

# QUESTIONNAIRE FOR MEN WHO HAVE SEX WITH MEN

## BLOCK A. FILLS IN BY THE INTERVIEWER

A.1. City \_\_\_\_\_

A.2.1. Respondent's QR code \_\_\_\_\_

A.2.2. Respondent's QR code \_\_\_\_\_ (please enter again) [duplication to increase data reliability]

A.3.1. Date of interview (FULL DD/MM/YYYY format) / \_\_\_\_\_.\_\_\_\_\_./2024

A.3.2. Date of interview (FULL DD/MM/YYYY format) / \_\_\_\_\_.\_\_\_\_\_./2024 (please enter again) [duplication to increase data reliability]

A.4. Interview start time \_\_\_\_\_ hours. \_\_\_\_\_ min.

## BLOCK B. SOCIO-DEMOGRAPHIC CHARACTERISTICS

B.1. Specify the year of your birth \_\_\_\_\_ [Previous rounds question]

B.2. Specify the month of your birth \_\_\_\_\_ [Previous rounds question]

B.3. Specify the day of your birth \_\_\_\_\_ [Previous rounds question]

B.4. Please specify your age \_\_\_\_\_ full years [Previous rounds question]

*Interviewer! In case the respondent is 16 years younger → complete the interview and fill out the inconsistency form!*

*If the participant refuses or is unable to provide an answer, enter «bbb»/ «bb»*

B.5.	Specify first three letters of your last name in Ukrainian	
B.6.	Specify first two letters of your first name in Ukrainian	
B.7.	Specify first two letters of your patronymic in Ukrainian	

B.8. *Let me ask you more questions about your location. We don't ask for an address, but we want to know what area of the city you live in or spend most of your time?*  
*Interviewer! Show the respondent CARD 1 with a map of the city divided into quadrants*

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B.9. Choose ONE option that describes your official marital status: [Previous rounds question]

1. single, never married
2. married (in a registered marriage with a woman or a man)
3. separated/divorced
4. widower

5. prefer not to answer

**B.10. Who do you live with and run a household with? Choose ONE option** [Previous rounds question]

1. alone - go to B.12.
2. with parents / relatives
3. with roommates, e.g. in a dormitory or in a rented apartment with other tenants
4. with a male partner
5. with a female partner
6. prefer not to answer

**B.11. How many people are living in your household (including yourself)?** \_\_\_\_\_  
("98" if Don't know, "99" if Prefer not to answer)

**B.12. Please describe the home where you live:**

1. It is owned or being bought by you (or someone in the household)
2. It is rented for money by you (or someone in the household)
3. It is occupied without payment or money or rent
4. I have no permanent residence
5. other (specify) \_\_\_\_\_
6. prefer not to answer

**B.13. What level of education do you have? Please select ONE option** [Previous rounds question]

1. elementary (incomplete 9 classes)
2. basic (incomplete) (full 9 classes)
3. full general secondary or vocational (11 classes, school) or unfinished higher
4. basic higher (universities of I-II levels of accreditation, technical school)
5. higher (bachelor, specialist and master after university/institute)
6. scientific degree (candidate or doctor of sciences)
7. prefer not to answer

**B.14. What best corresponds to your current work situation? Please select ONE option**

1. working full time
2. working part time
3. not working and not looking for work
4. not working, but looking for a job
5. disabled or retired
6. currently in school/college, university (student)
7. other (specify) \_\_\_\_\_
8. prefer not to answer (**DO NOT read!**)

**B.16. Please tell, what was your personal income for the last 30 days? Please take into account income from both official and informal activities, pensions, scholarships,**

**subsidies, as well as assistance, gifts, products, things from relatives and friends**  
\_\_\_\_\_ UAH [Previous rounds question] ("99" if Prefer not to answer)

*Interviewer! Ask the following two questions only to those who answered questions B.10 and B.11 that their household consists of more than 1 person (participant himself).*

**B.17. Thinking about all the people in your household, who earns incomes to support your household?**

1. participant lives alone (**DO NOT read!**)
2. only me (the participant) earn incomes
3. my parents earn
4. other relatives
5. spouse/partner
6. friend
7. others or other people (non-household members), please specify \_\_\_\_\_
8. I do not remember (**DO NOT read!**)
9. prefer not to answer (**DO NOT read!**)

### BLOCK C. SEXUAL ORIENTATION AND GENDER IDENTITY

**C.1. Are you sexually attracted to...? Select only ONE option** [Previous rounds question]

1. exclusively men
2. mostly men, but sometimes women
3. men and women equally
4. mostly women, but sometimes men
5. exclusively women
6. I have not yet decided (**DO NOT read!**)
7. other \_\_\_\_\_

*Interviewer! Explain to the respondent: Transgender people are people whose gender identity is different from the gender that was registered at birth. Non-binary people are those who do not identify themselves as either men or women.*

**C.2. Do you consider yourself a transgender or non-binary person?** [Previous rounds question]

1. yes, transgender women
2. yes, transgender men
3. yes, a non-binary person
4. no
5. what else? \_\_\_\_\_

## BLOCK D. POPULATION SIZE ESTIMATION. PART I

*Let me ask you a few questions about how you meet other men. Please remember that all this information will be anonymous*

**D.1. Do you use the Internet or mobile applications to find male partners?** [Previous rounds question]

1. yes
2. no – go to D.4.

**D.2. Do you have profiles (personal pages) on websites or mobile applications now?** [Previous rounds question]

1. yes
2. no – go to D.4.

**D.3. Indicate if you used sites or mobile applications that will now be listed, and if so, how many? Have you logged in within the last 30 days (month)?** [Previous rounds question]

*Interviewer! Name the respondent sites in turn so as to go through the ENTIRE table. Check "Yes" only in the lines that correspond to the presence of profiles of the respondent*

The name of the site or mobile application	Have you ever used site or mobile application for searching male partners?		Have you logged in within the last 30 days (month)?		Have you used this app in the last 30 days in the city where we are now?		
	yes	if yes, how many profiles	no	yes	no	yes	no
<b>D.3.1. Bluesystem</b>	1	—	2	1	2	1	2
<b>D.3.2. Planetromeo</b>	1	—	2	1	2	1	2
<b>D.3.3. Mobile application Hornet</b>	1	—	2	1	2	1	2
<b>D.3.4. Mobile application Grindr</b>	1	—	2	1	2	1	2
<b>D.3.5. Mobile application Badoo</b>	1	—	2	1	2	1	2
<b>D.3.6. Other dating sites or apps (how exactly?)</b>	1	—	2	1	2	1	2

**D.4. How have you been looking for male partners in the last 6 months? Please tick all that apply** [Previous rounds question]

*Interviewer! Check so that there was no notice both for "Has not been looking..." and other ways!*

1. in clubs, cafes, bars, discos, saunas
2. through friends, acquaintances
3. on cruising areas (for example, in parks, on beaches, in other public places)
4. at private gay parties
5. in organizations for gays and LGBT people
6. using special applications for mobile phones
7. using the internet (at the dating sites)
8. using the Internet (in social nets)
9. in other ways (specify) \_\_\_\_\_
10. has not been looking for male partners for the last 6 months (**DO NOT read!**)

**D.5. Did you take part in just such a study in 2021, when you were asked about your sexual behavior, you took an HIV test and received coupons? [Question for PSE]**

1. yes, in this city
2. yes, in another city (\_\_\_\_\_)
3. no
4. I do not remember (**DO NOT read!**)

**D.6. Did you take part in the study of transgender people in 2020, when you were asked about your sexual behavior, you took an HIV test and received coupons? [Question for PSE]**

1. yes, in this city
2. yes, in another city (\_\_\_\_\_)
3. no
4. I do not remember (**DO NOT read!**)

**D.7. Did you take part in the EMIS – The European MSM Internet Survey in 2023-24, when you were asked about your sexual behavior etc. online? [Question for PSE]**

1. yes, at that time you lived in this city
2. yes, at that time you lived in another city (please specify: \_\_\_\_\_)
3. no
4. I do not remember (**DO NOT read!**)

**BLOCK U. ESTIMATION OF THE NUMBER. PART II. NETWORK SIZE**

**U.1. How many MSM do you know? Not only from this city, but in general.**

**Acquaintances are people you know by sight and name, can contact if necessary, and have seen or talked to in the last 2 years. They in turn know you, can contact you, and have communicated with you.**

**In the context of this study meaning males who had at least one oral or anal sexual contact with a male within the last 6 months. (Answer: A)**

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*Interviewer! If the respondent finds it difficult, say, "Can you estimate approximately? Think about the men you may be living with or interacting with, the men who live in other parts of the city, the different men." The participant must give an answer, ZERO cannot be the answer!*

**U.2. Of these A people, how many live in this city? (Answer: B)**

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*Interviewer! The respondent must give an answer, ZERO cannot be the answer! Check: this number cannot be greater than the answer to the previous question!*

**U.3. Of these B people, how many are age 16 or older? (Answer: C)**

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*Interviewer! The respondent must give an answer, ZERO cannot be the answer! Check: this number cannot be greater than the answer to the previous question!*

**U.4. Of these C people, how many had oral or anal sex with another man in the last 6 months? (Answer: D)**

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*Interviewer! The respondent must give an answer, ZERO cannot be the answer! Check: this number cannot be greater than the answer to the previous question!*

**U.5. Of these D people, how many have you seen in the last 30 days? (Answer: E)**

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*Interviewer! The respondent must give an answer, ZERO cannot be the answer! Check: this number cannot be greater than the answer to the previous question!*

**U.6. Of these E people, how many have you seen in the last 14 days? (Answer: E)**

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*Interviewer! The respondent must give an answer, ZERO cannot be the answer! Check: this number cannot be greater than the answer to the previous question!*

**BLOCK Q. POPULATION SIZE ESTIMATION. PART III ("PRIVATIZED NETWORK SAMPLING" METHOD)**

Now I'm going to ask you a few questions that may seem complicated and incomprehensible. But these questions are very important for estimating the size of the group of men who have sex with men in this city.

As you probably know, estimating the number of men who have sex with men is important for advocating for the needs of this community, as well as for properly assessing and planning the resources that will be allocated for prevention programs and other services to be provided to the community.

I will ask you the first letter of your first name (in full form, e.g. "Oleksiy", not "Lesha", so the first letter would be "O") and the first letter of your last name (e.g. "S[h]" for "Shevchenko"). Next, I will enter these two letters into a special application that will turn them into a hash - a code that will be unique to these two letters, but from this code it will not be possible to get back these letters of your first and last name. I will also ask you to tell me or type in the FOUR LAST digits of your main telephone number (the one you use when you talk to other men). These four digits will be converted into a code using the same scheme. As a result, we will be able to get a unique hash code based on the first letters of your first and last name and phone number, but no one (not even us) will be able to get your first name, last name or phone number back. The letters of your first and last name, as well as the digits of your phone number, will not be stored anywhere.

Then I will ask you to find the telephone contacts of several (optimally 5) of your MSM acquaintances WHO LIVE IN THIS CITY and with whom you communicate most often in your phone's contact book. I will ask them to create a hash code based on their first letter of their first name and first letter of their last name, as well as the LAST FOUR digits of their phone number. We will record only the unique hash code of your friends. It will not be possible to recreate their first names, last names or phone numbers based on these codes.

At the stage of analysis, we will be able to analyze the coincidences between the codes named by different participants and try to calculate the estimated number of MSM in this city based on the intersections of personal social networks.

**Q.1. Now I will ask you a few questions about you. The answers will be used to create a unique anonymous code [PSE question]**

*If the participant refuses to answer, enter "98", if they do not have a phone, enter "97".*

No	Question	Hash codes
Q.1.1.	Encode the first letter of your full first name and the first letter of your last name	
Q.1.3.	Encode the last 4 digits of your phone number	

**Q.2. I want to ask you the same questions about your (optimally at least 5) acquaintances who have sex with men and LIVE IN OUR CITY and who are over 16 years old. Please select 5 phone numbers and provide the same information about them (separately for each column) [PSE question]**

*If the participant refuses to answer, write "98" if they do not have their phone numbers (for example, they communicate only through Telegram or dating apps - write '97', if they do not know the real names of their friends - write "96".*

No	Question	Answer options	Q.2 .1. First	Q.2 .2. Second	Q.2 .3. Third	Q.2 .4. Fourth	Q.2 .5. Fifth
Q.2.1.	Does he live in our city?	1 - yes 2 - no					
Q.2.2.	Is he over 16 years old?	1 - yes 2 - no					
Q.2.3.	Encode the first letter of his full first name and the first letter of his last name						
Q.2.4.	Encode the last 4 digits of his phone number						

**For the correct operation of the population estimation method, I also need to ask you the following question.**

**Q.3. How many telephone numbers that you regularly use do you have?**

#### Scale-up

*I will be asking you about all your **acquaintances aged 10 and above who reside in Ukraine**. 'Acquaintances' refer to all the people you know and who know you by appearance or name, with whom you can contact if necessary and with whom you have interacted personally, by phone, or via email within **the last two years**. These can be members of your family or other relatives, friends, neighbors, coworkers, or people you learn from. It may also include those with whom you have not very good relations or whom you consider your enemies*

*I will not ask you about specific individuals or inquire about any personal information about your acquaintances; I don't even need to know their names. I am only interested in knowing the quantity of the individuals you are referring to.*

*Interviewer! Read the statements to the respondent one by one so as to go through the ENTIRE table in sequence*

**Q3. Now I will ask you about the number of your acquaintances in general. Please tell me, how many do you have...?**

**Q4. How many of these people know that you have sex with men?**

*Interviewer! If the respondent finds it difficult, say, "Can you estimate approximately? The participant must give an answer!"*

Nº	Category of acquaintances	Q3. Number of these people IN GENERAL	Q4. Number of these people who KNOW
1	Family members		
2	other relatives		
3	Friends and companions from MSM community		
4	friends and companions not among the MSM		
5	co-workers and colleagues		
6	Acquaintances currently studying together		
7	neighbors		
8	other acquaintances		

*Interviewer! Each row of the table must have TWO digits*

**BLOCK G. SEXUAL INTERCOURSE WITH MEN**

***Let me ask you a few questions about your intimate life with other men. Please remember that all this information will be anonymous***

**G.1. How old were you when you had your FIRST sexual contact (oral or anal) with another male? \_\_\_\_\_ full years [Previous rounds question]**

*Interviewer! In case the respondent does not remember → enter 99!*

**G.3. Think about the last 6 months. Remember if you had ANAL sex with a MAN during this period? [Previous rounds question, GAM]**

1. yes
2. no - go to G.16.
3. difficult to answer (DO NOT read!) - go to G.16.

**G.4. How many MEN have you had sex within the last 6 months? [Previous rounds question]** \_\_\_\_\_

*Interviewer! In case the respondent does not want to answer, or do not remember → enter 999!*

**G.5. In the last 30 days, when you used a condom during sex with a MAN, were there any times when... (one answer for each line)**

No		Yes	No	I have no sex in the last 30 days	Didn't use a condom in the last 30 days	Do not know / do not remember (do not read out)	Refusal to answer (do not read out)
1	Did the condom break or slip?	1	2	3	4	98	99
2	Sex started without a condom (was worn during the process)	1	2	3	4	98	99
3	Sex continued after the condom was removed	1	2	3	4	98	99

**G.5.1 Did you use a condom during the last ANAL sex with a MAN? [Previous rounds question, GAM]**

1. yes
2. no
3. difficult to answer (**DO NOT read!**)

**G.5.3. Did you use special lubricant during your last anal sexual contact? [Previous rounds question]**

1. yes
2. no
3. difficult to answer (**DO NOT read!**)

*Interviewer! Before asking the respondent questions, please, explain the following terms: permanent, casual, commercial sexual partner:*

- ✓ The term permanent sexual partner denotes to partners with whom one forms permanent long term relations, but at the same time the respondent did not reward materially or received a material reward for sexual services with this partner.
- ✓ The term casual sexual partner denotes to unfamiliar partners with whom the respondent had a casual sexual relationship, but at the same time did not reward materially or received a material reward for sexual services.
- ✓ The term commercial sexual partner denotes to partners who received material reward for sexual services or rewarded respondent for sexual services.

**G.6. Who did you have last anal sex with? (multiple answers) [Previous rounds question]**

1. with a permanent sexual partner
2. with a casual sexual partner
3. with a person, to whom you provided renumeration for sex
4. with a person, who provided you renumeration for sex
5. last sex was with several partners (group sex)

*Now I'm going to ask few questions about your sexual intercourses with permanent sexual partner*

**G.7. Did you have anal sex with PERMANENT SEXUAL PARTNER (PARTNERS) during the last 30 days?** [Previous rounds question]

1. yes \_\_\_\_\_ (number of such partners)
2. no - go to G.10.
3. difficult to answer (DO NOT read!) - go to G.10.

**G.8. Did you use condom during last anal sexual contact with PERMANENT SEXUAL PARTNER (PARTNERS)?** [Previous rounds question]

1. yes
2. no - go to G.10.
3. difficult to answer (DO NOT read!) - go to G.10.

**G.9. How often have you used condom during anal contacts with your PERMANENT partner ((PARTNERS) in the last 30 days)?** [Previous rounds question]

1. always (100%)
2. in the majority of cases (75%)
3. in half of cases (50%)
4. sometimes (25%)
5. rarely (less than 10%)
6. never
7. difficult to answer (DO NOT read!).

*Now I'm going to ask few questions about your sexual intercourses with casual partner*

**G.10. Did you have anal sex with CASUAL SEXUAL PARTNER during the last 30 days?**

[Previous rounds question]

1. yes \_\_\_\_\_ (number of such partners)
2. no - go to G.13.
3. difficult to answer (DO NOT read!) - go to G.13.

**G.11. Did you use condom during last anal sexual contact with CASUAL PARTNER?**

[Previous rounds question]

1. yes
2. no - go to G.13.
3. difficult to answer (DO NOT read!) - go to G.13.

**G.12. How often have you used condom during anal contacts with your CASUAL partner in the last 30 days?** [Previous rounds question]

1. always (100%)
2. in the majority of cases (75%)
3. in half of cases (50%)
4. sometimes (25%)
5. rarely (less than 10%)

6. never
7. difficult to answer (**DO NOT read!**)

*Now I'm going to ask few questions about your sexual intercourses with partner TO WHOM YOU PROVIDED RENUMERATION FOR SEX*

**G.13. Have you ever provided renumeration to another man to have oral or anal sex?**

1. yes
2. no - go to G.16.
3. difficult to answer (**DO NOT read!**) - go to G.16.

**G.13.1. Did you have anal sex with SEXUAL PARTNER TO WHOM YOU PROVIDED RENUMERATION FOR SEX during the last 30 days?** [Previous rounds question]

1. yes \_\_\_\_\_ (number of such partners)
2. no - go to G.16.
3. difficult to answer (**DO NOT read!**) - go to G.16.

**G.14. Did you use condom during last anal sexual contact with PARTNER TO WHOM YOU PROVIDED RENUMERATION FOR SEX?** [Previous rounds question]

1. yes
2. no - go to G.16.
3. difficult to answer (**DO NOT read!**) - go to G.16.

**G.15. How often have you used condom during anal contacts with your partner TO WHOM YOU PROVIDED RENUMERATION FOR SEX in the last 30 days?** [Previous rounds question]

1. always (100%)
2. in the majority of cases (75%)
3. in half of cases (50%)
4. sometimes (25%)
5. rarely (less than 10%)
6. never
7. difficult to answer (**DO NOT read!**)

*Now I'm going to ask few questions about your sexual intercourses with partner WHO PROVIDED YOU RENUMERATION FOR SEX*

**G.16. Did you provide sexual services for remuneration during your lifetime?** [Previous rounds question]

1. yes
2. no - go to G.20.

**G.17. Did you provide sexual services for remuneration in the LAST 30 days?** [Previous rounds question]

1. yes \_\_\_\_\_ (number of such partners)
2. no - go to G.20.
3. difficult to answer (**DO NOT read!**) - go to G.20.

**G.18. Did you use condom during last anal sexual contact with PARTNER WHO PROVIDED YOU RENUMERATION FOR SEX?** [Previous rounds question]

1. yes
2. no - go to G.20.
3. difficult to answer (**DO NOT read!**) - go to G.20.

**G.19. How often have you used condom during anal contacts with your partner WHO PROVIDED YOU RENUMERATION FOR SEX in the last 30 days?** [Previous rounds question]

1. always (100%)
2. in the majority of cases (75%)
3. in half of cases (50%)
4. sometimes (25%)
5. rarely (less than 10%)
6. never
7. difficult to answer (**DO NOT read!**)

*Now I'm going to ask few questions about lubricant usage during anal sex with all male partners*

**G.20. How often in the last 30 days have you used special lubricant (water-based) during anal contact (passive or active) with all of your male sexual partners?** (Interviewer! Only one answer is possible) [Previous rounds question]

1. always (100%)
2. in most cases (75%)
3. in half of the cases (50%)
4. sometimes (25%)
5. seldom (less than 10%)
6. never
7. do not know / do not remember (**DO NOT read!**)
8. I didn't have sexual contacts in the last 30 days

## BLOCK H. SEXUAL INTERCOURSE WITH FEMALES

*Please, let me ask you a few questions about your intimate life with females. Please, remember that all this information will be anonymous.*

**H.1. Have you ever had sexual contact with FEMALES (vaginal, oral or anal)?** [Previous rounds question]

1. yes
2. no - go to I.1

**H.2. How many FEMALES have you had vaginal or anal sex with in the last 6 month?**

\_\_\_\_\_ [Previous rounds question]

*Interviewer! If the respondent does not want to respond or does not remember → write 999!*

*If respondent replied that he had none → write 0 → go to question I.1*

**H.3. Did you use a condom during the last vaginal or anal sexual contact with a FEMALE? [Previous rounds question]**

1. yes
2. no
3. hard to answer (**DO NOT read!**)

**H.4. Have you had sexual contact with a female sex worker in the last 6 month for which you provided remuneration? [Previous rounds question]**

1. yes
2. no - go to I.1.
3. hard to answer (**DO NOT read!**) - go to I.1.

**H.5. Did you use a condom during the last vaginal or anal sexual contact with a female sex worker? [Previous rounds question]**

1. yes
2. no
3. hard to answer (**DO NOT read!**)

## BLOCK I. ALCOHOL

**I.1. Do you drink alcohol?**

1. yes
2. no - go to J.1
3. don't know/don't remember (**DO NOT read!**) - go to J.1
4. refuse to answer (**DO NOT read!**) - go to J.1

**I.2. How many drinks containing alcohol do you have on a typical day when you are drinking? [Blue book question]**

*EXPLAIN: standard drink is 50 ml of strong alcoholic beverages (such as vodka, cognac) or 150 ml of medium strength beverages (i.e. wine) or 500 ml of low alcohol drinks (such as beer or gin and tonic)*

1. 1 or 2
2. 3 or 4
3. 5 or 6
4. 7-9
5. 10 or more
6. don't know/don't remember (**DO NOT read!**)
7. refuse to answer (**DO NOT read!**)

**I.3. On one occasion, how often do you have eight or more drinks? [Previous rounds question]**

1. never
2. less than monthly
3. monthly
4. weekly
5. daily or almost daily
6. don't know/don't remember (DO NOT read!)

## BLOCK J. DRUG USE

**Some people use drugs. Note that the common sex stimulant "poppers" is NOT a drug, so we ask you to ignore the experience of using poppers in matters relating to drugs. Also, please remember that the survey is anonymous and your answers will not be connected to your personal data.**

**J.1. Have you ever used any drugs that you sniff, swallow or inhale other than those prescribed by medical provider for you? (Interviewer, please explain that we are not talking about sexual stimulants now) Choose only one option** [Blue book question]

1. yes
2. no - go to J.4.
3. don't know - go to J.4.
4. refuse to answer - go to J.4.

**J.2. When did you sniff, swallow or inhale drugs other than those prescribed for you last time? Choose only one option** [Previous round legacy question]

1. during the last 30 days
2. during the last 12 months - go to J.4
3. more than a year ago - go to J.4
4. don't remember - go to J.4
5. refuse to answer - go to J.4

**J.3.1. How often in the last month have you had sex with MEN under the influence of non-injectable drugs? [Previous rounds question]**

1. always
2. most of the time (around 75%)
3. half the time
4. sometimes (around 25%)
5. rarely (less than 10%)
6. never – go to J.3.2.
7. during the last month I did not have sex with men – go to J.3.2.
8. hard to answer (DO NOT read!) – go to J.3.2.

**J.3.1.1. Why do you have sex with men under the influence of non-injectable drugs? (several options)**

1. substance use simply coincides with sex (I use substances, so sometimes sex happens when I am under the influence of substances)

2. to increase sexual arousal, increase libido
3. to have better and longer sex
4. to increase the pleasure of sex, to enhance orgasm
5. to get new sensations, to make sex more diverse
6. to enhance/improve sensations, increase sensitivity, in particular tactile/body sensitivity
7. to increase the depth of emotions, increase empathy, emotional, mental, spiritual intimacy with a partner
8. to become more relaxed, overcome shame, emotional discomfort, relieve tension, stress that prevents you from relaxing
9. to relax your muscles or your partner's muscles and facilitate penetration
10. to overcome physical discomfort
11. to overcome fear
12. I use it at parties to achieve openness (extroversion) in relationships
13. to experiment, out of curiosity and interest in new things
14. I can't have sex without them
15. other (please specify) \_\_\_\_\_

**J.3.2. How often in the last month have you had sex with FEMALE under the influence of non-injectable drugs? [Previous rounds question]**

1. always
2. most of the time (around 75%)
3. half the time
4. sometimes (around 25%)
5. rarely (less than 10%)
6. never
7. during the last month I did not have sex with females
8. hard to answer (**DO NOT read!**)

**J.4. Have you ever injected any drugs, other than those prescribed for you? Choose only one option [Blue book question]**

1. yes
2. no - go to J.8.
3. don't know - go to J.8.
4. refuse to answer - go to J.8.

**J.5. When did you inject any drugs last time? Choose only one option [Previous round legacy question]**

1. during the last 30 days
2. during the last 12 month
3. more than a year ago - go to J.8.
4. don't remember - go to J.8.
5. refuse to answer - go to J.8.

**J.6. Have you had experiences of drug overdose during the last 12 months? [Question proposed by APH and IBBS working group]**

1. yes
2. no
3. don't remember/ don't want to answer (**DO NOT read!**)

**Now we want to ask you about sex stimulants, for example Viagra and "poppers". Please remember that the survey is anonymous and your answers will not be connected to your personal data.**

**J.8. Now I will read the names of the sex stimulants, and you tell me, what sex stimulants have you used? (please select all that apply)**

1. poppers
2. Viagra, Sialis, Levitra
3. other sex stimulants (indicate) \_\_\_\_\_
4. did not use drugs in the last 12 months
5. don't know / don't remember (**DO NOT read!**)
6. don't want to answer (**DO NOT read!**)

**J.10. How often in the last month (30 days), before sexual intercourse, you used both drugs (injectable and non-injectable) and sex stimulants but not alcohol? (Interviewer, if the respondent reported that they have never used any drugs, whether injecting or not, please indicate "never")**

1. always (100%)
2. in most cases (75%)
3. in half of the cases (50%)
4. sometimes (25%)
5. rarely (10%)
6. never
7. has not used for the last 30 days
8. don't know/don't remember (**DO NOT read!**)
9. refusal to answer (**DO NOT read!**)

## BLOCK K. HIV SERVICES

**K.1.2. In the past three months, have you been given condoms and lubricant (for example, through an outreach service, sexual health clinic or received by post)?**

1. yes, condoms and lubricant
2. yes, condoms only
3. yes, lubricant only

4. none of them
5. no, because no need
6. don't know/don't remember (**DO NOT read!**)
7. refusal to answer (**DO NOT read!**)

**K.3. In the past three months, have you received FREE counselling on condom use and safe sex (for example, through an outreach service or sexual health clinic)? [GAM]**

1. yes
2. no
3. don't know/don't remember (**DO NOT read!**)

**K.4. Have you been tested FREE for sexually transmitted infections in the past three months (for example, through an outreach service or sexual health clinic)? [GAM]**

1. yes
2. no
3. don't know/don't remember (**DO NOT read!**)

**K.5. Are you a client of an organization (organizations) that provides HIV prevention services for men who have sex with men (e.g. condoms)? [Previous round question, PSE]**

1. yes
2. no - go to K.8.
3. hard to answer (**DO NOT read!**) - go to K.8.
4. refused to answer (**DO NOT read!**) - go to K.8.

**K.6. How long have you been a client of this organization? \_\_\_\_\_ months**  
[Previous round question]

*Interviewer! If the respondent mentions the number in years, then translate it into months! If the respondent says less than a month, write 0. If the participant is a client of several organizations, indicate their names and the duration of the client status separated by commas.*

**K.6.1. What organization(s) you got the service from? Interviewer, show the participant CARD 2. Write down the organization code, "98" if Don't know, "99" if Prefer not to answer**

---

**K.7. Do you have a client's card of this organization? [Previous round question, PSE]**

1. yes, I have it with me → write down the cards number \_\_\_\_\_
2. yes, but I do not have it with me
3. no I don't have one
4. no, my organization does not provide cards

**K.8. Did you buy condoms for yourself during the last month (30 days)? [Previous round question]**

1. yes
2. no

3. don't know/don't remember (**DO NOT read!**)
4. refuse to answer (**DO NOT read!**)

**K.9. Within the last 30 days, have there been any cases when you could not purchase condoms when you needed them? [Previous round question]**

1. yes
2. no
3. don't know/don't remember (**DO NOT read!**)

## **BLOCK P. COUNSELING AND TESTING FOR HIV AND STIS**

**P.1. Do you know where in our city you can get tested for HIV? [Previous round question, GAM]**

1. yes → where? \_\_\_\_\_ (name of institution)
2. no

**P.2. Have you ever tested for HIV?**

1. yes
2. no - go to P.9.
3. I do not want to answer - go to P.9.

**P.3. Do you know your HIV status from an HIV test?**

1. no - go to P.9.
2. yes
3. I do not want to answer - go to P.9.

**P.4. If yes, when were you last tested?**

1. in the last 6 months
2. in the last 6–12 months
3. more than 12 months ago

*Interviewer, pause before this question. Then read out: Please remember that the survey is anonymous and your answers will not be connected to your personal data*

**P.5. Was the result of your last test?**

1. positive
4. negative - go to P.6.1.
2. I do not want to answer - go to P.6.1

**P.5.1. Was the last HIV test the very first HIV positive test result you have ever received? [History of testing method question]**

1. yes
2. no
3. don't know (**DO NOT read!**)
4. refuse to answer (**DO NOT read!**)

**P.5.2. What year did you first test positive?** (in “YYYY” format, “1900” if Don’t know, “1901” if Prefer not to answer) [History of testing method question]

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**P.5.3. What month did you first test positive?** (in “MM” format, “00” if Don’t know, “99” if Prefer not to answer) [History of testing method question]

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**P.5.4. Before your first positive test, did you ever have a negative HIV test?** [History of testing method question]

1. yes
2. no
3. don’t know (**DO NOT read!**)
4. refuse to answer (**DO NOT read!**)

**P.5.5. What year did you last test HIV negative?** (in “YYYY” format, “1900” if Don’t know, “1901” if Prefer not to answer) [History of testing method question]

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**P.5.6. What month did you last test HIV negative?** (in “MM” format, “00” if Don’t know, “99” if Prefer not to answer) [History of testing method question]

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**P.6.1. Where did you have your last HIV test to learn your status?** [Current round question]

1. medical facility (health clinic, hospital, or similar)
2. ART site/AIDS center
3. outreach/mobile testing
4. community center/organization
5. in my home
6. at work
7. other (specify) \_\_\_\_\_
8. don’t know (**DO NOT read!**)
9. refuse to answer (**DO NOT read!**)

*In Ukraine, self-testing programs have been introduced, i.e. those where a person, having received a test kit, performs an HIV test with his or her own hands in a convenient place and at a convenient time.*

**P.9. Have you ever done HIV test by yourself (non-assistant self-testing), without help or supervision of service provider (medical worker, social worker, etc.)? [Current round question]**

1. yes
2. no - go to P.22.
3. don't know/don't remember (**DO NOT read!**) - go to P.22.
4. refuse to answer (**DO NOT read!**) - go to P.22.

**P.10. When was the last time when you have done non-assistant HIV self-test? \_\_\_\_\_ months [Current round question]**

*Interviewer! If the respondent mentions the number of years, then translate it into months! If the respondent says less than a month → write 0*

*If the respondent does not remember → write 999*

**P.11. Where did you get the HIV self-test kits? You can mark all the options that suit your situation [Current round question]**

1. community-based: in a non-governmental organization, from a social worker, in a mobile van
2. in a medical facility
3. I have ordered the HIV test online (not free)
4. I have ordered the HIV test online (for free from the NGO or at the pharmacy)
5. I have ordered and received Safe or Party box (HealthLink, Drugstore or other projects)
6. it was distributed at my workplace
7. I bought test in pharmacy
8. I got a test in mass distribution community events
9. I took it in vending machines/testomat
10. I got it from my partner/friend/peer
11. other (specify) \_\_\_\_\_

**P.12. What type of test was it? (*multiple options* ) [Current round question]**

1. oral
2. blood
3. don't know / don't remember (**DO NOT read!**)
4. refuse to answer (**DO NOT read!**)

**P.12.1. What was the result of your HIV self-test?**

1. positive
2. negative - go to P.13.
3. I do not want to answer - go to P.13.
4. don't know the result - go to P.13.

**P.12.2. What were your next steps after receiving a positive result? (multiple options)**

1. I visited my family doctor
2. I went to a health care facility that provides HIV services
3. contacted an NGO
4. did not take any action
5. other \_\_\_\_\_
6. refuse to answer (DO NOT read!)

**P.13. Did you have any difficulties in the process to perform this test? (multiple options)**

[Current round question]

1. no
2. yes, it was hard to understand instructions/algorithm
3. yes, it was hard to collect the sample
4. yes, it was hard to interpret the results
5. yes, it was hard to understand the next steps after the negative result
6. yes, it was hard to understand the next steps after positive result
7. yes, it was hard to understand the next steps after the uncertain result
8. don't know/don't remember (DO NOT read!)
9. refusal to answer (DO NOT read!)

**Interviewer, the following questions are for respondents who reported their HIV-positive status. Please select the appropriate option**

1. the respondent is HIV-positive
2. the respondent is HIV-negative or refused to disclose their status. - go to P.22.

**P.17. Have you ever taken ARVs, that is, antiretroviral medication to treat your HIV infection? [Previous and current round question, cascade]<sup>1</sup>**

1. yes - go to P.18.
2. no, and never did - go to P.17.1.
3. no, but I have already been assigned - go to P.21.
4. accepted but stopped - go to P.19.
5. don't know - go to P.21.
6. prefer not to answer (DO NOT read!) - go to P.21.

**P.17.1. What is the main reason you never taken ARVs?**

1. fear that others find out - go to P.21.
2. fear of stigma from healthcare providers - go to P.21.
3. costs too much - go to P.21.
4. other \_\_\_\_\_ - go to P.21.
5. don't know - go to P.21.
6. prefer not to answer (DO NOT read!) - go to P.21.

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<sup>1</sup> In the sub-block questions about ART, there is a technical error regarding questions skipping patterns. As a result, the collected data is incomplete. We recommend using the questions about ART from the biological component of the study.

**P.18. How long have you been taking ART? [Previous and current round question, cascade]**

1. less than 6 months
2. 6-12 months
3. 12 months or more
4. don't know (**DO NOT read!**)
5. prefer not to answer (**DO NOT read!**)

**P.18.1. How long has it been since your last ART? \_\_\_\_\_ days → if NOT more than 1 day → go to P.20 [Previous round question, cascade]**

*Interviewer! If the respondent mentions a number in months or years, translate it into days!*

**P.19. How long have you stopped taking ART regularly? \_\_\_\_\_ months**  
[Previous and current round question, cascade]

*Interviewer! If the respondent mentions the number of years, then translate it into months! If the respondent says less than a month → write 0*

*If the respondent does not remember → write 999*

**P.20. Sometimes people have trouble taking HIV medications (ART) because of personal situations or circumstances. What are the reasons you have stopped taking ART or have not yet started to take ART? (for each option choose Agree/Disagree/Not relevant) [Current round question]**

		Agree	Disagree	Not Relevant
1	You don't think that you need it	1	2	3
2	You don't have time to go to the clinic	1	2	3
3	You don't have the energy or motivation to go to the clinic	1	2	3
4	You missed an appointment, so it is difficult to go back	1	2	3
5	You have been too sick to go to the clinic	1	2	3
6	Your drug use got in the way of going to the clinic	1	2	3
7	You had unwanted side effects or complications	1	2	3
8	You don't understand when you are supposed to take each pill	1	2	3
9	You lost your medicines or your medicines was stolen	1	2	3

10	Your drinking (alcohol) got in the way of going back to the clinic	1	2	3
11	You had to wait too long, so you left without being seen	1	2	3
12	I feel healthy	1	2	3
13	I changed my place of residence, I don't know where to go	1	2	3

**P.21. Have you ever had a HIV viral load test?** [Previous round question, cascade]

1. yes
2. no - go to P.22
3. I don't know / I don't remember (**DO NOT read!**) - go to P.22

**P.21.1. When did you have your last HIV viral load test?** [Current round question]

1. less than 6 months
2. 6-12 months
3. last 12 months or more
4. don't know (**DO NOT read!**)
5. prefer not to answer (**DO NOT read!**)

**P.21.2. Did you receive the result of your last HIV viral load test?** [Current round question]

1. yes
2. no - go to P.22
3. I don't know / I don't remember (**DO NOT read!**) - go to P.22

**P.21.3. Did medical worker explain what the result of your last HIV viral load test meant?**

[Current round question]

1. yes
2. no
3. I don't know / I don't remember (**DO NOT read!**)

**P.22. I am not asking you about the test result at this time, I just want to know whether do you know if your regular sexual partner has his/her HIV test done or not? (choose one option)**

1. yes
2. no - go to O.1
3. don't know/don't remember (**DO NOT read!**)
4. refuse to answer (**DO NOT read!**) - go to O.1.
5. no regular sexual partner - go to O.1

**P.23. Could you tell his/her HIV status? (choose one option)**

1. yes, HIV-positive
2. yes, HIV-negative
3. no
4. don't know/don't remember (**DO NOT read!**)
5. refuse to answer (**DO NOT read!**)

## BLOCK O. PREP and PEP

**Now we will talk about pre-exposure prevention or PrEP and post-exposure prophylaxis or PEP.**

**O.1. Have you ever heard about pre-exposure prophylaxis (PrEP)? [Previous and current round question]**

1. yes
2. no - go to O.9
3. don't know/ don't remember (**DO NOT read!**)
4. refuse to answer (**DO NOT read!**)

**O.1.1. If yes, what PrEP models have you heard about? (several options)**

1. ED-PrEP (Event-driven PrEP), also known as the 2-1-1 regimen (2 pills before contact, 1 on the day of contact, 1 on the next day)
2. daily PrEP (one pill daily)
3. long-acting injectable form of PrEP (CAB-LA)
4. none of them

Interviewer explain *Pre-exposure prophylaxis (PrEP) is a preventive intervention for people at high risk for HIV infection. As a part of this intervention, people take preventive drugs every day in order to protect themselves from HIV infection. However, it is important not to underestimate other preventive measures, such as the constant use of condoms*

**O.1.2. Do you agree with the following statements about PrEP? (choose one option in each line)**

Interviewer! Read the statements one by one

No	Statements about PrEP	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Don't know/do n't remember (do not read out)
O.1.2.1.	PrEP provides 99% protection against sexual transmission of	1	2	3	4	5	98

	HIV if you follow your doctor's recommendations						
<b>O.1.2.2.</b>	PrEP is effective only if taken regularly. Protection against HIV is lost if the course of treatment is interrupted	1	2	3	4	5	98
<b>O.1.2.3.</b>	PrEP also protects against sexually transmitted infections other than HIV (e.g. gonorrhea, syphilis, herpes, chlamydia)	1	2	3	4	5	98
<b>O.1.2.4.</b>	PrEP medications should be taken during the entire period when risky practices for HIV infection continue	1	2	3	4	5	98
<b>O.1.2.5.</b>	PrEP is prescribed before the moment of risky contact with HIV infection	1	2	3	4	5	98
<b>O.1.2.6.</b>	When using this method of prevention, HIV testing is performed before starting, then after 1 month, and then quarterly	1	2	3	4	5	98

<b>O.1.2.7.</b>	If you start taking PrEP, you will have to take it for life	1	2	3	4	5	98
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*Interviewer! You must check each statement*

## **O.2. Have you ever taken PrEP?**

1. yes
2. no - go to O.3.

### **O.2.1. Have you taken pre-exposure prophylaxis (PrEP) drugs within the last 12 months?**

[Previous round question ]

1. yes, I have taken PrEP drugs and take it now
2. yes, I have taken PrEP drugs but do not take it now
3. no, I have not → go to O.3
4. don't know/don't remember (DO NOT read!) → go to O.3
5. refuse to answer (DO NOT read!) → go to O.3

### **O.2.3. What PrEP model? (several options)**

1. ED-PrEP (Event-driven PrEP), also known as the 2-1-1 regimen (2 pills before contact, 1 on the day of contact, 1 on the next day)
2. daily PrEP (one pill daily)
3. long-acting injectable form of PrEP (CAB-LA)
4. other \_\_\_\_\_
5. don't know/don't remember (DO NOT read!)

### **O.2.4. Where did you get PrEP? (multiple answers are possible)**

1. NGO
2. ART site
3. medical facility (except for the ART site)
4. bought it
5. received from friend/partner
6. other \_\_\_\_\_
7. don't know/don't remember (DO NOT read!)

### **O.2.5.1. Have you ever shared your PEP medications with your friends, acquaintances, or partners?**

1. yes
2. no
3. don't know/don't remember (DO NOT read!) → go to O.3
4. refuse to answer (DO NOT read!) → go to O.3

**O.2.5.2. Receiving PrEP implies that you should be regularly tested for HIV at the sites/locations where you receive PrEP medications. Do you get tested for HIV at PrEP sites/locations? If yes, how regularly?**

1. I get tested at least once every 3 months
2. I get tested at least once every 6 months
3. I get tested less than once every 6 months
4. I have never been tested yet
5. don't know/don't remember (**DO NOT read!**) → go to O.3
6. refuse to answer (**DO NOT read!**) → go to O.3

**O.2.6. Have you ever stopped taking PrEP?**

1. no – go to O.9.
2. yes (what was the reason for that \_\_\_\_\_)

**O.3. Why have you not taken PrEP drugs? (Several options)**

1. I am already living with HIV
2. I don't have enough information about PrEP
3. I am ashamed to talk about it with my doctor
4. it is not accessible at my place of residence
5. I do not know where to get drugs
6. It's complicated to take PrEP every day
7. I do not think I am at risk for HIV infection, my behavior is safe, I don't have permanent sexual risks
8. I don't want to visit medical facility to get it
9. I don't want to do HIV testing every quarter
10. I don't believe that it can actually protect me from HIV/don't think it is working
11. for me It is better to use condoms all the time
12. I think it will damage my kidneys
13. I think it will damage my liver
14. I have concerns about other adverse events (headache, nausea, vomiting, rash and loss of appetite)
15. I'm afraid that my parents will find the medicines
16. I'm afraid that my partner will find the medicines
17. I used to be on PrEP, but I stopped
18. I'm afraid someone can think I'm HIV+
19. other (specify, what exactly \_\_\_\_\_)
20. don't know/don't remember (**DO NOT read!**)
21. refuse to answer (**DO NOT read!**)

*Interviewer explain Post-exposure prevention (PEP) is a type of preventive intervention for people who are at high risk of HIV infection, and, unlike PrEP, involves taking drugs after a possible contact with an HIV-positive person.*

**O.9. Have you ever heard about post-exposure prevention (PEP)? [Current round question]**

1. yes
2. no – go to O.11

3. don't know/ don't remember (**DO NOT read!**) – go to O.11
4. refuse to answer (**DO NOT read!**) – go to O.11

**O.9.1. Do you agree with the following statements about PEP? (choose one option in each line)**

Interviewer! Read the statements one by one

No	Statements about PEP	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Don't know/do n't remember (do not read out)
O.9.1. 1.	PEP is administered after exposure to a potential source of HIV infection, such as blood or other potentially dangerous fluids for HIV infection	1	2	3	4	5	98
O.9.1. 2.	PEP is prescribed no later than 72 hours after the risky contact	1	2	3	4	5	98
O.9.1. 3.	The full course of PEP treatment is 28 days	1	2	3	4	5	98
O.9.1. 4.	Waiting for HIV test results should not be a barrier to prescribing PEP	1	2	3	4	5	98
O.9.1. 5.	Condoms should be used while taking PEP medication	1	2	3	4	5	98

Interviewer! You must check each statement

#### **O.9.2. Do you know where and how to get PEP?**

1. yes (specify \_\_\_\_\_)
2. no
3. don't know/ don't remember (**DO NOT read!**)
4. refuse to answer (**DO NOT read!**)

#### **O.10. Have you taken post-exposure prevention (PEP) drugs within the last 12 months?**

[Current round question]

1. yes, I have taken - go to O.11
2. no, because I am living with HIV (PLHIV) - go to O.11
3. no, I have not
4. don't know/don't remember (**DO NOT read!**)
5. refuse to answer (**DO NOT read!**)

#### **O.10.1. Are you willing to take PEP in a case of exposure?**

1. yes
2. no (what is a reason? \_\_\_\_\_)
3. don't know (**DO NOT read!**)
4. refuse to answer (**DO NOT read!**)

#### **Doxy-PEP**

#### **O.11. Have you ever heard of post-exposure prophylaxis with doxycycline, Doxy-PEP?**

1. yes, heard
2. yes, I have taken it in the last 12 months – go to R.1
3. yes, I have taken it, but not in the last 12 months – go to R.1
4. no, never heard
5. don't know/don't remember (**DO NOT read!**)

*Interviewer, read next info: Doxy-PEP is the taking of doxycycline as post-exposure prophylaxis for bacterial STIs between 24 and 72 hours after sex without a condom.*

#### **O.12. Would you agree to become a member of Doxy-PEP program, if ... (one answer for each line)**

*Interviewer! Read the statements to the respondent one by one so as to go through the ENTIRE table*

O.11.1. The drug (tablet) should be taken within 24-72 hours after sex without a condom (condomless sex)	Yes	No	Don't know/don't remember ( <b>DO NOT read!</b> )
O.11.2. A person who wants to take the drug should be examined by a doctor to confirm the need for treatment	Yes	No	Don't know/don't remember ( <b>DO NOT read!</b> )

O.11.3. A person taking the drug should be tested for chlamydia, gonorrhea and syphilis every 3 months	Yes	No	Don't know/don't remember <b>(DO NOT read!)</b>
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## BLOCK R. KNOWLEDGE ABOUT HIV

**R.1. Do you agree with the following statements about HIV infection? (choose one option in each line)**

Interviewer! Read the statements one by one

No	Statements about HIV	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Don't know/do n't remember (do not read out)
R.1.1.	<b>HIV can be avoided if correctly using a condom during each sexual contact</b>	1	2	3	4	5	98
R.1.2.	<b>HIV can be avoided if an HIV-positive person has an undetectable level of HIV viral load (The undetectable HIV viral load means that HIV-positive person received &lt;50 copies as the result of viral load testing in the past 6 months)</b>	1	2	3	4	5	98
R.1.3.	<b>Chance to get HIV-infection is very low if HIV-negative person is taking pre-exposure</b>	1	2	3	4	5	98

	<b>prophylaxis (PrEP)</b>						
R.1.4.	<b>Chance to get HIV is significantly reduced if a person is taking post-exposure prophylaxis (PEP) immediately (&lt;72 hours) after possible HIV exposure (May have been exposed to HIV during sex or shared needles or other equipment (works) to inject drugs)</b>	1	2	3	4	5	98
R.1.5.	<b>After HIV-positive diagnoses, a person should immediately start ART</b>	1	2	3	4	5	98
R.1.6.	<b>ART can be delayed if an HIV-positive person feels healthy</b>	1	2	3	4	5	98
R.1.7.	<b>An HIV-positive person can stop taking ART if s/he feels healthy</b>	1	2	3	4	5	98

*Interviewer! You must check each statement*

## BLOCK M. MEDICAL CARE FOR HEPATITIS, TB AND STIs

**We would now like to ask a few questions about your experience of visiting medical institutions, as well as whether you have had any illnesses.**

**M.1.1. Do you have a family doctor (with whom you have signed a declaration) in the city where you live? [Current round question]**

1. yes
2. no

**M.1.2. During the last 12 months have you visited a healthcare facility? [Previous rounds question]**

1. yes
2. no - go to M.3

**M.2. Which types of medical facilities have you visited? You can choose several options**

**[Previous rounds question]**

1. general clinic
2. hospital
3. private laboratory
4. anti-tuberculosis dispensary
5. narcological dispensary
6. dermatological and venereological dispensary
7. called the family doctor home
8. visited family doctor
9. called an ambulance
10. NGO (e.g. for testing)
11. mobile clinic (e.g. for testing)
12. a health care facility that provides HIV surveillance
13. cabinets of trust
14. something else/ what? \_\_\_\_\_

**M.3. Did you avoid seeking MEDICAL HELP IN GENERAL within the last 12 months due to a fear or other concerns.... (one option per each line) [GAM]**

**M.4. Did you avoid HIV TESTING within the last 12 months due to a fear or other concerns like... (one option per each line) [GAM]**

No.	Reasons	M.3. Medical services in general		M.4. HIV testing	
		Yes	No	Yes	No

1	Stigmatization from medical personnel (poorer attitudes and unfair lower quality of medical care due to the fact that you have sexual relations with men)	1	2	1	2
2	Somebody can find out that you have sexual relations with men	1	2	1	2
3	Possible or experienced violence	1	2	1	2
4	Possible or experienced pursuit or arrest by law enforcement agencies	1	2	1	2

**Interviewer, the following few questions are only for respondents who reported their HIV-positive status.**

1. the respondent is HIV-positive
2. the respondent is HIV-negative or refused to disclose / does not know their HIV status.  
- go to M.8.

**M.5. Did you avoid turning to HIV-RELATED MEDICAL SERVICES within the last 12 months due to a fear or others concerns .... (one option per each line) [GAM]**

**M.6. Did you avoid seeking HIV TREATMENT within the last 12 months due to a fear or other concerns .... (one option per each line) [GAM]**

No.	Reasons	M.5. HIV-related medical care			M.6. HIV treatment		
		Yes	No	N/A	Yes	No	N/A
1	Stigmatization from medical personnel (poorer attitudes and unfair lower quality of medical care due to the fact that you have sexual relations with men)	1	2	3	1	2	3
2	Somebody can find out that you have sexual relations with men	1	2	3	1	2	3
3	Possible or experienced violence	1	2	3	1	2	3
4	Possible or experienced pursuit or arrest by law enforcement agencies	1	2	3	1	2	3

**M.7. [Experience of HIV-related discrimination in health-care settings]** Have you experienced any of the following forms of HIV-related discrimination when seeking HIV and non-HIV-specific health services in the last 12 months:

M.7.1 Denial of care due to HIV status.	Yes	No	Don't know or it's hard to answer ( <b>DO NOT read!</b> )
M.7.2 Advised not to have sex because of HIV status.	Yes	No	Don't know or it's hard to answer ( <b>DO NOT read!</b> )
M.7.3 Being the subject of gossip or negative talk because of HIV status.	Yes	No	Don't know or it's hard to answer ( <b>DO NOT read!</b> )
M.7.4 Verbal abuse because of HIV status.	Yes	No	Don't know or it's hard to answer ( <b>DO NOT read!</b> )
M.7.5 Physical abuse because of HIV status.	Yes	No	Don't know or it's hard to answer ( <b>DO NOT read!</b> )
M.7.6 Avoidance of physical contact because of HIV status.	Yes	No	Don't know or it's hard to answer ( <b>DO NOT read!</b> )
M.7.7 Sharing of HIV status without consent.	Yes	No	Don't know or it's hard to answer ( <b>DO NOT read!</b> )

**M.8. Have you ever had Hepatitis B?** [Previous rounds question]

1. yes
2. no - go to M.10
3. don't know (**DO NOT read!**) - go to M.10

**M.9. If yes, have you been treated for Hepatitis B?** [Previous rounds question]

1. yes, was receiving treatment and stopped based on physician's recommendation
2. yes, was receiving treatment c but have stopped on my own
3. yes, receiving treatment now
4. no, haven't received before and not receiving treatment now
5. don't know/don't remember (**DO NOT read!**)

**M.10. Have you received a vaccination against Hepatitis B?** [Previous rounds question]

1. yes
2. no
3. don't know (**DO NOT read!**)

**M.11. Have you ever had Hepatitis C?** [Previous rounds question]

1. yes

2. no - go to M.13
3. don't know (DO NOT read!) - go to M.13

**M.12. If yes, have you been treated for Hepatitis C? [Previous rounds question]**

1. yes, received a complete treatment course and was cured
2. yes, received a complete treatment course but wasn't cured
3. yes, was receiving treatment course but haven't completed it
4. yes, receiving treatment now
5. no, haven't received before and not receiving treatment now
6. don't know/don't remember (DO NOT read!)

**M.13. Have you been screened for tuberculosis?**

1. yes
2. no
3. don't know (DO NOT read!)

**M.13.1. Have you ever had tuberculosis? [Previous rounds question]**

1. yes
2. no - go to M.15
3. don't know (DO NOT read!) - go to M.15

**M.13.2. When did you have tuberculosis?**

Specify \_\_\_\_\_ (years, months)

**M.14. If yes, have you been treated for tuberculosis?**

1. yes, received a complete treatment course and was cured
2. yes, received a complete treatment course but wasn't cured
3. yes, was receiving treatment course but haven't completed it
4. yes, receiving treatment now
5. no, haven't received before and not receiving treatment now
6. don't know/don't remember (DO NOT read!)

**M.15. Have you ever had Syphilis? [Current round question]**

1. yes
2. no - go to M.17
3. don't know (DO NOT read!) - go to M.1

**M.15.1 When did you have Syphilis?**

Specify \_\_\_\_\_ (years, months)

**M.16. If yes, have you been treated for Syphilis? [Current round question]**

1. yes, received a complete treatment course and was cured
2. yes, received a complete treatment course but wasn't cured
3. yes, was receiving treatment course but haven't completed it
4. yes, receiving treatment now
5. no, haven't received before and not receiving treatment now
6. don't know/don't remember (**DO NOT read!**)

**M.17. Have you ever had Gonorrhea?** [Current round question]

1. yes
2. no - *go to M.19*
3. don't know (**DO NOT read!**) - *go to M.19*

**M.18. If yes, have you been treated for Gonorrhea?** [Current round question]

1. yes, received a complete treatment course and was cured
2. yes, received a complete treatment course but wasn't cured
3. yes, was receiving treatment course but haven't completed it
4. yes, receiving treatment now
5. no, haven't received before and not receiving treatment now
6. don't know/don't remember (**DO NOT read!**)

**M.19. Have you ever had Chlamydia?** [Current round question]

1. yes
2. no - *go to M.21*
3. don't know (**DO NOT read!**) - *go to M.21*

**M.20. If yes, have you been treated for Chlamydia?** [Current round question]

1. yes, received a complete treatment course and was cured
2. yes, received a complete treatment course but wasn't cured
3. yes, was receiving treatment course but haven't completed it
4. yes, receiving treatment now
5. no, haven't received before and not receiving treatment now
6. don't know/don't remember (**DO NOT read!**)

**M.21. Have you ever had genital Herpes?** [Current round question]

1. yes
2. no - *go to M.23*
3. don't know (**DO NOT read!**) - *go to M.23*

**M.22. If yes, have you been treated for Herpes?** [Current round question]

1. yes, received a complete treatment course
2. yes, was receiving treatment course but haven't completed it
3. yes, receiving treatment now
4. no, haven't received before and not receiving treatment now
5. don't know/don't remember (**DO NOT read!**)

**BLOCK S. DEPRESSION**

Over the last 2 weeks, how often have you been bothered by any of the following problems?  
(choose one option in each line)

		Not at all	Several days	More than half the days	Nearly every day
<b>S. 1.1.</b>	Little interest or pleasure in doing things	0	1	2	3
<b>S. 1.2.</b>	Feeling down, depressed, or hopeless	0	1	2	3
<b>S. 1.3.</b>	Trouble falling or staying asleep, or sleeping too much	0	1	2	3
<b>S. 1.4.</b>	Feeling tired or having little energy	0	1	2	3
<b>S. 1.5.</b>	Poor appetite or overeating	0	1	2	3
<b>S. 1.6.</b>	Feeling bad about yourself - or that you are a failure or have let yourself or your family down	0	1	2	3
<b>S. 1.7.</b>	Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
<b>S. 1.8.</b>	Moving or speaking so slowly that other people could have noticed. Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
<b>S. 1.9.</b>	Thoughts that you would be better off dead, or of hurting yourself	0	1	2	3

Over the last 2 weeks, how often have you been bothered by the following problems?

		Not at all	Several days	More than half the days	Nearly every day
<b>S.2.1.</b>	Feeling nervous, anxious or on edge	0	1	2	3
<b>S. 2.2.</b>	Not being able to stop or control worrying	0	1	2	3
<b>S. 2.3.</b>	Worrying too much about different things	0	1	2	3
<b>S. 2.4.</b>	Trouble relaxing	0	1	2	3
<b>S. 2.5.</b>	Being so restless that it is hard to sit still	0	1	2	3

<b>S. 2.6.</b>	Becoming easily annoyed or irritable			0	1	2	3
<b>S. 2.7.</b>	Feeling afraid as if something awful might happen			0	1	2	3

#### BLOCK E. MARKERS OF INTERNAL HOMOPHOBIA

**To what extent do you agree or disagree with the following statements? Please do not spend a lot of time thinking about the answers [Questions proposed by Expert group on LGBT in Ukraine according to Internal homophobia study and EMIS]**

**E.1. Obviously effeminate homosexual men make me feel uncomfortable**

Strongly disagree	Disagree	Somewh at disagree	I can't decide	Somewh at agree	Agree	Strongly agree	Not suitable for my situation
1	2	3	4	5	6	7	999

**E.2. I feel comfortable in gay bars**

Strongly disagree	Disagree	Somewh at disagree	I can't decide	Somewh at agree	Agree	Strongly agree	Not suitable for my situation
1	2	3	4	5	6	7	999

**E.3. Social situations with gay men make me feel uncomfortable**

Strongly disagree	Disagree	Somewh at disagree	I can't decide	Somewh at agree	Agree	Strongly agree	Not suitable for my situation
1	2	3	4	5	6	7	999

**E.4. I feel comfortable being seen in public with an obviously gay person**

Strongly disagree	Disagree	Somewh at disagree	I can't decide	Somewh at agree	Agree	Strongly agree	Not suitable for my situation
1	2	3	4	5	6	7	999

**E.5. I feel comfortable discussing homosexuality in a public situation**

Strongly disagree	Disagree	Somewh at disagree	I can't decide	Somew hat agree	Agree	Strongly agree	Not suitable for my situation
1	2	3	4	5	6	7	999

**E.6. I feel comfortable being a homosexual man**

Strongly disagree	Disagree	Somewh at disagree	I can't decide	Somew hat agree	Agree	Strongly agree	Not suitable for my situation
1	2	3	4	5	6	7	999

**E.7. Homosexuality is morally acceptable to me**

Strongly disagree	Disagree	Somewh at disagree	I can't decide	Somew hat agree	Agree	Strongly agree	Not suitable for my situation
1	2	3	4	5	6	7	999

**E.8. Even if I could change my sexual orientation, I would NOT do it**

Strongly disagree	Disagree	Somewh at disagree	I can't decide	Somew hat agree	Agree	Strongly agree	Not suitable for my situation
1	2	3	4	5	6	7	999

**E.9. I feel comfortable in places where gays often meet**

Strongly disagree	Disagree	Somewh at disagree	I can't decide	Somew hat agree	Agree	Strongly agree	Not suitable for my situation
1	2	3	4	5	6	7	999

**BLOCK F. MARKERS OF EXTERNAL HOMOPHOBIA, STIGMA AND DISCRIMINATION**

**F.1. Have you ever noticed the following? [GAM 6.5]**

F.1.1. Have you ever felt excluded from family activities because you have sex with men?	No	Yes, in the last 6 months	Yes, but not in the last 6 months	Don't know
F.1.2. Has someone ever scolded you because you have sex with men?	No	Yes, in the last 6 months	Yes, but not in the last 6 months	Don't know
F.1.3. Has someone ever blackmailed you because you have sex with men?	No	Yes, in the last 6 months	Yes, but not in the last 6 months	Don't know

*Interviewer! Make sure there is ONE answer in each line*

**F.2. Physical and/or sexual violence experienced by MSM [GAM 4.1]**

F.2.1. In the last 12 months, how many times has anyone physically hurt you, such as hit or choked you or threatened you with a knife or other weapon?	This has not happened in the last 12 months	Once	2–5 times	6–10 times	10 or more times	Don't know or it's hard to answer (DO NOT read!)
F.2.2. In the last 12 months, how many times has someone tricked you, lied to you or threatened you in order to make you have sex when you didn't want to?	This has not happened in the last 12 months	Once	2–5 times	6–10 times	10 or more times	Don't know or it's hard to answer (DO NOT read!)

**BLOCK RUSSIAN AGRESSION**

**Now I will ask you a few questions about the Russian invasion and its impact on your life.**

**O.1. Have you changed your place of residence after February 24, 2022? (One answer)**

1. no, I have not changed my place of residence - go to O.5
2. I moved to another settlement within the region and am still there

3. I moved to another settlement within the region, but I have already returned (please specify when you returned, in months) - go to O.3
4. I moved to another region of Ukraine and I am still there
5. I have traveled to another region of Ukraine, but have already returned (please specify when you returned, in months) - go to O.3
6. I went to another country, but I have already returned back (please specify when you returned, in months) - go to O.3
7. other (please specify) - go to O.3

**O.1.2. If in the previous question the participant says they were out of the area but returned, please record when they returned**

\_\_\_\_\_ (date in DD.MM.YYYY format)

**O.2. What oblast/ city did you move from?**

\_\_\_\_\_ (oblast)

\_\_\_\_\_ (settlement)

**O.3. How long do you plan to stay in this settlement? (one answer)**

1. I plan to stay here to live
2. I plan to stay here until the war is over
3. I plan to move to another place in the near future
4. I plan to return to my permanent place of residence in the near future
5. other (specify)\_\_\_\_\_
6. don't know (**DO NOT read!**)

**O.5. Have you been a internally displaced person from 2014 to 2022?**

1. yes
2. no
98. don't know/don't remember (**DO NOT read!**)
99. refuse to answer (**DO NOT read!**)

**O.6. Do you currently have refugee status (you have an official certificate)?**

1. yes
2. no
98. don't know (**DO NOT read!**)
99. refuse to answer (**DO NOT read!**)

**O.7. Have you sought help from an LGBT organization? Which ones?**

1. yes, \_\_\_\_\_
2. no
99. refuse to answer (**DO NOT read!**)

**O.11. Are you a member of the military (ARMED FORCES OF UKRAINE, territorial defense, military volunteers)?**

1. yes
2. no – go to O.14

99. refuse to answer (**DO NOT read!**) - go to O.14

**O.12. When did you join the military?**

1. before 24.02 - go to O.14
2. after 24.02
99. don't know (**DO NOT read!**) - go to O.14
99. refuse to answer (**DO NOT read!**) - go to O.14

**O.13. How did you become a military man?**

1. I was mobilized
2. I decided to join on my own
99. refuse to answer (**DO NOT read!**)

*This is the end of this part of the study. Dear respondent! Thank you for your answers and your time! Next, a medical specialist will be waiting for you to complete the biological component of the study. Have a nice day!*

**Z.1. Interview completion time** \_\_\_\_\_ hours. \_\_\_\_\_ min.

**Z.2. Interviewer who conducted the survey** \_\_\_\_\_ (**surname**)