

Questionnaire Identification Number: _____

Date: _____

HIV/AIDS and Vaccine Knowledge Survey: HVTN

Country: _____

City: _____

Region: _____

Site: _____

The following is a series of questions that will be read to you that relate to HIV/AIDS. Prior to asking you HIV/AIDS related questions, I will ask for some general information about yourself, but your name will not be written on this document and all information is kept confidential. Please answer all questions honestly and as completely as possible.

Section 1: Background Information

1. Sex Male [1] Female [2]	2. Month born? ____ ____ Don't know month [88] No response [99]	3. Year born? ____ ____ Don't know month [88] No response [99]	4. How old were you at your last birthday? ____ ____ Don't know month [88] No response [99]	5. Highest level of education? Primary [1] Secondary [2] Higher [3] No response [9]
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6. How long have you lived in ____ (community/town)?
____ | ____ (years)
Record 00 if less than 1 year
Don't know month [88]
No response [99]

7. What is your ethnicity?
(list locally appropriate categories)
Mixed ethnicity [0]
No response [9]

8. What is your religion?
(list locally appropriate categories)
No religion [0]
Don't know [8]
No response [9]

Section 2: Questions

Question 1: Are scientists trying to develop an HIV vaccine?

Yes [1]	No [2]	Don't know [0]
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Question 2: Is there a cure for AIDS?	Yes [1]	No [2]	Don't know [0]					
Question 3: Do you agree with the statement: "My community could really benefit from an HIV vaccine."								
Strongly Disagree [1]	Disagree [2]	Neutral [3]	Agree [4]	Strongly Agree [5]				
Question 4: Is herbal/traditional medicine an effective way to treat someone who has AIDS?				Yes [1]	No [2]	Don't know [0]		
Question 5: Do you agree with the statement: "Most people important to me would support my involvement in HIV vaccine research".				Strongly Disagree [1]	Disagree [2]	Neutral [3]	Agree [4]	Strongly Agree [5]
Question 6: Does HIV cause AIDS?				Yes [1]	No [2]	Don't know [0]		

Question 7: From the following list, please indicate which methods are able to protect one from contracting HIV:

	Yes	No	Don't know
Abstaining from sex	[1]	[2]	[0]
Not sharing food with someone who has AIDS	[1]	[2]	[0]
Having sex only with one faithful, uninfected partner	[1]	[2]	[0]
Male withdrawal before ejaculation during sex without a condom	[1]	[2]	[0]
Use of condoms during sex	[1]	[2]	[0]
Limiting the number of sexual partners or having only one sexual partner	[1]	[2]	[0]

Question 8: Is there a vaccine to prevent HIV?

Yes
[1] No
[2] Don't know
[0]

Question 9: Would you get an HIV vaccine today?

Yes
[1] No
[2] Don't know
[0]

Question 10: Is it impossible to avoid getting AIDS?

Yes
[1] No
[2] Don't know
[0]

Question 11: Can HIV be contracted by the following means:	Yes	No	Don't know
Mosquito bite	[1]	[2]	[0]
Witchcraft/supernatural means	[1]	[2]	[0]
HIV vaccine	[1]	[2]	[0]
Question 12: Can a healthy-looking person have AIDS?	Yes	No	Don't know
	[1]	[2]	[0]
Question 13: Please indicate all persons who can participate in HIV vaccine trials:	Yes	No	Don't know
HIV negative persons	[1]	[2]	[0]
HIV positive persons	[1]	[2]	[0]
No persons	[1]	[2]	[0]