

AFRICAN POPULATION AND HEALTH RESEARCH CENTRE AND  
THE KENYA MEDICAL RESEARCH INSTITUTE  
**HIV Serological Survey (to be completed for persons aged 15-54 years)**

<b>1 BACKGROUND</b>								
101	RECORD THE START TIME (24 hour clock) (HH/MM)							
102	FIELDWORKER'S CODE							
103	DATE OF INTERVIEW (DD/MM/YY)							
104	RESPONDENT'S SERO SURVEY ID							
105	SEX OF RESPONDENT (F=FEMALE; M=MALE)							
106	How old were you at your last birthday?							
<b>INTERVIEWER: CHECK Q106 AND CIRCLE ONE OF THE FOLLOWING</b>								
107	FEMALE: AGE BETWEEN 15-49 YRS							
	FEMALE: AGED OUTSIDE 15-49 YRS							
	MALE: AGE BETWEEN 15-54 YRS							
	MALE: AGED OUTSIDE 15-54 YRS							
108	ADMINISTER THE INFORMED CONSENT TO THE RESPONDENT NOTE: FOR RESPONDENT IAGED BETWEEN 15-17, USE "INFORMED CONSENT FORM FOR MINORS" AND SEEK GUARDIAN'S CONSENT FIRST							
109	IF RESPONDENT IS AGED 15-17, HAS GURDIAN CONSENTED?							
110	RESULT OF INFORMED CONSENT							
	1 RESPONDENT ACCEPTS BOTH? COLLECT BLOOD SAMPLE FIRST THEN INTERVIEW							
	2 RESPONDENT ACCEPTS TO GIVE BLOOD SAMPLE ONLY ? COLLECT BLOOD							
	3 RESPONDENT REFUSES TO GIVE BLOOD BUT ACCEPTS INTERVIEW							
	4 RESPONDENT REFUSES BOTH							
	5 MISSED CASE							
111	Now I would like to ask you a few questions about your understanding of how the virus spreads and how one can protect him/herself from the disease. Your participation in the study is completely voluntary and you are free to stop participating at any point.							

<b>2 KNOWLEDGE ABOUT HIV/AIDS</b>			<b>SKIPS</b>
201	Is there anything a person can do to avoid getting AIDS or the virus that causes AIDS?	Yes No DK	1 2 ? 203 8 ? 203
202	What can a person do?  Anything else?  CIRCLE ALL WAYS MENTIONED	Abstain from sex Use condoms Stay faithful to one partner Limit number of sex partners Avoid sex with prostitutes Avoid sex with person who has many partners Avoid sex with homosexuals Avoid sex with drug users Avoid blood transfusion Avoid injections Avoid sharing razors Avoid kissing Avoid mosquito bites Seek protection from traditional healer OTHER _____ (Specify) OTHER _____ (Specify)	A B C D E F G H I J K L M N W Z
203	Can people reduce their chances of getting the AIDS virus by having just one sex partner who has no other partners?	Yes NO DK	1 2 8
204	Can people get the AIDS virus from mosquito bites?	Yes No DK	1 2 8
205	Can people reduce their chances of getting the AIDS virus by using a condom every time they have sex?	Yes NO DK	1 2 8
206	Can people get the AIDS virus by sharing food with a person who has AIDS?	Yes NO DK	1 2 8
207	Can people reduce their chance of getting the AIDS virus by not having sex at all?	Yes NO DK	1 2 8
208	Can people get the AIDS virus because of witchcraft or other supernatural means?	Yes NO DK	1 2 8
209	Is it possible for a healthy-looking person to have the AIDS virus?	Yes NO DK	1 2 8
210	Do you know someone personally who has the virus that causes AIDS or someone who died of AIDS?	Yes NO DK	1 2 8

211	Can the virus that causes AIDS be transmitted from a mother to her child?	Yes	1	
		NO	2 ?	214
		DK	8 ?	214
212	When can the virus that causes AIDS be transmitted from mother to her child? Can it be transmitted:	YES	NO	DK
	<b>CIRCLE CODE</b>			
	During pregnancy?	1	2	8
	During delivery?	1	2	8
	During breastfeeding?	1	2	8
	During conception?	1	2	8
213	Can a mother who is infected with the AIDS virus reduce the risk of giving the virus to the baby by taking certain drugs during pregnancy ?	Yes	1	
		NO	2	
		DK	8	
214	Would you buy fresh vegetables from a vendor who has the AIDS virus?	Yes	1	
		NO	2	
		DK	8	
215	If a member of your family got infected with the virus that causes AIDS, would you want it to remain a secret or not?	Yes	1	
		NO	2	
		DK	8	
216	If a relative of yours became sick with the virus that causes AIDS, would you be willing to care for her or him in your own home?	Yes	1	
		NO	2	
		DK	8	
217	If a female teacher has the AIDS virus, should she be allowed to continue teaching in school?	Yes	1	
		NO	2	
		DK	8	
<b>3</b>	<b>TESTING HISTORY</b>			
301	<b>I do not want to know the result</b> , but have you ever been tested to see if you have the virus that causes AIDS?	Yes	1	
		NO	2 ?	308
		DK	8 ?	308
302	How long ago was the last time that you were tested?	LESS THAN 3 MONTHS AGO	1	
	<b>CIRCLE ONE</b>	4-6 MONTHS AGO	2	
		7-12 MONTHS AGO	3	
		MORE THAN A YEAR AGO	4	
		DON'T KNOW	8	
303	The last time you were tested, did you ask for the test, was it offered to you, or was it required?	ASKED FOR THE TEST	1	
		IT WAS OFFERED	2	
		IT WAS REQUIRED	3	
		DON'T KNOW	8	

<p>304 Where did you have the last test?</p> <p><b>CIRCLE ONLY ONE ANSWER</b></p>	<p>GOVT HOSPITAL/ HEALTH CENTRE 1</p> <p>MISSION HOSPITAL/CLINIC 2</p> <p>VCT CENTRE 3</p> <p>PRIVATE CLINIC 4</p> <p>CBO/NGO VCT 5</p> <p>KEMRI 6</p> <p>OTHER (Specify) _____ 96</p>	
	<p>305 How was testing done the last time you took a test, was it by giving blood, saliva or something else?</p> <p>Blood 1</p> <p>Saliva 2</p> <p>Other _____ 96</p> <p>(Specify)</p>	
	<p>306 I do not want to know the result, but did you get the results of your last test?</p> <p>Yes 1 ? 310</p> <p>NO 2</p> <p>DK 8</p>	
<p>307 What is the main reason why you did not get the results?</p> <p><b>CIRCLE ONLY ONE: DO NOT PROBE ONLY ONE ANSWER POSSIBLE</b></p>	<p>Afraid to know results 1</p> <p>Forgot to get results 2</p> <p>No transport 3</p> <p>No time to get results 4</p> <p>Not necessary 5</p> <p>Already knew my status before the test 6</p> <p>Did not care about the results 7</p> <p>Other _____ 96</p> <p>(Specify)</p>	
<p>308 Do you know where a person can get tested to find out if they have the virus that causes AIDS?</p>	<p>Yes 1</p> <p>NO 2 ? 310</p> <p>DK 8 ? 310</p>	
<p>309 Where can a person have this test?</p> <p><b>CIRCLE ALL MENTIONED</b></p>	<p>GOVT HOSPITAL/ HEALTH CENTRE A</p> <p>MISSION HOSPITAL/CLINIC B</p> <p>VCT CENTRE C</p> <p>PRIVATE CLINIC D</p> <p>CBO/NGO VCT E</p> <p>KEMRI F</p> <p>OTHER _____ G</p> <p>(Specify)</p>	
	<p>310 Do you think it is important for people to know if they have the virus that causes AIDS through testing?</p> <p>Yes 1</p> <p>NO 2 ? 312</p> <p>DK 8 ? 312</p>	
<p>311 Why do you think it is important for people to know if they have the virus?</p> <p><b>CIRCLE ALL MENTIONED: PROBE BY ASKING "Anything else"</b></p>	<p>Reduce risk of getting infected A</p> <p>Reduce risk of infecting others B</p> <p>To seek care C</p> <p>To plan for future D</p> <p>OTHER _____ E</p> <p>(Specify)</p>	

312 Would you want to be tested/retested for the virus that causes AIDS and know the result of the test?		Yes	1 ?	314
		NO	2	
		DK	8	
313 Why not?	Already know status	A		
	Don't want to know	B		
<b>CIRCLE ALL MENTIONED</b>	Testing is of no benefit	C		
	Afraid of dying faster	D		
	My spouse/partner refuses/not approve	E		
	My parents/guardian would not approve	F		
	Other _____	G		
		(Specify)		
314 Do you know of services that are available to a person who is infected by the virus that causes AIDS?		Yes	1	
		NO	2 ?	401
		DK	8 ?	401
315 Which services can a person infected by the virus that causes AIDS need?				
	TESTING,COUNSELLING	A		
	PMTCT	B		
Anything else?	ARV TREATMENT	C		
<b>CIRCLE ALL MENTIONED</b>	OTHER TREATMENT	D		
	FAMILY PLANNING	E		
	NUTRITIONAL SUPPORT	F		
	MICRO-CREDIT PROGRAMS	G		
	SPIRITUAL SUPPORT	H		
	LEGAL AID	I		
	OTHER _____	J		
		(Specify)		
316 Where can someone in this community get the services that you have mentioned?				
	GOVT HOSPITAL/ HEALTH CENTRE	A		
Anywhere else?	MISSION HOSPITAL/CLINIC	B		
<b>CIRCLE ALL MENTIONED</b>	VCT CENTRE	C		
	PRIVATE CLINIC	D		
	CBO/NGO VCT	E		
	KEMRI	F		
	OTHER _____	G		
		(Specify)		
<b>4 MARRIAGE AND SEXUAL ACTIVITY</b>				
401 Are you currently married or living with someone as if married?				
		YES CURRENTLY MARRIED	1 ?	403
		YES LIVING WITH SOMEONE	2 ?	403
		YES LIVED WITH SOMEONE	3	
		NO, NOT IN A UNION	4	
402 Have you ever been married or lived with someone as if married?				
		YES, FORMERLY MARRIED	1	
		YES, LIVED WITH SOMEONE	2	
		NO	3 ?	404
403 How old were you when you first got married/started living with someone?		AGE IN YEARS	<input type="text"/>	<input type="text"/>



410c In the past 3 months, how many times was a condom used during sexual intercourse with this person? RECORD NUMBER OF TIMES. IF NO CONDOM WAS USED CIRCLE '00'		<input type="text"/>	<input type="text"/>	?	411
		0	0		
		DK	9	8	? 411
REFUSED TO ANSWER		9	7	?	411
410d What was the main reason a condom was NOT used on this occasion?					
		Wanted to get pregnant		1	
		Partner refused		2	
		Didn't have a condom		3	
		Felt safe		4	
		Refused to answer		5	
		To enjoy sex better		6	
		Don't Know		7	
		Other _____		96	
		(Specify)			
411 In total, how many different partners have you had sex with in the last 12 months? RECORD NUMBER OF TIMES, IF MORE THAN 95, WRITE '95'					
		<input type="text"/>	<input type="text"/>		
<b>5 PRACTICES</b>					
<b>5A MALE CIRCUMCISION THIS SECTION TO BE ADMINISTERED TO MALES ONLY</b>					
		IF FEMALE		?	5B
		Yes		1	
501 Are you circumcised?		NO		2	? 5B
		DK		8	? 5B
		REFUSED TO ANSWER		97	? 5B
502 At what age did you get circumcised?					
		DD	<input type="text"/>	<input type="text"/>	
		MM	<input type="text"/>	<input type="text"/>	
		YY	<input type="text"/>	<input type="text"/>	
		DK	<input type="text"/>	<input type="text"/>	
503 Where did the circumcision take place?					
		Rural home		1	
		Urban home		2	
		Hospital/Clinic		3	
		Don't Know		4	
		Other _____		96	
		(Specify)			
504 Why were you circumcised?					
CIRCLE ONE		Religious reasons		1	
		Cultural rites		2	
		Health reasons		3	
		Forced		4	
		Peer pressure		5	
		Don't know		6	
		Other _____		96	
		(SPECIFY)			

<b>5B QUESTIONS ON PUBIC HAIR REMOVAL PRACTICE</b>					
<b>(To be administered to both Males and Females)</b>					
Now I would like to ask some questions about pubic hair removal practice. I know these questions might sound intrusive but are important for us to understand this subject better.				SKIPS	
505	Some people sometimes remove their pubic hair. Have you ever heard of this practice?	Yes	1		
		NO	2?	6	
506	Have you ever removed/shaved your pubic hair?	Yes	1		
		NO	2?	515	
507	At about what age did you start this practice of removing your pubic hair?				
	AGE IN YEARS	<input type="text"/>	<input type="text"/>		
508	How often do you remove your pubic hair?				
		At least once a week	1		
		At least once every 2 weeks	2		
	CIRCLE ONLY ONE ANSWER	At least once a month	3		
		At least once every 2-6 months	4		
		At least once every 7-12 months	5		
		Other (Specify frequency).....	6		
509	When was the last time you removed your pubic hair?				
	RECORD DURATION	DAYS	<input type="text"/>	<input type="text"/>	
		MONTHS	<input type="text"/>	<input type="text"/>	
		YEARS	<input type="text"/>	<input type="text"/>	
510	What is the main reason why you remove your pubic hair?				
		Religious reasons	1		
		To avoid getting STI	2		
		Hygiene reasons	3		
		Cultural reasons	4		
	CIRCLE ONLY ONE	To enjoy sex/avoid discomfort	5		
		Beauty	6		
		My partner told me to do so	7		
		Medical reasons	8		
		Peer pressure	9		
		No reason	10		
		Other_____	96		
		(Specify)			
511	Do you normally remove all the hair to the skin or just cut it short?				
		Remove everything to the skin	1		
		Just make/cut it shorter	2		
		Plucking	3		

<p>512 What do you normally use for removing your pubic hair?</p> <p>CIRCLE ONLY ONE</p>	<p>Razors 1</p> <p>Electric clipper 2</p> <p>Chemical depilators 3</p> <p>Waxing 4</p> <p>Manual plucking 5</p> <p>Scissors 6</p> <p>Other (Specify)..... 96</p>	
<p>513 Do you normally get undesirable effects during/after removing your pubic hair?</p>	<p>Yes 1</p> <p>NO 2 ? 516</p>	
<p>514 What effects do you normally get?</p> <p>CIRCLE ALL MENTIONED</p>	<p>Itchiness A</p> <p>Razor bumps B</p> <p>Small abscesses/pimples C</p> <p>Redness of skin D</p> <p>Pain E</p> <p>Cuts F</p> <p>Other (Specify)..... G</p> <p style="text-align: center;"><b>SKIP TO 516</b></p>	
<p>515 Why don't you remove your pubic hair?</p> <p>CIRCLE ONLY ONE</p>	<p>To avoid getting STI/HIV 1</p> <p>To enjoy sex 2</p> <p>It is difficult to remove/shave 3</p> <p>Fear of itchiness/side effects 4</p> <p>My partner told me not to 5</p> <p>I like it that way/beauty 6</p> <p>I don't know how to 7</p> <p>No reason 8</p> <p>Other _____ 96</p> <p style="text-align: center;">(Specify)</p>	
<p>516 Does your spouse/partner remove his/her pubic hair?</p> <p>CIRCLE ONLY ONE</p>	<p>Yes 1</p> <p>No 2 ? 6</p> <p>Don't have partner 3 ? 6</p> <p>DK 8 ? 6</p>	
<p>517 How often does he/she remove the pubic hair?</p> <p>CIRCLE ONLY ONE ANSWER</p>	<p>At least once a week 1</p> <p>At least once every 2 weeks 2</p> <p>At least once a month 3</p> <p>At least once every 2-6 months 4</p> <p>At least once every 7-12 months 5</p> <p>Other (Specify frequency)..... 6</p> <p>Don't know 8</p>	

518	What does he/she use for removing his/her pubic hair?	<p style="text-align: right;">Razors 1  Electric clipper 2  Chemical depilators 3  Waxing 4  Manual plucking 5  Scissors 6  Other (Specify)..... 96</p>	
CIRCLE ONLY ONE			
<b>6</b>	<b>REFERRAL</b>		
601	CHECK 109 & 110, IF RESPONDENT REFUSED TO GIVE BLOOD: Would you tell me the main reason you refused to give blood for this study?  CIRCLE ONLY ONE	<p style="text-align: right;">Fear of being pricked 1  Don't want to give blood 2  Needs permission from partner 3  Guardian/parent refused 4  Needs permission from guardian 5  Spouse/partner refused 6  Afraid results will be known by others 7  Health reasons 8  Religious reasons 9  Other _____ 96  (Specify)</p>	
602	Would you like to have information about where you can go if you wish to have an HIV test and to be told your results?  IF YES, GIVE LEAFLET AND INDICATE NEAREST VCT SERVICES	<p style="text-align: right;">Yes 1  NO 2</p>	

603 To help us improve the way we conduct this type of research in future, I want to ask you a final question about the interview itself.							
603a	Were there any questions that you found difficult to answer in this interview?	Yes 1 No 2 ?	604				
603 b	If yes, which questions were difficult? <b>CIRCLE ALL MENTIONED</b>	Knowledge about HIV/AIDS A Testing History B Marriage and sexual activity C Male circumcision D Pubic hair removal E Referral questions F					
603c	Why were these questions difficult to answer?	The questions were too personal 1 The questions were too private 2 I did not understand them 3 They seemed to be rude 4 They were asked impolitely 5 Other, _____ 6 Specify					
604	RESULT OF INTERVIEW	INTERVIEW COMPLETED AND BLOOD SAMPLE TAKEN 1 ? INTERVIEW COMPLETED, REFUSED TO GIVE BLOOD 2 ? GAVE BLOOD, REFUSED INTERVIEW 3 ? REFUSED BOTH 4 ? OUTSIDE AGE RANGE 5 ? PARTLY COMPLETED 6 ? MISSED CASES 7 OTHER ..... 96 ?	606 606 606 606 606 606 606				
605	Reasons for missed out cases	DIED 1 OUT-MIGRATED 2 ABSENT FROM HOME 3 FAILED TO FIND RESPONDENT 4 OTHER _____ 96 (Specify)					
606	END INTERVIEW AND THANK RESPONDENT RECORD THE END TIME (24 hour clock) (HH/MM) FIELD WORKERS REMARKS/COMMENTS ABOUT INTERVIEW ..... ..... ..... ..... ..... .....	<table border="1" style="display: inline-table; vertical-align: top;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					