

**The Finding Respect and Ending Stigma around HIV (FRESH) Study
Intervention Workshop Survey
Health Workers**

Thank you for participating in this study. Please fill out this questionnaire as completely as possible. **However, if you feel any questions are not applicable to you, you can write "N/A" in the response areas for those questions.**

PART 1

1. How old were you at your last birthday (How old are you now)? ____ years

2. What is your gender? (Check one)
 - Female
 - Male
 - Transgender
 - Other (please specify):

3. What is your religion? (Check one)
 - Christian-Catholic Christian-Protestant
 - Hindu Jewish
 - Muslim Buddhist
 - None Other (please specify):

4. How important is religion to you? (Check one)
 - Not important
 - Somewhat important
 - Important
 - Very important

5. What is the **highest level** of school you completed?
 - Less than High school High school diploma or GED Some College
 - Associate Degree Bachelor's Degree College Graduate
 - Other

6. How would you classify your race/ethnicity?
 - Caucasian/ White
 - African American/Black
 - Multi-Racial
 - Asian
 - Hispanic/Latino
 - Other

7. What is your current health-related occupation?

- | | |
|---|---|
| <input type="checkbox"/> Administrator | <input type="checkbox"/> Administrative Support (reception, clerical, financial services, etc.) |
| <input type="checkbox"/> Clinical Aide | <input type="checkbox"/> Dentist (DDS) |
| <input type="checkbox"/> Environmentalist | <input type="checkbox"/> Health educator |
| <input type="checkbox"/> Laboratory Technician | <input type="checkbox"/> Nurse / Nurse Practitioner (RN, CRNP, LPN) |
| <input type="checkbox"/> Physician (MD, DO) | <input type="checkbox"/> Physician Assistant |
| <input type="checkbox"/> Social worker | <input type="checkbox"/> Other: <input type="text"/> |
| <input type="checkbox"/> Registered Dietician/Nutritionist | |
| <input type="checkbox"/> Researcher or Epidemiologist | |
| <input type="checkbox"/> Disease Intervention Manger/Specialist | |
| <input type="checkbox"/> Pharmacist/Pharmacy Technician | |

8. How many years have you been working in your current job? years

PART 2

Instructions: We would like to ask you about **infection concerns** in your health facility

For each item Circle your response: **Not worried (1), a little worried (2), somewhat worried (3), very worried (4) or not applicable (5).**

Please indicate your response by circling which of the numbers corresponds to it.

How worried would you be of getting HIV if you did the following	Not worried	A little worried	Somewhat worried	Very worried	Not applicable
1. Took the temperature of a patient living with HIV	1	2	3	4	5
2. Touched the clothing of a patient living with HIV	1	2	3	4	5
3. Cleaned the operating room or exam area after a patient living with HIV was seen	1	2	3	4	5
4. Did a physical exam on a patient living with HIV	1	2	3	4	5
5. Gave an injection to a patient living with HIV	1	2	3	4	5
6. Dressed the wounds of a patient living with HIV	1	2	3	4	5
7. Inserted a central line/IV drip in a patient living with HIV	1	2	3	4	5
8. Drew blood from a patient living with HIV	1	2	3	4	5
9. Sutured the wounds of a patient living with HIV	1	2	3	4	5

PART 3

Instructions: Now we would like to ask you about the **measures you typically** use when providing care or services for a patient living with HIV

Do you typically use any of the following measures when providing care or services for a patient living with HIV?

Please indicate your response by circling which of the responses corresponds to it.

Avoid physical contact	Yes	No	N/A
Wear gloves during all aspects of the patient’s care (history-taking, physical examination, etc.)	Yes	No	N/A
Use masks during all aspects of the patient’s care	Yes	No	N/A
Wear double gloves	Yes	No	N/A
Wear goggles during all aspects of the patient’s care	Yes	No	N/A

Do you typically use any special measures with patients living with HIV that you do not use with other patients?

- Yes No N/A

If yes, please describe the special measures you use

PART 4

Instructions: This part asks about things **you may have observed** the following in your health department

For each item write in your response: **Never (1), once or twice (2), several times (3), or most of the time (4)**

Please indicate your response by circling the corresponding number.

In the past 12 months, how often have you observed the following in your health facility?	Never	Once or twice	Several Times	Most of the time
1. Healthcare workers unwilling to care for a patient living with HIV	1	2	3	4
2. Healthcare workers providing poorer quality of care to a patient living with HIV than to other patients	1	2	3	4
3. Healthcare workers talking badly about people living with or thought to be living with HIV	1	2	3	4
4. Healthcare workers confronting or educating someone who was mistreating or speaking badly about people living with HIV	1	2	3	4
5. Healthcare workers disclosing a patient’s HIV status without the	1	2	3	4
6. Healthcare workers using extra infection control precautions (like wearing extra gloves) when caring for a patient living with HIV	1	2	3	4
7. Healthcare workers providing extra support or care for patients living with or thought to be living with HIV	1	2	3	4
8. Healthcare workers sending or referring patients living with HIV to other health facilities because the workers do not want to treat	1	2	3	4

PART 5

Instructions: For this question, tell us how hesitant you are to work alongside a co-worker living with HIV?

How hesitant are you to work alongside a co-worker living with HIV?

- Not hesitant
- A little hesitant
- Somewhat hesitant
- Very hesitant

PART 6

Instructions: There are no right or wrong answers to these questions. Please do your best to answer each question.

For each item circle your response: **When you strongly disagree (1) or strongly agree (4), you are very firm about your decision. When you disagree (2) or agree (3), you are close to being firm about your decision**

Please indicate your response by circling the corresponding number

Please indicate how much you agree or disagree with the following statements:	Strongly Disagree	Disagree	Agree	Strongly Agree
1. No matter my views or feelings, it is my professional responsibility to maintain the confidentiality of patients living with HIV	1	2	3	4
2. I would never test a patient for HIV without the patient's informed consent.	1	2	3	4
3. People living with HIV could have avoided HIV if they had wanted to.	1	2	3	4
4. HIV is punishment for bad behavior.	1	2	3	4
5. Most people living with HIV do not care if they infect other people	1	2	3	4
6. People living with HIV should feel ashamed of themselves.	1	2	3	4
7. Most people living with HIV have had many sexual partners.	1	2	3	4
8. People get infected with HIV because they engage in irresponsible behaviors.	1	2	3	4
9. People living with HIV should be allowed to have babies if they wish.	1	2	3	4
10. People living with HIV should feel guilty	1	2	3	4
11. People living with HIV are not as good as others.	1	2	3	4
12. People living with HIV are unclean.	1	2	3	4

PART 7

Instructions: Please tell us if **you strongly agree, agree, disagree, or strongly disagree** with the following statement in relation to each group listed in the table below. There are no right or wrong answers to these questions. Please do your best to answer each question. **When you strongly disagree or strongly agree you are very firm about your decision. When you disagree or agree, you are close to being firm about your decision**

For each item, please check your response. If you strongly agree or agree with any of the statements, please indicate your reasons on the right side of the table.

		I strongly agree/agree because of the following reasons: (Please check all reasons that apply.)	
a) I would prefer not to provide services to— <i>People who inject illegal drugs</i>	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <i>*Please complete the next column if you strongly agree/agree <u>only</u>.</i>	They put me at higher risk for disease.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
		This group engages in immoral behavior.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
		I have not received training to work with this group.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
		I am worried that people will associate me with this group.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
For each item, please check your response. If you strongly agree or agree with any of the statements, please indicate your reasons on the right side of the table.			
b) I would prefer not to provide services to— <i>Men who have sex with men</i>	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <i>*Please complete the next column if you strongly agree/agree <u>only</u>.</i>	They put me at higher risk for disease.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
		This group engages in immoral behavior.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
		I have not received training to work with this group.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
		I am worried that people will associate me with this group.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
c) I would prefer not to provide services to— <i>Sex workers</i>	<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree <i>*Please complete the next column if you strongly agree/agree <u>only</u>.</i>	They put me at higher risk for disease.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
		This group engages in immoral behavior.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
		I have not received training to work with this group.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
		I am worried that people will associate me with this group.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree

PART 8

Instructions: In your day-to-day life, how often do any of the following things happen to you?: **Almost every day (6), at least once a week (5), a few times in a month (4), a few times a year (3), less than once in a year (2) or never (1)** *Please indicate your response by circling the corresponding number*

1. You are treated with less courtesy than other people are.

Because of your...	Almost every day	At least once a week	A few times in a month	A few times a year	Less than once in a year	Never
RACE	6	5	4	3	2	1
HIV STATUS	6	5	4	3	2	1
GENDER	6	5	4	3	2	1
SEXUAL ORIENTATION	6	5	4	3	2	1
ECONOMIC SITUATION	6	5	4	3	2	1

2. You are treated with less respect than other people are.

Because of your...	Almost every day	At least once a week	A few times in a month	A few times a year	Less than once in a year	Never
RACE	6	5	4	3	2	1
HIV STATUS	6	5	4	3	2	1
GENDER	6	5	4	3	2	1
SEXUAL ORIENTATION	6	5	4	3	2	1
ECONOMIC SITUATION	6	5	4	3	2	1

In your day-to-day life, how often do any of the following things happen to you?

3. You receive poorer service than other people at restaurants or stores.

Because of your...	Almost every day	At least once a week	A few times in a month	A few times a year	Less than once in a year	Never
RACE	6	5	4	3	2	1
HIV STATUS	6	5	4	3	2	1
GENDER	6	5	4	3	2	1
SEXUAL ORIENTATION	6	5	4	3	2	1
ECONOMIC SITUATION	6	5	4	3	2	1

4. People act as if they think you are not smart.

Because of your...	Almost every day	At least once a week	A few times in a month	A few times a year	Less than once in a year	Never
RACE	6	5	4	3	2	1
HIV STATUS	6	5	4	3	2	1
GENDER	6	5	4	3	2	1
SEXUAL ORIENTATION	6	5	4	3	2	1
ECONOMIC SITUATION	6	5	4	3	2	1

5. People act as if they are afraid of you.

Because of your...	Almost every day	At least once a week	A few times in a month	A few times a year	Less than once in a year	Never
RACE	6	5	4	3	2	1
HIV STATUS	6	5	4	3	2	1
GENDER	6	5	4	3	2	1
SEXUAL ORIENTATION	6	5	4	3	2	1
ECONOMIC SITUATION	6	5	4	3	2	1

6. People act as if they think you are dishonest.

Because of your...	Almost every day	At least once a week	A few times in a month	A few times a year	Less than once in a year	Never
RACE	6	5	4	3	2	1
HIV STATUS	6	5	4	3	2	1
GENDER	6	5	4	3	2	1
SEXUAL ORIENTATION	6	5	4	3	2	1
ECONOMIC SITUATION	6	5	4	3	2	1

In your day-to-day life, how often do any of the following things happen to you?

7. People act as if they're better than you are.

Because of your...	Almost every day	At least once a week	A few times in a month	A few times a year	Less than once in a year	Never
RACE	6	5	4	3	2	1
HIV STATUS	6	5	4	3	2	1
GENDER	6	5	4	3	2	1
SEXUAL ORIENTATION	6	5	4	3	2	1
ECONOMIC SITUATION	6	5	4	3	2	1

8. You are called names or insulted.

Because of your...	Almost every day	At least once a week	A few times in a month	A few times a year	Less than once in a year	Never
RACE	6	5	4	3	2	1
HIV STATUS	6	5	4	3	2	1
GENDER	6	5	4	3	2	1
SEXUAL ORIENTATION	6	5	4	3	2	1
ECONOMIC SITUATION	6	5	4	3	2	1

9. You are threatened or harassed.

Because of your...	Almost every day	At least once a week	A few times in a month	A few times a year	Less than once in a year	Never
RACE	6	5	4	3	2	1
HIV STATUS	6	5	4	3	2	1
GENDER	6	5	4	3	2	1
SEXUAL ORIENTATION	6	5	4	3	2	1
ECONOMIC SITUATION	6	5	4	3	2	1

PART 9

Instructions: These questions ask about your risk perception of getting infected with HIV.

1. What is your gut feeling about how likely you are to get infected with HIV?

- extremely unlikely
- very unlikely
- somewhat likely
- very likely
- extremely likely

2. I worry about getting infected with HIV _____

- none of the time
- rarely
- some of the time
- a moderate amount of time
- a lot of the time
- all of the time

3. Picturing myself getting HIV is something I find _____

- very hard to do
- hard to do
- easy to do
- very easy to do

4. Getting HIV is something I am _____

- not concerned about
- a little concerned about
- moderately concerned about
- concerned a lot about
- extremely concerned about

5. I think my chances of getting infected with HIV are _____

- zero
- almost zero
- small
- moderate
- large
- very large

6. Getting HIV is something I have _____

- never thought about
- rarely thought about
- thought about some of the time
- thought about often

Please indicate if you agree or disagree with the following statements:

Response

7. I am sure I will NOT get infected with HIV	
8. I feel I am unlikely to get infected with HIV	
9. I feel vulnerable to HIV infection	
10. There is a chance, no matter how small, I could get HIV	

PART 10

Instructions: We are asking the questions below to assess **your knowledge about HIV.**

Please indicate your response by circling your answer

		TRUE	FALSE	Don't Know
1	Coughing and sneezing DO NOT spread HIV	T	F	DK
2	A person can get HIV by sharing a glass of water with someone who has HIV	T	F	DK
3	Pulling out the penis before a man climaxes/cums keeps a woman from getting HIV during sex	T	F	DK
4	A woman can get HIV if she has anal sex with a man	T	F	DK
5	Showering, or washing one's genitals/private parts, after sex keeps a person from getting HIV	T	F	DK
6	All pregnant women infected with HIV will have babies born with AIDS	T	F	DK
7	People who have been infected with HIV quickly show serious signs of being infected	T	F	DK
8	There is a vaccine that can stop adults from getting HIV	T	F	DK
9	People are likely to get HIV by deep kissing, putting their tongue in their partner's mouth, if their partner has HIV	T	F	DK
10	A woman cannot get HIV if she has sex during her period	T	F	DK
11	There is a female condom that can help decrease a woman's chance of getting HIV	T	F	DK
12	A natural skin condom works better against HIV than does a latex condom	T	F	DK
13	A person will NOT get HIV if she or he is taking antibiotics	T	F	DK
14	Having sex with more than one partner can increase a person's chance of being infected with HIV	T	F	DK
15	Taking a test for HIV one week after having sex will tell a person if she or he has HIV	T	F	DK
16	A person can get HIV by sitting in a hot tub or a swimming pool with a person who has HIV	T	F	DK
17	A person can get HIV from oral sex	T	F	DK
18	Using Vaseline or baby oil with condoms lowers the chance of getting HIV	T	F	DK

PART 11

Instructions: Please indicate your responses **whether Yes or No** to the questions below.

1. I have watched a movie or television show in which a character depicted a person with HIV. Yes No
2. I have observed, in passing, a person I believe may have had HIV. Yes No
3. I have observed persons with HIV on a frequent basis. Yes No
4. I have HIV. Yes No
5. I have worked with a co-worker who had HIV. Yes No
6. I have never observed a person that I was aware had HIV. Yes No
7. A friend of the family has HIV. Yes No
8. I have a relative who has HIV. Yes No
10. I live with a person who has HIV. Yes No

PART 12

Instructions: There are no right or wrong answers to these questions. Please do your best to answer each question.

For each item circle your response: **When you strongly disagree (1) or strongly agree (4), you are very firm about your decision. When you disagree (2) or agree (3), you are close to being firm about your decision**

Please indicate your response by circling the number which corresponds to it.

Please indicate how much you agree or disagree with the following statements:	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
I try to imagine myself in the shoes of clients with HIV when providing services to them.	1	2	3	4	5
An important component of my relationship with clients with HIV is my understanding of the emotional status of them and their families.	1	2	3	4	5
I try to understand what is going on in the minds of clients with HIV by paying attention to their nonverbal cues and body language.	1	2	3	4	5
I believe that empathy is an important factor in providing health services.	1	2	3	4	5
Clients with HIV feel better when I understand their feelings	1	2	3	4	5
HIV patients' illness can only be cured by medical treatment; therefore, affectionate (friendly, warmhearted, loving, fond?) ties between health workers and clients cannot have a significant impact.	1	2	3	4	5
I do not allow myself to be touched by intense emotional relationships with clients with HIV and their family members.	1	2	3	4	5

Please indicate how much you agree or disagree with the following statements:	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
I believe that emotion has no place in the provision of services for HIV.	1	2	3	4	5
Attentiveness to the experiences of clients with HIV is irrelevant to treatment effectiveness.	1	2	3	4	5
It is difficult for me to view things from the perspectives of clients with HIV.	1	2	3	4	5
My understanding of how a client with HIV and their families' feel is totally irrelevant for health service provision.	1	2	3	4	5

PART 13

Instructions: There are no right or wrong answers to these questions. Please do your best to answer each question.

For each item write in your response: **Strongly disagree (1), disagree (2), agree (3), or strongly agree (4)**

Please indicate your response by circling the number which corresponds to it

Please indicate how much you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Agree	Strongly agree
I would be ashamed if I were infected with HIV.	1	2	3	4
I would be ashamed if someone in my family were infected with HIV.	1	2	3	4
I can easily imagine myself in the same situation as patients living with HIV in this facility.	1	2	3	4
I would feel guilty if I were infected with HIV	1	2	3	4
If I were infected with HIV, this would make me feel that I'm a bad person.	1	2	3	4
If I were infected with HIV, this would make me feel I'm not as good as others	1	2	3	4
If I were infected with HIV, this would make me feel I'm unclean.	1	2	3	4

PART 14

Instructions: Please answer the questions below, indicating the **extent of your willingness or unwillingness** to engage in the scenarios described below.

For each item select response: **Definitely unwilling (1), probably unwilling (2), probably willing (3), or definitely willing (4).**

Please indicate your response by circling the number which corresponds to it.

	Definitely unwilling	Probably unwilling	Probably willing	Definitely willing
How would you feel about renting a room in your home to someone with HIV?	1	2	3	4
How would you feel about working in the same office with someone with HIV?	1	2	3	4
How would you feel about having someone with HIV as your neighbor?	1	2	3	4
How would you feel about having someone with HIV as the caretaker of your children?	1	2	3	4
How would you feel about having your children marry someone with HIV?	1	2	3	4
How would you feel about introducing someone with HIV to your friends?	1	2	3	4
How would you feel about recommending someone with HIV for a job working with someone you know?	1	2	3	4

THANK YOU VERY MUCH FOR YOUR TIME AND YOUR PARTICIPATION IN FRESH!!!