

WIHS ID #

B3. In the last six months, how many times did you go for **regular HIV care**? |__|__|__| # TIMES

B4. In the last six months, did you miss any **scheduled regular HIV care** appointments? By this, I mean you did not go for a scheduled appointment and did not re-schedule.

YES 1
NO 2 (B5)

a. How many times did this happen? |__|__|__| # TIMES

B5. In general, how often do your HIV providers want you to see you for your **regular HIV care**? Would you say once a year, twice a year, three times a year, or more frequently?

ONCE A YEAR 1
TWICE A YEAR 2
THREE TIMES A YEAR 3
MORE FREQUENTLY 4

B6. IS THIS AN ODD- OR EVEN-NUMBERED VISIT?

ODD-NUMBERED VISIT 1 (SECTION D)
EVEN-NUMBERED VISIT 2

SECTION C: TRUST IN HIV CARE PROVIDERS, HEALTH CARE EMPOWERMENT, BARRIERS TO CARE

*Source: Safran Physician Trust Subscale of the PCAS
*Source: Johnson et al Health Care Empowerment Inventory
*Kalichman Barriers to Care

INTRODUCTION TO PARTICIPANT: Please think now about the HIV care providers who you typically see for your **regular HIV care**. These HIV care providers might be a doctor or doctors, nurse practitioners, physician assistants, or other health care professionals. For each question, please tell me whether you strongly agree, agree, disagree, or strongly disagree. **SHOW PARTICIPANT RESPONSE CARD 12A.**

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
C1. You can tell your HIV care providers anything.	1	2	3	4	5
C2. Your HIV care providers sometimes pretend to know things when they are not really sure.	1	2	3	4	5
C3. You completely trust your HIV care provider's judgments about your health care.	1	2	3	4	5
C4. Your HIV care providers care more about holding costs down than about doing what is needed for your health.	1	2	3	4	5
C5. Your HIV care providers would always tell you the truth about your health, even if there was bad news.	1	2	3	4	5

WIHS ID #

--

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
C6. Your HIV care providers care as much as you do about your health.	1	2	3	4	5
C7. If a mistake was made in your treatment, your HIV care providers would try to hide it from you.	1	2	3	4	5
C8. All things considered, you trust your HIV care providers.	1	2	3	4	5

INTRODUCTION TO PARTICIPANT: For the next set of questions, I will ask you about caring for yourself, and particularly about your HIV care. For each question, please tell me whether you strongly agree, agree, disagree, or strongly disagree.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
C9. You prefer to get as much information as possible about treatment options.	1	2	3	4	5
C10. You try to get your health care providers to listen to your preferences for your treatment.	1	2	3	4	5
C11. You are very active in your health care.	1	2	3	4	5
C12. You take your commitment to your treatment seriously.	1	2	3	4	5
C13. You recognize that there will likely be setbacks and uncertainty in your health care treatment.	1	2	3	4	5
C14. You are comfortable with the idea that there may be setbacks in your treatment.	1	2	3	4	5
C15. You have learned to live with the uncertainty of your health condition.	1	2	3	4	5
C16. You accept that the future of your health condition is unknown even if you do everything you can.	1	2	3	4	5

C17. In the last six months, have any of the following happened in terms of your **regular HIV care**?

	YES	NO	NA
a. Not having transportation to get to or from a regular HIV care visit.	1	2	
b. Not being able to pay for a regular HIV care visit.	1	2	
c. Not knowing where to go for HIV regular care.	1	2	

WIHS ID #

--

	YES	NO	NA
d. Not having someone to watch your children or other people in your care while you go to a regular HIV care visit.	1	2	3
e. Not feeling that you need to go for regular HIV care because your HIV is under control.	1	2	
f. Not having time or not being able to take off work during the hours that regular HIV care is available.	1	2	
g. Not wanting to go to the HIV clinic because people you know might see you there.	1	2	
h. Not wanting to go for regular HIV care because you felt too sick.	1	2	

SECTION D: SOCIAL SUPPORT, SOCIAL ISOLATION, ANXIETY

*Source: Loneliness scale (Hughes; shortened version of the R-UCLA)

*Tangible and Emotional Support subscales of MOS SSS, with additional questions added

*GAD-7 assessment of anxiety

INTRODUCTION TO PARTICIPANT: The next questions ask about your feelings these days. Please tell me how often you feel the way described in each of the following statements.

D1. How often do you feel that you lack companionship? Is it hardly ever, some of the time, or often?

- HARDLY EVER..... 1
- SOME OF THE TIME 2
- OFTEN..... 3

D2. How often do you feel left out? Is it hardly ever, some of the time, or often?

- HARDLY EVER..... 1
- SOME OF THE TIME 2
- OFTEN..... 3

D3. How often do you feel isolated from others? Is it hardly ever, some of the time, or often?

- HARDLY EVER..... 1
- SOME OF THE TIME 2
- OFTEN..... 3

INTRODUCTION TO PARTICIPANT: People sometimes look to others for company, for help, or for other kinds of support. How often are each of the following kinds of support available to you when you need it?

SHOW PARTICIPANT RESPONSE CARD 12B.

	None of the time	A little of the time	Some of the time	Most of the time	All of the time	NA
D4. Someone you can count on to listen to you when you need to talk.	1	2	3	4	5	
D5. Someone to give you information to help you understand a situation.	1	2	3	4	5	

WIHS ID #

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	None of the time	A little of the time	Some of the time	Most of the time	All of the time	NA
D6. Someone to give you good advice about a crisis.	1	2	3	4	5	
D7. Someone to confide in or talk to about yourself or your problems.	1	2	3	4	5	
D8. Someone whose advice you really want.	1	2	3	4	5	
D9. Someone to share your most private worries and fears with.	1	2	3	4	5	
D10. Someone to turn to for suggestions about how to deal with a personal problem.	1	2	3	4	5	
D11. Someone who understands your problems.	1	2	3	4	5	
D12. Someone to help you if you were confined to bed.	1	2	3	4	5	
D13. Someone to take you to the doctor or somewhere you had to go if you needed it.	1	2	3	4	5	
D14. Someone to prepare your meals if you were unable to do it yourself.	1	2	3	4	5	
D15. Someone to help with daily chores like grocery shopping if you were sick.	1	2	3	4	5	
D16. Someone to care for children/grandchildren/others in your care, even for a short time if you were unable.	1	2	3	4	5	6
D17. Someone to give you a place to live if you needed it even if for a short time.	1	2	3	4	5	
D18. Someone to give you money for things you really needed like food and clothing.	1	2	3	4	5	

INTRODUCTION TO PARTICIPANT: These next questions ask about your feelings over the last two weeks. Over the last two weeks, how often have you been bothered by the following problems? Please tell me whether you have not felt this way at all, you have felt it for several days, for over half of the days, or nearly every day over the last two weeks. **SHOW PARTICIPANT RESPONSE CARD 12C.**

	Not at all	Several days	Over half the days	Nearly every day
D19. Feeling nervous, anxious, or on edge.	0	1	2	3
D20. Not being able to stop or control worrying.	0	1	2	3
D21. Worrying too much about different things.	0	1	2	3

WIHS ID #

--

	Not at all	Several days	Over half the days	Nearly every day
D22. Trouble relaxing.	0	1	2	3
D23. Being so restless that it's hard to sit still.	0	1	2	3
D24. Becoming easily annoyed or irritable.	0	1	2	3
D25. Feeling afraid as if something awful might happen.	0	1	2	3

D26. IS THIS AN ODD- OR EVEN-NUMBERED VISIT?

ODD-NUMBERED VISIT 1 (SECTION F)

EVEN-NUMBERED VISIT 2

SECTION E: SPIRITUALITY

*Source: Detroit Area Study, 1995 every day discrimination

*FACIT-SP for spirituality

INTRODUCTION TO PARTICIPANT: These questions ask about how you have been feeling over the past seven days. **SHOW PARTICIPANT RESPONSE CARD 12D.**

	Not at all	A little bit	Some-what	Quite a bit	Very much	NA
E1. I feel peaceful.	0	1	2	3	4	
E2. I have a reason for living.	0	1	2	3	4	
E3. My life has been productive.	0	1	2	3	4	
E4. I have trouble feeling peace of mind.	0	1	2	3	4	
E5. I feel a sense of purpose in my life.	0	1	2	3	4	
E6. I am able to reach down deep into myself for comfort.	0	1	2	3	4	
E7. I feel a sense of harmony within myself.	0	1	2	3	4	
E8. My life lacks meaning and purpose.	0	1	2	3	4	
E9. I find comfort in my faith or spiritual beliefs.	0	1	2	3	4	
E10. I know that whatever happens with my illness, things will be OK.	0	1	2	3	4	5
E11. My illness has strengthened my faith or spiritual beliefs.	0	1	2	3	4	5
E12. I find strength in my faith or spiritual beliefs.	0	1	2	3	4	

SECTION F: LIFETIME DISCRIMINATION

*Source: Williams et al 2008 / MacArthur Midlife Study MMIS supplemental questions

- F0. CHECK VCS: WERE QUESTIONS ABOUT LIFETIME DISCRIMINATION ADMINISTERED AT A PREVIOUS VISIT?
 YES..... 1 (F9)
 NO..... 2

INTRODUCTION TO PARTICIPANT: In the next questions, we are interested in the way other people have treated you or your *beliefs* about how other people have treated you. For each question, please tell me if *any* of the following has ever happened to you. **SHOW PARTICIPANT RESPONSE CARD 12E FOR ITEMS C-E IN EACH QUESTION.**

F1. At any time in your life, have you ever been unfairly fired from a job or been unfairly denied a promotion in a job?	YES 1		NO 2 (F2)			
a. How many times has this happened in your lifetime? __ __						
b. When was the last time this happened? Was it in the past week, past month, past year, or more than a year ago?	1 Past week	2 Past month	3 Past year	4 More than a year ago		
c. How much do you think your gender had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	
d. How much do you think your race/ethnicity had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	
e. How much do you think your HIV had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	6 NA

F2. For unfair reasons, have you ever <u>not</u> been hired for a job?	YES 1		NO 2 (F3)			
a. How many times has this happened in your lifetime? __ __						
b. When was the last time this happened? Was it in the past week, past month, past year, or more than a year ago?	1 Past week	2 Past month	3 Past year	4 More than a year ago		
c. How much do you think your gender had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	
d. How much do you think your race/ethnicity had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	
e. How much do you think your HIV had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	6 NA

WIHS ID #

--

F3. Have you ever been unfairly stopped, searched, questioned, physically threatened or abused by the police?					YES 1	NO 2 (F4)
a. How many times has this happened in your lifetime? __ __						
b. When was the last time this happened? Was it in the past week, past month, past year, or more than a year ago?	1 Past week	2 Past month	3 Past year	4 More than a year ago		
c. How much do you think your gender had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	
d. How much do you think your race/ethnicity had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	
e. How much do you think your HIV had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	6 NA

F4. Have you ever been unfairly discouraged by a teacher or advisor from continuing your education?					YES 1	NO 2 (F5)
a. How many times has this happened in your lifetime? __ __						
b. When was the last time this happened? Was it in the past week, past month, past year, or more than a year ago?	1 Past week	2 Past month	3 Past year	4 More than a year ago		
c. How much do you think your gender had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	
d. How much do you think your race/ethnicity had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	
e. How much do you think your HIV had to do with this?	1 Nothing	2 A little	3 Some	4 A lot	5 Everything	6 NA

