



**HOUSTON HEALTH
DEPARTMENT**

2022

HIV PREVENTION NEEDS ASSESSMENT

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Methodology

Survey Sampling Plan

Houston Health Department staff calculated the 2022 Houston HIV Prevention Needs Assessment sample size based on the total number of people at-risk for HIV in the Houston/Harris County area (the number of people living with HIV (**PLWH**) subtracted from the 2019 Houston/Harris County population estimate), with a 95% confidence interval at both 3% and 5% margin of error. Respondent composition goals for the HIV Prevention Needs Assessment were based on the three-year average proportion of new diagnoses in the Houston/Harris County area. Efforts were taken to over-sample members of special populations determined by the Houston HIV Prevention Community Planning Group (transgender individuals, persons of color, and individuals between the ages of 13 – 24). As data collection was implemented, regular reports were used to help assess progress and deficiencies towards sampling goals and to adjust outreach efforts when determined necessary.

Survey Tool

Data for the 2022 Houston HIV Prevention Needs Assessment were collected using a 49-question paper and electronic survey. The survey questions included open-ended, multiple choice, and scaled questions addressing three main topics:

- HIV, sexually transmitted infection (STI), and hepatitis C prevention service needs, accessibility, and barriers
- Prevention behaviors among respondents
- Social Determinants

The survey tool was developed by Houston Health Department staff, reviewed and approved by the Houston HIV Prevention Community Planning Group for relevancy, clarity and to ensure the use of non-stigmatizing language. A cover sheet was provided in both the paper and electronic version of the survey that explained the purpose of the survey, ensure anonymity of the respondents, planned data uses, and consent. The survey and promotional material were translated to Spanish as well to ensure that monolingual Spanish speakers had access to the survey.

Data Collection

Respondents for the 2022 HIV Prevention Needs Assessment were recruited through the flyers, word of mouth, print and electronic advertisement via social

media, and staff promotion at community events within Houston/Harris County.

Inclusion criteria were individuals of negative or unknown HIV status, and PLWH that live within the Houston/Harris County area. Participants were self-selected and self-identified according to these criteria. Surveys were self-administered in English and Spanish both in paper and electronic formats.

Participation in the needs assessment was voluntary, anonymous, and monetarily incentivized; respondents were advised of these conditions verbally and in writing. On average, the survey took participants 10 to 15 minutes to complete. No questions in the survey were required to be answered by respondents, as the nature of many of these questions were personal and respondents might not have felt comfortable disclosing certain information. In total, 629 surveys were collected between April 2022 to June 2022.

Data Management

Data was primarily collected and managed using Qualtrics, an electronic survey platform. Paper surveys that were collected during the collection period were entered as reported by the respondent by Houston Health Department staff into the Qualtrics platform. Data cleaning and preliminary analyses were conducted on a weekly basis to ensure data quality, and to assess progress and deficiencies towards sampling goals so that outreach efforts could be adjusted if needed. The sensitive nature of the questions being asked in the 2022 HIV Prevention Needs Assessment resulted in some responses being missing or invalid. These responses were coded as unknown during analysis and excluded from the denominator in some variables analyzed. Proportions in this report represent the total number of valid and non-missing responses, and not the total number of completed survey responses. Some responses in the survey provided a “check all that apply” option, which result in the denominator representing the total number of responses rather than the total number of valid or non-missing responses. Data analysis was performed using SAS 9.4 and QSR International© NVivo 10.

Limitations

The 2022 Houston HIV Prevention Needs Assessment was successful in reaching the sampling goals set forth, and collecting rich quantitative and qualitative data on HIV, STI, and hepatitis C prevention services and behaviors in the Houston/Harris County area. However, there are limitations to the generalizability, reliability, and accuracy of the results that should be considered in using this data for planning or other needs.

- *Convenience Sampling.* Outreach efforts utilized a multitude of avenues to ensure that the sample of respondents were representative of not only the Houston/Harris County area, but those most at-risk for HIV, STI, and hepatitis C acquisition. However, respondents that were surveyed were not randomly selected which resulted in the sample not being completely proportional to those at-risk for HIV, STI and hepatitis C in the Houston area.
- *Margin of Error.* The minimum sample size goal of 384 with a 5.00% margin of error and a 95% confidence interval was met for the 2022 HIV Prevention Needs Assessment. This indicates that 95% of the time, the quantitative results reported in this document are anticipated to be correct by a

margin of 5 percentage points. For these reasons, the results reported in this document are statistically significant, generalizable, and are suitable for HIV planning purposes as they draw general conclusions about the overall HIV, STI and hepatitis C needs and experiences of the Houston area.

- *Reporting Bias.* Survey participants were self-selected and self-identified, and responses were self-reported by respondents. The survey responses that were collected were anonymous and could not be corroborated with additional data sources. Therefore, this data should not be used as empirical evidence of reported health or treatment outcomes but the experiences of the respondents that completed surveys.
- *Survey Tool.* Full data accuracy could not have been assured during the data collection process due to factors such as variability in comprehension due to language barriers, misinterpretation of the survey question being asked, and/or literacy. The sensitive nature of the questions being asked also could have resulted in individuals not feeling comfortable enough to answer the questions being asked in the survey.

HIV in Houston

Houston is the fourth largest city in the United States, the largest city in the State of Texas, and is one of the most racially and ethnically diverse major American metropolitan areas. The City of Houston spans nearly 600 square mile and is one of the least densely populated major metropolitan areas in the country. Houston also sits within the most populous county in the State of Texas and third most populous county in the United States. The United States Census Bureau estimates that Harris County has almost 4.7 million residents living with the county line, and about half of which live in the City of Houston.

In 2020, 934 new diagnoses of HIV were reported in Houston/Harris County, which is lower than the 1,200 average number of new cases that are reported year after year. Significant barriers to HIV prevention services caused by the COVID-19 pandemic in 2020 can be attributed to the lower-than-average number of newly reported HIV cases and should not be seen as a significant reduction in the number of new HIV diagnoses in Houston/Harris County. Despite the reduction of new cases reported in 2020, the trends in proportion of new HIV cases among demographic groups remained considerably the same – Black/African Americans making up the majority of new HIV cases (47%, n=437), followed by Hispanic/Latinos (39%,N=362); Male-to-male contact (MSM) accounting for the most at-risk for HIV transmission (75%, n=701); Males being majority of new HIV cases reported (84%, n=789).

Table 1. New Diagnoses of HIV in Houston/Harris County by Select Demographic Characteristics, 2020

	Cases	%
Total	934	100%
Sex Assigned at Birth		
Male	789	84%
Female	145	16%
Race/Ethnicity		
White	106	11%
Black/African American	437	47%
Hispanic/Latino	362	39%
Other/Multiple Races	29	3%
Age at Diagnosis		
0 – 24 ¹	240	26%
25 – 34	351	38%
35 – 44	166	18%
45 – 54	94	10%
55+	83	9%
Transmission Risk²		
Male-to-male sexual contact (MSM)	701	75%
Person who injects drugs (PWID)	42	5%
MSM/PWID	16	2%
Sex with male/Sex with female	173	19%

¹Age group 0-12 years were combined with 13-24 years because 0-12 years category had less than 5 cases and could not be reported

²Cases with no reported risk and no identified risk were re-categorized into standard categories using CDC's multiple imputation program.

Demographics

The following summary and tables below describe the demographic and special characteristics of the 2022 Houston HIV Prevention Needs Assessment participants. These demographic and special characteristics help to better understand the diverse array of people who are and who are not utilizing HIV, STI and hepatitis C prevention services and their prevention behaviors in Houston/Harris County.

(Table 2) When looking at age groups of respondents that took the 2022 HIV Prevention Needs Assessment, respondents were primarily between the ages of 25 to 34 (51%), followed by 35 to 44 years old and 13 to 24 years old (both 16%). Youth (13 to 27 years old) made up 36% of the total respondents of the needs assessment while seniors (50+) made up 18% of the total respondents. The median age of the respondents was 30 years old.

The racial and ethnic make-up of the respondents to the 2022 HIV Prevention Needs Assessment were nearly split between individuals that identified as Hispanic/Latino (54%), followed by Non-Hispanic White (24%), and Non-Hispanic Black/African American (20%). Other race categories were selected by participants but did not specify what ‘other’ race/ethnicity group they identified as.

The participants were primarily female assigned at birth and identified as cisgender women (51%, both). Transgender individuals made up 2% of the total needs assessment sample, with 1% identifying as transgender men, and 1% as transgender women.

The 2022 HIV Prevention Needs Assessment respondents overwhelmingly identified as straight/heterosexual (70%), followed by gay and bisexual (19% and 5%, respectively). Two respondents selected ‘other’ as their sexual orientation, with one stating their sexual orientation as “solo sexual/masturbation”.

When examining the marital status of the survey participants, respondents reported primarily being single (48%), and married/domestic partnership (45%).

	N	%
Age Groups		
13-24 years	85	16%
25-34 years	273	51%
35-44 years	88	16%
45-54 years	31	6%
55-64 years	32	6%
65 and older	26	5%
Race/Ethnicity		
Hispanic/Latino	456	54%
American Indian or Alaska Native	1	0%
Asian	7	1%
Black or African American	170	20%
Native Hawaiian or Pacific Islander	2	0%
White	203	24%
Other	3	0%
Sex		
Male	266	49%
Female	278	51%
Gender		
Man	256	47%
Woman	280	51%
Transgender Man	3	1%
Transgender Woman	4	1%
Other Gender/Non-binary	1	0%
Sexual Orientation		
Straight	378	70%
Gay	103	19%
Lesbian	15	3%
Bisexual	29	5%
Pansexual	8	1%
Asexual	3	1%
Not Sure	4	1%
Other	1	0%
Marital Status		
Single	260	48%
Married/Domestic Partnership	148	45%
Divorced	28	5%
Separated	3	1%
Widowed	6	1%

Prevention Service Needs & Barriers

Service Needs & Barriers

The primary purpose of the HIV Prevention Needs Assessment is to assess the needs and barriers to HIV, STI, and Hepatitis prevention services in the Houston/Harris County area. The 2022 HIV Prevention Needs Assessment examined the service needs and barriers for 13 identified prevention services provided in the Houston/Harris County area and participants were asked about the service needs and barriers they experienced in the past 12 months.

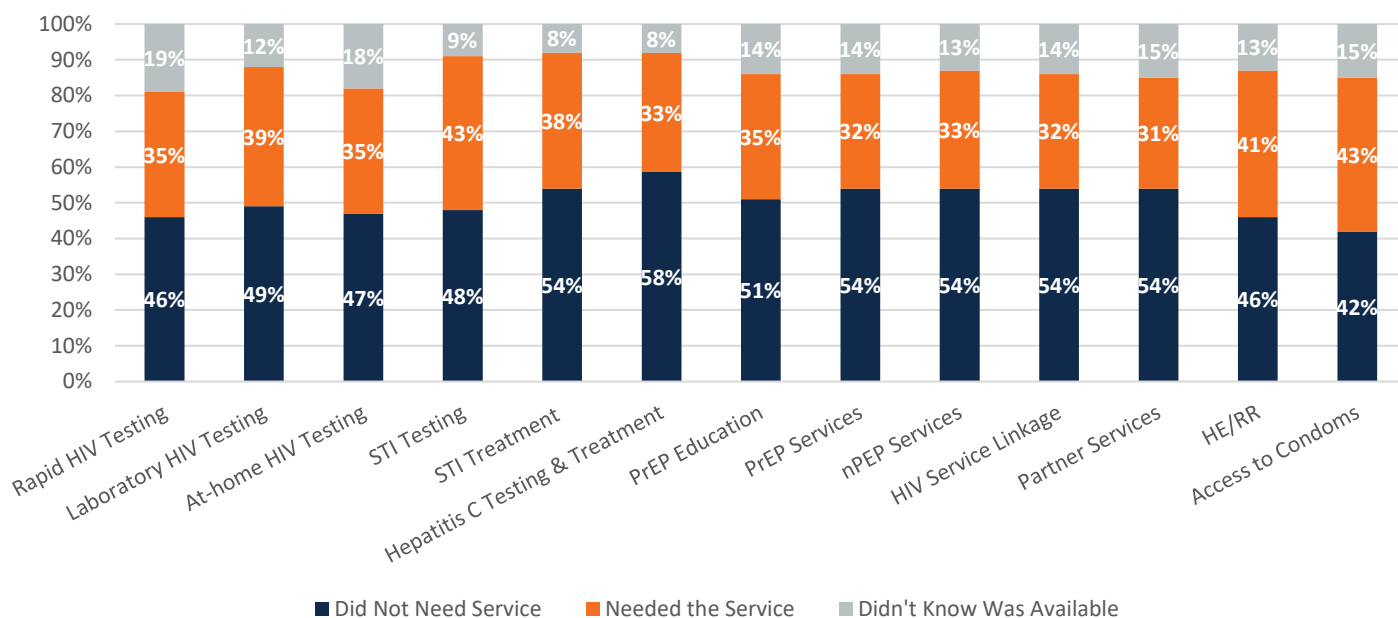
(Chart 1) The chart below shows the responses provided by the 2022 HIV Prevention Needs Assessment participants about their HIV, STI, and Hepatitis service prevention needs and barriers. Participants were asked if they needed the service or did not need the service in the past 12 months, as well as if they knew the service was available.

Among all 13 services that were listed, STI (gonorrhea, chlamydia, and syphilis) testing and access to free condoms were the most needed services (both 43%), followed by Health Education/Risk Reduction (**HE/RR**) (41%), and Laboratory HIV Testing (39%).

Respondents of the needs assessment reported the least need for Hepatitis C Testing & Treatment (58%), Partner Services, PrEP (**Pre-exposure Prophylaxis**) services, HIV Service Linkage, nPEP (**Non-occupational Post-Exposure Prophylaxis**) Services, and STI Treatment (all, 54%).

When asked about knowledge of available services, respondents reported not knowing about Rapid HIV Testing (19%), At-home HIV Testing (18%), and Partner Services and Access to Free Condoms (both 15%) the most out of all 13 services listed.

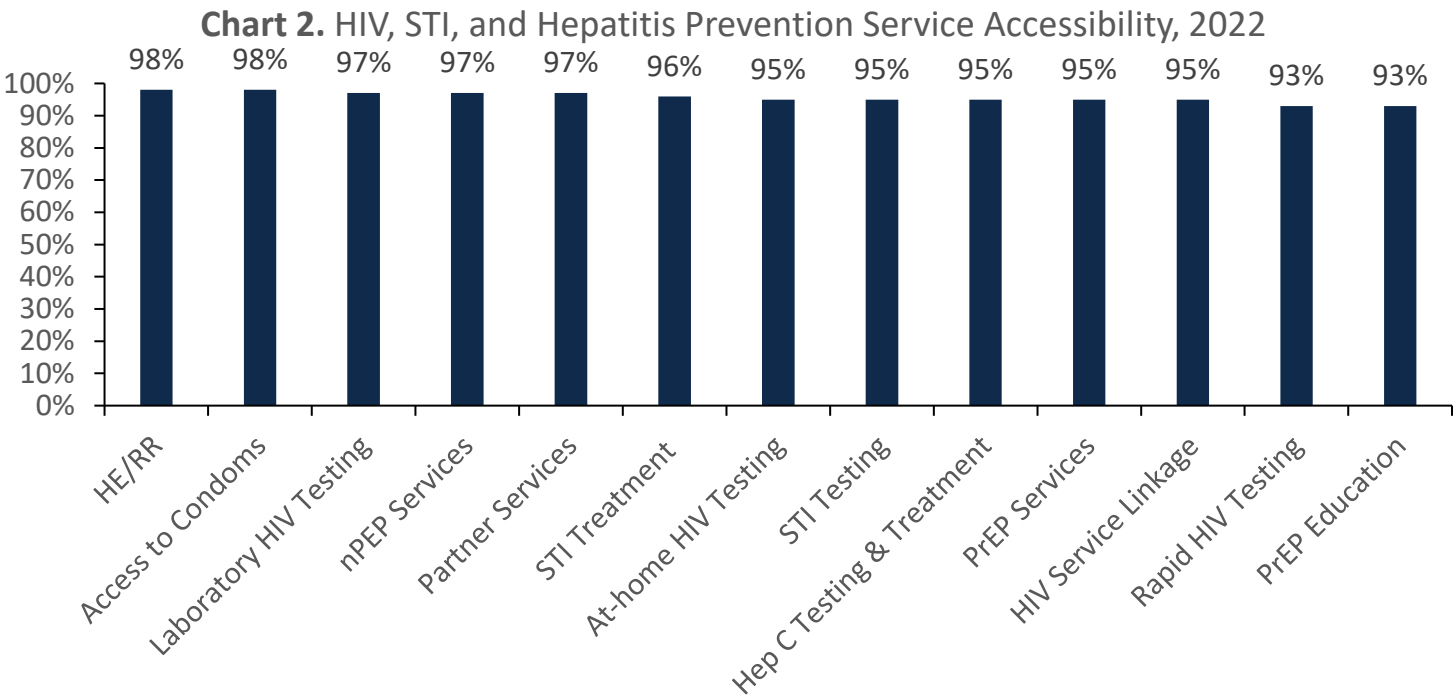
Chart 1. HIV, STI, and Hepatitis C Prevention Service Needs in Houston/Harris County, 2022



Service Accessibility

The 2022 HIV Prevention Needs Assessment participants were asked if each of the 13 services they needed in the past 12 months were easy or difficult to access. If difficulty was reported, participants were asked to describe what factors made accessing the service difficult. The following data reported details the percentage of participants that reported needing the service in the past 12 months and not experiencing difficulty or barriers in accessing the prevention service.

(**Chart 2**) Among the 13 HIV, STI, and Hepatitis prevention services, Health Education/Risk Reduction (**HE/RR**) and Access to Free Condoms were the most accessible services (both 98%), followed by Laboratory HIV Testing, nPEP (**Non-occupational Post Exposure Prophylaxis**) Services, and Partner Services (all 97%). The HIV, STI, and Hepatitis prevention services that participants reported the most barriers to access were Rapid HIV Testing and PrEP (**Pre-Exposure Prophylaxis**) Education (both 93%).

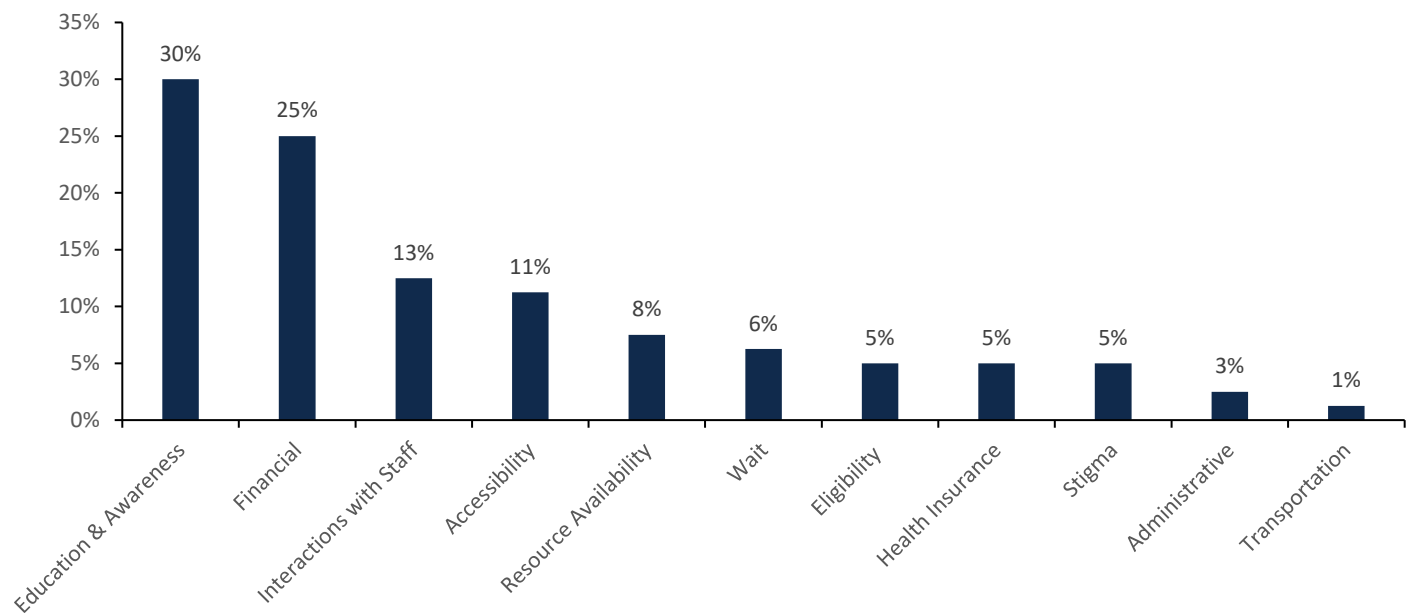


Service Barriers

Participants of the 2022 HIV Prevention Needs Assessment that indicated they needed a HIV, STI, or hepatitis prevention service in the previous 12 months were asked if they had any difficulty in accessing the service. If respondents encountered difficulties, they were asked to provide a brief description on the barrier or barriers that they encountered. Descriptions that were provided were then analyzed using recursive abstraction to categorize these barriers experienced by participants into 39 distinct barriers, which were then grouped into 12 unique barrier types.

(Chart 3) Participants reported very few barriers to HIV, STI, and hepatitis prevention services, with only 80 reports being gathered from all the respondents of the needs assessment. The most common reported barrier types by participants were education and awareness (30%), financial barriers (25%), interactions with staff (13%), and accessibility of the services (11%).

Chart 3. Prevention Service Barrier Types in Houston, Harris County, 2022



(Table 3) Among education and awareness barriers, 50% were due to not knowing where to go to access the prevention services, 33% were due to not knowing who to contact for the prevention services, 13% was due to not knowing what the service entirely entails, and 4% was due to not knowing the service was available.

All barriers related to financial barriers were due to not being able to afford the prevention services. Among

barriers attributed to interactions with staff, 36% were due to provider/staff resistance in providing a prevention service, 27% was due to poor treatment by staff/providers, 18% due to communication issues from the staff/provider with the client, and 18% were due to staff having limited to no knowledge of the prevention service.

Table 3. Barriers and Barrier Types to HIV Prevention Services, 2022

Education & Awareness	%	Wait-Related Issues	%	Interactions with Staff	%
Availability (Didn't know the service was available)	4%	Waitlist (Put on a waitlist)	20%	Communication (Poor correspondence/Follow up from staff)	18%
Definition (Didn't know what the service entails)	13%	Unavailable (Waitlist full/ not available resulting in client not being placed on waitlist)	40%	Poor Treatment (Staff insensitive to clients)	27%
Location (Didn't know where to go [location or location w/in agency])	50%	Wait at Appointment (Appointment visits take long)	20%	Resistance (Staff refusal/resistance to assist clients)	36%
Contact (Didn't know who to contact for service)	33%	Approval (Long durations between application and approval)	20%	Staff Knowledge (Staff has no/limited knowledge of service)	18%
				Referral (Received service referral to provider that did not meet client needs)	0%
Eligibility	%	Administrative Issues	%	Health Insurance	%
Ineligible (Did not meet eligibility requirements)	50%	Staff Changes (Change in staff w/o notice)	0%	Uninsured (Client has no insurance)	100%
Eligibility Process (Redundant process for renewing eligibility)	0%	Understaffing (Shortage of staff)	0%	Coverage Gaps (Certain services/medications not covered)	0%
Documentation (Problems obtaining documentation needed for eligibility)	50%	Service Change (Change in service w/o notice)	0%	Locating Provider (Difficulty locating provider that takes insurance)	0%
		Complex Process (Burden of long complex process for accessing services)	0%	ACA (Problems with ACA enrollment)	0%
		Dismissal (Client dismissal from agency)	0%		
		Hours (Problems with agency hours of operation)	100%		
Transportation	%	Financial	%	Accessibility	%
No Transportation (No or limited transportation options)	100%	Financial Resources (Could not afford service)	100%	Literacy (Cannot read/difficulty reading)	0%
Providers (Problems with special transportation providers such as Metrolify or Medicaid transportation)	0%			Spanish Services (Services not made available in Spanish)	44%
				Released from Incarceration (Restricted from services, due to probation, parole, or felon status)	0%
				Distance (Service not offered within accessible distance)	56%
Resource Availability	%	Housing	%	Employment	%
Insufficient (Resource offered insufficient for meeting need)	83%	Homeless (Client is without stable housing)	0%	Unemployed (Client is unemployed)	0%
Quality (Resource quality was poor)	17%	IPV (Interpersonal domestic issues make housing situation unsafe)	0%	Leave (Employer does not provide sick/wellness leave for appointments)	0%

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				Referral (Received service referral to provider that did not meet client needs)	0%
Eligibility	%	Administrative Issues	%	Health Insurance	%
Ineligible (Did not meet eligibility requirements)	50%	Staff Changes (Change in staff w/o notice)	0%	Uninsured (Client has no insurance)	100%
Eligibility Process (Redundant process for renewing eligibility)	0%	Understaffing (Shortage of staff)	0%	Coverage Gaps (Certain services/medications not covered)	0%
Documentation (Problems obtaining documentation needed for eligibility)	50%	Service Change (Change in service w/o notice)	0%	Locating Provider (Difficulty locating provider that takes insurance)	0%
		Complex Process (Burden of long complex process for accessing services)	0%	ACA (Problems with ACA enrollment)	0%
		Dismissal (Client dismissal from agency)	0%		
		Hours (Problems with agency hours of operation)	100%		
Transportation	%	Financial	%	Accessibility	%
No Transportation (No or limited transportation options)	100%	Financial Resources (Could not afford service)	100%	Literacy (Cannot read/difficulty reading)	0%
Providers (Problems with special transportation providers such as Metrolify or Medicaid transportation)	0%			Spanish Services (Services not made available in Spanish)	44%

		<div>Released from Incarceration0% (Restricted from services, due to probation, parole, or felon status)</div> <div>Distance56% (Service not offered within accessible distance)</div>			
Resource Availability	%	Housing	%	Employment	%
Insufficient83% (Resource offered insufficient for meeting need)		Homeless0% (Client is without stable housing)		Unemployed0% (Client is unemployed)	
Quality17% (Resource quality was poor)		IPV0% (Interpersonal domestic issues make housing situation unsafe)		Leave0% (Employer does not provide sick/wellness leave for appointments)	

Prevention Behaviors

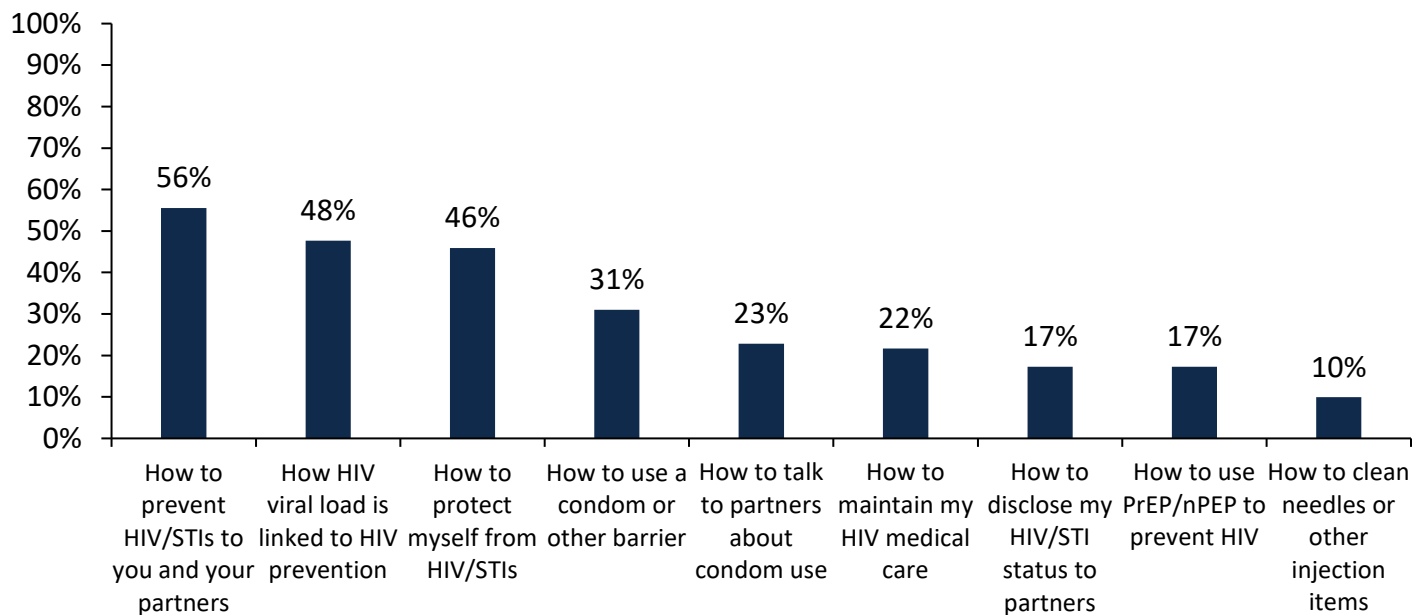
Prevention Messaging

Participants of the 2022 HIV Prevention Needs Assessment were asked about HIV, STI, and Hepatitis C prevention messaging, what prevention messaging they received, and how they received the prevention messaging in the past 12 months.

When asked if participants had received some type of HIV, STI, or Hepatitis C prevention messaging in the past 12 months, 55% of respondents said they had received some form of prevention messaging and 45% reported not receiving any prevention messaging in the past 12 months. Among those who said they had received

prevention messaging in the past 12 months, participants reported hearing how to prevent HIV/STIs to themselves and their partners the most (56%), followed by how viral load is linked to HIV prevention (48%) and how to protect yourself from HIV/STIs (46%). Individuals who had received prevention messaging in the past 12 months reported hearing the following messaging the least – how to disclose HIV/STI status to partners (17%), how to use PrEP/nPEP to prevent HIV (17%), and how to clean needles or other injection equipment (10%). **Chart 4** below further describes the messaging received by participants.

Chart 4. Prevention Messaging Received in the Past 12 Months in Houston/Harris County, 2022

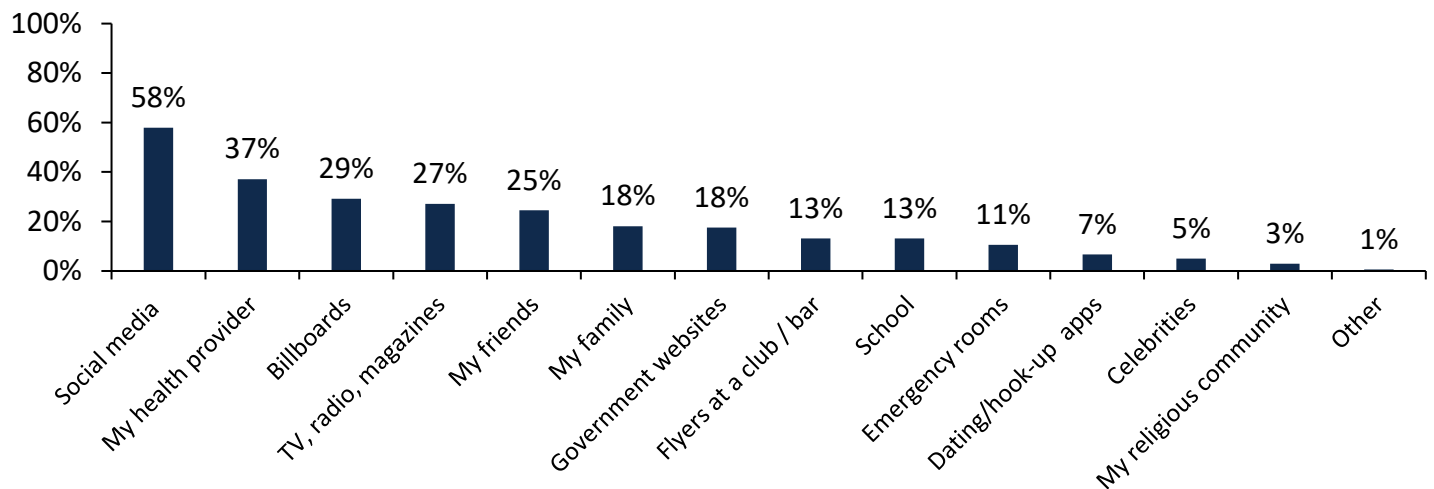


Participants that had received prevention messaging were also asked where they received the HIV, STI, and Hepatitis prevention messaging from in the 2022 HIV Prevention Needs Assessment. Respondents reported receiving prevention messaging from social media (Facebook, Twitter, Instagram, etc.) the most (58%), followed by their health care provider (37%), billboards (29%), and other media sources such as TV, radio, newspapers, etc. (27%). Individuals reported receiving prevention messaging the least through their religious

community (3%), celebrities (5%), and from dating or hook-up websites/apps (7%). **Chart 5** below details the total responses gathered when asked about where people received HIV, STI and Hepatitis prevention messaging.

Individuals did indicate they received prevention messaging in places other than the ones listed in the survey (1%) and reported focus groups and their jobs as places they received prevention messaging.

Chart 5. HIV, STI, and Hepatitis Prevention Messaging Sources in Houston/Harris County, 2022

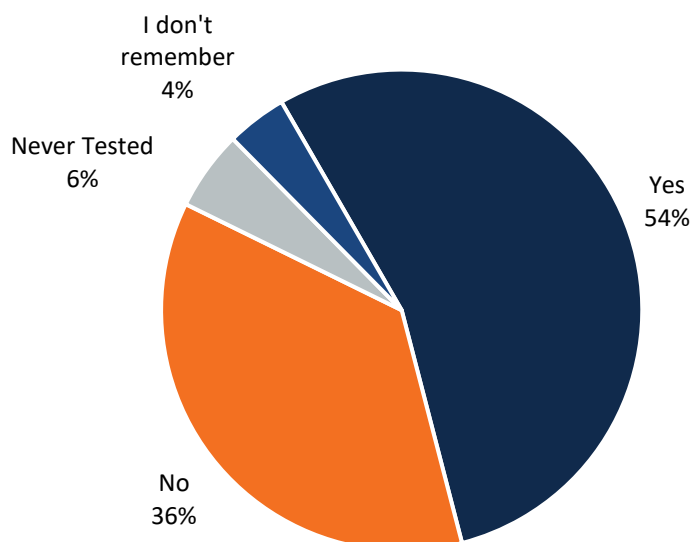


HIV Testing

The 2022 HIV Prevention Needs Assessment asked participants questions regarding their HIV testing behaviors. Questions asked regarding HIV testing were if participants had tested for HIV in the past 12 months, why they did not test for HIV in the past 12 months, when their most recent HIV test was, and where their most recent HIV test was conducted.

(Graph 1) When asked if participants had tested for HIV in the past 12 months, 54% had stated they had tested for HIV, 36% stated they had not tested for HIV, 5% stated they have never tested for HIV, and 4% stated they don't remember if they tested for HIV in the past 12 months.

Graph 1. HIV Testing in the Past 12 Months in Houston/Harris County, 2022

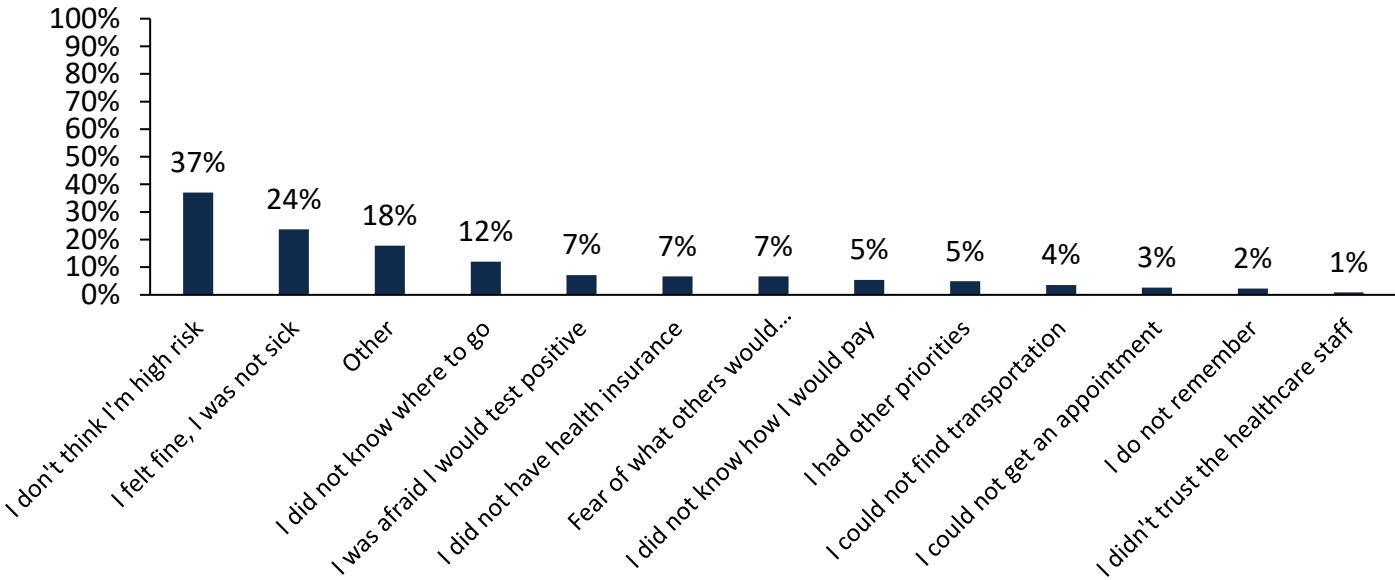


(Chart 6) Among the respondents stating they had not tested for HIV in the past 12 months, the most reported reason for not testing for HIV were because they did not think they were high risk for HIV transmission (37%), they did not feel sick (24%), and other reasons. These other reasons reported by participants were that the participants were not sexually active during the past 12 months, they were in a monogamous relationship, they are already living with HIV, they were not exposed during

the past 12 months, they did not need to test or think it was necessary and because their doctor did not offer to test for HIV.

The least common reasons for not testing for HIV in the past 12 months were because the participant did not trust the healthcare staff (1%), they could not get an appointment (2%), and they could not find transportation (3%).

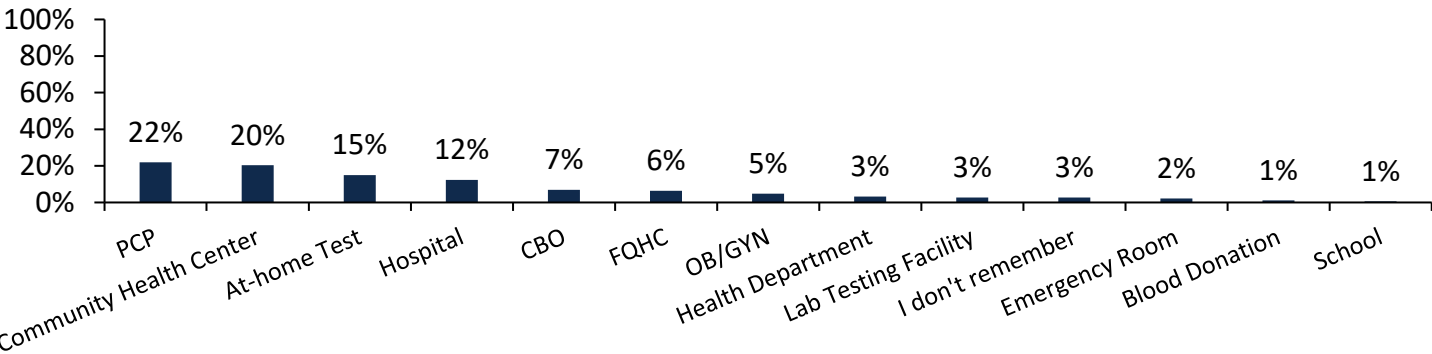
Chart 6. Reasons For Not Testing For HIV in the Past 12 Months in Houston/Harris County, 2022



(Chart 7) When participants were asked where their most recent HIV test was, many participants reported testing for HIV at their primary care physician (PCP) the most (22%), followed by at a community health center

(20%), and by taking an at-home HIV test (15%). The least common places that respondents reported testing for HIV were at schools (1%), at blood donation centers (1%), and at emergency rooms (2%).

Chart 7. Location of Most Recent HIV Test in Houston/Harris County, 2022



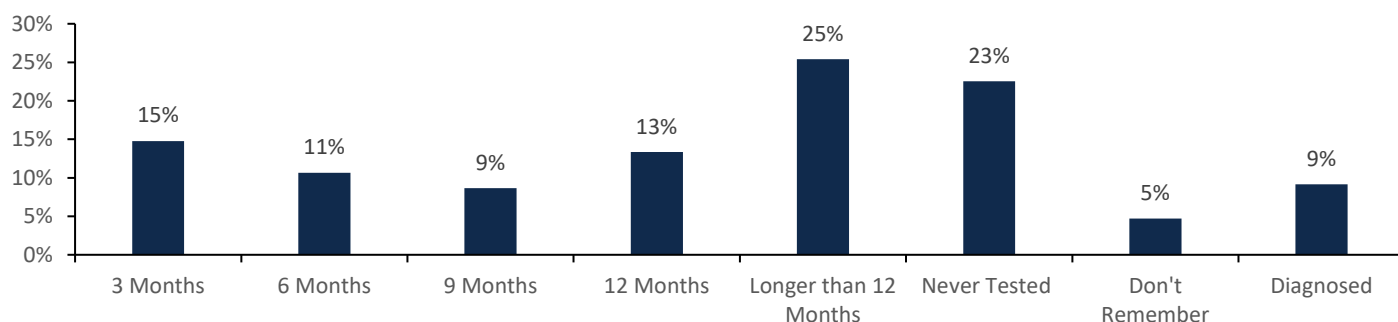
STI & Hepatitis Testing

Participants of the 2022 HIV Prevention Needs Assessment were asked if they had been tested, diagnosed and/or treated for chlamydia, gonorrhea, syphilis and/or hepatitis C in the past 3, 6, 9, and/or 12 months. Results for each STI and for hepatitis can be found in the charts below:

(Chart 8) Among the needs assessment participants, 15% had tested for chlamydia within the past 3 months, 13%

within the past 12 months, 25% had their last test longer than 12 months ago, and 23% had never tested for chlamydia at all. 9% of respondents that reported testing for chlamydia reported being diagnosed with chlamydia. 86% of the respondents who were diagnosed with chlamydia completed treatment, 11% had not completed treatment, and 3% reported never getting treatment for chlamydia.

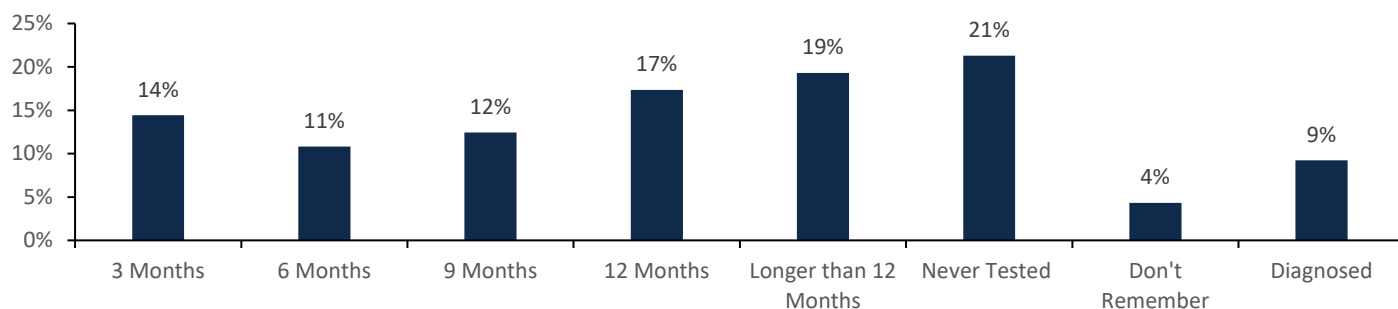
Chart 8. Chlamydia Testing and Diagnosis in Houston/Harris County, 2022



(Chart 9) Among the needs assessment participants, 14% had tested for gonorrhea within the past 3 months, 17% within the past 12 months, 19% had their last test longer than 12 months ago, and 21% had never tested for gonorrhea at all. 9% of respondents that reported

testing for gonorrhea also reported being diagnosed with gonorrhea. 42% of the respondents who were diagnosed with gonorrhea completed treatment, 47% had not completed treatment, and 5% reported never getting treatment for gonorrhea.

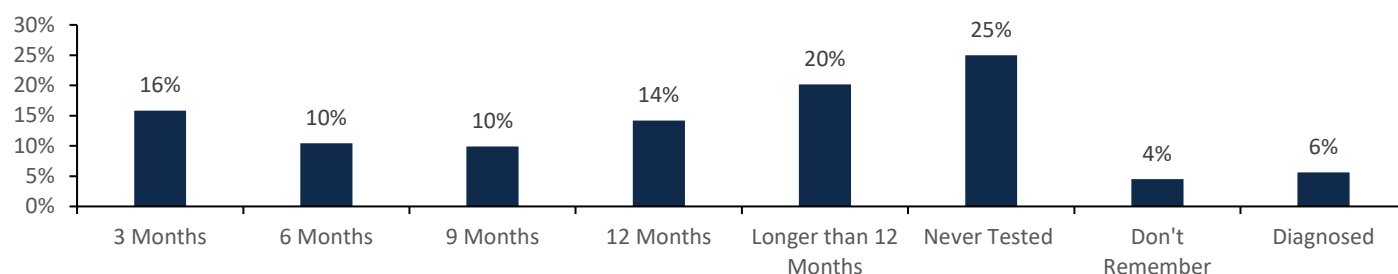
Chart 9. Gonorrhea Testing and Diagnosis in Houston/Harris County, 2022



(Chart 10) Among the needs assessment participants, 16% had tested for syphilis within the past 3 months, 14% within the past 12 months, 20% had their last test longer than 12 months ago, and 25% had never tested for syphilis at all. 6% of respondents that reported testing

for syphilis reported being diagnosed with syphilis. 86% of the respondents who were diagnosed with syphilis completed treatment, 9% had not completed treatment, and 5% reported never getting treatment for syphilis.

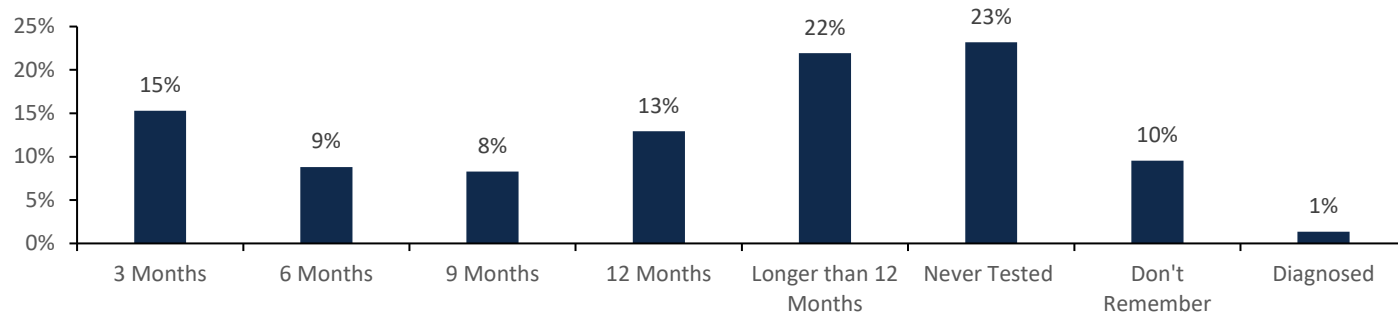
Chart 10. Syphilis Testing and Diagnosis in Houston/Harris County, 2022



(Chart 11) Among the needs assessment participants, 15% had tested for hepatitis C within the past 3 months, 13% within the past 12 months, 22% had their last test longer than 12 months ago, and 23% had never tested for hepatitis C at all. 1% of respondents that reported

testing for hepatitis C reported being diagnosed with hepatitis C. 60% of the respondents who were diagnosed with hepatitis C completed treatment, 40% had not completed treatment, and 0% reported never getting treatment for hepatitis C.

Chart 11. Hepatitis C Testing and Diagnosis in Houston/Harris County, 2022



PrEP & nPEP

Participants of the 2022 HIV Prevention Needs Assessment were asked questions regarding PrEP and nPEP awareness, awareness of resource locations, and uptake in the past 12 months. PrEP, Pre-Exposure Prophylaxis, is a medication for individuals that do not have HIV that reduces your chances of getting HIV from sex or injection drug use. nPEP, Non-occupational Post-Exposure Prophylaxis, is a medication that an individual who does not have HIV can take to prevent acquiring HIV if they think they may have been exposed through sex or needle sharing in the last 72-hours.

(Table 1) When asked if participants had ever heard of PrEP, 69% of respondents were PrEP aware compared to 31% of participants who were not aware. When asked if they knew where someone can go to get PrEP, 56% of participants said they knew where to get PrEP while 44% said they did not know where to get PrEP. Individuals that heard of PrEP were 6.54 times as likely to know where to get PrEP.

Table 4. PrEP Awareness and PrEP Resource Awareness in Houston/Harris County, 2022				
Do you know where to get PrEP?				Total
	Yes	No		
Have you heard of PrEP?	Yes	52%	17%	69%
	No	4%	27%	31%
	Total	56%	44%	

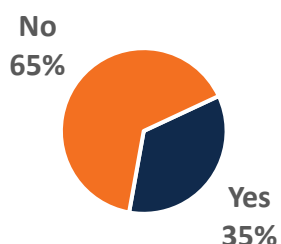
(Table 2) When asked if participants had ever heard of nPEP, 63% of respondents were nPEP aware compared to 37% who were not aware. When asked if they knew where someone can go to get nPEP, 54% of respondents

said they knew where to get nPEP while 46% said they did not know where to get nPEP. Individuals that heard of nPEP were 7.49 times as likely to know where to get nPEP.

Table 5. nPEP Awareness and nPEP Resource Awareness in Houston/Harris County, 2022				
Do you know where to get PrEP?				Total
	Yes	No		
Have you heard of PrEP?	Yes	50%	13%	63%
	No	4%	33%	37%
	Total	54%	46%	

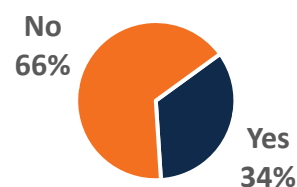
(Chart 12) When participants were asked about PrEP use in the past 12 months, 35% of participants reported having used PrEP in the past 12 months while 65% of participants reported not having used PrEP in the past 12 months.

Chart 12. PrEP Use in the Past 12 Months in Houston/Harris County, 2022



(Chart 13) When participants were asked about nPEP use in the past 12 months, 34% of participants reported having used nPEP in the past 12 months while 66% of participants reported not having used nPEP in the past 12 months.

Chart 13. nPEP use in the Past 12 Months in Houston/Harris County, 2022



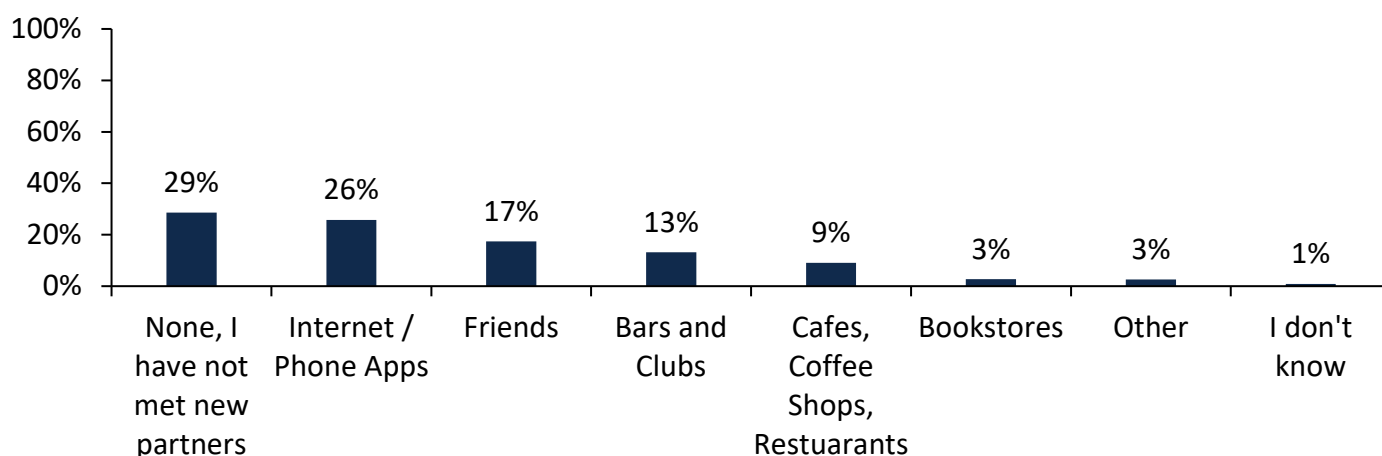
Sex Partners

Questions were asked of the 2022 HIV Prevention Needs Assessment participants regarding where they met their sex partners in the past 6 months, the number of sex partners they have had in the past 6 months, how often they discuss HIV/STI status with their partners, and the HIV status of their partners.

(Chart 14) When asked where respondents met their sex partners in the past 6 months, many participants reported not meeting any new sex partners in the past 6 months (29%). Among the participants that did meet

new sex partners in the past 6 months, 26% reported meeting partners through internet and phone apps, 17% reported meeting partners through friends, and 13% reported meeting partners at bars and clubs. Respondents also reported meeting sex partners at events in the Houston/Harris County area, public transit stops, work, school, saunas, and social media. The median number of new sex partners reported by respondents in the past 6 months was 2 with respondents reporting as few as 1 new partner and as many as 60 new partners in the past 6 months.

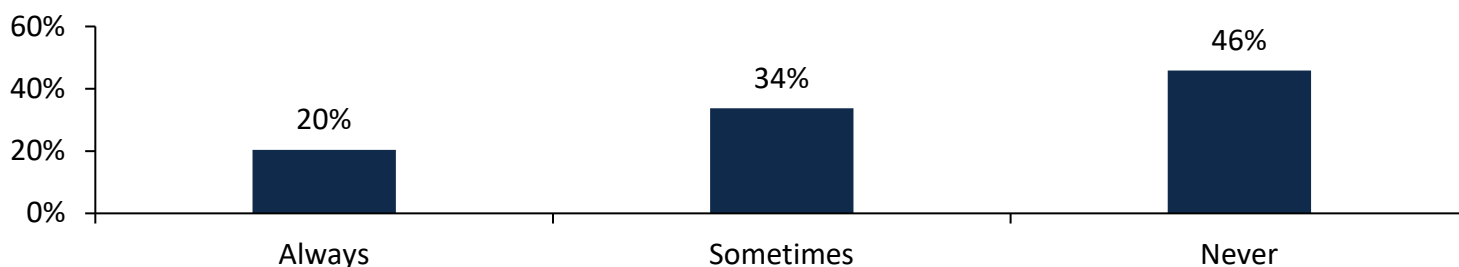
Chart 14. Where Respondents Met Sex Partners in the Past 6 Months in Houston/Harris County, 2022



(Chart 15) Respondents were also asked how often they discuss their HIV/STI status with their partners. Among those that reported having a new sex partner in the past 6 months, respondents mostly reported that they never talk about their HIV/STI status with their partners (46%).

34% of respondents reported that they sometimes talking about their HIV/STI status with partners and 20% of respondents reported that they always talk about their HIV/STI status with their partners.

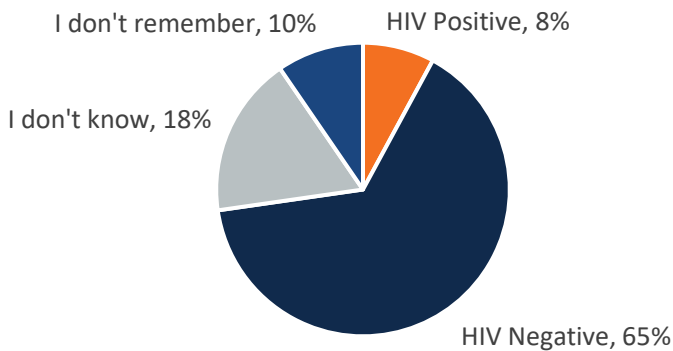
Chart 15. Discussing HIV/STI Status with Sex Partners, 2022



(Chart 16) Participants of the 2022 HIV Prevention Needs Assessment were also asked about the HIV status of their sex partners in the past 6 months. 8% of respondents reported at least one of their sex partners in the past 6 months as living with HIV and 65% of respondents reported that at least one of their sex partners were HIV

negative. Among those with a HIV-negative partner, 69% reported their partner currently taking PrEP. 18% of participants reported not knowing the HIV status of their sex partners, and 10% stated that they do not remember the HIV status of the sex partners in the past 6 months.

Chart 16. HIV Status of Sex Partners in the Past 6 Months, 2022



Condom Use

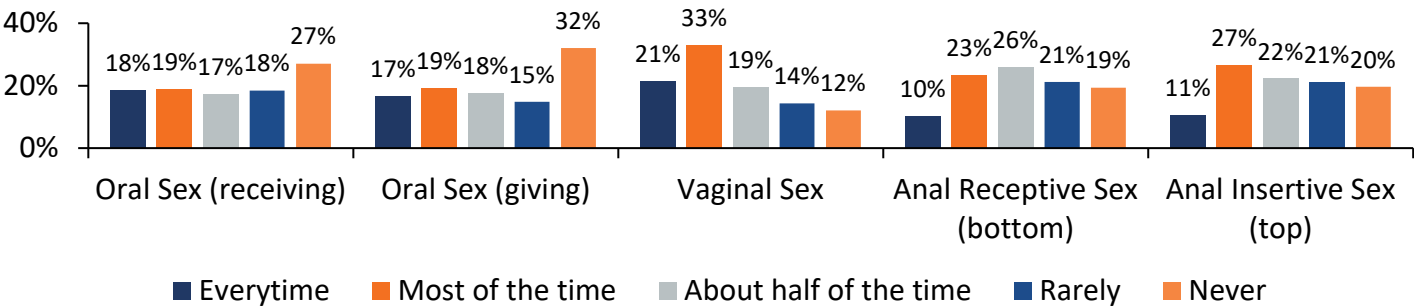
Participants of the 2022 HIV Prevention Needs Assessment were asked details about their current sexual activity (oral, vaginal, and anal sex) and the use of condoms. If a participant reported no condom use or inconsistent condom use with sexual activity, they were also asked to report why they did not or inconsistently used condoms during these sexual activities. Participants who reported no new sexual partners in the past 6 months were excluded from the following analysis.

(Chart 17) Among participants who reported at least one new sexual partner in the past 6 months, 38% reported that they always use condoms during at least one type of sexual activity (oral sex, vaginal sex, anal sex). Condom use was reported less frequently by participants when

participating in oral sex, with 32% of participants reporting no condom use when they give oral sex and 27% when they receive oral sex. Participants who reported having vaginal sex reported the highest consistent and moderately consistent condom use with 21% of participants always using a condom and 33% using a condom most of the time.

Participants who reported participating in insertive (top) and receptive (bottom) anal sex reported higher proportions of inconsistent condom use compared to other sexual activities with 26% of those who participate in anal receptive sex (bottom) and 22% of those who participate in anal insertive sex (top) using condoms about half the time.

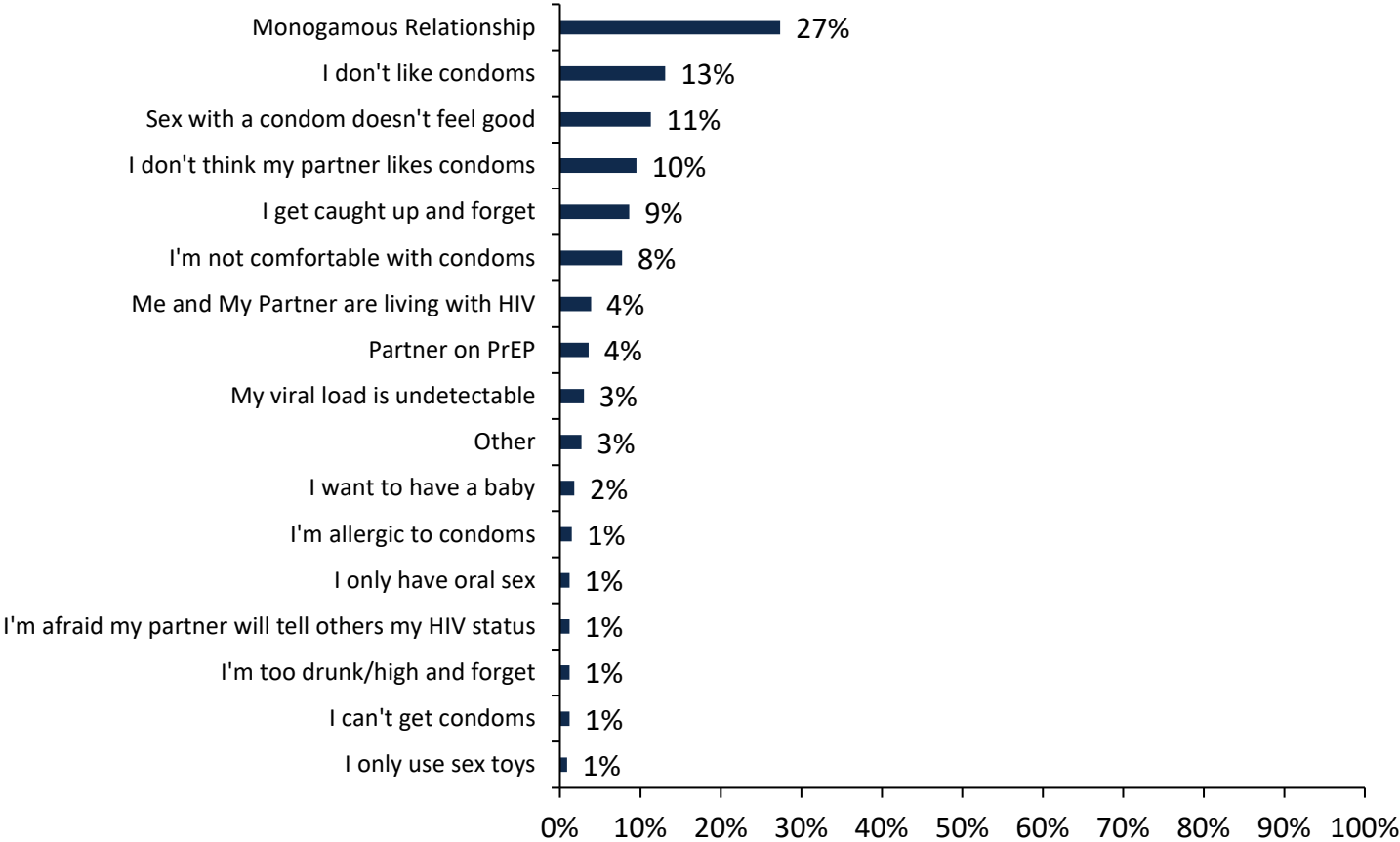
Chart 17. Condom Use by Type of Sexual Activity, 2022



(Chart 18) Participants with inconsistent or no condom use were asked about their reasons as to why they did not use condoms by selecting from a list of common reasons for lack of condom use and could write in answers as well. The most frequently cited reason for inconsistently or not using condoms at all were because the participants were in a monogamous relationship (27%). The next most reported reasons for inconsistent or no condom use were because the respondents don't like condoms (13%), sex did not feel as good with a

condom (11%) and because they thought their partners did not like condoms. Other reasons that were reported by respondents were that they were a lesbian, they have dedicated partners who they only have sex with, sometimes they just do not have them in the moment, they are on birth control or because they couldn't get pregnant.

Chart 18. Reasons Why No or Inconsistent Condom Use



Injection Drug Use

In the 2022 HIV Prevention Needs Assessment participants were asked about their injection drug/substance use. Participants were asked if they had ever injected drugs/substance in the past 12 months, how often they shared their injection equipment with others, and how often they cleaned their injection equipment. When we refer to substances in this report, we include the following: medications, insulin, steroids, hormones, or silicone.

Among all needs assessment respondents 16% reported that they had injected drugs and/or substance in the past 12 months. (Chart 19) Among the participants that have injected drugs/substances in the past 12 months, 37% reported they never share their equipment, 35% shared their equipment only a few times, and 25% shared their equipment about half the time.

(Chart 20) Among participants that have injected drugs/substances in the past 12 months, when asked how often they clean their equipment with bleach

majority of respondents reported that they never have (45%), 29% reported only a few times, and 21% reported about half the time.

Chart 19. How Often Individuals Shared Injection Equipment Among People Who Inject Substances, 2022

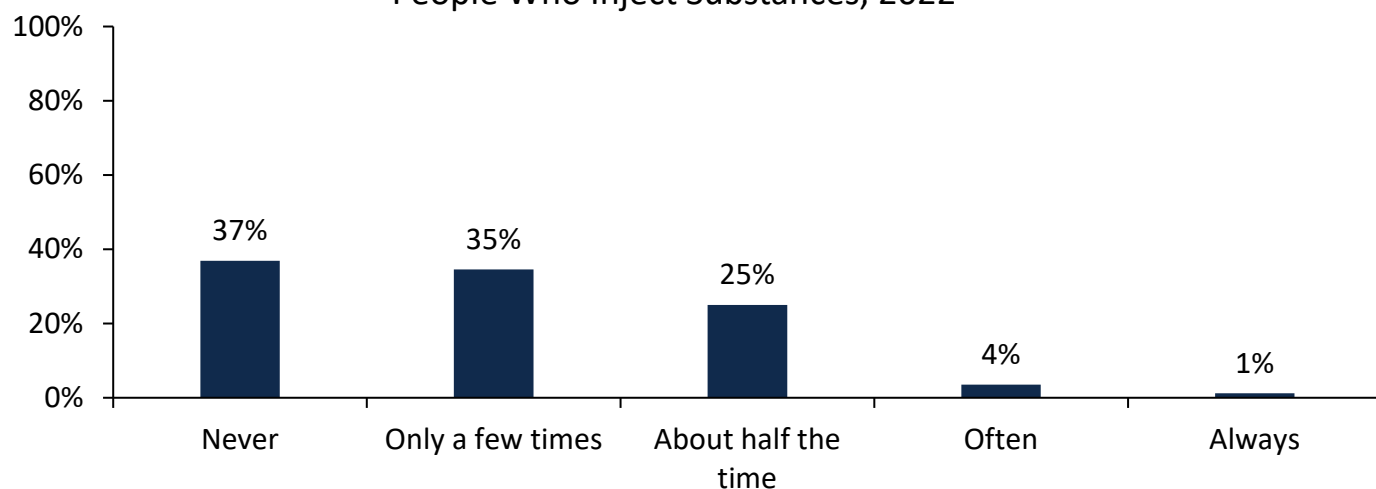
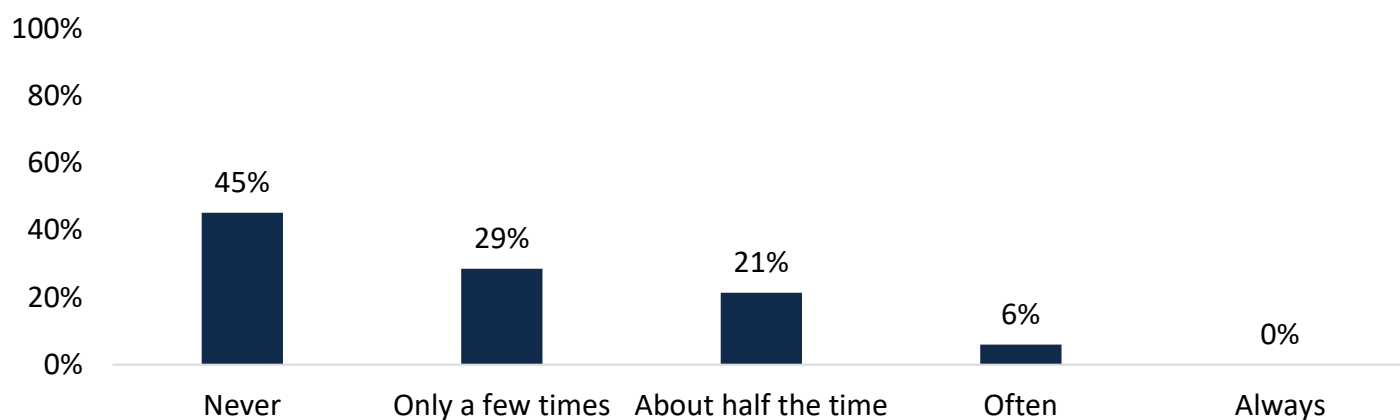


Chart 20. How Often Individuals Clean Injection Equipment with Bleach Among People Who Inject Substances, 2022



Social Determinants

The Social Determinants of Health Framework is a model used in public health that evaluates socioeconomic factors that may influence health and access to care or prevention services in different populations and geographical locations. The Social Determinants of Health Framework examines these socioeconomic factors through a group of five domains – the neighborhood and built environment, health and health care, social and community context, education, and economic stability. These factors can serve as gateways and/or barriers to health in populations. Identifying common patterns in these social determinants among populations and communities can help to barriers to

prevention services that often are the underlying cases for health disparities that are unique to populations and communities.

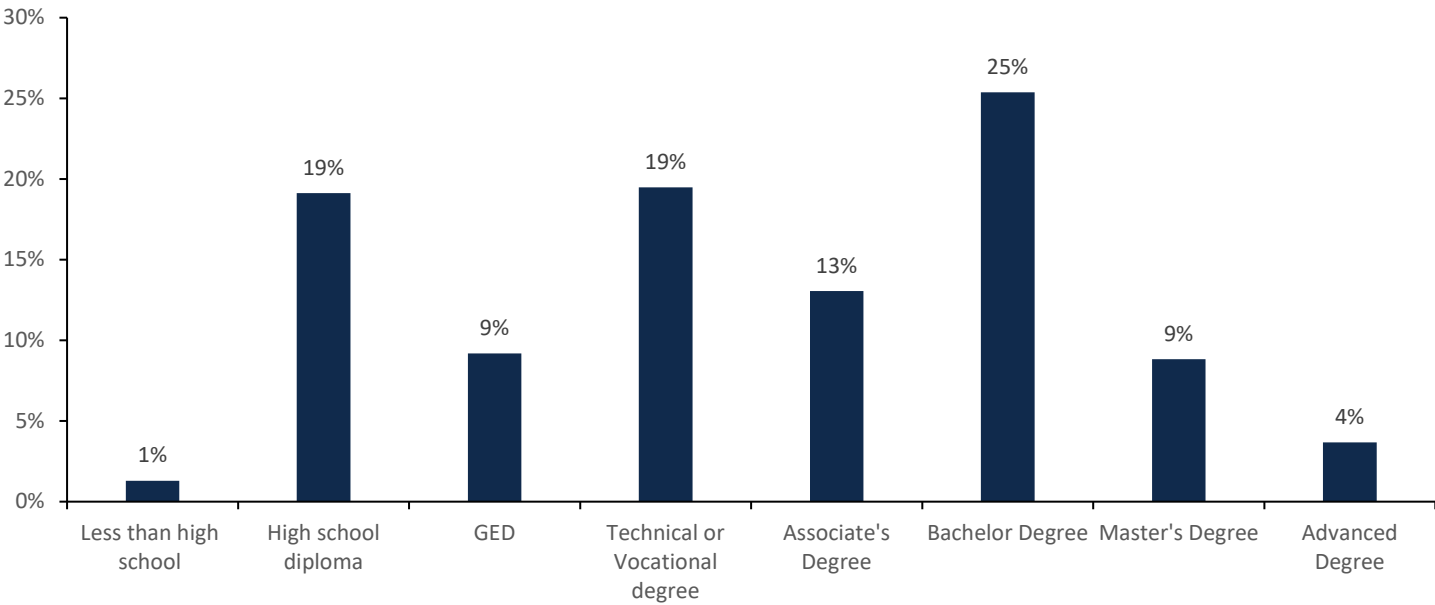
The 2022 HIV Prevention Needs Assessment looks at how these social determinants influence and drive the participants’ health, risks, resources, and access to HIV, STI, and hepatitis prevention services in the Houston/Harris County area. Examining these social determinants helps communities to better understand needs and identify new or emerging areas of need related to HIV, STI, and hepatitis prevention services.

Education

(Chart 21) Participants of the 2022 HIV Prevention Needs Assessment were asked to report their highest level of education they have received from a list of options provided. Participants in the needs assessment reported most frequently that the highest level of education they have received to be a bachelor’s degree (25%), followed by a technical or vocational degree and a high school diploma (both 19%).

When looking at higher educational attainment, 38% of participants had completed a program at a 4-year college or university, 33% had completed an educational program after high school, and 30% completed some or all their high school education.

Chart 21. Educational Attainment in Houston/Harris County, 2022

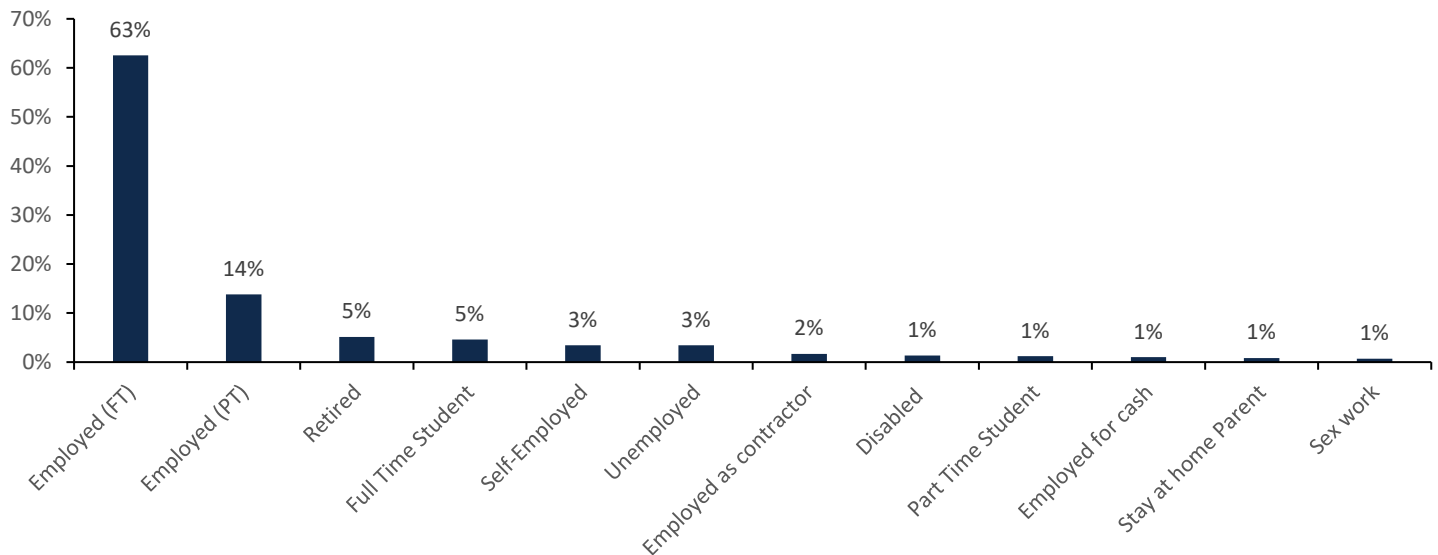


Employment

Participants of the needs assessment were asked to identify their current employment status from a list of options provided. Participants were asked to select as many types of employment as needed to describe their employment status and could write in an employment situation if not present.

(Chart 22) The most reported employment status by participants was employed full time (63%), followed by employed part time (14%), retired and full-time student (both 5%). The least commonly reported employment status was being disabled, a part time student, employed for cash, stay at home parent, and participating in sex work (all 1%). No write in options were provided by the participants of this needs assessment.

Chart 22. Employment Status in Houston/Harris County, 2022

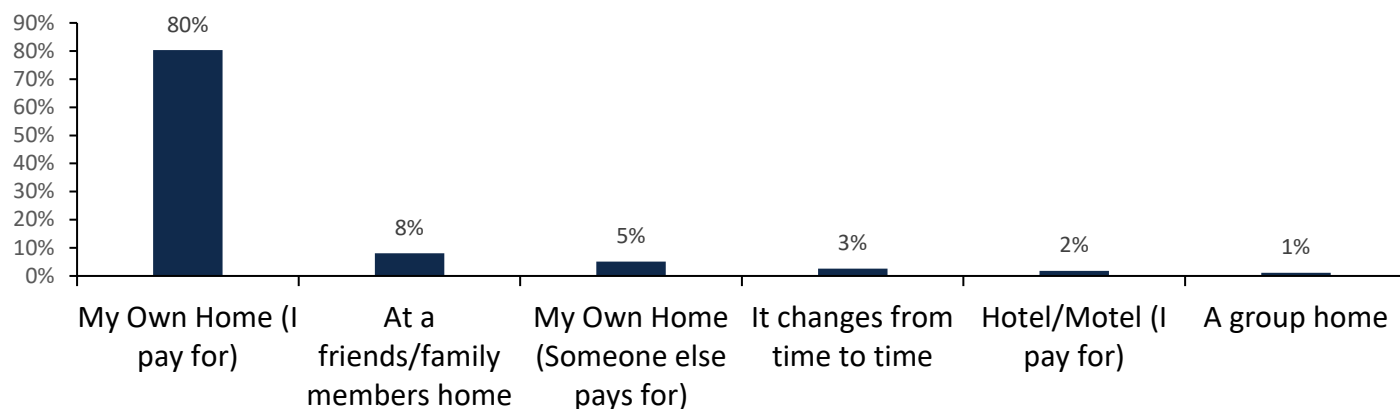


Housing

Participants of the needs assessment were asked to identify where they sleep most often from a list of 10 possible housing types and were able to write in a response if the choices provided did not match an option that reflects their housing situation. Participants were also asked if they thought their housing situation was stable, and if their housing situation had interfered with them accessing HIV, STI, and hepatitis prevention services.

(Chart 23) Participants largely reported that they live in a house that they pay for themselves (80%) compared to any other response. Individuals also reported that they sleep most often at a friend's and/or family members home (8%), their own home that somebody else pays for (5%), a combination of places (3%) and a hotel/motel that they pay for (2%).

Chart 23. Housing Types in Houston/Harris County, 2022



(Chart 24) Participants were asked whether they believed their housing situation was stable, with stable meaning the participant felt they had a regular and safe place to sleep every night with little to no fear of this changing due to financial constraints, eviction, etc. Only 13% of respondents reported that they felt their housing situation was unstable.

(Chart 25) Participants were also asked whether their housing situation has interfered with them accessing or utilizing HIV, STI, or hepatitis prevention services. Overwhelmingly participants felt that their housing situation had not interfered with them accessing or utilizing prevention services (80%). However, 20% of participants did feel as if their housing situation did interfere with prevention service access and utilization.

Chart 24. Stable Housing in Houston/Harris County, 2022

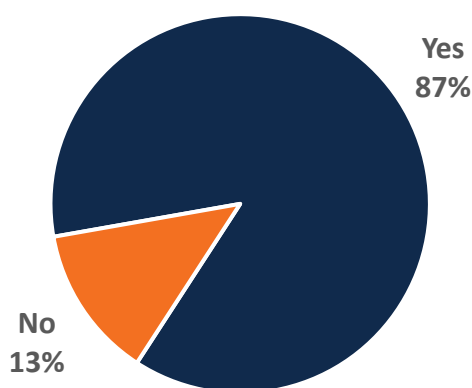
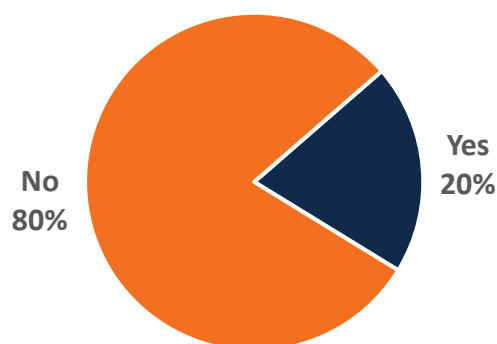


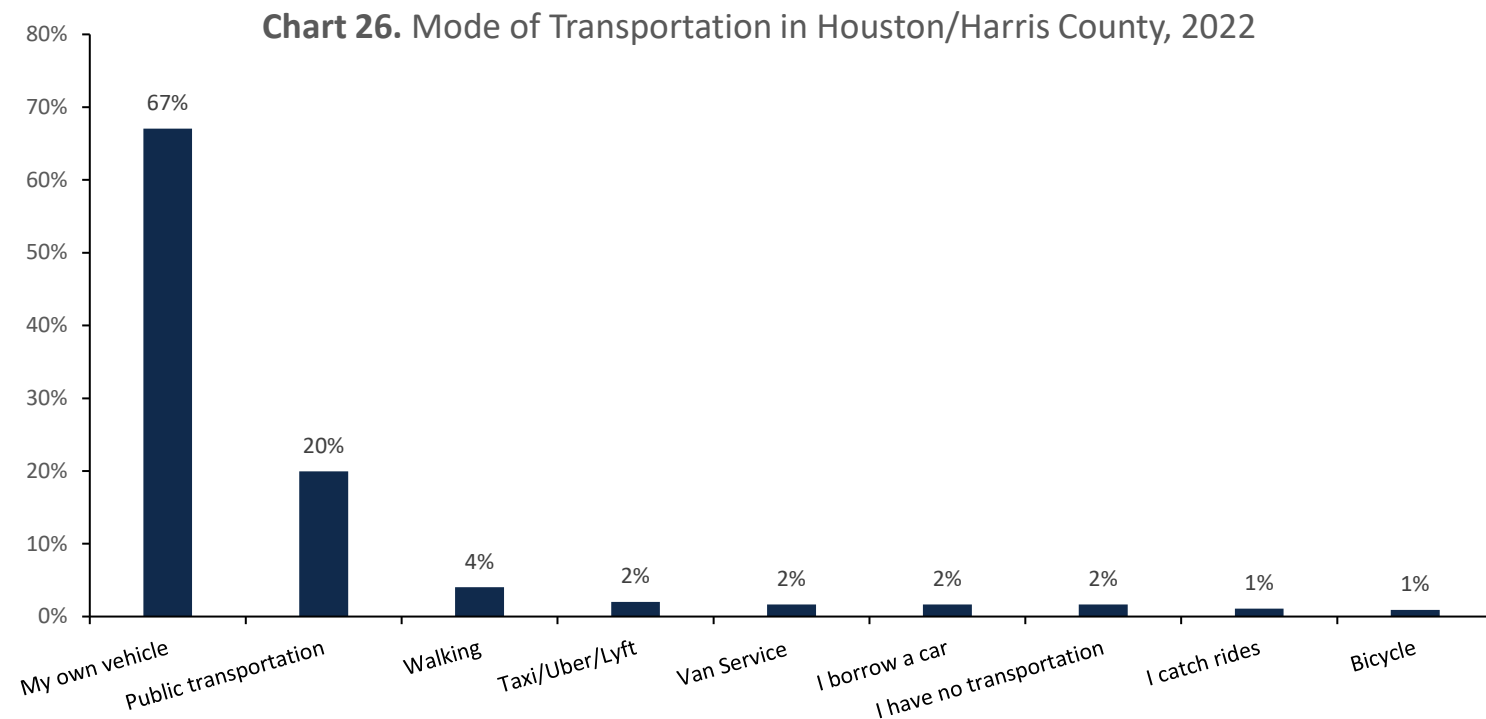
Chart 25. Housing Interference with Prevention Services in Houston/Harris County, 2022



Transportation

Participants of the needs assessment were asked to identify their primary mode of transportation from a list of 9 possible transportation types and were able to write in a response if the choices provided did not match an option that reflects their mode of transportation. Participants were also asked if they thought their transportation was stable, and if their mode of transportation had interfered with them accessing HIV, STI, and hepatitis prevention services.

(Chart 26) Participants of the needs assessment primarily reported that they use their own vehicle to get around (67%), followed by using public transportation (20%), walking to get around (4%). Participants also reported, but in lower frequency, using a taxi/Uber/Lyft service, a van service provided by a clinic or program, borrowing a car, or having no mode of transportation at all (all 2%), I catch rides (1%), or having no mode of transportation at all (all 2%).



(Chart 27) Participants were asked if they felt their mode of transportation was stable, meaning they could regularly get to and from where they need. Participants largely stated that they felt their mode of transportation was stable, with only 20% stating that they felt their transportation was unstable.

(Chart 28) Participants were also asked whether their transportation has interfered with them accessing or utilizing HIV, STI, or hepatitis prevention services. Overwhelmingly participants felt that their housing situation had not interfered with them accessing or utilizing prevention services (79%). However, 21% of participants did feel as if their mode of transportation did interfere with prevention service access and utilization.

Chart 27. Stable Transportation in Houston/Harris County, 2022

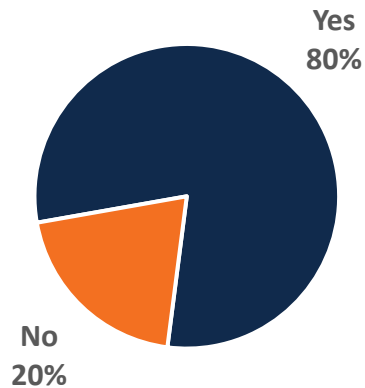
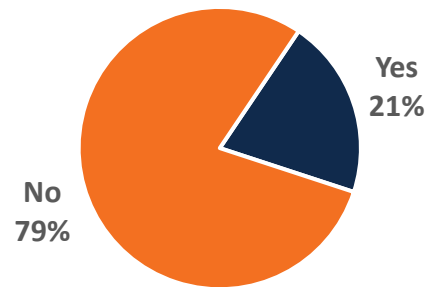


Chart 28. Transportation Interference with Prevention Services in Houston/Harris County, 2022

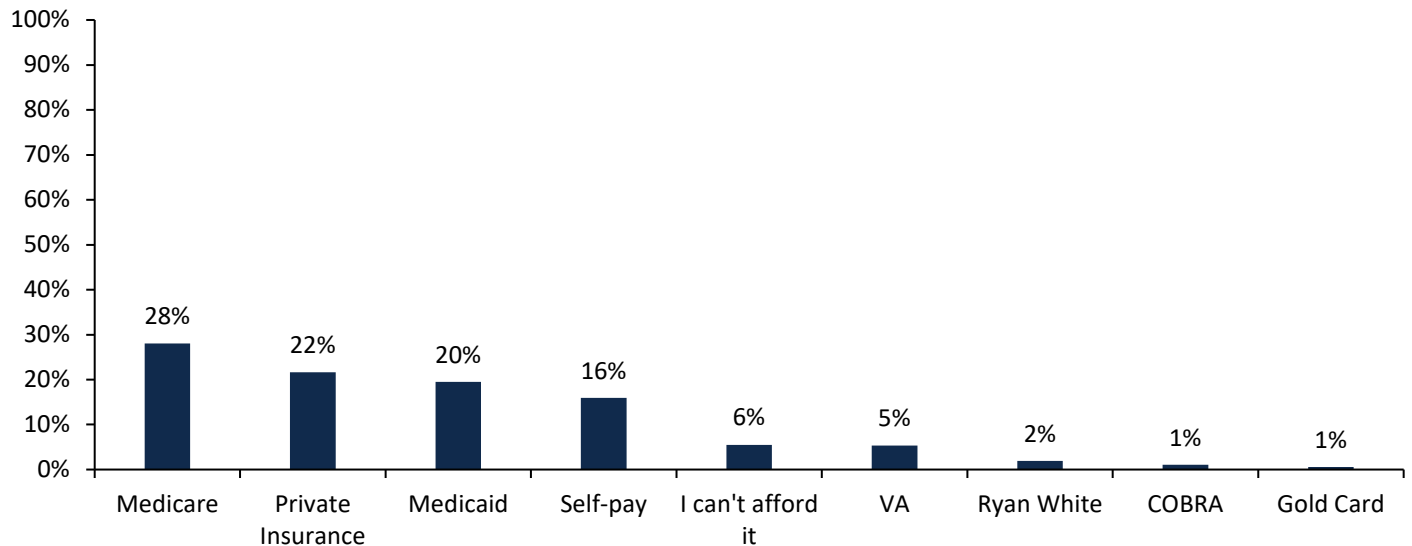


Health Insurance

Participants of the 2022 HIV Prevention Needs Assessment were asked how they pay for medical care for themselves and/or their families and whether they had difficulty paying for medical care and HIV, STI, and hepatitis prevention services. Participants were also asked if they needed assistance paying for medical care and HIV, STI, hepatitis prevention services.

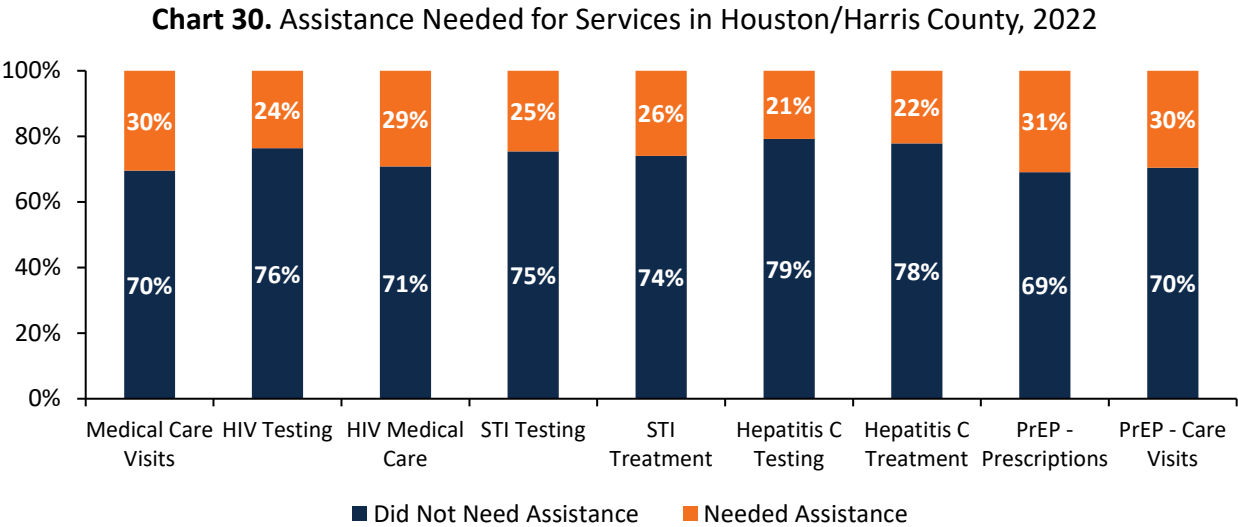
(Chart 29) Of the all the insurance types reported by the needs assessment participants, Medicare was the most frequently reported health insurance type used to pay for medical care (28%), followed by private insurance (22%), Medicaid (20%) and paying for medical care out of pocket with no assistance (16%). One response of concern is that 6% of respondents reported that they do not receive medical care due to the inability to pay.

Chart 29. Health Insurance Type in Houston/Harris County, 2022



Participants were also asked if they needed assistance with paying for medical care and HIV, STI, hepatitis prevention services. These services included general medical care, HIV, STI, and hepatitis C testing and treatment, and PrEP services which included prescription and care visits. Responses indicating that respondents did or did not need assistance paying for the following services are included in the analysis. Individuals that indicated they did not need a service were excluded.

(Chart 30) Needs assessment participants indicated they needed assistance with paying for PrEP prescriptions (31%), PrEP care visits (30%) and HIV medical care (29%) the most out of all the services. Participants reported the lowest need in assistance for paying for HIV testing (24%), STI testing (25%) and STI treatment (25%).



Discrimination & Violence

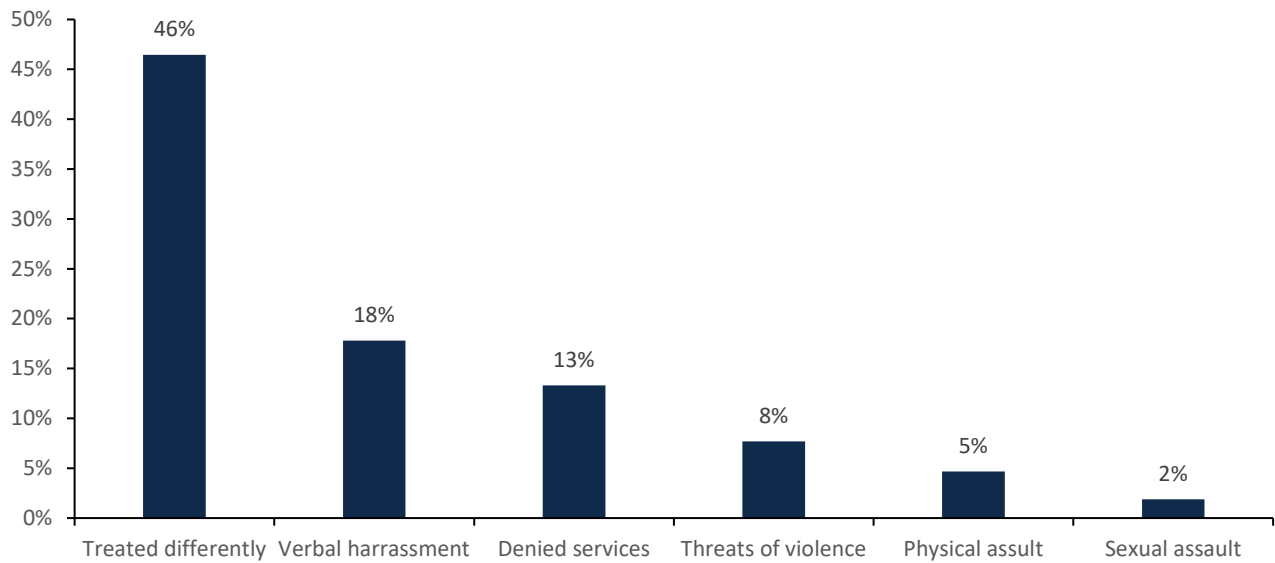
The 2022 HIV Prevention Needs Assessment explored participant’s experiences with discrimination and violence. Participants were asked if they had ever been treated differently because of their race/ethnicity, sex, gender, sexual orientation, or HIV status as well as experienced any threats or physical acts of violence or sexual assault.

(Chart 31) Among the 534 needs assessment participants that provided feedback on their experiences with discrimination and violence, 46% of respondents stated they had been treated differently because of their race/ethnicity, sex, gender, sexual orientation or HIV status, 18% stated they experience verbal harassment, 13% stated they had been denied

services because of their race/ethnicity, sex, gender, sexual orientation or HIV status, 8% stated they had threats of violence made towards them, 5% had experienced physical violence, and 2% had experienced sexual assault.

Among those that were treated differently, 19% stated it was because of their race/ethnicity, 13% stated it was because of their sex and/or gender, 12% due to their sexual orientation, and 3% due to their HIV status. Among those that had been denied services, 7% was due to their race/ethnicity, 4% was due to their sex and/or gender, and 2% was due to their sexual orientation.

Chart 31. Experiences with Discrimination and Violence in Houston/Harris County, 2022

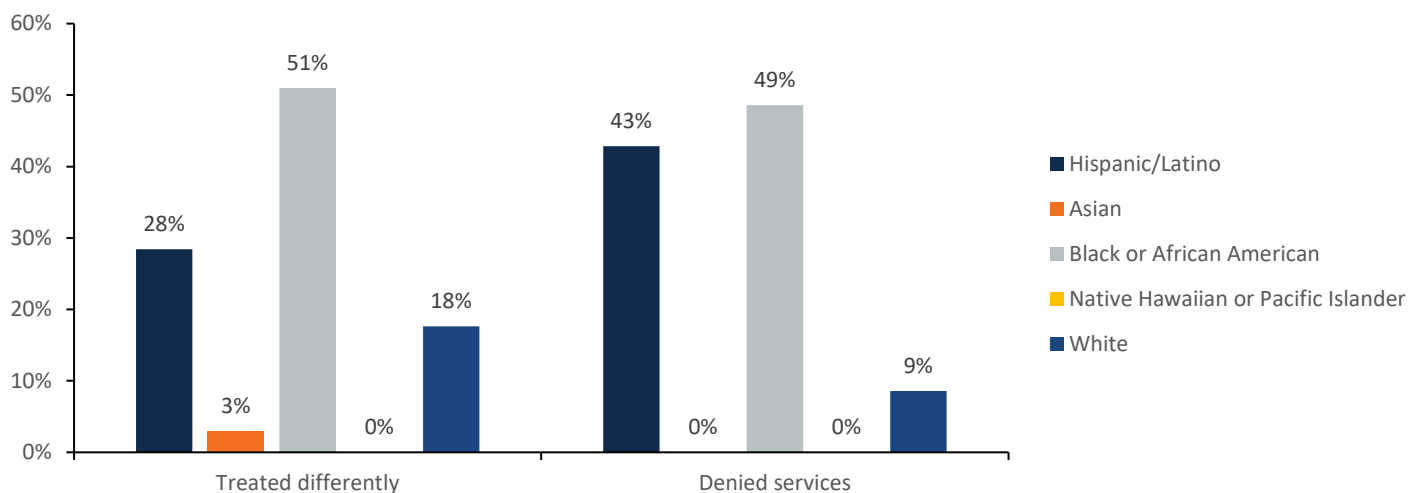


Discrimination by Race/Ethnicity

(Chart 32) When examining discrimination (experiences of being treated differently or denied services) among those who reported these experiences by racial/ethnic groups we see Black or African Americans experienced the highest proportion of discrimination compared to any other racial/ethnic group.

Black or African Americans reported with the highest proportion of being treated differently and being denied services due to their race/ethnicity (51% and 49%, respectively). Hispanic/Latino participants reported the second highest proportion of discrimination, with 28% reporting being treated differently and 43% reporting being denied services due to their race/ethnicity.

Chart 32. Discrimination by Race/Ethnicity in Houston/Harris County, 2022



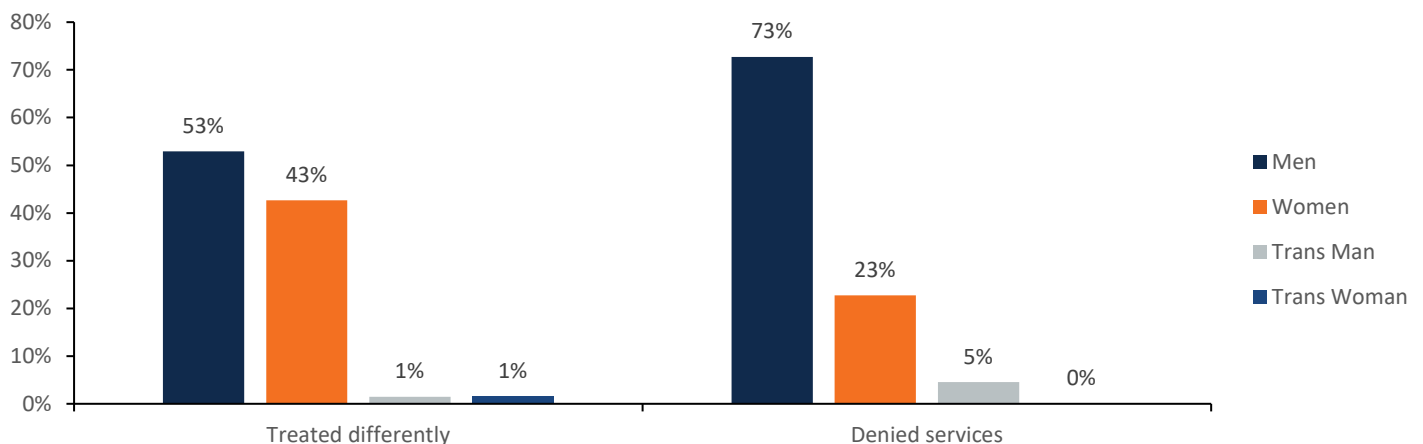
Discrimination by Sex/Gender

(Chart 33) When examining discrimination (experiences of being treated differently or denied services) among those who reported these experiences by sex/genders we see men experienced the highest proportion of discrimination compared to any other sex/gender group.

Men reported the highest proportion of being treated differently and being denied services due to their sex/gender (53% and 73%, respectively). Women

reported the second highest proportion of discrimination, with 43% being treated differently due to their sex/gender and 23% being denied services due to their sex/gender. Transgender individuals reported the lowest proportion of discrimination due to their sex/gender; however, there were few transgender individuals represented in the data and may not be truly representative of the experiences of transgender people.

Chart 33. Discrimination by Sex/Gender in Houston/Harris County, 2022



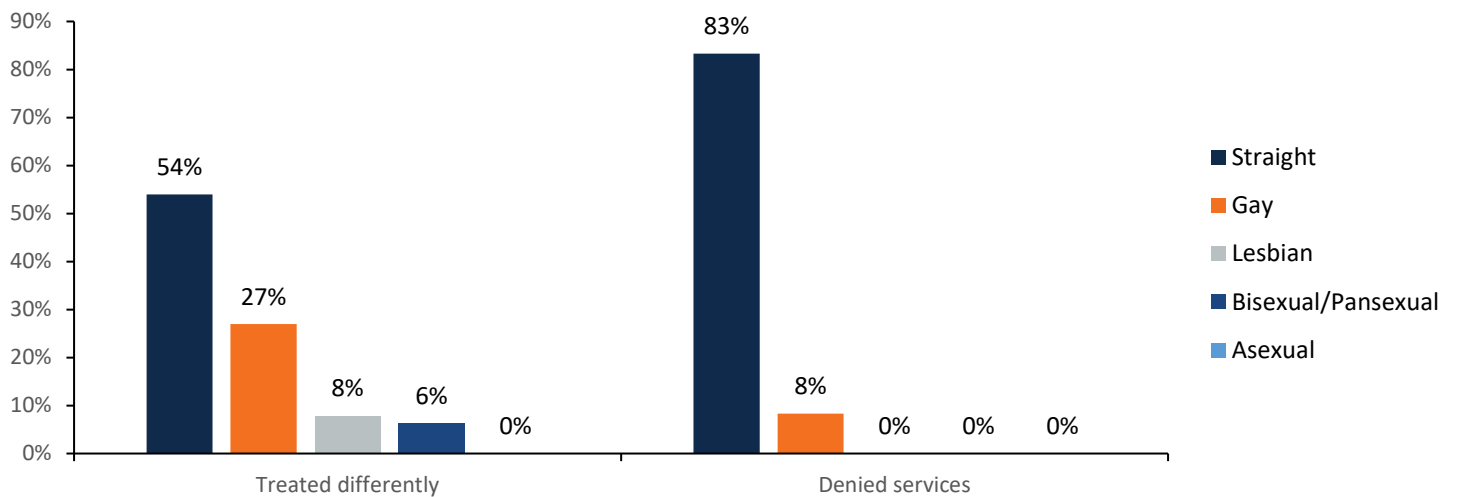
Discrimination by Sexual Orientation

(Chart 34) When examining discrimination (experiences of being treated differently or denied services) among those who reported these experiences by sexual orientation we see straight respondents experienced the highest proportion of discrimination compared to any other sexual orientation.

Straight respondents reported the highest proportion of being treated differently and being denied services due

to their sexual orientation (54% and 83%, respectively). Gay respondents reported the second highest proportion of discrimination with 27% reporting being treated differently and 8% reporting being denied services due to their sexual orientation. Only straight and gay respondents reported experiencing being denied services due to their sexual orientation.

Chart 34. Discrimination by Sexual Orientation in Houston/Harris County, 2022



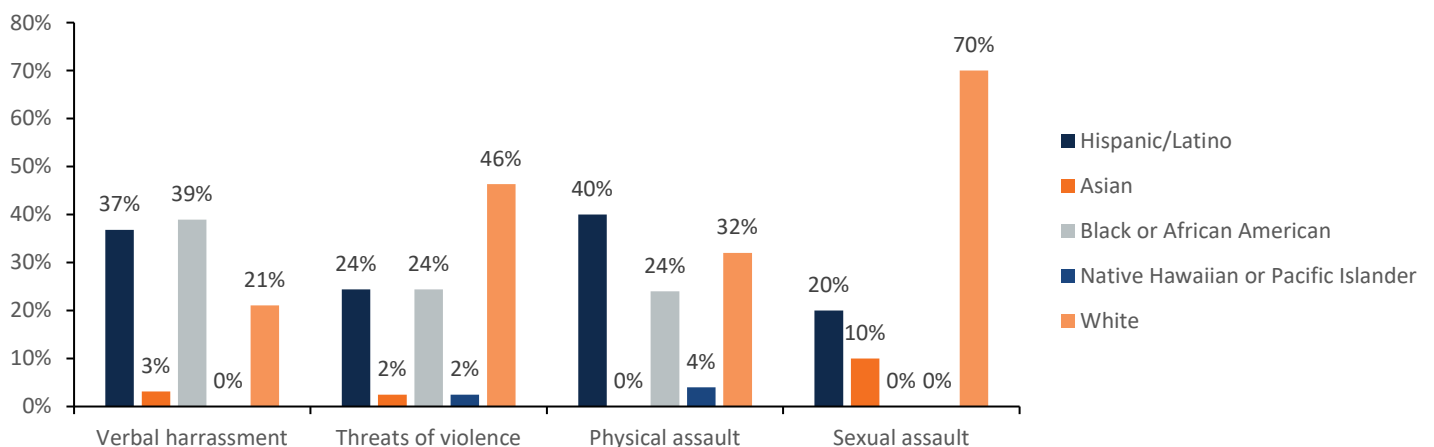
Violence by Race/Ethnicity

(Chart 35) When examining violence (experiences that include verbal threats, physical assault, and/or sexual assault) among those who reported these experiences by race/ethnicity we see proportions vary by race/ethnicity and the type of violence that they experienced.

When examining reported verbal harassment by race/ethnicity, Black or African American participants reported the highest proportion of verbal harassment (39%) followed by Hispanic/Latino participants (37%).

When looking at threats of violence, White participants reported the highest proportion at 46%, followed by Black or African American and Hispanic/Latino participants (both 24%). Hispanic/Latino participants and white participants reported the highest proportion of experiences involving physical violence (40% and 32%, respectively) compared to all other race/ethnicity groups. Lastly, White participants and Hispanic/Latino participants reported the highest proportion of experiences involving sexual assault (70% and 20%, respectively).

Chart 35. Violence by Race/Ethnicity in Houston/Harris County, 2022



Violence by Sex/Gender

(Chart 36) When examining violence (experiences that include verbal threats, physical assault, and/or sexual assault) among those who reported these experiences by sex/gender we see proportions vary sex/gender and the type of violence that they experienced.

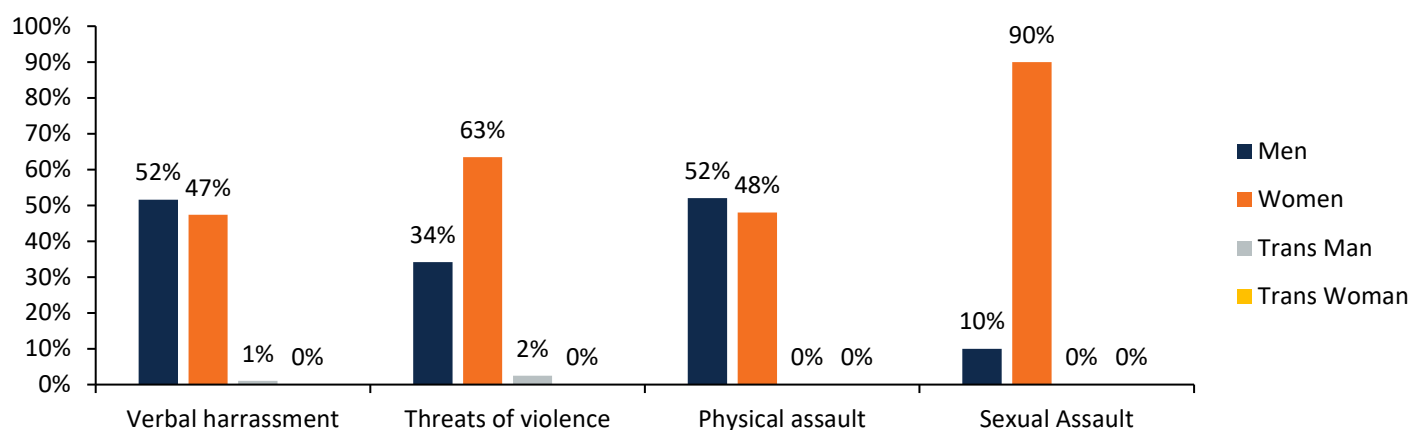
Men and women both experienced verbal harassment relatively similarly, with 52% of men reporting experiences of verbal harassment and 47% of women reporting experiences of verbal harassment.

Transgender individuals (transgender men and transgender women) reported low to no experiences of verbal harassment. Similar proportions were seen

among men and women who reported experiences with physical assault.

Two-thirds of women respondents reported experiences of threats of violence while only a third of men reported experiences involving threats of violence. Transgender individuals reported low to no experiences of threats of violence. When looking at reporting of experiences of sexual assault, women reported the highest proportion of experiences (90%). Few transgender individuals represented in the data and may not be truly representative of the experiences of transgender people.

Chart 36. Violence by Sex/Gender in Houston/Harris County, 2022



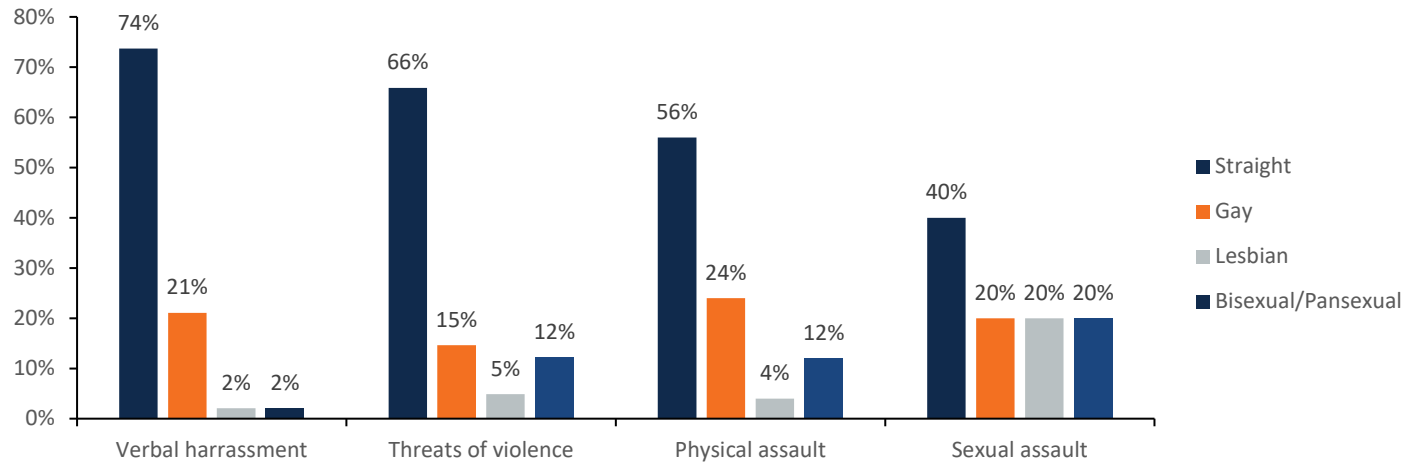
Violence by Sexual Orientation

(Chart 37) When examining violence (experiences that include verbal threats, physical assault, and/or sexual assault) among those who reported these experiences by sexual orientation we see similar proportions by sexual orientation and the type of violence that they experienced.

Overall, straight respondents reported higher proportions of all types of violence compared to all other sexual orientations. Seventy-four percent (74%) of straight respondents reported experiencing verbal harassment, 66% of straight respondents reported

experiencing threats of violence, 56% of straight respondents reported experiences of physical assault, and 40% of straight respondents reported experiencing sexual assault. The second largest proportion of reported violence experienced among all categories was reported by gay respondents. Twenty-one percent (21%) of gay respondents reported experiences of verbal harassment, 15% reported experiences of threats of violence, 24% reported experiences with physical assault, and 20% reported experiences with sexual assault.

Chart 37. Violence by Sexual Orientation in Houston/Harris County, 2022



Thank you for your participation!



2022 HOUSTON HIV PREVENTION COMMUNITY PLANNING GROUP NEEDS ASSESSMENT SURVEY

- Your survey responses are anonymous (private).
- Your participation in this survey is completely voluntary and you can stop at any time.
- Submitting a completed survey means you choose to participate in this survey project.

Instructions:

- This survey is made up mostly of multiple-choice questions. Please check the box next to the answer or answers you select. If you choose "Other," please write a short description on the line that follows. Some answers you select may ask you to go to another question. Skip directly to that question, and do not answer the questions in between.
- Please answer all questions as completely and as accurately as possible. There is no right or wrong answer to a question.

Purpose and Benefits of Taking This Survey:

The purpose of this survey is to help the Houston HIV Prevention Community Planning Group (CPG) and the Houston Health Department (HHD) gather information about HIV prevention needs for people in the Houston Area.

This survey asks some questions that may be personal to answer, including questions about health, sexual activity, and drug use.

By completing this survey, you are playing an important role in helping CPG and the HHD design and carry out projects and programs that will have the greatest impact on reducing HIV transmission in our city.

HIV Prevention Services

1. Please tell us about any of the following prevention services you have used or needed in the past 12 months:

Rapid HIV Testing (Testing for HIV through finger stick or mouth swab)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service?
Laboratory HIV Testing (Testing for HIV through a lab or blood draw)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service?
At home HIV testing (Access to HIV testing outside of a clinical setting or health center)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service?

STI Testing (Testing for oral, genital, or rectal gonorrhea and/or chlamydia, or syphilis)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service? <hr/> <hr/> <hr/>
STI Treatment (Treatment for gonorrhea, chlamydia, and/or syphilis after a positive STI test result)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service? <hr/> <hr/> <hr/>
Hepatitis C Testing & Treatment (Lab or rapid test for hepatitis C and/or linkage to treatment)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service? <hr/> <hr/> <hr/>
PrEP Education (PrEP education, referral and linkage to a PrEP provider, and/or PrEP medication assistance)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service? <hr/> <hr/> <hr/>

PrEP Services (Same day PrEP services, prescription of PrEP, follow-up appointments and labs)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service? <hr/> <hr/> <hr/>
nPEP services (nPEP is a medication that can be used to help prevent HIV after exposure)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service? <hr/> <hr/> <hr/>
HIV Service Linkage (Assistance with linkage to HIV medical care after diagnosis or if an individual has fallen out of care as well as linkage to any other services to help an individual stay in care)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service? <hr/> <hr/> <hr/>
Partner Services (After a positive HIV and/or STI diagnosis, a disease intervention specialist helps individuals learn more about their diagnosis, and helps inform and test partners)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service? <hr/> <hr/> <hr/>

Health Education/Risk Reduction (Education about strategies to prevent or reduce HIV risk to oneself and others)	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service? <hr/> <hr/> <hr/>
Access to Free Condoms	Please check one: <ul style="list-style-type: none"> <input type="checkbox"/> I didn't know this service was available <input type="checkbox"/> I did not need this service <input type="checkbox"/> I needed this service, and it was easy to get <input type="checkbox"/> I needed this service, and it was difficult to get (<i>go here</i> →) 	Briefly, please tell us what made it difficult for you to get this service? <hr/> <hr/> <hr/>

HIV/STI Prevention Activities

2. In the past 12 months, have you received any information about preventing HIV/STIs?

(Check one)

- ☐ Yes
☐ No (**skip Questions 3-4 and go to Question 5**)

3. What was the information? (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> How to prevent HIV/STIs to you and your partners | <input type="checkbox"/> How to talk to partners about condom use |
| <input type="checkbox"/> How HIV viral load is linked to HIV prevention | <input type="checkbox"/> How to disclose my HIV/STI status to partners |
| <input type="checkbox"/> How to protect myself from HIV/STIs | <input type="checkbox"/> How to maintain my HIV medical care, if living with HIV |
| <input type="checkbox"/> How to use a condom or other barrier | <input type="checkbox"/> How to use PrEP/nPEP to prevent HIV |
| <input type="checkbox"/> How to clean needles or other injection items | <input type="checkbox"/> Other: _____ |

4. I've paid the most attention to HIV/STI related messages here:

(Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Billboards | <input type="checkbox"/> My family |
| <input type="checkbox"/> Social Media (Facebook, Twitter, Instagram, Snapchat, TikTok, etc.) | <input type="checkbox"/> My friends |
| <input type="checkbox"/> My health care provider | <input type="checkbox"/> Flyers at a club / bar |
| <input type="checkbox"/> Emergency rooms | <input type="checkbox"/> School |
| <input type="checkbox"/> Other Media (TV, radio, newspaper, magazines, etc.) | <input type="checkbox"/> Dating or hook-up websites / apps (Grindr, SCRUFF, Tinder, Match.com, etc.) |
| <input type="checkbox"/> Celebrities | <input type="checkbox"/> I've never received any HIV/STI prevention messages |
| <input type="checkbox"/> Government websites (Centers for Disease Control and Prevention, Health Departments, etc.) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> My religious community | |

5. In the past 12 months, have you been tested for HIV?

- ☐ Yes
☐ No (**skip to Question 6**)
☐ I don't remember
☐ I have never tested for HIV

If so, when was the date of your last HIV test date? _____
(Give your best estimate)

If so, where did you last test for HIV? _____

What was the result of your last HIV test?

(If you select Positive / Reactive please answer **Questions 7-8**, otherwise skip and go to **Question 9**)

- ☐ Positive / Reactive
- ☐ Negative / Non-reactive
- ☐ Indeterminate or unclear

- ☐ I did not get my test results
- ☐ I don't remember

6. Please tell us why you have NOT tested for HIV in the past 12 months?

(Check all that apply)

- | | |
|--|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> I did not know where to go <input type="checkbox"/> I could not get an appointment <input type="checkbox"/> I did not know how I would pay for it <input type="checkbox"/> I did not have health insurance <input type="checkbox"/> I could not find transportation <input type="checkbox"/> I had other priorities at the time <input type="checkbox"/> I felt fine, I was not sick <input type="checkbox"/> I was afraid I would test positive <input type="checkbox"/> I didn't trust the healthcare staff | <ul style="list-style-type: none"> <input type="checkbox"/> Staff didn't speak my language <input type="checkbox"/> I don't think I'm high risk for HIV transmission <input type="checkbox"/> I do not remember <input type="checkbox"/> Fear of what other people would think or say if they knew I got tested <input type="checkbox"/> Other: _____ |
|--|--|

7. If you are living with HIV, have you had a period of 12 months or more where you stopped seeing your HIV doctor?

- ☐ Yes
- ☐ No

Please explain why you had a period of 12 months or more where you stopped seeing your HIV doctor:

8. If you are NOT currently taking HIV medications, why are you not taking them?

(Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> N/A, I do take HIV medication | <input type="checkbox"/> They are too hard to take as prescribed |
| <input type="checkbox"/> I missed a refill | <input type="checkbox"/> I don't have the correct food to take with them |
| <input type="checkbox"/> I am undetectable or an elite controller/long-term non-progressor
<i>(please note that current treatment standards recommend continuing with HIV medication if you are undetectable to help stay undetectable)</i> | <input type="checkbox"/> I can't pay for them |
| <input type="checkbox"/> I forget to take them | <input type="checkbox"/> I don't have prescription insurance coverage |
| <input type="checkbox"/> I did not receive my mail-order medications, or I think someone else took them from my mail | <input type="checkbox"/> I don't have a safe place to keep them |
| <input type="checkbox"/> My Ryan White eligibility expired | <input type="checkbox"/> I don't want anyone to know I'm taking HIV meds |
| <input type="checkbox"/> No doctor has offered them to me | <input type="checkbox"/> I was tired of it, wanted a break |
| <input type="checkbox"/> My doctor doesn't think it's a good idea for me | <input type="checkbox"/> I choose not to take them |
| <input type="checkbox"/> I had bad side effects | <input type="checkbox"/> I feel fine, I'm not sick |
| | <input type="checkbox"/> Other: _____ |

9. People living with HIV who maintain an undetectable viral load (under 20 copies/mL) for at least 6 months have essentially no risk of HIV exposure to another person through sex. This is sometimes called Undetectable = Untransmittable, or U = U. **Have you heard about U = U before today? *(Check one)***

- ☐ Yes
☐ No
☐ I don't remember

10. Pre-Exposure Prophylaxis (also called PrEP) is a way for people who don't have HIV to prevent getting HIV by taking a pill every day. **Have you heard about PrEP before today? *(Check one)***

- ☐ Yes
☐ No
☐ I don't remember

11. Do you know where a person who does not have HIV can go to get on PrEP?
(Check one)

- ☐ Yes
☐ No

12. Have you used PrEP in the past 12 months?

- ☐ Yes
☐ No

13. Post-exposure Prophylaxis (also called PEP or nPEP) is a way for people who don't have HIV to prevent getting HIV if they think they may have been exposed through sex or needle sharing in the last 72 hours. **Have you heard about PEP or nPEP before today? *(Check one)***

- ☐ Yes

- ☐ No
- ☐ I don't remember

14. Do you know where a person who does not have HIV can go to get PEP or nPEP?

(Check one)

- ☐ Yes
- ☐ No

15. Have you used PEP or nPEP in the past 12 months?

- ☐ Yes
- ☐ No

16. In the past 6 months, how did you meet your sexual partners? *(Check all that apply)*

- | | |
|--|--|
| <input type="checkbox"/> Internet websites (Match.Com, OKCupid.com, Adam4Adam, etc.) or mobile apps (Grindr, Tinder, Bumble, etc.) | <input type="checkbox"/> Other (ex: truck stops, parks, gyms, etc.) |
| <input type="checkbox"/> Cafes, coffee shops, restaurants | <input type="checkbox"/> None, I have not met new sexual partners in the past 6 months (skip Questions 17-21 below and go to Question 22) |
| <input type="checkbox"/> Bars, club, events | <input type="checkbox"/> I don't know |
| <input type="checkbox"/> Bookstores or video stores | |
| <input type="checkbox"/> Friends | |

17. In the past 6 months, how many different sex partners have you had? _____

18. If you've had sex in the past 6 months, what is the HIV status of your sex partner(s)?

This could be anal, vaginal, or oral sex, either receptive (bottom) or insertive (top), with any person. *(check all that apply)*

- | | |
|--|--|
| <input type="checkbox"/> I have not had sex in the past 6 months | <input type="checkbox"/> HIV negative, not taking PrEP |
| <input type="checkbox"/> HIV positive | <input type="checkbox"/> I don't know |
| <input type="checkbox"/> HIV negative, taking PrEP | <input type="checkbox"/> I don't remember |
| | <input type="checkbox"/> I prefer not to answer |

19. How often do you talk about HIV/STIs status with new sex partners?

(Check one)

- | | |
|--|--|
| <input type="checkbox"/> Always, with every partner | <input type="checkbox"/> Never, I am living with HIV and have an undetectable viral load, so I don't feel like I have to share my status |
| <input type="checkbox"/> Sometimes, with some partners | <input type="checkbox"/> Never, I don't feel comfortable talking about this |
| <input type="checkbox"/> Never, my partner knows I'm living with HIV | <input type="checkbox"/> Never, I don't want to share my status |
| <input type="checkbox"/> Never, I always use condoms, so I don't feel like I have to | <input type="checkbox"/> Never, I don't have sex |

20. If you've had sex in the past 6 months, how often did you use a condom (or female / internal condom) for each of the following? (Check one answer for each item below)

	Every time	Most of the time	About half of the time	Rarely	Never	N/A, I didn't do this
Getting oral sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Giving oral sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vaginal sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anal sex, receptive (bottom)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anal sex, insertive (top)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. If you've had sex in the past 6 months, and you did NOT use a condom, why?

(Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> I only ever have sex with one person | <input type="checkbox"/> I'm afraid my partner(s) will tell other people about my HIV status |
| <input type="checkbox"/> My sex partner(s) is also living with HIV | <input type="checkbox"/> I'm not comfortable talking to partners about condoms |
| <input type="checkbox"/> My sex partner(s) is on PrEP | <input type="checkbox"/> I'm afraid of what my partner(s) will do if I bring up condoms |
| <input type="checkbox"/> My viral load is undetectable | <input type="checkbox"/> I only have oral sex, so I don't feel like I need a condom |
| <input type="checkbox"/> I can't get condoms | <input type="checkbox"/> I only use condoms when I have vaginal or anal sex, not with oral |
| <input type="checkbox"/> I don't like condoms | <input type="checkbox"/> I want to have a baby |
| <input type="checkbox"/> I'm not comfortable using condoms | <input type="checkbox"/> Sex with a condom doesn't feel as good |
| <input type="checkbox"/> I'm allergic to condoms | <input type="checkbox"/> I only use sex toys for penetrative sex |
| <input type="checkbox"/> I can't find condoms that fit | <input type="checkbox"/> Other: |
| <input type="checkbox"/> I'm too drunk / high at the time to remember to use condoms | |
| <input type="checkbox"/> I get caught up in the moment, and forget to use them | |
| <input type="checkbox"/> I don't think my partner likes condoms | |

22. Have you ever been tested for any of the following conditions?

(Check all that apply for each item below)

	In the past 3 months	In the past 6 months	In the past 9 months	In the past 12 months	It has been longer than 12 months	I have never had this test	I don't remember
Chlamydia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gonorrhea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Syphilis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Were you diagnosed with any of the conditions?

(Check all that apply. If you have never had tested for any of the conditions or you do not remember, skip below and go to Question 23)

- ☐ No, I was not diagnosed with any of the conditions
- ☐ Chlamydia
- ☐ Gonorrhea
- ☐ Syphilis
- ☐ Hepatitis C

If you were diagnosed with any of the conditions, did you complete treatment?

(Check all that apply, and select the condition(s) to which each answer applies)

- ☐ N/A, I was not diagnosed with any of the conditions
- ☐ No, I never got treatment for _____
- ☐ I started treatment, but did not complete it for _____
- ☐ Yes, I completed treatment for _____

Substance Use

23. In the past 12 months, has alcohol or drug use interfered with you getting medical care or HIV/STI prevention services? *Examples could include alcohol or drug use that led to missing medical care appointments or HIV/STI prevention service appointments, avoiding medical care for fear of legal issues, or fear telling someone about alcohol or drug use. (Check one)*

- ☐ No, I have not used alcohol and/or drugs
- ☐ No, I have used alcohol and/or drugs, but it has not interfered with me getting HIV/STI prevention services or medical care
- ☐ Yes
- ☐ Prefer not to answer

24. In the past 12 months, did you use a needle to inject any substances, including medications, insulin, steroids, hormones, silicone, or drugs? This does not include an injection or blood test from a medical professional. *(Check one)*

- ☐ No (skip Questions 25-26 below and go to Question 27)
- ☐ Yes

25. In the past 12 months, how often did you share or use needles or injection equipment that somebody else may have used?

- ☐ N/A, I never share or use other people's needles or injection equipment
- ☐ Never
- ☐ Only a few times
- ☐ About half the time
- ☐ Often
- ☐ Always

26. In the past 12 months, how often did you clean your needles or injection equipment with bleach?

- ☐ N/A, I never share or reuse needles or injection equipment
- ☐ Never
- ☐ Only a few times
- ☐ About half the time
- ☐ Often
- ☐ Always

Social Factors

27. Where do you sleep most often? (Check one)

- ☐ My own house / apartment that I pay for
- ☐ My own house / apartment that someone else pays for
- ☐ At the home of friends/family
- ☐ A group home
- ☐ Hotel / motel room that I pay for
- ☐ Hotel / motel room that someone else pays for
- ☐ Shelter / Transitional Housing
- ☐ Car
- ☐ On the street
- ☐ A combination of places, it changes all the time
- ☐ Other: _____

28. Do you feel your housing situation is stable? (Check one)

- ☐ Yes
- ☐ No

29. Has your housing situation interfered with you getting HIV/STI prevention services? (Check one)

- ☐ Yes
- ☐ No

30. What is your primary mode of transportation?

- ☐ My own vehicle (car, truck, motorcycle, or scooter)
- ☐ Public transportation (bus, train)
- ☐ A van provided by a clinic or program
- ☐ Taxi/Uber/Lyft
- ☐ Bicycle
- ☐ Walking
- ☐ I borrow a car from friends/family
- ☐ I catch rides with friends/family
- ☐ I have no transportation
- ☐ Other: _____

31. Do you have reliable (i.e., consistently working, available) transportation? (Check one)

- ☐ Yes
- ☐ No

32. Has your transportation situation interfered with you getting HIV/STI prevention services? (Check one)

- ☐ Yes

☐ No

What is your employment situation? (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Employed full time | <input type="checkbox"/> Not working due to disability |
| <input type="checkbox"/> Employed part time | <input type="checkbox"/> Unemployed, but currently seeking employment |
| <input type="checkbox"/> Employed as a contractor (ex: Lyft, Uber, Instacart, DoorDash, etc.) | <input type="checkbox"/> Unpaid volunteer |
| <input type="checkbox"/> Employed for cash (ex: cleaning, childcare, landscaping, construction, etc.) | <input type="checkbox"/> Full time student |
| <input type="checkbox"/> Self-employed | <input type="checkbox"/> Part time student |
| <input type="checkbox"/> I support myself through sex work | <input type="checkbox"/> Stay at home parent |
| <input type="checkbox"/> I support myself through street work (ex: panhandling, drug trade, etc.) | <input type="checkbox"/> Unpaid caregiver for a family member or friend |
| <input type="checkbox"/> Retired | <input type="checkbox"/> Other: _____ |

33. What is your current monthly household income? \$ _____

☐ Prefer not to answer

34. In the past 12 months, what kind of income or assistance did you receive?

(Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> None | <input type="checkbox"/> Rental subsidy (e.g., Section 8, HOPWA) |
| <input type="checkbox"/> Paycheck for wages/salary | <input type="checkbox"/> Unemployment benefits |
| <input type="checkbox"/> Paid in cash or tips | <input type="checkbox"/> Worker's comp |
| <input type="checkbox"/> Social security | <input type="checkbox"/> VA benefits |
| <input type="checkbox"/> Disability | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> TANF/AFDC | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Food stamps | |

35. How do you pay for medical care for yourself or your family? (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Private health insurance.
<i>If so, which company do you have?</i>

<i>(e.g., Aetna, Anthem, Blue Cross/Blue Shield, COGNA, Humana)</i> | <input type="checkbox"/> VA |
| <input type="checkbox"/> COBRA | <input type="checkbox"/> Indian Health Service |
| <input type="checkbox"/> Medicaid | <input type="checkbox"/> Self-pay |
| <input type="checkbox"/> Medicare | <input type="checkbox"/> I don't get medical care because I can't pay for it |
| <input type="checkbox"/> Gold Card | <input type="checkbox"/> I only get medical care for HIV through Ryan White |
| | <input type="checkbox"/> Other: _____ |

36. Do you have trouble paying for the following on your own?

(Check one answer for each item below)

	Yes	No	I don't need this
Medical Care Visits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HIV Testing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HIV Medical Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STI Testing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STI Treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis C Testing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis C Treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PrEP (Prescription)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PrEP (Care visits)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
nPEP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

37. In the past 12 months, have you been released from juvenile detention, jail, or prison?

(Check one)

- ☐ Yes
☐ No
☐ Prefer not to say

38. In the past 12 months, have you experienced any of the following?

(Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Been treated differently because of your race/ethnicity | <input type="checkbox"/> Been denied services because you're living with HIV |
| <input type="checkbox"/> Been treated differently because of your sex/gender | <input type="checkbox"/> Been asked to leave a public place |
| <input type="checkbox"/> Been treated differently because of your sexual orientation | <input type="checkbox"/> Verbal harassment/taunts |
| <input type="checkbox"/> Been treated differently because you're living with HIV | <input type="checkbox"/> Threats of violence by someone you know |
| <input type="checkbox"/> Been denied services because of your race/ethnicity | <input type="checkbox"/> Threats of violence by a stranger |
| <input type="checkbox"/> Been denied services because of your sex/gender | <input type="checkbox"/> Physical assault by someone you know |
| <input type="checkbox"/> Been denied services because of your sexual orientation | <input type="checkbox"/> Physical assault by a stranger |
| | <input type="checkbox"/> Sexual assault by someone you know |
| | <input type="checkbox"/> Sexual assault by a stranger |
| | <input type="checkbox"/> None of the above |
| | <input type="checkbox"/> Prefer not to answer |

Demographic Information

39. What zip code do you live in? _____

40. What is your age (in years)? _____

41. What is your race/ethnicity? *(Check all that apply)*

- | | |
|--|---|
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> American Indian or Alaska Native |
| <input type="checkbox"/> White | <input type="checkbox"/> Asian |

- ☐ Native Hawaiian or Pacific Islander
☐ Other: _____

42. Are you of Hispanic, Latino, or Spanish heritage?

- ☐ Yes
☐ No

43. What is your current gender identity or gender expression?

- ☐ Male
☐ Female
☐ Transgender Male (Female to Male)
☐ Transgender Female (Male to Female)
☐ Genderqueer or non-binary
☐ Additional gender category: _____

44. What sex were you assigned / given at birth?

- ☐ Male
☐ Female
☐ Intersex / Ambiguous

45. In terms of sexual orientation, how do you identify?

- ☐ Straight / Heterosexual
☐ Gay
☐ Lesbian
☐ Bisexual
☐ Asexual (someone who does not feel sexual attraction)
☐ Pansexual (someone who feels sexual attraction, desire, love towards all sexes / genders)
☐ Not sure
☐ Other: _____

46. What is your current relationship status?

- ☐ Single, never married
☐ Married
☐ Domestic partnership or civil union
☐ Divorced
☐ Separated
☐ Widowed

47. Are you currently pregnant?

- ☐ Yes
☐ No
☐ I don't know

If you are currently pregnant, are you in prenatal care?

- ☐ Yes
☐ No

48. How much school have you completed?

- ☐ Less than high school
☐ High school diploma
☐ GED
☐ Technical or vocational degree
☐ Associate's degree
☐ Bachelor's degree
☐ Master's degree
☐ Terminal degree (such as PhD, JD)