

## SUPPLEMENTAL DIGITAL CONTENT

**Supplement to:** Bor J, Musakwa N, Onoya D, Evans D. Perceived efficacy of HIV treatment-as-prevention among university students in Johannesburg, South Africa. *Sexually Transmitted Infections*.

## CONTENTS


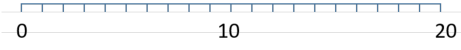
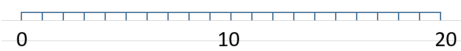

**Suppl Table 1. Visual Analogue Scale to elicit perceptions of HIV transmission risk in four scenarios.**

**Suppl Table 2. Questions included to ask about perceptions of HIV risk, particularly around HIV transmission and treatment as prevention.**

**Suppl. Table 3. Participant Characteristics and Perceived Efficacy of TasP**

**Suppl Figure 1. Differences in perceived risk: (a) 1 vs. 52 sex acts and (b) ART vs. no ART.**

**Suppl Table 1. Visual Analogue Scale to elicit perceptions of HIV transmission risk in four scenarios.**

Question	Scale
1. Consider a woman who does not have HIV. Imagine she has sex one time with a man who is HIV-infected and they do not use a condom. Choose a number from 0 to 20 to reflect how likely you think it is that she will become infected with HIV.	
2. Consider a woman who does not have HIV. Imagine she has sex one time very week for a year (52 times) with a man who is HIV-infected and they do not use a condom. Choose a number from 0 to 20 to reflect how likely you think it is that she will become infected with HIV.	
3. Consider a woman who does not have HIV. Imagine she has sex one time without a condom with a man who is HIV-infected but who is taking ARVs every day and is virally suppressed. Choose a number from 0 to 20 to reflect how likely you think it is that she will become infected with HIV.	
4. Consider a woman who does not have HIV. Imagine she has sex one time very week for a year (52 times) without a condom with a man who is HIV-infected but taking ARVs every day and is virally suppressed. Choose a number from 0 to 20 to reflect how likely you think it is that she will become infected with HIV.	

**Suppl Table 2. Questions included to ask about perceptions of HIV risk, particularly around HIV transmission and treatment as prevention.**

Question	Scale	
1. What is your gut feeling about how likely you are to get infected with HIV?	Extremely unlikely	0
	Very unlikely	1
	Somewhat likely	2
	Very likely	3
	Extremely likely	4
2. I worry about getting infected with HIV	None of the time	0
	Rarely	1
	Some of the time	2
	A moderate amount of time	3
	A lot of the time	4
	All of the time	5
3. Picturing myself getting HIV is something I find:	Very hard to do	0
	Hard to do	1
	Easy to do	2
	Very easy to do	3
4. I am sure I will NOT get infected with HIV	Strongly disagree	0
	Disagree	1
	Somewhat disagree	2
	Agree	3
	Strongly agree	4
5. I feel vulnerable to HIV infection	Strongly disagree	0
	Disagree	1
	Somewhat disagree	2
	Agree	3
	Strongly agree	4

**Suppl. Table 3. Participant Characteristics and Perceived Efficacy of TasP**

<b>Participant characteristics (N=365)</b>	<b>N (%) in each group</b>	<b>Perceived TasP efficacy Mean (SD)</b>	<b>P-value<sup>sss</sup></b>
<b>Gender</b>			
Male	187 (51.2%)	19.3 (23.3)	0.758
Female	176 (48.2%)	21.6 (27.0)	
Missing	2 (0.6%)	2.8 (3.9)	
<b>Age, years</b>			
18 – 19	164 (44.9%)	23.0 (27.4)	0.128
20 – 25	195 (53.4%)	18.4 (23.3)	
Missing	6 (1.6%)	12.5 (13.8)	
<b>Location of high school</b>			
Gauteng Province	204 (55.9%)	20.0 (25.4)	0.796
Outside Gauteng Province	158 (43.3%)	20.6 (24.8)	
Missing	3 (0.8%)	25.0 (25.0)	
<b>Type of high school</b>			
Private	40 (11.0%)	23.1 (25.2)	0.238
Public	287 (78.6%)	19.5 (25.2)	
Missing	38 (10.4%)	23.6 (25.5)	
<b>Tuition paid by</b>			
Parent	138 (37.5%)	18.4 (24.5)	0.175
Loan or scholarship	197 (54.3%)	20.9 (25.1)	
Other	29 (8.0%)	26.9 (28.4)	
Missing	1 (0.2%)	-	
<b>Housing</b>			
Student residence	191 (52.3%)	20.6 (24.7)	0.599
Other	156 (42.7%)	20.2 (26.4)	
Missing	18 (4.9%)	18.7 (19.1)	
<b>Health insurance</b>			
Private	97 (26.6%)	18.8 (23.0)	0.753

None/other	231 (63.3%)	21.3 (26.3)	
Unknown	37 (10.1%)	18.4 (23.4)	
<b>Food security</b>			
Food secure	304 (86.3%)	21.0 (25.1)	0.762
Food insecure	46 (12.6%)	20.3 (25.0)	
Missing	15 (4.1%)	18.6 (29.3)	
<b>Socio-economic status*</b>			
Low	97 (26.6%)	20.6 (24.6)	0.466
Medium	96 (26.3%)	21.9 (23.8)	
High	99 (27.1%)	18.4 (23.6)	
Missing	73 (20.0%)	20.7 (29.6)	
<b>Tested for HIV</b>			
Never/Other/Missing	152 (41.6%)	21.8 (25.2)	0.573
<6 months	164 (44.9%)	19.4 (25.5)	
6 to <12 months	27 (7.4%)	22.3 (24.3)	
12 to <24 months	10 (2.7%)	11.6 (17.4)	
≥24 months	12 (3.3%)	17.7 (28.3)	

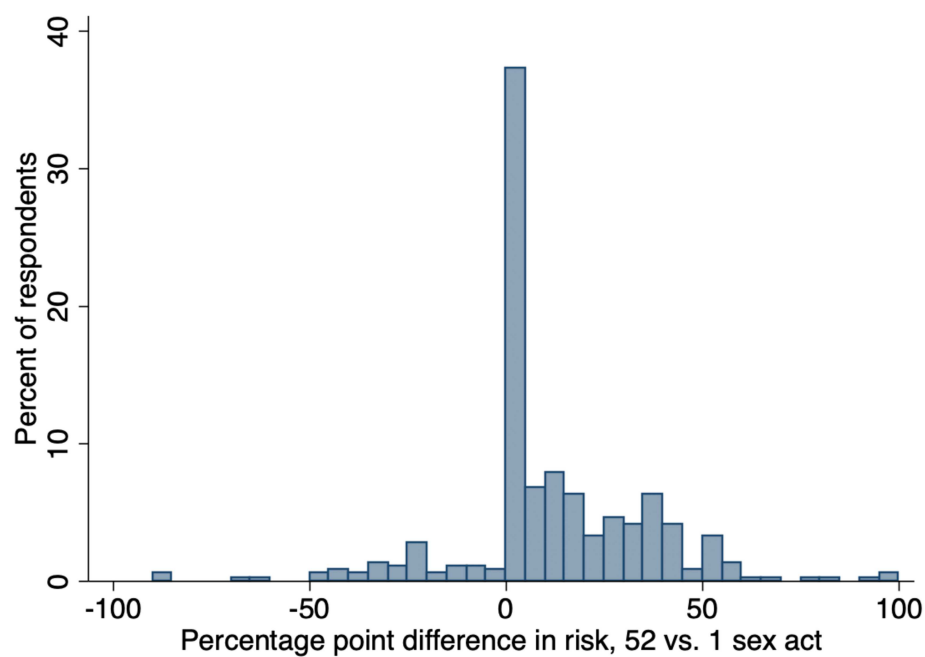
Suppl. Table 3, continued

HIV knowledge and risk perception			
<b>Knowledge of HIV<sup>s</sup></b>			
High	187 (51.2%)	18.5 (24.4)	0.177
Low	178 (48.8%)	22.3 (25.9)	
<b>Risk perception of HIV<sup>ss</sup></b>			
High	141 (38.6%)	16.8 (23.8)	0.016
Low	224 (61.4%)	22.5 (25.8)	
<b>ART reduces transmission risk</b>			
True	240 (65.8%)	22.1 (26.1)	0.075
False	118 (32.3%)	17.0 (23.4)	
Missing	7 (1.9%)	17.3 (19.1)	
<b>Consequences of stopping HIV treatment</b>			
Reported “You become more infectious”	116 (31.8%)	23.5 (28.3)	0.169
Did not report “You become more infectious”	249 (68.2%)	18.8 (23.4)	
<b>Someone can get HIV/AIDS by having one sexual encounter with an HIV infected person</b>			
True	350 (95.9%)	20.5 (25.3)	0.678
False	13 (3.6%)	17.1 (23.2)	
Missing	2 (0.6%)	19.8 (11.3)	
<b>Having sexual intercourse less frequently may reduce your risk of becoming infected with HIV</b>			
True	202 (55.3%)	24.4 (26.7)	0.0002
False	160 (43.8%)	15.3 (22.3)	
Missing	3 (0.8%)	13.2 (13.9)	

\$ as described in <sup>16</sup>, <sup>ss</sup> as described in <sup>20</sup>, <sup>sss</sup> P-values are Kruskal-Wallis tests of the null hypothesis that the rank sum of “perceived TasP efficacy” was the same in each group (e.g. male, female, missing).

**Suppl Figure 1. Differences in perceived risk: (a) 1 vs. 52 sex acts and (b) ART vs. no ART.**

(a)



(b)

