COHORT QUESTIONNAIRE

PEER COUNSELLOR’S ID

TYPE OF INTERVIEW
○ First interview at CheckpointLX [Baseline interview in the Cohort]
○ Follow-up interview at CheckpointLX [Baseline interview in the Cohort]
○ Follow-up interview in Cohort
○ Interview outside the Cohort

IDENTIFICATION DATA
[1.01] DATE [ ] [ ] [ ] - [ ] - [ ]

[1.02] PARTICIPANTS’ UNIQUE CODE
Year [ ] Month [ ] Day [ ] First name [ ] Last name [ ]

[1.03] AGE [ ] [ ]

[1.04] GENDER
○ Men
○ Transgender (MTF)
○ Women
○ Transgender (FTM)

KNOWLEDGES AND ATTITUDES

[2.01] HAVE YOU EVER BEEN TESTED FOR HIV? ○ Yes ○ No [2.03] ○ NK ○ RNS

[2.02] DID YOU HAVE ACCESS TO THE RESULT? ○ Yes [2.04] ○ No [2.03] ○ NK ○ RNS

[2.03] WHAT WERE THE REASONS FOR NOT BEING TESTED BEFORE/ NOT PICKING THE RESULT? Multiple options
In case of answer to this question go to question 2.07
○ I was never at risk
○ I did not know where to get tested
○ I was afraid of the result
○ I did not think it was important
○ I was at risk but did not want to know the result
○ I was afraid the result would not be anonymous or confidential
○ The test was expensive
○ I was too busy
○ I though I would be contacted if the result was positive
○ I did not feel bad
○ Other (specify) [ ]
[2.04] How many times were you tested previously? [ ] [ ] ○ NK ○ RNS

[2.05] The last test was performed at...? Single option
- ○ CheckpointLX
- ○ Public network of VCT centers [CAD]
- ○ Family doctor [NHS]
- ○ Public Hospital [NHS]
- ○ Blood donation
- ○ Mobile unit
- ○ Private laboratory
- ○ Private Hospital or Clinic
- ○ Treatment Team/Drug Treatment Centre
- ○ Abroad
- ○ Other
- ○ NK
- ○ RNS

[2.06] Date of last test [ ] [ ] [ ] ○ NK ○ RNS
Result ○ Negative ○ Undetermined ○ Positive ○ NK ○ RNS

[2.07] Why do you want to get tested? Multiple options
- Perception of HIV exposure [In the previous 3 months] ○ Yes ○ No ○ NK ○ RNS
  Specify [ ]

- Perception of HIV exposure [More than 3 months ago] ○ Yes ○ No ○ NK ○ RNS
  Specify [ ]

- Partner diagnosed HIV+ / Disclosed HIV+ status ○ Yes ○ No ○ NK ○ RNS
- Possible window period by the time of the previous test ○ Yes ○ No ○ NK ○ RNS
- Symptoms / Medical indication ○ Yes ○ No ○ NK ○ RNS
- To check health status / Routine ○ Yes ○ No ○ NK ○ RNS
- My partner asked me to test for HIV ○ Yes ○ No ○ NK ○ RNS
- Accident with condom use [rupture / left inside] ○ Yes ○ No ○ NK ○ RNS
- To stop using condom with my partner ○ Yes ○ No ○ NK ○ RNS
- Other reason [specify] [ ]

Sexual life and partners

[3.01] How would you define your sexual orientation?
- ○ Homosexual
- ○ Heterosexual
- ○ NK
- ○ Bisexual
- ○ Other
- ○ RNS
[3.02] HOW OLD WERE YOU WHEN YOU FIRST HAD ANAL SEX?  
- I never had anal sex  [3.05]  
- NK  
- RNS

[3.03] WHEN YOU HAVE ANAL SEX WITH MEN...  
- Single option
  - Are you insertive?
  - Are you receptive?
  - Are you both?
  - I do not have anal sex  [3.05]
  - NK
  - RNS

[3.04] IN THE PREVIOUS 12 MONTHS / SINCE THE LAST VISIT DID YOU HAVE SEX WITH PENETRATION WITH:

- Bisexual men  
- Men with different sexual partners  
- Sex workers (even if not paid)  
- Men with HIV  
- Injecting drug users  
- Women  
- Threesome / Group sex  
- Other [specify]  

SEXUAL LIFE AND PARTNERS

[3.05] IN THE PREVIOUS 12 MONTHS / SINCE THE LAST VISIT DID YOU HAVE A STEADY PARTNER?  
- Yes
- Yes, more than one
- No  [3.13]
- NK
- RNS

[3.06] HOW LONG ARE YOU, OR HAVE YOU BEEN, WITH YOUR LAST STEADY PARTNER?  

Months  

Years  

[3.07] WHAT IS THE GENDER OF YOUR LAST STEADY PARTNER?  

- Men  
- Transgender women [MTF]  
- NK
- Women  
- Transgender men [FTM]  
- RNS

[3.08] IN THE PREVIOUS 12 MONTHS / SINCE THE LAST VISIT DID YOU HAVE ANY OF THE FOLLOWING SEXUAL PRACTICES WITH YOUR STEADY PARTNER?  

(read all options)

- Oral sex with ejaculation at your partner’s mouth  
- Oral sex with ejaculation at your mouth  
- Anal penetration  
- Insertive anal penetration  
- Receptive anal penetration  
- Other [specify]  

Yes  
No  
NK  
RNS
[3.09] AT YOUR LAST ANAL PENETRATION (INSERTIVE OR RECEPTIVE) WITH STEADY PARTNER DID YOU USE A CONDOM?  
○ Yes  ○ No  ○ NK  ○ RNS

[3.10] IN THE PREVIOUS 12 MONTHS / SINCE THE LAST VISIT HOW OFTEN DID YOU USE CONDOMS FOR ANAL PENETRATIONS (INSERTIVE OR RECEPTIVE) WITH STEADY PARTNER? 
Single option  
○ Always  ○ Often  ○ Occasionally  ○ Rarely  ○ Never  ○ NK  ○ RNS

[3.11] DO YOU OR YOUR STEADY PARTNER HAVE SEX WITH OTHER PARTNERS?  
○ Yes  ○ No  ○ NS  ○ NR  ○ Other

[3.12] YOUR STEADY PARTNER IS...  
○ HIV-negative  ○ HIV-positive  ○ NK  ○ NR

SEXUAL LIFE: OCCASIONAL PARTNERS AND SEX WORKERS

[3.13] IN THE PREVIOUS 12 MONTHS / SINCE THE LAST VISIT DID YOU HAVE SEX (ORAL, ANAL, VAGINAL) WITH OCCASIONAL PARTNERS?  [Any partner with whom you had sex once or sporadically, with or without exchange of money or drugs]  
○ Yes  ○ No  ○ NR  [4.01]  ○ NK  ○ RNS

[3.14] IN THE PREVIOUS 12 MONTHS / SINCE THE LAST VISIT HAVE YOU EVER BEEN PAID WITH MONEY OR DRUGS FOR SEX?  
○ Yes  ○ No  ○ NK  ○ RNS

[3.15] IN THE PREVIOUS 12 MONTHS / SINCE THE LAST VISIT DID YOU HAVE ANAL SEX (PENETRATION) WITH HOW MANY OCCASIONAL PARTNERS?  

[3.16] IN THE PREVIOUS 12 MONTHS / SINCE THE LAST VISIT DID YOU HAVE ANY OF THE FOLLOWING SEXUAL PRACTICES WITH AN OCCASIONAL PARTNER? [read all options]

Oral sex with ejaculation at your partner’s mouth  
○ Yes  ○ No  ○ NK  ○ RNS

Oral sex with ejaculation at your mouth  
○ Yes  ○ No  ○ NK  ○ RNS

Anal penetration  
○ Yes  ○ No  ○ NR  [3.11]  ○ NK  ○ RNS

Insertive anal penetration  
○ Yes  ○ No  ○ NK  ○ RNS

Receptive anal penetration  
○ Yes  ○ No  ○ NK  ○ RNS

Other [specify]  

[3.17] AT YOUR LAST ANAL PENETRATION (INSERTIVE OR RECEPTIVE) WITH AN OCCASIONAL PARTNER DID YOU USE A CONDOM?  
○ Yes  ○ No  ○ NK  ○ RNS

[3.18] IN THE PREVIOUS 12 MONTHS / SINCE THE LAST VISIT HOW OFTEN DID YOU USE CONDOMS FOR ANAL PENETRATIONS (INSERTIVE OR RECEPTIVE) WITH AN OCCASIONAL PARTNER?  Single option  
○ Always  ○ Often  ○ Occasionally  ○ Rarely  ○ Never  ○ NK  ○ RNS

<table>
<thead>
<tr>
<th>Location</th>
<th>Yes</th>
<th>No</th>
<th>NK</th>
<th>RNS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discos and gay bars</td>
<td></td>
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<tr>
<td>Saunas</td>
<td></td>
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<tr>
<td>“Dark rooms” (including sex-shops)</td>
<td></td>
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<tr>
<td>Sex clubs</td>
<td></td>
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<tr>
<td>Internet</td>
<td></td>
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<tr>
<td>Cruising sites (WCs, parks, parking lots)</td>
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<tr>
<td>Gym</td>
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<tr>
<td>Other (specify)</td>
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</tbody>
</table>

### Condoms

#### [4.01] Do You Use Condoms for Oral Sex?

- Always
- Often
- Occasionally
- Rarely
- Never
- NK
- RNS

#### [4.02] In Case You Do Not Always Use Condoms for Anal Penetrations, Would You Identify the Main Reasons?

<table>
<thead>
<tr>
<th>Reason</th>
<th>Yes [5.01]</th>
<th>No</th>
<th>NK</th>
<th>RNS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not have anal sex</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Always uses condoms</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>With steady partner</td>
<td></td>
<td></td>
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<tr>
<td>With a “reliable” person</td>
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<tr>
<td>With steady partner after testing for HIV and both were negative</td>
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<tr>
<td>With a partner that declares he is HIV-negative</td>
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<tr>
<td>With a partner that declares undetectable viral load</td>
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<tr>
<td>With a partner that does not want to use</td>
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<tr>
<td>If used alcohol or drugs</td>
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<tr>
<td>Being too aroused</td>
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<tr>
<td>Condom reduces pleasure</td>
<td></td>
<td></td>
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<tr>
<td>Condom interrupts sexual intercourse</td>
<td></td>
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<tr>
<td>Allergy to latex</td>
<td></td>
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<tr>
<td>Condom make him loose erection</td>
<td></td>
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<tr>
<td>Does not like using condoms</td>
<td></td>
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<tr>
<td>Not having condoms in that moment</td>
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<tr>
<td>Being in a sex venue without condoms available</td>
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<tr>
<td>Condoms are expensive</td>
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<tr>
<td>Other (specify)</td>
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</tbody>
</table>

#### [4.03] Do You Use Lubricants for Anal Sex?

- Always
- Often
- Occasionally
- Rarely
- Never
- NK
- RNS

Specify
# ALCOHOL AND DRUGS

## [5.01] HAVE YOU EVER USE ALCOHOL OR DRUGS BEFORE OR DURING INTERCOURSE?

- Yes, alcohol
- Yes, other substances orally or “snorted”
- Yes, alcohol or other substances
- Yes, injected drugs
- No [6.01]
- NK
- RNS

## [5.02] IN THE PREVIOUS 12 MONTHS / SINCE THE LAST VISIT DID YOU USE ALCOHOL OR DRUGS BEFORE OR DURING INTERCOURSE?

<table>
<thead>
<tr>
<th>Substance</th>
<th>Always</th>
<th>Often</th>
<th>Occasionally</th>
<th>Rarely</th>
<th>Never</th>
<th>NK</th>
<th>RNS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td></td>
<td></td>
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<tr>
<td>Cannabis</td>
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<tr>
<td>Heroine</td>
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<tr>
<td>Cocaine</td>
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<tr>
<td>Ecstasy (MDMA)</td>
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<tr>
<td>Amphetamines</td>
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<tr>
<td>Poppers</td>
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<tr>
<td>LSD</td>
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<tr>
<td>Viagra/ Cialis/ similar</td>
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<tr>
<td>Ketamine</td>
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<tr>
<td>Methadone</td>
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<tr>
<td>Mephedrone</td>
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<tr>
<td>Other (specify)</td>
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</tbody>
</table>

## [5.03] DO YOU CONSIDER THAT USING OF ANY OF THOSE SUBSTANCES MAKES YOU USE LESS CONDOMS?

- Yes
- No
- NK
- RNS

# PEP (POST-EXPOSURE PROPHYLAXIS)

## [6.01] HAVE YOU EVER HEARD ABOUT PEP?

- Yes, well informed
- Yes, not well informed
- No [7.01]
- NK
- RNS

## [6.02] HAVE YOU EVER USED PEP?

- Yes
- No [7.01]
- NK
- RNS

## [6.03] IN THE PREVIOUS 12 MONTHS / SINCE THE LAST VISIT DID YOU USE PEP?

- Yes
- No
- NK
- RNS
# STIs (Sexually Transmitted Infections) and Hepatitis

## [7.01] Have you ever had a STI? [Diagnosed or Symptoms]
- Yes, discharge
- Yes, lesions
- Yes, warts
- Yes, other symptoms
- Yes, asymptomatic
- No [7.05]
- NK
- RNS

## [7.02] Which STIs have you been diagnosed with?

<table>
<thead>
<tr>
<th>STI</th>
<th>Yes</th>
<th>No</th>
<th>NK</th>
<th>RNS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Syphilis</td>
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<td></td>
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<td></td>
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<tr>
<td>Gonorrhoea</td>
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<tr>
<td>Chlamydia</td>
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<tr>
<td>Trichomonas</td>
<td></td>
<td></td>
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<tr>
<td>Genital herpes</td>
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<tr>
<td>Lymphogranuloma venereum</td>
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<tr>
<td>Condyloma or genital warts</td>
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<tr>
<td>I was never diagnosed with a STI</td>
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</tbody>
</table>

Other [specify]

## [7.03] In the previous 12 months / since the last visit did you have a STI [Diagnosed or Symptoms]?
- Yes, discharge
- Yes, lesions
- Yes, warts
- Yes, other symptoms
- Yes, asymptomatic
- No [7.05]
- NK
- RNS

## [7.04] Which STIs have you been diagnosed with in the previous 12 months / since the last visit?

<table>
<thead>
<tr>
<th>STI</th>
<th>Yes</th>
<th>No</th>
<th>NK</th>
<th>RNS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Syphilis</td>
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<td></td>
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<tr>
<td>I was never diagnosed with a STI</td>
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</tbody>
</table>

Other [specify]
[7.05] ARE YOU VACCINATED FOR HEPATITIS A?  ○ Yes  ○ No  ○ NK  ○ RNS

[7.06] ARE YOU VACCINATED FOR HEPATITIS B? [3 doses at least]  ○ Yes  ○ No  ○ NK  ○ RNS

[7.07] ARE YOU OR WERE YOU EVER INFECTED WITH A VIRAL HEPATITIS?

Hepatitis A (HAV)  ○ Yes  ○ No  ○ NK  ○ RNS
Hepatitis B (HBV)  ○ Yes  ○ No  ○ NK  ○ RNS
Hepatitis C (HCV)  ○ Yes  ○ No  ○ NK  ○ RNS

SOCIODEMOGRAPHIC CHARACTERIZATION

[8.01] WHERE WERE YOU BORN?  Single option

○ Portugal [8.03]
○ Central or Western Europe
○ Eastern Europe
○ African Portuguese-speaking countries
○ Other African countries
○ North America
○ Brazil
○ Other Latin American or Caribbean countries
○ Asia
○ Middle East
○ Oceania
○ Other (specify)
○ NK
○ RNS

[8.02] WHEN DID YOU ARRIVE FOR THE FIRST TIME TO PORTUGAL? [Year]  ○ NK  ○ RNS

[8.03] EDUCATIONAL LEVEL  Single option

○ Basic education or less
○ Secondary education
○ Professional training (equivalent to secondary)
○ Bachelor
○ Master or Doctoral
○ Other
○ NK
○ RNS
8.04 JOB SITUATION

- Full time employed
- Part-time employed
- Sex Worker
- Unemployed (with or without subsidy)
- Retired
- Student
- Other [specify]
- NK
- RNS

9. HIV SCREENING

9.01 HIV - RAPID TEST RESULT

- Reactive
- Not reactive

9.02 ACCEPTED REFERAL?

- Yes
- No
- NK
- RNS

Observations

PARTICIPATION IN THE COHORT

10. WILL YOU PARTICIPATE IN THE COHORT?

- Yes [END]
- No

10.02 REASONS FOR NOT PARTICIPATION

- Reactive test
- Did not consent
- Not a men who have sex with men
- Women
- Not interested in the study
- Does not have time
- Other reason