FORM NO ☐☐☐

FORM C
VIRTUAL MAPPING OF MEN WHO HAVE SEX WITH MEN
MSM PROFILE

VIRTUAL SITE NAME AND CODE:_____ ☐☐ DATE: ☐☐ ☐☐ ☐☐☐☐

TYPE OF VIRTUAL SITE: WEBSITE ☐ APP ☐ FACEBOOK ☐ WHATSAPP ☐

COUNTY: _____ ☐ VM NAME : _____

FIELD COORDINATOR NAME : _____ SIGNATURE _____

INFORMED CONSENT

- ***Use this form for subjects who are aged 18 years or above.***
- ***Before starting the interview, the interviewer should ask the subject in which language he/she would prefer to be interviewed and the appropriate language consent form and questionnaire should be used.***
- ***The interviewer should introduce him/herself and greet the respondent.***

The National AIDS and STD Control Program (NASCOP) in partnership with University of Manitoba (UoM), Men Against AIDS Youth Group (MAAYGO), Mamboleo Peer Empowerment Group (MPEG), HIV and AIDS Peoples Alliance of Kenya (HAPA Kenya) and National SOGIE Research Advisory Committee (G10) is conducting assessment to learn more about the problems affecting men who have sex with men (MSM), who are at a higher risk of acquiring HIV, Hepatitis and other Sexually Transmitted Infections. In this assessment, we are interviewing Men who have Sex with Men and wanted to ask few questions about your use of various internet/Apps/Facebook group/Whatsapp groups to meet male sexual partners. The interview will take roughly 15 - 20 minutes. There may be some questions, which you may find sensitive in nature. The assessment is entirely voluntary and you have no obligation to participate. If you agree to participate in the assessment, you may also decide not to answer some questions, or stop at any time during the interview. If you decide not to participate, we respect your decision. You will be compensated Ksh. 500 to cover your travel costs incurred to participate in this assessment. The results of this assessment will be used to develop programs and policies that can help prevent HIV/AIDS and its spread, as well as to develop related services.

This assessment is completely CONFIDENTIAL and WE DO NOT NEED TO KNOW YOUR NAME or any other information which can identify you. If you have any questions about your rights as a respondent participating in this assessment or if you wish to discuss your participation in the survey, please contact: Helgar Musyoki, NASCOP, Ph:0722497484, Kennedy Olango, MAAYGO, Ph:0725734542, Samuel Kuria, MPEG, Ph:0724898250 and Martin Kyana, HAPA Kenya, Ph:0721755385.

Have you ever had sex with men **Yes** ☐ **No** ☐ → END

DO YOU AGREE TO PARTICIPATE? **Yes** ☐ **No** ☐

(*Interviewer: if yes, sign and date below to indicate that informed consent was given by the participant. If answer is no, approach the next eligible subject)*

Sl	QUESTION	CATEOGRY	SKIP
1	How old are you?	AGE IN COMPLETED YEARS ☐☐	
2	What is the highest level of education you attended?	NO FORMAL EDUCATION ..... 1 PRIMARY ..... 2 SECONDARY ..... 3 TERTIARY/COLLEGE/UNIVERSITY ..... 4 OTHERS(SPECIFY) 5	
3	What is your marital status?	SINGLE ..... 1 MARRIED ..... 2 DIVORCED/WIDOWED/SEPARATED ..... 3 NO ANSWER 99	
4	In which Sub county do you live?	SUBCOUNTY:_____ ☐☐	
5	How do you describe your sexual orientation?	GAY ..... 1 BISEXUAL ..... 2 ASEXUAL ..... 3 HETEROSEXUAL ..... 4 OTHERS (SPECIFY) ..... 97 NO ANSWER 99	
Sl	**QUESTION**	**CATEOGRY**	**SKIP**

6	What is your gender identity ?	MALE.....1 FEMALE.....2 TRANSGENDER.....3 DON'T KNOW.....98 NO ANSWER.....99	
7	What is you sexual role?	BOTTOM.....1 TOP.....2 VERSATILE.....3 OTHERS (SPECIFY).....97 NO ANSWER.....99	
8	For how long have you been engaged in anal sex with a man?	NUMBER OF YEARS ☐☐ NEVER HAD ANAL.....95 → DON'T KNOW.....98 NO ANSWER.....99	END
9	How many male sexual partners have you had in the last one month?	NUMBER OF PARTNERS ☐☐ NONE.....00 → DON'T KNOW.....98 NO ANSWER.....99	END
10	Do you charge for sex?	YES.....1 NO.....0 NO ANSWER.....99	
11	In the last one month, have you ever visited a physical location (streets/public place, home etc) to meet other male sexual partners?	YES.....1 NO.....0 NO ANSWER.....9	
12	How many different internet pages or mobile apps have you used in the last month to meet other male sexual partners ?	NUMBER OF INTERNET/APP..... ☐ FACEBOOK..... ☐ WHATSAPP..... ☐	
13	Which days of the week do you use internet/mobile App/Facebook/Whatsapp to meet other male sexual partners? **MULTIPLE RESPONSE**	MONDAY.....A TUESDAY.....B WEDNESDAY.....C THRUSDAY.....D FRIDAY.....E SATURDAY.....F SUNDAY.....G	
14	Which time of the day do you use internet/mobile App/ Facebook/Whatsapp to meet other male sexual partners? **MULTIPLE RESPONSE**	MORNING.....A AFTERNOON.....B EVENING.....C NIGHT.....D	

15	Now I would like to know the 5 most common websites/Apps/Facebook/Whatsapp that the MSMs use for network/connect/meet their sexual partners?				
S.N	PLEASE LIST 5 MOST COMMOM WEBSITE/APP/FACEBOOK/WHATSAPP THAT THE MSMs USE.	NO. OF PROFILES YOU HAVE ON THIS WEBSITE	NO. OF PEOPLE YOU CONNECTED THROUGH THIS SITE IN THE LAST ONE WEEK	NO. OF MEN WITH WHOM YOU HAD ANAL SEX LAST WEEK	HOW MANY AMONG THEM, WITH MONEY/ BENEFIT INVOLVED
1					
2					
3					
4					
5					

Sl	QUESTION	CATEOGRY	SKIP
16	Have you ever heard of an organization/NGO in this County offering health services for men who have sex with men?	YES....1 NO....0 → DON'T KNOW....98 NO ANSWER....99	**19**
17	Have you ever been contacted by a peer educator/outreach worker in the last 3 months?	YES....1 NO....0 → DON'T KNOW....98 NO ANSWER....99	19
18	The last time when you were contacted by a peer educator/outreach worker, how/where did he contact you?	AT HOME....1 AT PHYSICAL LOCATION OF MSMs....2 THROUGH PHONE....3 OTHER....97 NO ANSWER....99	21
19	**IF ANSWER IS 'NO' IN 16 or 17,** Would you like to receive HIV related information services ?	YES....1 NO....0 → DON'T KNOW....98 NO ANSWER....99	21
20	Which source/s would you like to receive HIV related information/services?	PEER EDUCATOR/ORW....A INTERNET/WEBSITE....B PHONE....C ELECTRONIC/PRINT MEDIA....D OTHERS....X NO ANSWER....Z	
21	Have you ever visited a clinic or drop-in Centre in or around your town that provides health information or services to MSM/MSW in the past 3 months?	YES....1 NO....0 DON'T KNOW....98 NO ANSWER....99	
22	Have you ever been tested for HIV?	YES....1 NO....0 → DON'T KNOW....98 NO ANSWER....99	26
23	How many times have you tested for HIV in the last 12 months?	NUMBER OF TIMES ☐☐ NONE....00 → DON'T KNOW....98 NO ANSWER....99	26
24	When did you have your MOST recent HIV test?	NUMBER OF MONTHS AGO ☐☐ DON'T KNOW....98 NO ANSWER....99	
25	Which was the place where you visited for the most recent HIV test?	GOVERNMENT FACILITY....1 PRIVATE FACILITY....2 MSM FRIENDLY CLINICS....3 SELF TEST....4 OTHERS....5 NO ANSWER....99	28
26	Was there an occasion in the past 12 months, where you wanted to undergo for HIV testing but could not do?	YES....1 NO....0 DON'T KNOW....98 NO ANSWER....99	
27	What was the reason/s for not undergoing HIV testing in the past 12 months? **MORE THAN ONE OPTION POSSIBLE**	I DON'T THINK I HAVE HIV/NO REASON TO TEST A AFRAID OF LEARNING HIV STATUS....B LACK OF CONFIDENTIALITY....C TAKE TOO MUCH TIME....D NOT EASILY ACCESSIBLE....E NOT AWARE OF A PLACE....F DID NOT WANT TO GO TO A FACILITY THEN....G OTHERS (SPECIFY)....X NO ANSWER....Z	
28	Do you know a place where HIV testing can be done?	YES....1 NO....0 → DON'T KNOW....98 NO ANSWER....99	30
29	Which is/are the place/s where you can visit for HIV testing? **MORE THAN ONE OPTION POSSIBLE**	GOVERNMENT FACILITY....A PRIVATE FACILITY....B MSM FRIENDLY CLINICS....C SELF TESTS....D OTHERS....X NO ANSWER....Z	

Sl	QUESTION	CATEOGRY	SKIP
30	Have you heard of HIV self-testing?	YES....1 NO....0 DON'T KNOW....98 NO ANSWER....99	
INST: PLEASE EXPLAIN THE HIV SELF TEST TO THE RESPONDENTS HIV Self Testing is a process in which a person collects his or her own specimen (oral fluid or blood) and then performs an HIV test and interprets the results, often in a private setting, either alone or with someone he/she trusts. HIVST does not provide a definite HIV positive diagnosis. All reactive (positive) self-tests results need to be confirmed by a trained provider.			
31	Have you ever used HIV Self-Testing ?	YES....1 NO....0 DON'T KNOW....98 NO ANSWER....99	
32	If HIV self-testing is made available to you , how likely would you use it?	MORE LIKELY TO TEST....1 EQUALIY LIKELY TO TEST....2 LESS LIKELY TO TEST....3 DON'T KNOW....98 NO ANSWER....99	35
33	Why do you think you would be more likely to test for HIV using HIV self-testing? **MORE THAN ONE RESPONSE**	PRIVACY....A CONVENIENCE....B NOONE KNOW THE STATUS....C NO BLOOD SAMPLE/PRICK REQUIRED....D NO NEED TO VISIT HEALTH FACILITY....E CAN DO AT HOME/AT CONVENIENCE....F OTHERS....X	
34	How likely would you repeat HIV test using a HIV self test?	ONCE IN 3 MONTHS....1 ONCE IN 6 MONTHS....2 ONCE IN AN YEAR....3 LESS THAN ONCE A YEAR....4 DON'T KNOW....98 NO ANSWER....99	
35	What do you think are the main disadvantages of HIV self-testing? **MORE THAN ONE OPTION POSSIBLE**	NO DISADVANTAGE....A LACK OF POST TEST CONSELING INCREASE DISTRESS....B POSSIBILITY OF SELF-HARM....C POSSIBILITY OF HARMING OTHERS....D REDUCED CHANCE OF DISCLOSURE/ ENROLLMENT IN CARE....E OTHERS....X	
36	How would you like to receive HIV self-test kits? **MORE THAN ONE OPTION POSSIBLE**	PEER EDUCTOR/ORW....A VCT....B NGO/PROGRAMS....C PHARMACY....D FRIENDS....E OTHERS....X NO ANWER....Z	

SIGNED BY INTERVIEWER:_____ SIGNED BY RESPONDENT:_____

THANKS