

Salway T, Thomson K, Taylor D, et al. A post-test comparison of HIV test knowledge and changes in sexual risk behaviour between clients accessing HIV testing online versus in-clinic.

Supplementary Text S1. Baseline and 3-month questionnaires

BASELINE QUESTIONNAIRE:

PART 1 OF 5: EXPERIENCES WITH HIV AND STI TESTING

Thank you for participating!

We'd like to start by asking you some questions related to the last time you tested for sexually transmitted infections (STIs) or HIV. This may be a test that you have already received a result for or one where you are still waiting for your result. Please note about half the survey questions are in this first section.

1: When was your last test?

R: (1) in the last week (2) two weeks ago (3) three weeks ago (4) four weeks ago (5) more than one month ago (6) I don't know

2: What was the main reason for your last test? (check all that apply)

R: (1) I get tested regularly and this was a routine test (2) I tested after starting a new relationship (3) I was encouraged to get tested by friends, family, or a partner (4) I was getting tested after an event or exposure that might have put me at risk (5) I had symptoms or illness that I thought might be related to STI or HIV (6) I found out that a sex partner has or might have an STI or HIV (7) A health care provider recommended that I get tested (8) Other, please describe

3: Overall, how satisfied or dissatisfied were you with your last testing experience?

R: (1) Very satisfied (2) Satisfied (3) Neither satisfied nor dissatisfied (4) Dissatisfied (5) Very dissatisfied

4: if answer (4) or (5): **Can you tell us briefly why you were not satisfied with your last testing experience?**

R: _____

5: When you were last tested, did you test online (through a program called *GetCheckedOnline*) or at a clinic?

R: (1) Online through GetCheckedOnline (2) At a clinic

(Answer to this question used to stratify into Get Checked Online (GCO) versus clinic participants)

6. (GCO): **Where did you hear about the GetCheckedOnline service? Check all that apply**

R: (1) from a story in the news (2) from printed materials in a clinic (posters, pamphlet) (3) from a doctor or nurse (4) from a community organization (5) from friends (6) from family (7) from a

sex partner (8) from a Health Initiative for Men campaign (9) from social media (e.g., facebook, twitter, youtube) (10) Other (11) I don't know

7. (GCO): **Have you ever tested at any of the following clinics? (check all that apply)**

R: (1) Clinic at 655 West 12th Ave (2) Bute Street clinic (3) Health Initiative for Men clinic on Davie Street (4) other Health Initiative for Men clinic (5) I don't know

8. (Clinic): **Which clinic?**

R: (1) Clinic at 655 West 12th Ave (2) Bute Street clinic (3) Health Initiative for Men clinic on Davie street (4) Other: clinic name _____ (5) I don't know

9. (Clinic): **Before this survey had you heard of the program called Get Checked Online? This is a program operated by the BC Centre for Disease Control that allows you to get tested for sexually transmitted infections and HIV by printing out an order form from a website that you would take to a lab, then get your results online.**

R: (1) Yes, but I haven't used it (2) Yes, I have used it or have created an account (3) No, I haven't heard of it

10. (Clinic) if (1) or (2): **Where did you hear about the GetCheckedOnline service? Check all that apply**

R: (1) from a story in the news (2) from printed materials in a clinic (posters, pamphlet) (3) from a doctor or nurse (4) from a community organization (5) from friends (6) from family (7) from my regular partner (e.g., boyfriend, girlfriend, spouse) (8) from a sex partner (9) from a Health Initiative for Men campaign (10) from social media (e.g., facebook, twitter, youtube) (11) Other (12) I don't know

11. (Clinic): **How likely or unlikely would you be to use Get Checked Online the next time you needed to get tested?**

R: (1) Very likely (2) Likely (3) Neither likely nor unlikely (4) Unlikely (5) Very unlikely

12 (Clinic): **When you last tested, how long did it take you to get to the clinic (e.g., from your home, school or work)?**

R: ____ minutes

13 (GCO): **How much do you agree or disagree with the following statements about your most recent STI or HIV test?**

- a. **It was convenient for me to get tested**
- b. **I would use Get Checked Online again**
- c. **I would recommend Get Checked Online to others**
- d. **I received enough information to help me decide what tests I needed**

R: (1) Strongly agree (2) Agree (3) Neither agree nor disagree (4) Disagree (5) Strongly disagree

14 (Clinic): **How much do you agree or disagree with the following statements about your most recent STI or HIV test?**

- a. **It was convenient for me to get tested**
- b. **I would use this clinic again**
- c. **I would recommend this clinic to others**
- d. **I received enough information to help me decide what tests I needed**

R: (1) Strongly agree (2) Agree (3) Neither agree nor disagree (4) Disagree (5) Strongly disagree

15: **When you were last tested for a sexually transmitted infection or HIV, what kinds of specimens did you give? (check all that apply)**

R: (1) urine sample (2) blood sample (3) throat swab (4) rectal swab (5) vaginal swab (6) I don't know

16 (GCO): **How would you rate the experience of your visit to LifeLabs where your specimens were collected?**

R: (1) Very poor (2) Poor (3) Fair (4) Good (5) Excellent

17 (GCO) if (1) or (2) to 43: **Can you briefly tell us why you had a poor experience?**

R: _____

18 (GCO): **How long did it take you to get to the lab to give your specimens (e.g., from your home, school or work)?**

R: ____ minutes

19: **Which of the following infections were you tested for? Choose all that apply.**

R: (1) Chlamydia (2) Gonorrhea (3) Syphilis (4) HIV (5) Hepatitis C (5) I don't know (6) Other: please describe_____

20: **Do you receive your results from the last time you tested?**

R: (1) Yes (2) No (3) I don't know

21: **Did you receive any test results that were positive?**

R: (1) Yes (2) No (3) I don't know (4) Prefer not to say

22 (GCO): **How satisfied or dissatisfied were you with your experience of receiving your test results through Get Checked Online?**

R: (1) Completely satisfied (2) Satisfied (3) Neither satisfied nor dissatisfied (4) Dissatisfied (5) Completely dissatisfied

23 (Clinic): **How satisfied or dissatisfied were you with your experience of receiving your test results at this clinic?**

R: (1) Completely satisfied (2) Satisfied (3) Neither satisfied nor dissatisfied (4) Dissatisfied (5) Completely dissatisfied

24 (If (4) or (5) to above for either GCO or Clinic: **Can you briefly tell us why you were dissatisfied with your experience?**

R: _____

25 (Clinic): **When speaking with the clinic health care provider, were there questions about your sexual history that you didn't feel comfortable answering honestly?**

R: (1) Yes, all or most of them (2) Yes, some of them (3) No, none of them (4) I don't know (5) Prefer not to say

26 (GCO): **When filling out the information on GetCheckedOnline, were there questions about your sexual history that you didn't feel comfortable answering honestly?**

R: (1) Yes, all or most of them (2) Yes, some of them (3) No, none of them (4) I don't know (5) Prefer not to say

27: **How confident or unconfident are you that your personal information and results from your last test will be kept confidential?**

R: (1) Very confident (2) Confident (3) Neither confident nor unconfident (4) Not that confident (5) Not at all confident

28 (GCO): **How easy or difficult was it for you to use the online testing service?**

R: (1) Very easy (2) Easy (3) Somewhat easy (4) Neither easy nor difficult (5) Somewhat difficult (6) Difficult (7) Very difficult

29 (GCO): **if 5-7 from 53: Can you briefly tell us why you found it difficult to use the online testing service?** [text box]

30 (GCO): **Have you ever received an automatic testing reminder from GetCheckedOnline?**

R: (1) Yes (2) No (3) I don't know

31 (GCO): **How helpful or unhelpful did you find the testing reminder?**

R: (1) Very helpful (2) Helpful (3) Neither helpful nor unhelpful (4) Not that helpful (5) Not at all helpful

32: **Was this your first time getting a test for HIV or STIs?**

R: (1) Yes (2) No (3) I don't know

33 if (2) to 23a: **Before this last test, how long had it been since you were tested for HIV or STIs?**

R: (1) less than 3 months (2) 3-6 months (3) 6-12 months (4) 1-2 years (5) 2-5 years (6) more than 5 years (7) I don't know

34 if (2) to 23a: **How often do you usually get tested for HIV or STIs?**

R: (1) Once a month (2) Every 3-4 months (3) Twice a year (4) Once a year (5) Every few years (7) No set pattern

35 How important is it for you to be able to test anonymously or without using your real name?

R: (1) Very important (2) Important (3) Neither important nor unimportant (4) Somewhat important (5) Not at all important

36: What was your last HIV test result?

R: (1) HIV Positive (2) HIV Negative (3) I've never had an HIV test (or a test result) (4) I don't know (5) Prefer not to say

37. How long have you known of your HIV positive status?

R: (1) less than 1 year (2) _____ (years)

38: When was that last time you saw a health care provider about your HIV status?

R: (1) Last 6 months (2) 6 -12 months ago (3) More than 1 year ago (4) Have never seen a health care provider about my HIV infection (5) I don't know

39: Are you currently taking antiretroviral medications (ART, HAART)?

R: (1) Yes (2) No (3) I don't know

40: What was your most recent viral load count?

R: (1) I didn't get a viral load test (2) I don't know (3) It was undetectable (4) It was detectable

41: Have you been diagnosed with any of the following?

- Syphilis
- Gonorrhea
- Chlamydia
- Herpes
- Genital warts (HPV)
- Hepatitis B
- Hepatitis C
- Shigella

R: (1) No (2) Yes, in the last 12 months (3) Yes, over a year ago (4) I don't know

42: Have any of the following caused you to delay, avoid, or skip testing in the past year? Choose all that apply.

R: (1) Didn't know where to go (2) Needed an appointment (3) The wait was too long (4) The clinic was too far away (5) The clinic wasn't open when I could test (6) Didn't want to see a doctor or nurse (7) I don't like needles (8) Couldn't get anonymous testing (9) None of the above (10) Other, please describe: _____

43: The last question in this section tests your general knowledge about HIV testing.

Are the following statements about HIV testing true or false?

- **If a person has a negative HIV test, then they do not have HIV.**
- **An HIV test will not tell a person if he or she has HIV until three months after having sex.**
- **Six weeks after getting HIV most people will have a positive HIV test.**
- **There is an HIV test that takes a few minutes to give you a result.**
- **When blood is drawn for HIV testing, it is always tested for other infections.**
- **A person who tests positive for HIV is required to tell all of their previous partners.**
- **Any health care professional like a doctor, nurse or pharmacist can view your HIV test result (positive or negative).**
- **All positive tests results are reported to the public health department.**

R: (1) True (2) False

PART 2 OF 5: ABOUT YOU

Thanks for completing that first section! The survey is about half way done.

Part 2 asks some questions about you. This will help us to learn about the people who are getting tested through services offered by the BC Centre for Disease Control and help us to understand the impact of our services.

44: How old are you?

R: _____

45: How would you describe your gender?

R: _____

46: How would you describe your sexual orientation?

R: _____

47: One of the populations that the BC Centre for Disease Control is trying to reach through our testing services is men (including trans men) who have sex with other men, for example, gay men, bisexual men, or other men who have sex with men). Would you consider yourself to be a man who has sex with other men?

R: (1) Yes (2) No (3) Prefer not to say

(Answer to this question used to stratify questions by MSM or not)

48: What ethnic group(s) do you identify yourself with? Choose all that apply

R: (1) Aboriginal (e.g., First Nations, Métis or Inuit) (2) White (3) Chinese (4) South Asian (e.g., Indian, Pakistani, Sri Lankan) (5) Filipino (6) Southeast Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese) (7) Japanese (8) Korean (9) Black (10) Latin American (11) Arab (12) West Asian (e.g., Afghan, Iranian) (13) Another group, please describe: _____

49. if answer 1: Do you identify as First Nations, Métis or Inuit?

R: (1) First Nations (2) Métis (3) Inuit (4) Another Aboriginal identity (5) Prefer not to say

50: What is the highest level of education or training that you have completed?

R: (1) None (2) some elementary or primary school (3) completed elementary or primary school (4) some secondary or high school (or equivalent) (5) completed secondary or high school (or equivalent) (6) some college, CEGEP, vocational school, trade school or apprenticeship training (7) completed college, CEGEP, vocational school, trade school or apprenticeship training (8) some university (9) completed university certificate or diploma (10) Completed undergraduate university degree (e.g., BA, BSc, Bed) (11) Completed graduate education (e.g., MA, PhD, MD) (12) Other (13) Prefer not to say

51: How would you describe your current employment? (Choose all that apply)

R: (1) Full time employment (2) Part time employment (3) Self-employed (4) Volunteer (5) Student (6) Retired (7) Unemployed (8) Unable to work (9) Other (10) Prefer not to say

52: In the past year, which of the following living situations did you experience? (Choose all that apply)

R: (1) House or apartment (2) Living with parents (3) Staying with friends (4) School dormitory (5) Couch surfing (6) Living in a hotel (7) Shelter (8) Recovery or transition house (9) Hospital/Health Institution (11) Other institution (12) On the street (13) Prefer not to say

53: What is your income, before taxes?

R: (1) <\$20,000 (2) \$20,000-29,999 (3) \$30,000-39,999 (4) \$40,000-49,999 (5) \$50,000-59,999 (6) \$60,000-69,999 (7) \$70,000-79,999 (8) \$80,000-89,999 (9) \$90,000+ (10) Prefer not to say

54: Do you currently receive income assistance or disability assistance?

R: (1) Yes (2) No (3) I don't know (4) Prefer not to say

55: What are the first three characters of your current postal code?

(1) R: ____ (2) I don't know

56: Are you still living in the same city/region where you lived one year ago?

R: (1) Yes (2) No

57. Were you born in Canada?

R: (1) Yes (2) No

58. (If No): **What country were you born in?**

R: _____

59. (if No): **What year did you come to Canada?**

R: _____

60. What language(s) do you speak at home?

R: _____

61: How often have you looked online for health information over the past year?

R: (1) Every day (2) A few times a week (3) A few times a month (4) A few times a year (5) Once in the past year (6) Never

62: Do you use your cell phone for any of the following? Choose all that apply:

R: (1) Texting (2) Browse the internet (3) Find dates/hook-ups (4) Use apps (5) I don't have a cell phone (6) I have a cell phone but don't do any of the above

63. In terms of your internet skills, do you consider yourself to be:

R: (1) Not at all skilled (2) Not very skilled (3) Fairly skilled (4) Skilled (5) Expert

64. How easy or difficult is it for you to go online when you need to?

R: (1) Very easy (2) easy (3) somewhat easy (4) neither easy nor difficult (4) difficult (5) somewhat difficult (6) Very difficult

PART 3 OF 5: EXPERIENCES WITH SEXUAL HEALTH SERVICES

We'd now like to ask you a few questions about your experiences in general with the health care system about your sexual health.

65: In general, how comfortable or uncomfortable is it for you to discuss your sexual history with health care providers?

R: (1) Very comfortable (2) Comfortable (3) Neither comfortable nor uncomfortable (4) Uncomfortable (5) Very uncomfortable

66: How much do you worry about being judged by a health care provider when providing information about your sexual history?

R: (1) Very worried (2) Somewhat worried (3) Neutral (4) A little worried (5) Not at all worried

67: Where do you usually go for health care when you get sick?

R: (1) Family physician (2) Walk-in medical clinic (3) Emergency Centre (hospital) (4) No usual place (5) Other, please describe: _____

68: How comfortable or uncomfortable would you feel discussing your sexual history where you usually go for health care?

R: (1) Very comfortable (2) Comfortable (3) Neither comfortable nor uncomfortable (4) Uncomfortable (5) Very uncomfortable

69: Have you ever been tested for sexually transmitted infections (STIs) or HIV where you usually go for health care?

R: (1) Yes (2) No (3) Don't know

70: How much do you agree or disagree with the statements below?

The last time you went to a clinic to get tested for HIV or STIs:

- I found the clinic hours to be convenient.
- I felt uncomfortable in the waiting room.
- I found it easy to make an appointment.
- I had to wait a long time to see the doctor or nurse.
- I felt comfortable using my real name to get tested.

R: (for each item): (1) Strongly agree (2) Agree (3) Neither agree nor disagree (4) Disagree (5) Strongly disagree

71: How much do you agree or disagree with the statements below?

- It is very embarrassing for me to test for an STI or HIV.
- Testing is one way I can take charge of my sexual health.
- Among my friends, people regularly get tested for STIs or HIV.
- I would feel ashamed if someone I knew found out I tested for an STI or HIV.
- I choose to test for an STI or HIV regardless of what other people think.
- I would feel guilty if I were diagnosed with an STI or HIV.

R: (for each item): (1) Strongly agree (2) Agree (3) Neither agree nor disagree (4) Disagree
(5) Strongly disagree

PART 4 OF 5: EXPERIENCES WITH DRUGS AND ALCOHOL

In this next section, we'd like to ask you some general questions about your experiences using drugs and alcohol. This will help us to know more about the needs of the clients accessing testing services through BCCDC.

72: How often did you consume 5 or more drinks for in one sitting (beer, wine and spirits) in the last 12 months?

R: (1) Never (2) Once a month or less (3) Once a week or less (4) A few times a week (5) Daily

73: How often have you used the following recreational substances in the last 12 months?

Marijuana

Cocaine

Crack

Crystal Meth

Ecstasy ("E"), MDMA, MDA

GHB or "G"

Ketamine or "K"

Psychedelic drugs (e.g. LSD or acid, mescaline, mushrooms)

Heroin

Other opioids without prescription (e.g. Percocet, Dialaudid, Oxycontin)

Tranquilizers or benzos without prescription (e.g. Valium, Rovotril)

Poppers

Viagra, Cialis or other erectile dysfunction drugs

R: (1) Never (2) Once a month or less (3) Once a week or less (4) A few times a week (5) Daily

74: Have you ever used a needle to inject drugs?

R: (1) Yes (2) No (3) I don't know (4) Prefer not to say

75: In the past 3 months, have you used a needle to inject drugs?

R: (1) Yes (2) No (3) I don't know (4) Prefer not to say

76 (if yes to 74): In the past 3 months, have you used a needle or cooker that had been used previously by another person?

R: (1) Yes (2) No (3) I don't know (4) Prefer not to say

PART 5 OF 5: YOUR SEXUAL EXPERIENCES

In this last section, we'd like to ask you some questions about your sex life. This will help us to understand more about the clients accessing testing services through BCCDC.

77: How often have you looked online or used apps to find someone to have sex with?

R: (1) Every day (2) A few times a week (3) A few times a month (4) A few times a year (5) Once in the past year (6) Never (7) I don't know

78: Do you currently use any online dating sites (or apps)?

R: (1) Yes (2) No (3) I don't know (4) Prefer not to say

79: How often do you use these apps / check your profile?

R: (1) Every day (2) A few times a week (3) A few times a month (4) A few times a year (5) Once in the past year (6) Never (7) I don't know

80: How many sex partners have you had in the last 3 months?

R: (1) None (2) Number: _____ (3) I don't know

81: How would you describe the gender(s) of your sex partner(s) in the past 3 months?

R: ____

82: Below are some examples of types of sex, not all of which will apply to you. Have you had any of the following types of sex in the last 3 months? (Choose all that apply)

R: (1) Vaginal sex – your penis in partner's vagina (2) Vaginal sex – penis in your vagina (3) Oral sex – Receiver (mouth on your penis, vagina, or anus) (4) Oral sex – Giver (your mouth on partner's penis, vagina or anus) (5) Anal sex – Receiver/bottom (penis in your anus) (6) Anal sex – Giver/top (your penis in partner's anus) (7) Prefer not to answer (8) Not applicable (9) Other: _____ (10) I don't know

83: Have you had anal or vaginal sex without condoms in the past 3 months?

R: (1) Yes (2) No (3) I don't know (4) Prefer not to say

84: In the last 3 months, did you use any of the following substances before you had sex?

Marijuana

Crystal Meth

Cocaine

GHB

Ketamine

Ecstasy/MDMA

Poppers

Viagra, Cialis or other erectile dysfunction drugs

R: (1) Yes (2) No (3) I don't know

85 (not MSM): How many sex partners have you had in the last 12 months?

R: (1) None (2) Number: _____ (3) I don't know

87: What kinds of sex have you had in the last 12 months? (Check all that apply)

R: (1) Hooking-up with casual sex partners (2) Dating, sex with potential boyfriends/girlfriends (3) Sex with primary partner (boyfriend/girlfriend, husband/wife, spouse, etc.) (4) Sex with friends (friends with benefits) (5) Sex with two or more partners (group sex) (6) Sex with a client (sex work) (7): Other: Please Specify_____

(MSM): **The following questions are about your most recent sexual encounter.**

86. What best describes your relationship to the last guy you had sex with?

R: (1) Boyfriend, partner or husband (2) Friend with benefits, fuck buddy or frequent hook-up (3) First time hook-up, anonymous or no relationship (4) Never had sex with a guy

87 (MSM): How many times have you had sex with him?

R: (1) Only once (2) 2-5 (3) 6-9 (4) 10 times or more

88: When did you have sex with him?

R: (1) In the last week (2) In the last 3 months (3) In the last 6 months (4) Over 6 months ago but less than 1 year (5) Over a year ago

89: When did you first have sex with him?

R: (1) In the last week (2) In the last 3 months (3) In the last 6 months (4) Over 6 months ago but less than 1 year (5) Over a year ago

90: How often do you have sex with him?

R: (1) Daily (2) Weekly (3) Monthly (4) A few times a year (5) Once a year or less (6) I don't have sex with him anymore

91 (MSM): Do you both live in the same region?

R: (1) Yes (2) No (3) Unsure

92 (MSM): What best describes his age?

R: (1) More than 5 years younger than me (2) Around the same age (3) More than 5 years older than me (4) Unsure

93 (MSM): The last time you had sex with him, what kind of sex did you have? (Check all that apply)

R: (1) Jerking off (2) Sucking (oral sex) (3) Rimming (4) Fucking (anal sex, intercourse) (5) Other, please specify

94: When you fucked (the last time you had sex) did you use a condom?

R: (1) Yes (2) No (3) Unsure

95: **What position did you take the last time you had sex with him?**

R: (1) Top (2) Bottom (3) Both top and bottom

96 (MSM): **Do you know his HIV status?**

R: (1) No (2) Yes, he is positive (3) Yes, he is negative

97 (MSM): **How likely is it that you two will have sex again?**

R: (1) Very likely (2) Likely (3) Unlikely (4) Very unlikely (5) Unsure

(MSM): The next questions are about the sex you've been having over the last 12 months.

98 What kinds of sex have you had in the last 12 months? (Check all that apply)

R: (1) Not sexually active (2) Hooking-up with casual sex partners (3) Dating, sex with potential boyfriends (4) Sex with primary partner (boyfriend, husband, spouse, etc.) (5) Sex with fuck buddies, friends with benefits (6) Sex with two or more partners (group sex) (7) Sex with a client (sex work) (7):

Other: Please Specify _____

99 (MSM): **In the last 12 months, how many guys have you had sex with in total?**

R: (1) None (2) Number: _____ (3) I don't know

100: **How many of them were a partner, boyfriend, friend with benefits or fuck buddy?**

R: (1) None (2) 1 (3) 2-5 (4) 6-9 (5) 10 plus

101: **In the last 12 months, how many guys...**

a) **...whose HIV status was the SAME as yours did you fuck or fucked you WITHOUT condoms?**

b) **...whose HIV status was UNKNOWN to you did you fuck or fucked you WITHOUT condoms?**

c) **... whose HIV status was OPPOSITE yours did you fuck or fucked you WITHOUT condoms?**

R: (1) None (2) 1 (3) 2-5 (4) 6-9 (5) 10-19 (6) 20+

102: **What's been your position during sex, in the last 12 months?**

R: (1) Top (2) Mostly top (3) Both top and bottom (versatile) (4) Mostly bottom (5) Bottom (6) no anal sex

104: **How often did you use condoms with the following partners over the last 12 months?**

a) **Boyfriend, partner, husband**

b) **Friend with benefits, fuck buddy**

c) **Hookup, casual, anonymous partner**

R: (1) Never (2) Occasionally (3) Usually (4) Always (5) Not applicable

3-MONTH QUESTIONNAIRE:

PART 1 OF 4: FOLLOW-UP QUESTIONS ABOUT YOUR TEST THREE MONTHS AGO

In the first survey you completed, we asked you questions about your last experience getting tested for sexually transmitted infections (STIs) or HIV. We'd like to start this survey by asking your thoughts about this same testing experience now that three months has passed.

2: Overall, how satisfied or dissatisfied were you with this testing experience three months ago?

R: (1) Very satisfied (2) Satisfied (3) Neither satisfied nor dissatisfied (4) Dissatisfied (5) Very dissatisfied

3: if answer (4) or (5): **Can you tell us briefly why you were not satisfied with your last testing experience?**

R: _____

4: GetCheckedOnline is a program operated by the BC Centre for Disease Control that allows you to get tested for sexually transmitted infections and HIV by printing out an order form from a website that you would take to a lab, then get your results online.

5: When you tested three months ago, did you test online (through *GetCheckedOnline*) or at a clinic?

R: (1) Online through GetCheckedOnline (2) At a clinic

6 (Clinic): **How likely would you be to use Get Checked Online the next time you needed to get tested?**

R: (1) Very likely (2) Likely (3) Neither likely nor unlikely (4) Unlikely (5) Very unlikely

7 (GCO): **How much do you agree or disagree with the following statements about your STI or HIV test three months ago?**

- e. It was convenient for me to get tested
- f. I would use Get Checked Online again
- g. I would recommend Get Checked Online to others
- h. I received enough information to help me decide what tests I needed

R: (1) Strongly agree (2) Agree (3) Neither agree nor disagree (4) Disagree (5) Strongly disagree

8 (Clinic): **How much do you agree or disagree with the following statements about your STI or HIV test three months ago?**

- e. It was convenient for me to get tested
- f. I would use this clinic again
- g. I would recommend this clinic to others
- h. I received enough information to help me decide what tests I needed

R: (1) Strongly agree (2) Agree (3) Neither agree nor disagree (4) Disagree (5) Strongly disagree

9: Do you receive your results from the time you tested three months ago?

R: (1) Yes (2) No

10: Did you receive any test results that were positive?

R: (1) Yes (2) No (3) I don't know (4) Prefer not to say

11 (GCO): How satisfied or dissatisfied were you with your experience of receiving your test results through Get Checked Online?

R: (1) Completely satisfied (2) Satisfied (3) Neither satisfied nor dissatisfied (4) Dissatisfied (5) Completely dissatisfied

12 (Clinic): How satisfied or dissatisfied were you with your experience of receiving your test results at this clinic?

R: (1) Completely satisfied (2) Satisfied (3) Neither satisfied nor dissatisfied (4) Dissatisfied (5) Completely dissatisfied

13 (GCO): How easy or difficult was it for you to use the online testing service?

R: (1) Very easy (2) Easy (3) Somewhat easy (4) Neither easy nor difficult (5) Somewhat difficult (6) Difficult (7) Very difficult

14 (GCO) if 5-7 from 53: Can you briefly tell us why you found it difficult to use the online testing service? [text box]

15 (GCO): Have you ever received an automatic testing reminder from GetCheckedOnline?

R: (1) Yes (2) No (3) I don't know

16 (GCO): How helpful or unhelpful did you find the testing reminder?

R: (1) Very helpful (2) Helpful (3) Neither helpful nor unhelpful (4) Not that helpful (5) Not at all helpful

17 Have you been tested for HIV or STI since your test 3 months ago?

R: (1) Yes (2) No

18 (If yes) With this most recent test, did you test online (through GetCheckedOnline) or at a clinic?

R: (1) Online through GetCheckedOnline (2) At a clinic

19 (GCO, or if Clinic and has used GCO) Have you talked to anyone about your experience testing through Get Checked Online, or about the service in general?

R: (1) Yes (2) No

20 Who did you talk to about Get Checked Online? Check all that apply

R: (1) Friend(s) (2) Regular partner(s) (e.g. boyfriend, girlfriend, spouse) (3) Sex partner(s) (4) Family members (5) Health care provider (6) Co-worker (7) on social media (facebook, twitter, youtube) (8) Other

21 (GCO, or if Clinic but has used GCO) How comfortable or uncomfortable would you be providing your health card (care card) number with your name and date of birth in order to use Get Checked Online?

R: (1) Very comfortable (2) comfortable (3) neither comfortable nor uncomfortable (4) somewhat uncomfortable (5) Very uncomfortable

PART 2 OF 4: KNOWLEDGE ABOUT HIV

In this section we'd like to ask you some questions about your understanding of HIV tests and strategies that can prevent HIV infection.

23: The first set of questions tests your general knowledge about HIV testing.

23 Are the following statements about HIV testing true or false?

- If a person has a negative HIV test, then they do not have HIV.
- An HIV test will not tell a person if he or she has HIV until three months after having sex.
- Six weeks after getting HIV most people will have a positive HIV test.
- There is an HIV test that takes a few minutes to give you a result.
- When blood is drawn for HIV testing, it is always tested for other infections.
- A person who tests positive for HIV is required to tell all of their previous partners.
- Any health care professional like a doctor, nurse or pharmacist can view your HIV test result (positive or negative).
- All positive tests results are reported to the public health department.

R: (1) True (2) False

24 The following statements are TRUE. Were you previously aware of the following HIV prevention strategies before taking this survey?

24a HIV medications, taken daily, suppress the viral load of HIV positive persons and significantly lower the chance that they can pass HIV to sexual partners.

R: (1) Yes (2) No

24b After a risky sexual event (such as having sex without a condom) there are medications you can take for a month that can prevent an HIV infection from being established. These medications are called post-exposure prophylaxis or PEP.

R: (1) Yes (2) No

24c Treatment as Prevention (TasP) is a new HIV prevention strategy that promotes HIV testing and treatment in order to increase the suppression of viral load among those who are HIV positive.

R: (1) Yes (2) No

24d A daily medication can be used by HIV negative people to prevent becoming infected with HIV. This is called pre-exposure prophylaxis or PrEP (not yet approved in Canada).

R: (1) Yes (2) No

24e An HIV positive person can be charged with sexual assault for not disclosing their positive status and having sex without a condom.

R: (1) Yes (2) No

PART 3 of 4: SEXUAL AND DRUG USE EXPERIENCES

In this next section we'd like to ask you some questions about your sex life and use of substances in the past three months.

26: How many sex partners have you had in the last 3 months?

R: (1) None (2) Number: _____

27: How would you describe the gender(s) of your sex partner(s) in the past 3 months?

R: _____

28: Have you had any of the following types of sex in the last 3 months? (Choose all that apply)

R: (1) Vaginal sex – your penis in partner's vagina (2) Vaginal sex – penis in your vagina (2) Oral sex – Receiver (mouth on your penis, vagina, or anus) (3) Oral sex – Giver (your mouth on partner's penis, vagina or anus) (4) Anal sex – Receiver/bottom (penis or sex toy in your anus) (5) Anal sex – Giver/top (your penis in partner's anus) (6) Prefer not to answer (7) Not applicable (8) Other: _____

29: Have you had anal or vaginal sex without condoms in the past 3 months?

R: (1) Yes (2) No

30: In the last 3 months, did you use any of the following substances before you had sex?

Marijuana

Crystal Meth

Cocaine

GHB

Ketamine

Ecstasy/MDMA

Poppers

Viagra or Cialis

R: (1) Yes (2) No

31: In the past 3 months, have you used a needle to inject drugs?

R: (1) Yes (2) No (3) I don't know (4) Prefer not to say

32 (if yes to 31): In the past 3 months, have you used a needle or cooker that had been used previously by another person?

R: (1) Yes (2) No (3) I don't know (4) Prefer not to say

PART 4 of 4: INTERNET AND TECHNOLOGY USE

We would like to start this final section by asking you for your opinions and about your experience using the internet for health information. For each statement, choose the response which best reflects your opinion and experience right now.

34. How useful do you feel the Internet is in helping you make decisions about your health?

R: (1) Very useful (2) Useful (3) Unsure (4) Not useful (5) Not useful at all

35. How important is it for you to be able to access health resources on the Internet?

R: (1) Very important (2) Important (3) Unsure (4) Not Important (5) Not important at all

36. I know what health resources are available on the Internet

R: (1) Strongly agree (2) Agree (3) Undecided (4) Disagree (5) Strongly Disagree

37. I know where to find helpful health resources on the Internet

R: (1) Strongly agree (2) Agree (3) Undecided (4) Disagree (5) Strongly Disagree

38. I know how to find helpful health resources on the Internet

R: (1) Strongly agree (2) Agree (3) Undecided (4) Disagree (5) Strongly Disagree

39. I know how to use the internet to answer questions about my health

R: (1) Strongly agree (2) Agree (3) Undecided (4) Disagree (5) Strongly Disagree

40. I know how to use the health information I find on the internet to help me

R: (1) Strongly agree (2) Agree (3) Undecided (4) Disagree (5) Strongly Disagree

41. I have the skills I need to evaluate the health resources I find on the internet

R: (1) Strongly agree (2) Agree (3) Undecided (4) Disagree (5) Strongly Disagree

42. I can tell high quality health resources from low quality health resources on the internet

R: (1) Strongly agree (2) Agree (3) Undecided (4) Disagree (5) Strongly Disagree

43. I feel confident in using information from the internet to make health decisions

R: (1) Strongly agree (2) Agree (3) Undecided (4) Disagree (5) Strongly Disagree

44 How much do you agree or disagree with the following statements?

I am excited by the possibilities represented by new technologies

I always keep informed about the latest technological developments

When a new technological product comes on the market, I can't wait to try it

New technologies are causing more problems than they are solving

With all of the developments in technology and computers, I find it difficult to keep up

R: (1) Totally agree (2) Agree somewhat (3) Disagree somewhat (4) Totally disagree (5) Don't know