question Eb6b.**
- HIV-negative → **If negative, go to question Eb6c.**
- not sure → **If not sure, go to Introduction, page 21.**

Eb6b. Is _____ (**second most recent partner**) taking any anti-HIV medications?

yes no don't know

If yes, no, or don't know, go to Introduction, page 21.

Eb6c. How confident are you that _____ (**second most recent partner**) is HIV-negative?

Show Card #9.

- | | | | |
|--------------------------|---------------------------|---------------------------|-----------------------------|
| <i>very confident</i> | <i>somewhat confident</i> | <i>slightly confident</i> | <i>not at all confident</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

SAMPLE: DO NOT FAX TO DATAFAX



Visit Code [][][][]

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HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up Risk Assessment (201)

Participant ID

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Site Number Participant Number Chk

Months 18 through 48 Follow-up Risk Assessment

INTRODUCTION

The next group of questions asks about the most recent time you had sex with this partner. The following questions will be about _____.

Eb7. When did you last have sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation.
mm yy [][] [][]

Eb8. Using the choices on this card, during the most recent time you had sex with this partner, where did you have sex? Show Card #10.

- your house or apartment or his house or apartment
- hotel
- sex club or bath
- bar, night club, or dance club
- health club or gym
- porn theater/video arcade
- public bathroom
- other public place, such as beach, park, woods, street, car, or van
- other

Eb9. During the most recent time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom?
yes no [] []

Eb10. During the most recent time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated.....
[] [] → If no, go to question Eb11.

Eb10a. Did your partner use a male condom or did you use an anal condom (Reality® condom)?
[] [] → If no, go to question Eb11.

Eb10a1. Did the condom slip off, tear, break, or otherwise fail?
[] []

Eb11. During the most recent time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated.
[] [] → If no, go to question Eb12.

Eb11a. Did you use a male condom or did your partner use an anal condom (Reality® condom)?
[] [] → If no, go to question Eb12.

Eb11a1. Did the condom slip off, tear, break, or otherwise fail?
[] []

**SAMPLE: DO NOT
FAX TO DATAFAX**



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Months 18 through 48 Follow-up
Risk Assessment (202)

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**Months 18 through 48
Follow-up Risk Assessment**

Eb12. Were you drinking alcohol within two hours before or during the most recent time you had sex with this partner?.....

yes no

→ If no, go to question Eb13.

Eb12a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.

number of drinks

Eb13. Was your partner drinking within two hours before or during the most recent time you had sex?

yes no don't know

Eb14. Did you use drugs either immediately before or during the most recent time you had sex with this partner?

yes no

→ If no, go to question Eb15.

Eb14a. Which drugs? *Mark all that apply.*

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Eb15. Did your partner use drugs either immediately before or during the most recent time you had sex with him?

yes no don't know

**SAMPLE: DO NOT
FAX TO DATAFAX**



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**Months 18 through 48
Follow-up Risk Assessment**

INSTRUCTION 7: If participant had only two male partners reported in question D15, go to question F1, page 27. Otherwise, record **“third most recent partner”** name/initials from question D17.

The following questions will be about _____.

Ec1. Is this person a... *Mark only one.*

- primary partner? This would be someone that you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.*
- steady, non-primary partner? This would be a partner with whom you had sex three or more times in the past, but don't consider your primary partner.*
- non-steady partner? This would be a partner with whom you had sex less than three times in the past.*

Ec2. How desirable did you find this partner?

<i>attractive enough</i>	<i>very desirable</i>	<i>extremely desirable</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ec3. How old is this partner?

<i>≤ 18 years</i>	<i>19-24 years</i>	<i>25-29 years</i>	<i>30-34 years</i>	<i>35-39 years</i>	<i>40-44 years</i>	<i>45-49 years</i>	<i>≥ 50 years</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ec4. How long have you been having sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation. **Show Card #8.**

- less than a week*
- more than a week but less than a month*
- one to six months*
- seven to 12 months*
- more than a year*

Ec5. How many times have you had sex with him since your last interview? That is, anal or oral sex, with or without a condom, and with or without ejaculation.

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Follow-up Risk Assessment**

Ec6. Has _____ (third most recent partner) ever had an HIV test? yes no don't know

If no or don't know, go to Introduction, page 25.

Ec6a. What was his **most recent** HIV test result?

- HIV-positive → **If positive, go to question Ec6b.**
- HIV-negative → **If negative, go to question Ec6c.**
- not sure → **If not sure, go to Introduction, page 25.**

Ec6b. Is _____ (third most recent partner) taking any anti-HIV medications? yes no don't know

If yes, no, or don't know, go to Introduction, page 25.

Ec6c. How confident are you that _____ (third most recent partner) is HIV-negative?

Show Card #9.

- | | | | |
|--------------------------|---------------------------|---------------------------|-----------------------------|
| <i>very confident</i> | <i>somewhat confident</i> | <i>slightly confident</i> | <i>not at all confident</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

SAMPLE: DO NOT FAX TO DATAFAX



Visit Code [][] . []

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HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up Risk Assessment (205)

Participant ID

[][][] - [][][][][] - [] Site Number Participant Number Chk

Months 18 through 48 Follow-up Risk Assessment

INTRODUCTION

The next group of questions asks about the most recent time you had sex with this partner. The following questions will be about _____.

Ec7. When did you last have sex with this partner? That is, anal or oral sex, with or without a condom, and with or without ejaculation..... mm yy [][] [][]

Ec8. Using the choices on this card, during the most recent time you had sex with this partner, where did you have sex?

Show Card #10.

- your house or apartment or his house or apartment
hotel
sex club or bath
bar, night club, or dance club
health club or gym
porn theater/video arcade
public bathroom
other public place, such as beach, park, woods, street, car, or van
other

Ec9. During the most recent time you had sex with this partner, did your partner ejaculate or come in your mouth without a condom? yes no [][] [][]

Ec10. During the most recent time you had sex with this partner, did you have anal sex when his penis was in your rectum? This would be with or without a condom and whether or not he ejaculated. If no, go to question Ec11.

Ec10a. Did your partner use a male condom or did you use an anal condom (Reality® condom)? If no, go to question Ec11.

Ec10a1. Did the condom slip off, tear, break, or otherwise fail?

Ec11. During the most recent time you had sex with this partner, did you have anal sex when your penis was in his rectum? This would be with or without a condom and whether or not you ejaculated. If no, go to question Ec12.

Ec11a. Did you use a male condom or did your partner use an anal condom (Reality® condom)? If no, go to question Ec12.

Ec11a1. Did the condom slip off, tear, break, or otherwise fail?

SAMPLE: DO NOT FAX TO DATAFAX



Visit Code [][][][]

[1]

[1]

HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up Risk Assessment (206)

Participant ID

[][][] - [][][][][] - []
Site Number Participant Number Chk

Months 18 through 48 Follow-up Risk Assessment

Ec12. Were you drinking alcohol within two hours before or during the most recent time you had sex with this partner?

yes

no

→ If no, go to question Ec13.

Ec12a. How many drinks did you have? By a drink, I mean a 12-oz. can or glass of beer, a 4-oz. glass of wine, a 1-1/2-oz. shot of liquor, or a mixed drink with that amount of liquor.....

[][]

number of drinks

Ec13. Was your partner drinking within two hours before or during the most recent time you had sex?

yes

no

don't know

Ec14. Did you use drugs either immediately before or during the most recent time you had sex with this partner?

yes

no

→ If no, go to question Ec15.

Ec14a. Which drugs? Mark all that apply.

- used marijuana or hashish
- used poppers or inhaled nitrites, including ampules
- smoked crack or rock cocaine
- snorted or sniffed cocaine
- swallowed, snorted or smoked amphetamines, such as speed, crystal or crank
- snorted or smoked heroin
- used hallucinogens, such as PCP, Special K, angel dust, acid, LSD, mushrooms, or Ecstasy
- used any other non-injectable drugs to get high
- used any injectable drugs to get high

Ec15. Did your partner use drugs either immediately before or during the most recent time you had sex with him?

yes

no

don't know

**SAMPLE: DO NOT
FAX TO DATAFAX**



Visit Code

HIVNET 015 (EXPLORE 040)

Months 18 through 48 Follow-up
Risk Assessment (207)

Participant ID

- -
Site Number Participant Number Chk

**Months 18 through 48
Follow-up Risk Assessment**

SEXUAL BEHAVIOR WITH WOMEN

The following questions ask about any female partners with whom you have had sex since your last interview.

F1. How many female sex partners have you had since your last interview? Include only women with whom you had vaginal, anal, or oral sex, with or without a condom, and with or without ejaculation.

If 0, go to Conclusion.

F2. How many of your female sex partners were HIV-positive?

F3. How many of your female sex partners told you they were HIV-negative and you had **no reason** to doubt it?

F4. How many of your female sex partners never told you their HIV status, or told you they were negative and you **have reason** to doubt it?

Interviewer: Adjust numbers of partners in F1 if appropriate.

F5. Were you in a primary relationship with a female sex partner since your last interview? This would be someone you have lived with or have seen a lot, and to whom you have felt a special emotional commitment.

yes no

If no, go to Conclusion.

positive negative not sure

F5a. What is your primary partner's HIV status?

F5b. Has a primary relationship ended since your last interview?.....

yes no

CONCLUSION

This concludes the questionnaire. We will ask similar questions six months from now during one of your regularly scheduled study visits. This important information will help us learn about what happens to participants during this study. Again, thank you for your help and cooperation.