

Guideline for conducting a rapid coverage survey among key populations

MARCH 2021



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This guideline was made possible by the generous support of the American people through the United States Agency for International Development (USAID) and the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). The contents are the responsibility of the LINKAGES project and do not necessarily reflect the views of USAID, PEPFAR, or the United States Government.

In addition, FHI 360 acknowledges assistance for this publication from the Bill & Melinda Gates Foundation from research funded in part by the foundation (contract INV-020943). The content contained within is that of the authors and does not necessarily reflect positions or policies of the Bill & Melinda Gates Foundation.

Suggested citation: LINKAGES. Guideline for conducting a rapid coverage survey among key populations. Durham (NC): FHI 360; 2021.

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FOREWORD

Members of key populations (KPs)—including men who have sex with men, transgender people, sex workers, and people who inject drugs—face disproportionately high HIV infection risks and often more limited access to HIV prevention and treatment services due to stigma, discrimination, and criminalization. According to data from the Joint United Nations Programme on HIV/AIDS (UNAIDS), more than half of all new HIV infections globally occur among KP members and their sexual partners. Programs for KPs, based on global guidance produced by the World Health Organization (WHO), are therefore an essential part of tackling the HIV epidemic.

KP programs deliver a minimum package of services to KP individuals, usually through a combination of outreach to physical sites (hot spots) where they congregate and referral to established facilities for additional services. These services are generally delivered by community-based organizations (CBOs) and nongovernmental organizations (NGOs) working within defined geographic areas that they know well. KP individuals are trained as outreach workers to reach their peers as effectively as possible.

It is important for CBOs to know whether they are reaching their goals for coverage with the minimum package of services and to understand their contribution toward the UNAIDS 95-95-95 targets. While routinely collected program data measure the volume of services provided to KP individuals (number of persons reached with different services), they do not capture the full picture of service coverage along the continuum of care from prevention to treatment. Population-level coverage is usually estimated through integrated biological and behavioral surveillance (IBBS) surveys among a sample of KPs. These sampling approaches do not provide the level of detail needed at the local level by CBOs. Furthermore, IBBS surveys are complex and expensive to implement, and are only conducted every three to five years at best.

This guideline for a rapid coverage survey of KP individuals aims to fill this knowledge gap. It provides CBOs with a simple and inexpensive but robust way to obtain regular updates on the reach and coverage of interventions targeting KP individuals. The survey is designed to be implemented by the CBO within its geographic area. Conducted at a randomly selected sample of hot spots, it requires minimal financial resources and a relatively small investment of time to design, implement, and analyze. Even so, the results are likely to be representative of KPs across the area covered by the CBO. With adequate coordination of the timing of implementation, results from surveys in different geographic areas may be pooled together to develop national-level estimates.

The survey is designed to be integrated into routine programmatic work, using existing resources of people (staff and peer outreach workers) and skills. When repeated on an annual basis, the rapid coverage survey can help CBOs track their progress toward program goals, identify gaps in services or outreach, and improve their interventions. It can also provide program implementers and managers at the subnational or national levels with a more detailed picture of coverage.

INTRODUCTION

This guide to designing and implementing a rapid coverage survey is intended for program managers of CBOs providing services to KPs. The simple survey is conducted with KP members by peer outreach workers at selected hot spots in the geographic areas covered by your program. The survey gathers basic information about their exposure to the program, the services they are receiving or would like to receive, and their HIV risk and vulnerability. It will help you track progress toward your targets for reaching KPs with the services they need as well as toward the 95-95-95 targets for KPs in the selected geographic area.

Why is this survey needed?

Programs for KPs are essential to achieve and sustain HIV epidemic control. WHO has issued global guidance on the package of services that should be provided to KPs: access to condoms and lubricants; harm reduction interventions; behavioral interventions; HIV testing and counseling; access to pre-exposure prophylaxis (PrEP); HIV treatment and care for those who are infected; prevention and management of viral hepatitis, tuberculosis (TB), and mental health conditions; sexual and reproductive health interventions including screening and treatment for sexually transmitted infections (STIs); and interventions for addressing violence.

The majority of prevention programs involve outreach to physical sites where KPs congregate. **To measure effectiveness, knowing what proportion of KPs are reached with the recommended package of services, whether outreach services are convenient and accessible, and how many are HIV positive and receiving antiretroviral therapy (ART) is essential.** Traditionally, these questions are answered through an IBBS or similar survey, but these often do not provide adequate local-level information that can be used by organizations conducting outreach at hot spots. Although you capture routine program data, it may omit some KP members who are not enrolled in your program. This rapid coverage survey is a way to obtain a more complete picture of your overall progress toward program goals.

How does the survey help you?

The survey will help you understand:

- Proportion of KPs being reached at hot spots in your target areas
- How well individual KP members are covered by each service in the minimum package
- KP members' access to and use of prevention products
- Services needed by KP members, and how they would like to receive them
- Proportion of KP members aware of their HIV status
- Proportion of KP members who are HIV positive or have other STIs
- Proportion of HIV-positive KP members on ART and whether they are virally suppressed

This information can help you gauge your progress toward the UNAIDS 95-95-95 targets and the extent to which HIV prevention and other health needs of KPs are met as stated in the national guidelines. By repeating the survey each year, you will be able to see the impact of your work, identify any gaps in the program, and understand better the changes happening within your program area.

The survey is designed to provide information for you. The information will be used only to gauge the impact of programs, not to evaluate program performance or compare different CBOs. This survey gives you a measure of coverage to compare with program data. It provides information that you cannot get with program data—such as reported levels of condom use, PrEP adherence, and experiences of violence.

What is different about this survey?

Unlike other national surveys such as the IBBS, the rapid coverage survey:

- Is simple and quick to implement
- Provides data at the local level
- Requires little outside support only for assistance with sampling and data analysis
- Is inexpensive
- Can be done more frequently than an IBBS (each year vs. every four years)
- Integrates with your data system during the course of routine programmatic work
- Provides important information to guide your program implementation
- Provides data that complements data from other sources

The rapid coverage survey:

- Is NOT a population size estimate
- Does NOT map hot spots or available services
- Does NOT replace programmatic mapping

Table 1. Comparison of rapid coverage survey with programmatic mapping and IBBS

Characteristic	Rapid Coverage Survey	Programmatic Mapping	IBBS
Assesses number of KP members receiving services?	Yes	No	Yes
Estimates HIV prevalence, ART coverage, viral suppression?	Yes	No	Yes
Implemented quickly?	Yes	Yes	No
Minimal costs?	Yes	Yes	No
Led by program staff and peers?	Yes	Yes	No
Frequency	Annual	Annual	3–5 years
Level	Local	Local	National
Conducted at all hot spots?	No	Yes	No
Maps services at hot spots?	No	Yes	No
Produces size estimate for KP?	No	Yes	Yes
Used for identifying where to place services?	No	Yes	No
Requires large number of CBO staff and peer outreach workers?	No	Yes	No

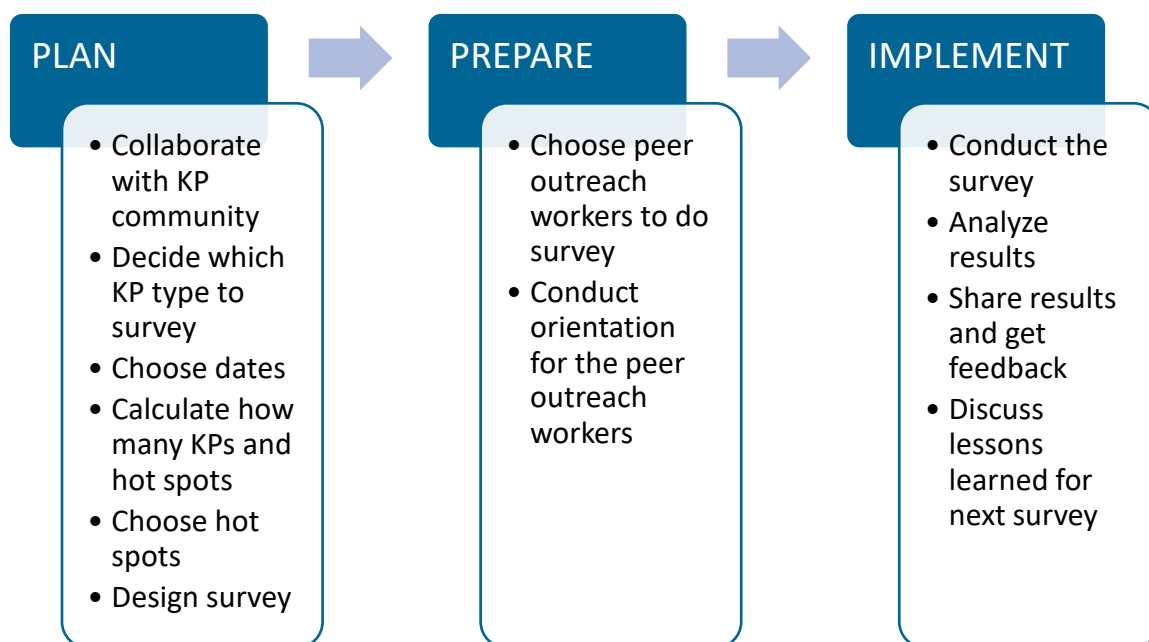
Where, who, and when?

The rapid coverage survey is done at a sample of hot spots in your coverage area. It does not require surveying every hot spot, unless you cover only a few. It is extremely important to update the list of hot spots in your project area at least semiannually, or more frequently as recommended.

The survey is done by peer outreach workers, after a simple orientation from CBO staff.

The survey is recommended to be done once a year. The period of planning, surveying, and analyzing the results will take about four weeks; conducting the survey in the field will take about one week. LINKAGES strategic information (SI) staff will support you in planning, design, implementation, and analysis of the survey.

This step-by-step guide for planning, implementing, and analyzing survey results includes template tools and other resources to help you.



PLANNING THE SURVEY

Collaborate with the KP community

Engage with representatives of the KP community at the beginning of the process so they understand the purpose of the survey and how it will help provide better services. Once you have identified the hot spots where the survey will be done, discuss your plans with your KP program advisory group or community board or an informal focus group and ask them for their input. Discuss:

- What the survey is for
- When it will be conducted and how the hot spots will be chosen (the reason for choosing them at random and the process for doing so are explained below)
- Who will conduct the survey, how they will be chosen, and the orientation they will receive

- What questions will be asked
- Data confidentiality and anonymity
- How the data will be used and how the survey results will be shared
- How HIV and other tests will be conducted (if you choose to offer this as part of the survey)
- How they would like to be involved

Emphasize to the KP representatives that no one will be required to take part in the survey if they do not want to and choosing not to take part will not affect their access to any LINKAGES-supported services or services from other providers.

Do you need ethics approval for the survey?

Because the survey is designed to be a part of routine program work (like programmatic mapping), it should be categorized as a non-research activity. Please consult with your local institutional review board (IRB) to ensure that local requirements are met before carrying out the survey.

Which KP groups will you survey?

Plan a separate survey for each KP type that you cover. For example, if you provide services to female sex workers and men who have sex with men then you should plan separate surveys for each population.

When will you do the survey?

Allow one week to conduct the survey, with two weeks to prepare for it and a week for analysis. Use your mapping data to identify the best time period for the survey. Choose a period when the number of KPs at the hot spots is likely to be around the average, rather than a time when there is a lot of seasonal mobility, such as a holiday or festival. Also consider the season and whether the weather may make it difficult for the outreach worker to reach the hot spot, or to find KP members at the hot spot.

Once you have identified the specific hot spots for your survey (see below), ask the peer outreach workers assigned to those hot spots whether there are better days or times to reach the greatest number of KP individuals.

How many KP individuals will you survey (sample size)?

The survey is not designed to be given to every KP member at every hot spot, but rather a certain number of them that is representative of all the KPs in your program area. This makes the survey faster and easier to do, but requires some planning.

A minimum number of KP individuals are required to be surveyed so that you can draw conclusions about your whole program from the survey. This minimum number is called the sample size, and it is calculated using **Tool 1** (in the Excel workbook). The only information you will need to enter in the tool is *the total number of KPs in the area serviced by your project using data from the last round of programmatic mapping*. When you enter this number in the tool, it will display the minimum number of KPs that you must survey.

How many hot spots will you survey?

To keep things simple, you will not survey KPs at every hot spot where you work, only at a limited number. At each of these hot spots, you will survey all the KPs who can be identified on the day(s) of

the survey. To calculate the number of hot spots to choose, divide your sample size by the average number of KPs at each hot spot based on your programmatic mapping data.

- For example, if the estimated number of KPs in your program area is 4,000 and there are 200 active hot spots, the average hot spot has 20 KP individuals (4,000 divided by 200). If your sample size (calculated by using Tool 1) is 500 KPs, for example, you find the number of hot spots to survey by dividing 500 by 20. In this example, this means you will need to conduct the survey at 25 hot spots (500 divided by 20).

Which hot spots will you survey?

The hot spots you survey must be chosen completely at random. Using random choice ensures the survey will be representative of all the KPs in your program area. If you choose hot spots because you believe the coverage is particularly high or low, they are easier to reach, or even because you think they are typical of all your hot spots, you will not have a random sample, and you will not be able to draw conclusions about your program as a whole. It is extremely important to update your hot spot list at least every six months to ensure that the survey is comprehensive.

Two ways to choose your hot spots at random:

Option 1: Make a numbered list of all hot spots and then use the random hot spot selector (**Tool 2** in the Excel workbook). This is a quick and simple method. Instructions are provided in the tool in the workbook.

Option 2: Draw names of hot spots out of a bag, using the following steps:

- Write the name of each hot spot on a separate slip of paper. In the example above, if there are 200 hot spots, you will have 200 slips of paper.
- Fold each slip the same way so the name cannot be seen, and place all of them in a bowl or bag. Shake it to mix up the slips well.
- Draw one slip from the bowl at a time until you have drawn the desired number of hot spots. These are the hot spots where the survey will be conducted. For the example above, you will draw 25 slips of paper from the bag.
- If you are unable to recruit 500 KP individuals for the survey from the 25 hot spots that were initially selected, then randomly select another hot spot from the others on the list. If the number of KP individuals is still below the number required for the survey, then repeat this process until you have reached the required 500.

Make sure representatives from the selected hot spots know about the survey in advance, especially if they were not part of your initial planning meeting. If necessary, hold a meeting with them to explain the survey and answer any questions. They can also help encourage participation. See the section on orientation below.

How many days will you need for the survey, and how many interviewers?

Once you have randomly chosen the hot spots, use your knowledge of each hot spot to calculate how many peer outreach workers to assign to each one. Ask the regular peer outreach workers for those hot spots whether there are better days or times to reach the greatest number of KP individuals. For example, a hot spot may be active only from Friday to Sunday, in which case the survey should be done over those three days. Or, it may be busy each evening during the week, in which case the survey could be done over the space of a week.

Each peer outreach worker conducting the survey will probably be able to interview around three to five KP individuals in one hour. Depending on the size of the hot spot and the number of days it is active in a week, you may need more than one interviewer in order to reach all the KP individuals in the time available. You can calculate this using your knowledge of the number of mapped KPs at the hot spots you have chosen and the number of days each is active. For example:

- If a hot spot has 60 KP individuals and is active three days a week, the goal will be to survey 20 on each day. This will take one interviewer about seven hours working without a break, which is probably not realistic. But two interviewers could complete the interviews working three-and-half hours a day for each of the three days.
- If a hot spot has 80 KP individuals and is active seven days a week but only in the evenings, the goal will be to survey about 12 each evening. One interviewer would need to work four hours an evening for seven evenings.

You should assign two peer outreach workers to each hot spot, working as a pair, for safety. It may be helpful to orient two or three additional pairs of peer outreach workers in case someone you have oriented is unable to conduct the survey.

What questions will you ask?

Tool 5 (p. 17) contains a set of **core questions** that must be included in the survey each time. They cover the following areas:

- Confirmation that the person is a KP member and their age
- Enrolled in your program or another project
- Received services from your program or another project
- Services desired that have not been received
- HIV risk behaviors and protective behaviors
- Knowledge of HIV status
- Experiences of stigma and discrimination
- Experiences of violence

Repeating the questions in each round of the survey will allow you to compare results from one round to the next. Therefore, do not to change the wording of these questions.

Have the survey and the consent form translated into your local language(s), if needed. Once translated, test it with a peer outreach worker or another KP individual who speaks the language, to make sure the translation is accurate.

CHOOSING AND ORIENTING PEER OUTREACH WORKERS FOR THE SURVEY

Choosing peer outreach workers

Peer outreach workers are the best people to conduct the rapid coverage survey because they understand HIV prevention and the LINKAGES program, and have a good rapport with KPs.

It is essential that the survey is conducted by peer outreach workers who are NOT the regular peer outreach workers for the chosen hot spots. There are two reasons:

- The regular peer outreach worker may be tempted to focus on the KP individuals they know best at their hot spot and spend less time finding others.
- Some KP individuals may worry that if they say something negative about program services to their regular peer outreach worker, they will upset that person or may be treated unfairly in the future. This may stop them from responding honestly to some survey questions.

This means that the peer outreach workers who will do the survey should only be chosen *after* the hot spots have been selected. Because the peer outreach workers will probably not be known in those hot spots, it is important for safety to assign two to work together at each location.

Choose peer outreach workers who:

- Are of the same KP type as the individuals they will be surveying
- Are experienced in outreach
- Are good at talking to KP members, including ones they do not already know
- Have motivational interviewing skills
- Have good attention to detail (e.g., they fill in their peer logbooks regularly and completely)
- Are available during the period of the survey
- Are willing to take part and to receive the orientation

Orienting the peer outreach workers

Organize the orientation for a day when all the peer outreach workers can attend. Make sure that all the appropriate program staff—outreach supervisor, SI staff—are present, too. Ask the *regular* peer outreach workers for the hot spots that will be surveyed to attend for part of the orientation to talk about their hot spots.

Cover the following topics:

Introduction

- Why the survey is important and useful
- The survey is for all KP individuals at a hot spot—those who are enrolled in your program and those who are not
- Hot spots have been chosen at random to represent all hot spots in your program area
- Why the peer outreach workers have been chosen (including the reasons for using peer outreach workers from outside the hot spots)

Consent

Go over the materials on how to introduce the survey to KP individuals (Tool 4, p. 16). Make sure to cover the following points:

- The survey applies to every KP individual at the hot spot (whether enrolled or not enrolled)
- Importance of identifying yourself and the CBO
- Asking for verbal consent to do the survey and checking the box on the survey sheet to show consent was given
- Emphasize that individuals:
 - Can refuse to take part without penalty
 - Can refuse to answer any question they do not want to answer
 - Can stop taking part before the end if they do not want to continue
 - Will be told that all information will be kept anonymous and confidential (and what that means)

Confidentiality and ethics

- Being discreet when talking to people, just as is done during outreach
- Finding a private place to do the survey once the person has agreed
- Not revealing to anyone else the identify of any KP individual or any information they give
- Keeping the response forms safe and taking them to the CBO office as soon as possible

Using the survey materials

- Go over the questionnaire (Tool 5, p. 17) and how to record responses
- Role-play talking to an enrolled KP individual and asking them to participate
- Role-play talking to a non-enrolled KP individual and asking them to participate
- Practice interviewing each other using the questionnaire, and recording answers. Do one round as an enrolled KP individual and one as a non-enrolled KP individual to get practice using all the questions. Discuss any difficulties that arise with the questionnaire (places that are hard to follow; ones that are uncomfortable to ask; how to put the person at ease, etc.).
- Discuss what to do if the KP individual says that they have experienced any kind of violence:
 - Ask if there has been a response
 - If the person says there has not been a response, ask them if they would like support
 - If they are enrolled, say that you will ask their peer outreach worker or a counselor to contact them
 - If they are not enrolled, ask what resources can you offer, e.g., contact from a local violence/crisis response team, referral for services?
- For more information on how to interview, see Resource 1 (p. 28).

Practical aspects

- Discuss how to identify enrolled and non-enrolled KP individuals at the hot spot. The regular peer outreach workers for the hot spots can be helpful with this part.
 - Use the most recent hot spot maps to analyze the number and location of known KPs.
 - Discuss the best days and times to reach as many KP individuals as possible.
 - Discuss how regular peer outreach workers for the selected hot spots and the peer supervisor can serve as recruiters.
 - Discuss the likely number of non-enrolled KP individuals at the hot spot. Brainstorm the best ways to identify and approach them, using the knowledge of those who regularly visit the hot spot. Emphasize the importance of reaching all the KP individuals at the hot

spot, not only the ones the peer outreach worker normally visits. The outreach supervisor can provide ideas on how best to do this.

- Discuss how to find places for interviewing that are as safe and confidential as possible.
- Make sure the peer outreach workers know how to reach the hot spot. Any special tips for getting there?
- Explain that no incentive (money or goods) is to be offered to KP individuals to participate in the survey.

Data management

- Discuss the Survey Record Sheet (Tool 6, p. 26)—what it is for and how to complete it.
- Discuss the process for returning complete survey response forms to the CBO office at the end of each day, and collecting new response forms.
- Repeat the importance of completing all the forms so that the data is comprehensive, and of keeping the forms safe and confidential.

Logistics

- Confirm the dates and times for conducting the survey. How many days/visits will be needed?
- Any other safety concerns? Who can the peer outreach workers contact if they need help?
- Transportation costs and an honorarium (see next section)
- Arrange for HIV testing (if this is being offered)
- Staff who will conduct tests, and testing supplies, if needed

PUTTING THE SURVEY INTO ACTION

How does the survey affect normal outreach and services?

Ensure that the survey does not interfere with normal outreach at the hot spots. During the orientation, when all the peer outreach workers are together (those doing the survey and the regular ones), discuss how to coordinate the survey work with normal outreach. The regular peer outreach workers can help by letting the KPs at the hot spot know that it will be taking place.

While the peer outreach workers are conducting the survey, they may not be able to do outreach in their own regular hot spot. Make sure that coverage is not interrupted. You can do this by assigning another peer outreach worker who is familiar with the hot spot to do some of the outreach. Or, schedule the survey for only some days of the week so that the peer outreach worker can continue regular outreach on the other days.

What materials are needed?

Make sure each peer outreach worker is supplied with:

- Map of the hot spot
- A form of ID to show they are part of the LINKAGES program, including the name of your CBO
- Questionnaire

- Response forms – enough for all the enrolled KP individuals and the estimated number of non-enrolled. (The peer outreach worker can take a batch of forms each day they go out, and pick up more supplies when they drop off completed forms.)
- Pens
- Supervisor’s name and phone number
- Cash for transportation to and from the hot spot, if needed
- HIV testing/self-testing kits (if you offer testing)

Supervising the survey

A designated supervisor from your staff should be available by phone each day of the survey in case there are questions or difficulties. Make sure the peer outreach workers know who is on duty each day.

Peer outreach workers should return their forms to the CBO at the end of each day, if possible, or the following morning if they are doing the survey in the evening. Make sure the forms are stored securely.

The supervisor should check the response forms each day to make sure they are correctly filled in and go over any issues with the peer outreach worker. This is particularly important on the first two days of the survey to identify any initial problems and make sure they are solved.

Feedback and evaluation

Arrange a feedback session with all the peer outreach workers after the first few days (or first week) of the survey.

Once the survey period is over, arrange a feedback and acknowledgment session with the peer outreach workers and SI staff. Ask the peer outreach workers for their honest feedback.

ANALYZING THE SURVEY AND WRITING THE REPORT

Use the Data Consolidation Sheet (Excel workbook, Tool 7) to compile data from the survey responses. Use one sheet for each hot spot, and then aggregate the totals from all the hot spots on the Data Totals Sheet (Excel workbook, Tool 8). This aggregation of totals is done because the survey is intended to be representative of your entire coverage area, rather than results for each individual hot spot.

You can analyze the data several ways. For example, a **prevention cascade** shows what proportion of KPs are receiving and using condoms (see the sample report below). A similar cascade could be constructed for PrEP access, or for needles and syringes for people who inject drugs. **Treatment cascades** show what proportion of HIV-positive KPs are accessing ART (and, if the information is available, what proportion are virally suppressed). A minimum service package table can present indicators showing what proportion of the enrolled KPs are receiving each service in the minimum

package, so that these can be compared with targets. You can create tables analyzing more than one variable, such as:

- Proportion of KPs receiving the minimum package services by age
- Proportion receiving HIV testing by enrolled/non-enrolled status.

Country SI advisors will answer questions about data entry and, where needed, they will provide support to generate these tables and graphs. A sample report is shown below.

Note that the tables and graphs are examples only; you are free to choose additional information to analyze and display. Include the peer outreach workers (who conducted the survey) and other community representatives in the process of data analysis and presentation.

A. BACKGROUND

A Rapid Coverage Survey of *female sex workers* was conducted from February 1 to February 8, 2021, for <insert area, City>. The goal was to survey <insert number of> *female sex workers*. There is an average of YY *female sex workers* per hot spot, and therefore ZZ hot spots were chosen. In total, AA *female sex workers* were surveyed.

Characteristics of the KPs surveyed:

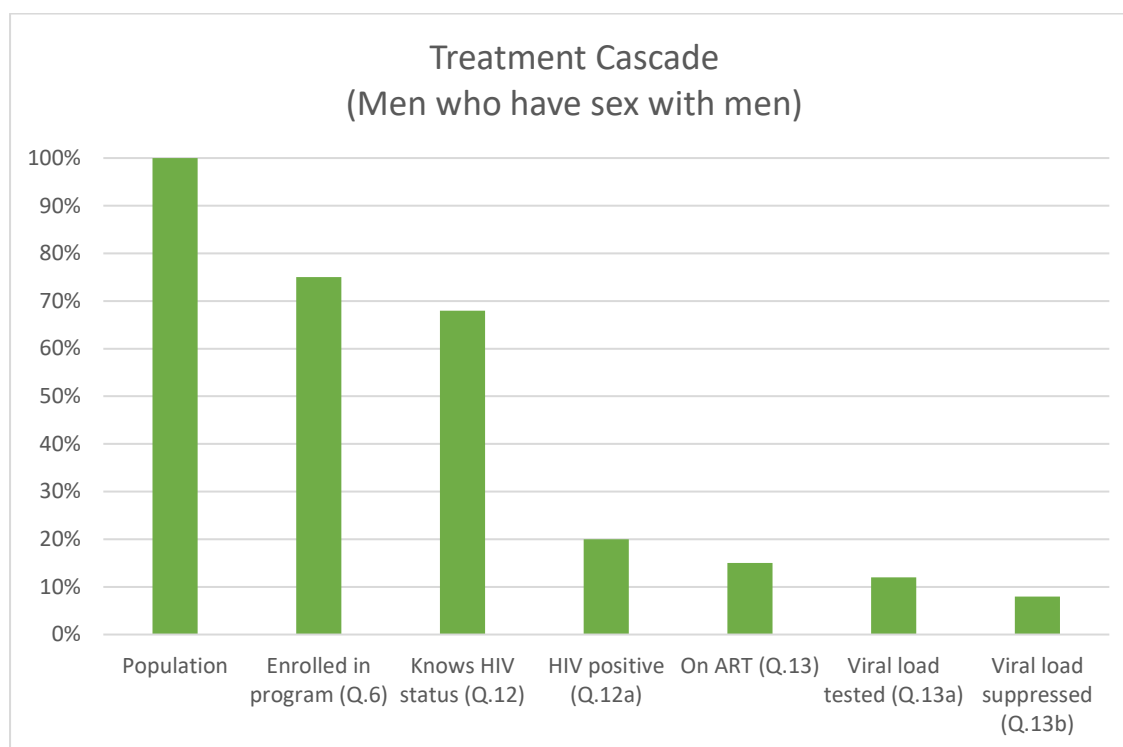
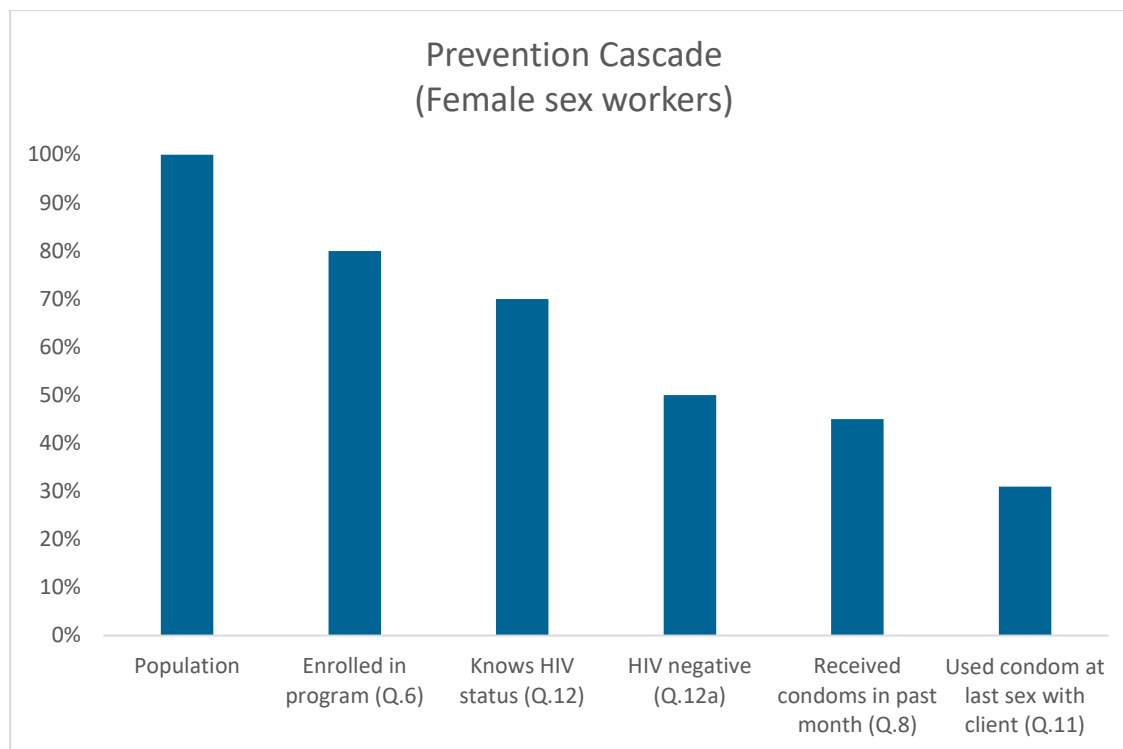
Proportion of KPs ENROLLED in program services (Q.6)	Proportion of KPs NOT ENROLLED in program services (Q.6)
81%	19%

Age (Q.3)	Proportion of surveyed KPs
18-21	5%
21-25	25%
25-30	28%
30-35	18%
35-40	12%
40+	8%

KP enrollment in program				
Not enrolled	<1 month	1-5 months	6+ months	TOTAL
6	2	2	10	20

B. ANALYSIS

1. Prevention and treatment cascades for the KPs surveyed



2. Table of indicators for minimum service package

Indicator	Percentage of enrolled KPs receiving service	Target
% of KPs who received condoms and lubricants (Q.8)	90%	100%
% of KPs who received behavioral intervention (contact from peer outreach worker) (Q.7)	95%	100%
% of eligible KPs who were tested for HIV in past 3 months (Q12c)	23%	25%
% of KPs on ART (Q.13)	5%	-
% of KPs who received screening/ treatment for hepatitis (Q.14)	15%	25%
% of KPs who received screening/ treatment for STIs/SRH (Q.16)	18%	25%
% of KPs who received treatment for STIs (Q.16a)	8%	-
% of KPs who received screening treatment for mental health (Q.17)	7%	25%

SHARING THE RESULTS

Once the survey analysis has been completed, be sure to share your findings with:

- Members of the community
- Peer outreach workers who conducted the survey
- Other peer outreach workers (explaining that the results are a snapshot of the program as a whole)
- KP program advisory committee
- Subnational EpiC program partner
- District-level government officials if you consider it useful to do so

REFLECTING AND NEXT STEPS

Some general questions to ask following the rapid coverage survey:

- What have you learned from the survey?
- How does the survey result compare with data from the program?
- What gaps in services have you noticed?
- How would you like to change or strengthen your outreach and your services in response to the findings?
- How can you improve the survey next time?
- When should you start planning the next survey?

TOOLS AND RESOURCES

Tool 1. Sample size calculator

See Excel workbook

Tool 2. Hot spot list generator

See Excel workbook

Tool 3. Hot spot list

See Excel workbook

Tool 4. Survey introduction and consent

See p. 16

Tool 5. Questionnaires

See p. 17

Tool 6. Survey record sheet

See p. 26

Tool 7. Data consolidation sheet

See Excel workbook

Tool 8. Data total sheet

See Excel workbook

Resource 1. Effective interviewing techniques

See p. 28

Tool 4. Survey introduction and consent

The peer outreach worker can adapt the language in this introduction, but it is important that they cover each point.

Hello, my name is XX, and I am a peer outreach worker with XXX organization and the EpiC program.

I'm doing a short survey of KP individuals in this area to ask them about the types of services they are receiving. The survey will help us provide better services to protect the community against HIV.

I'd like to ask you some questions. It will take about 20 minutes.

This survey is voluntary. You don't have to take part if you don't want to. If you don't participate it won't affect any services you're receiving, and it will not stop you from getting services in the future if you want them.

If you do take part, you can choose not to answer a particular question if you don't want to, and you can stop the survey at any time. It won't affect any services you receive.

All the information you give me will be confidential. Your name and other personal details will not be collected, and whatever information I collect will not be linked to you. It will only be shared with the staff at XX organization who will be analyzing all the responses from the survey.

Do I have your consent to participate? *(If yes, check the consent box on the questionnaire.)*

Is there anything you'd like to ask me before we start?

If you don't understand any of the questions I ask, please tell me. And if you want to change your answer to any of the questions, let me know.

If the person does not want to participate, ask:

- Can I come back and talk to you at another time? What's the best day, time, and place? Can I give you my mobile number in case you need to change plans?
- If you're not already getting services from XXX organization and the EpiC program, would you like a peer outreach worker to contact you to talk about HIV prevention and what services you can get? *If yes, ask for a name and mobile number.*
- Is there anyone else from the community around here who you think may want to take part in this survey?

Tool 5. Questionnaires

CORE (MANDATORY) QUESTIONS – FEMALE SEX WORKERS			
THE KP HAS GIVEN THEIR CONSENT TO PARTICIPATE IN THE SURVEY (Only check this box if the KP individual gives their voluntary consent, and do not ask any of the questions until they have done so.)			<input type="checkbox"/> YES
Q.	Question	Response	
Confirming KP identity, demographics, and hot spot affiliation			
1	In the past year, have you had sex in exchange for money?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Go to Q2 Thank them and do not continue the survey
2	Have you been exchanging sex for money for more than one year? <i>N/A = Not Answered</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q3
3	What is your age in years?	<input type="checkbox"/>	Go to Q4
4	Is this the place where you most frequently go to meet clients?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Go to Q5
5	Do you also use Facebook, WhatsApp, or other online platforms to meet clients?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q6
Program coverage			
6	Are you receiving services or being reached by someone from the <name of program, e.g., EpiC> program/<insert name of CBO>?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know	Go to Q7 Go to Q6a Go to Q6a
6a	<i>If no to 6:</i> Are you receiving services or being reached by someone from another HIV prevention program in this area?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know	Go to Q7
7	Have you received any services from a peer educator or counselor in the past three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q7a Go to Q8 Go to Q8
7a	<i>If yes to 7:</i> Where did you receive services? (Check all that apply.)	<input type="checkbox"/> Hot-spot <input type="checkbox"/> DIC <input type="checkbox"/> Virtual (online)	Go to Q8
8	Have you received condoms from a peer educator or counselor in the past month?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q8a
8a	Have you received lubricant from a peer educator or counselor in the past month?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q9
9	Have you been to a drop-in center in the past month?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q10

Access to prevention products			
10	Can you easily obtain free condoms and lubricant when you need them?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q11</i>
Risk behaviors			
11	Did you use a condom the last time you had sex with a client?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q12</i>
Coverage of HIV testing			
12	Do you know your HIV status?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q12a</i> <i>Go to Q12d</i> <i>Go to Q12d</i>
12a	<i>If yes to 12:</i> Are you willing to tell me your HIV status?	<input type="checkbox"/> HIV+ <input type="checkbox"/> HIV- <input type="checkbox"/> No	<i>Go to Q13</i> <i>Go to Q12b</i> <i>Go to Q14</i>
12b	<i>If HIV negative:</i> Have you ever heard of PrEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to 12c</i> <i>Go to 12e</i> <i>Go to 12e</i>
12c	<i>If HIV negative:</i> Have you ever taken PrEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to 12c</i> <i>Go to 12e</i> <i>Go to 12e</i>
12d	<i>If HIV negative:</i> Are you currently taking PrEP to protect yourself from HIV?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to 12e</i> <i>Go to 12e</i>
12e	<i>If no or N/A to 12, or answered 12a and is HIV negative:</i> Have you taken an HIV test in the past <i>three to six months?</i> <i>[according to national guidelines]</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q14</i>
Coverage of ART (if reporting HIV positive)			
13	<i>If yes to 12a and HIV positive:</i> Are you currently taking ART to treat HIV?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q13a</i> <i>Go to Q14</i> <i>Go to Q14</i>
13a	<i>If yes to 13:</i> Have you had your viral load tested in the past six months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q13b</i> <i>Go to Q14</i> <i>Go to Q14</i>
13b	<i>If yes to 13a:</i> When you were last tested, was your viral load suppressed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know	<i>Go to Q14</i>
Other medical services			
14	Have you had a test or treatment for hepatitis in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q15</i>
15	Have you had a check-up or treatment for tuberculosis (TB) in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q16</i>
16	Have you had a check-up for sexually transmitted infections (STIs) or sexual and reproductive health in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q17</i> <i>Go to Q17</i> <i>Go to Q17</i>
16a	<i>If yes to 16:</i> Have you been treated for an STI in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q17</i>

17	Has a doctor or nurse asked you about your mental health, or offered you mental-health treatment, in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q18
Experience of stigma, discrimination, violence			
18	In the past year, have you been treated unfairly by anyone because you are a sex worker?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q19
19	In the past year, have you experienced physical or sexual violence from anyone?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q19a Go to Q20 Go to Q20
19a	<i>If yes to 19:</i> Were you referred for help or did you receive services after this happened?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q19b
19b	<i>If yes to 19:</i> Are you still in need of support because of the violence you experienced? <i>If “yes”, provide referral to appropriate support.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q20
20	In the past year, do you think this area has become more safe for you, or less safe, or stayed about the same?	<input type="checkbox"/> More <input type="checkbox"/> Less <input type="checkbox"/> Same <input type="checkbox"/> N/A	Go to Q21
HIV testing (omit if you are not including voluntary HIV testing in your survey)			
21	<i>Only ask this question if the KP answered “no” to Q12c. Otherwise, go to Q22:</i> You told me that you haven’t taken an HIV test recently. Would you like to take an HIV test now so that you will know your HIV status? <i>If the KP answers “Yes”, refer to accompanying staff to provide HIV test.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Go to Q22 Go to Q22
Referral to other KPs			
22	Do you know other female sex workers in this area who you think are not being reached by someone from the EpiC program/name of CBO?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q22a End survey End survey
22a	If yes to 22: Would you be willing to introduce me to them so that I can ask them if they would like to take part in this survey?	<input type="checkbox"/> Yes <input type="checkbox"/> No	End survey

CORE (MANDATORY) QUESTIONS – MEN WHO HAVE SEX WITH MEN			
THE KP HAS GIVEN THEIR CONSENT TO PARTICIPATE IN THE SURVEY (Only check this box if the KP individual gives their voluntary consent, and do not ask any of the questions until they have done so.)			<input type="checkbox"/> YES
Q.	Question	Response	
Confirming KP identity, demographics, and hot spot affiliation			
1	In the past year, have you had sex with another man?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Go to Q3 Thank them and do not continue the survey
Note: There is no question 2 in this survey.			
3	What is your age in years?	<input type="checkbox"/>	Go to Q4
4	Is this the place where you most frequently go to meet men for sex?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Go to Q5
5	Do you also use Facebook, WhatsApp, or other online platforms to meet other men for sex? <i>N/A = Not Answered</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q6
Program coverage			
6	Are you receiving services or being reached by someone from the <insert name of program, e.g., EpiC> program/<insert name of CBO>?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q7 Go to Q6a Go to Q6a
6a	<i>If no to 6:</i> Are you receiving services or being reached by someone from another HIV prevention program in this area?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q7
7	<i>If yes to 6 or 6a:</i> Have you received any services from a peer educator or counselor in the past three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q7a Go to Q8 Go to Q8
7a	<i>If yes to 7:</i> Where did you receive services? (Check all that apply.)	<input type="checkbox"/> Hot-spot <input type="checkbox"/> DIC <input type="checkbox"/> Virtual (online)	Go to Q8
8	Have you received condoms from a peer educator or counselor in the past month?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q8a
8a	Have you received lubricant from a peer educator or counselor in the past month?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q9
9	Have you been to a drop-in center in the past month?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q10
Access to prevention products			
10	Can you easily obtain free condoms and lubricant when you need them?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q11
Risk behaviors			
11	The last time you had sex with a man, did you or your partner use a condom?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q12

Coverage of HIV testing			
12	Do you know your current HIV status?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q12a</i> <i>Go to Q12d</i> <i>Go to Q12d</i>
12a	<i>If yes to 12:</i> Are you willing to tell me your HIV status?	<input type="checkbox"/> HIV+ <input type="checkbox"/> HIV- <input type="checkbox"/> No	<i>Go to Q13</i> <i>Go to Q12b</i> <i>Go to Q14</i>
12b	<i>If HIV negative:</i> Are you aware of PrEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to 12c</i> <i>Go to 12e</i> <i>Go to 12e</i>
12c	<i>If HIV negative:</i> Have you ever taken PrEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to 12d</i> <i>Go to 12e</i> <i>Go to 12e</i>
12d	<i>If HIV negative:</i> Are you currently taking PrEP to protect yourself from HIV?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q12e</i>
12e	<i>If no or N/A to 12, or answered 12a and HIV- :</i> Have you taken an HIV test in the past <i>three to six months?</i> <i>[according to national guidelines]</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q14</i>
Coverage of ART (if reporting HIV+)			
13	<i>If yes to 12a and HIV positive :</i> Are you currently taking ART to treat HIV?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q13a</i> <i>Go to Q14</i> <i>Go to Q14</i>
13a	<i>If yes to 13:</i> Have you had your viral load tested in the past six months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q13b</i> <i>Go to Q14</i> <i>Go to Q14</i>
13b	<i>If yes to 13a:</i> When you were last tested, was your viral load suppressed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know	<i>Go to Q14</i>
Other medical services			
14	Have you had a test or treatment for hepatitis in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q15</i>
15	Have you had a check-up or treatment for tuberculosis (TB) in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q16</i>
16	Have you had a check-up for sexually transmitted infections (STIs) or sexual and reproductive health in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q17</i> <i>Go to Q17</i> <i>Go to Q17</i>
16a	<i>If yes to 16:</i> Have you been treated for an STI in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q17</i>
17	Has a doctor or nurse asked you about your mental health, or offered you mental-health treatment, in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q18</i>

Experience of stigma, discrimination, violence			
18	In the past year, have you been treated unfairly by anyone because you have sex with men?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q19</i>
19	In the past year, have you experienced physical or sexual violence from anyone?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q19a</i> <i>Go to Q20</i> <i>Go to Q20</i>
19a	<i>If yes to 19:</i> Were you referred for help or did you receive services after this happened?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q19b</i>
19b	<i>If yes to 19:</i> Are you still in need of support because of the violence you experienced? <i>If "yes", provide referral to appropriate support.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q20</i>
20	In the past year, do you think this area has become more safe for you, or less safe, or stayed about the same?	<input type="checkbox"/> More <input type="checkbox"/> Less <input type="checkbox"/> Same <input type="checkbox"/> N/A	<i>Go to Q21</i>
HIV testing (omit if you are not including voluntary HIV testing in your survey)			
21	<i>Only ask this question if the KP answered "no" to Q.12c.</i> <i>Otherwise, go to Q22:</i> You told me that you haven't taken an HIV test recently. Would you like to take an HIV test now so that you will know your HIV status?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Go to Q22</i> <i>Go to Q22</i>
Referral to other KPs			
22	Do you know other men who have sex with men in this area who you think are not being reached by someone from the EpiC program/name of CBO?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q22a</i> <i>End survey</i> <i>End survey</i>
22a	If yes to 22: Would you be willing to introduce me to them so that I can ask them if they would like to take part in this survey?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>End survey</i>

CORE (MANDATORY) QUESTIONS – PEOPLE WHO INJECT DRUGS		
THE KP HAS GIVEN THEIR CONSENT TO PARTICIPATE IN THE SURVEY <i>(Only check this box if the KP individual gives their voluntary consent, and do not ask any of the questions until they have done so.)</i>		<input type="checkbox"/> YES
Q.	Question	Response
Confirming KP identity, demographics, and hot spot affiliation		
1	In the past year, have you injected drugs?	<input type="checkbox"/> Yes <i>Go to Q2</i> <input type="checkbox"/> No <i>Thank them and do not continue the survey</i>
2	Have you been injecting drugs for more than one year? <i>N/A = Not Answered</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Go to Q3</i> <input type="checkbox"/> N/A
3	What is your age in years?	<input type="checkbox"/> <i>Go to Q4</i>
4	Is this the place where you most frequently go to inject drugs?	<input type="checkbox"/> Yes <i>Go to Q6</i> <input type="checkbox"/> No
Note: There is no question 5 in this survey.		
Program coverage		
6	Are you receiving services or being reached by someone from the <Insert name of program, e.g., EpiC> program/<insert name of CBO>?	<input type="checkbox"/> Yes <i>Go to Q7</i> <input type="checkbox"/> No <i>Go to Q6a</i> <input type="checkbox"/> N/A <i>Go to Q6a</i>
6a	<i>If no to 6:</i> Are you receiving services or being reached by someone from another HIV prevention program in this area?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Go to Q7</i> <input type="checkbox"/> N/A
7	<i>If yes to 6 or 6a:</i> Have you received any services from a peer educator or counselor in the past three months?	<input type="checkbox"/> Yes <i>Go to Q7a</i> <input type="checkbox"/> No <i>Go to Q8</i> <input type="checkbox"/> N/A <i>Go to Q8</i>
7a	<i>If yes to 7:</i> Where did you receive services? <i>(Check all that apply.)</i>	<input type="checkbox"/> Hot-spot <input type="checkbox"/> DIC <i>Go to Q8</i> <input type="checkbox"/> Virtual (online)
8	Have you received sterile needles/syringes from a peer educator or another service provider in the past month?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Go to Q9</i> <input type="checkbox"/> N/A
9	Have you been to a drop-in center in the past month?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Go to Q10</i> <input type="checkbox"/> N/A
Access to prevention products		
10	Can you easily obtain sterile needles and syringes when you need them?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Go to Q10a</i> <input type="checkbox"/> N/A
10a	Can you easily obtain free condoms and lubricant when you need them?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Go to Q10b</i> <input type="checkbox"/> N/A
10b	Can you access OST (opioid substitution therapy) if you want to?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Go to Q11</i> <input type="checkbox"/> N/A

Risk behaviors			
11	Did you use sterile injecting equipment the last time you injected drugs?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q11a
11a	Did you or your partner use a condom the last time you had sex?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q12
Coverage of HIV testing			
12	Do you know your current HIV status?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q12a Go to Q12d Go to Q12d
12a	<i>If yes to 12:</i> Are you willing to tell me your HIV status?	<input type="checkbox"/> HIV+ <input type="checkbox"/> HIV- <input type="checkbox"/> No	Go to Q13 Go to Q12b Go to Q14
12b	<i>If HIV negative:</i> Are you aware of PrEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to 12c Go to 12e Go to 12e
12c	<i>If HIV negative:</i> Have you ever taken PrEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to 12d Go to 12e Go to 12e
12d	<i>If HIV negative:</i> Are you currently taking PrEP to protect yourself from HIV?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q12e
12e	<i>If no or N/A to 12, or answered 12a and HIV- :</i> Have you taken an HIV test in the past <i>three to six months</i> ? <i>[according to national guidelines]</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q14
Coverage of ART (if reporting HIV+)			
13	<i>If yes to 12a and HIV positive:</i> Are you currently taking ART to treat HIV?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q13a Go to Q14 Go to Q14
13a	<i>If yes to 13:</i> Have you had your viral load tested in the past six months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q13b Go to Q14 Go to Q14
13b	<i>If yes to 13a:</i> When you were last tested, was your viral load suppressed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know	Go to Q14
Other medical services			
14	Have you had a blood test for hepatitis in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q14a
14a	Have you been treated for hepatitis C in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q15
15	Have you had a check-up or treatment for tuberculosis (TB) in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q16
16	Have you had a check-up for sexually transmitted infections (STIs) or sexual and reproductive health in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Go to Q17 Go to Q17 Go to Q17

16a	<i>If yes to 16:</i> Have you been treated for an STI in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q17</i>
17	Has a doctor or nurse asked you about your mental health, or offered you mental-health treatment, in the last three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q18</i>
Experience of stigma, discrimination, violence			
18	In the past year, have you been treated unfairly by anyone because you inject drugs?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q19</i>
19	In the past year, have you experienced physical or sexual violence from anyone?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q19a</i> <i>Go to Q20</i> <i>Go to Q20</i>
19a	<i>If yes to 19:</i> Were you referred for help or did you receive services after this happened?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q19b</i>
19b	<i>If yes to 19:</i> Are you still in need of support because of the violence you experienced? <i>If “yes”, provide referral to appropriate support.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q20</i>
20	In the past year, do you think this area has become more safe for you, or less safe, or stayed about the same?	<input type="checkbox"/> More <input type="checkbox"/> Less <input type="checkbox"/> Same <input type="checkbox"/> N/A	<i>Go to Q21</i>
HIV testing (omit if you are not including voluntary HIV testing in your survey)			
21	<i>Only ask this question if the KP answered “no” to Q.12c.</i> <i>Otherwise, go to Q22:</i> You told me that you haven’t taken an HIV test recently. Would you like to take an HIV test now so that you will know your HIV status?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Go to Q22</i> <i>Go to Q22</i>
Referral to other KPs			
22	Do you know other people who inject drugs in this area who you think are not being reached by someone from the EpiC program/name of CBO?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>Go to Q22a</i> <i>End survey</i> <i>End survey</i>
22a	<i>If yes to 22:</i> Would you be willing to introduce me to them so that I can ask them if they would like to take part in this survey?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>End survey</i>

Tool 6. Survey record sheet

This sheet is kept by the peer outreach worker. The first section is completed at the orientation; the subsequent sections are completed each time the peer outreach worker goes out to do the survey. Recording the number of KP individuals who were approached—even if they decline to take part in the survey—is important because it provides a sense of the overall number of KPs at the hot spot.

Peer outreach worker's name	
Name of hot spot	
Number of enrolled KPs	
Estimated number of non-enrolled KPs	

Survey Date 1: Month _____ Day _____		
Number of ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Number of NON-ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Total number of surveys completed:		_____
Number of response sheets delivered to CBO office		_____
Date _____	Received by: _____	

Survey Date 2: Month _____ Day _____		
Number of ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Number of NON-ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Total number of surveys completed:		_____
Number of response sheets delivered to CBO office		_____
Date _____	Received by: _____	

Survey Date 3: Month _____ Day _____		
Number of ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Number of NON-ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Total number of surveys completed:		_____
Number of response sheets delivered to CBO office		_____
Date _____	Received by: _____	

Survey Date 4: Month _____ Day _____		
Number of ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Number of NON-ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Total number of surveys completed:		_____
Number of response sheets delivered to CBO office		_____
Date _____	Received by: _____	

Survey Date 5: Month _____ Day _____		
Number of ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Number of NON-ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Total number of surveys completed:		_____
Number of response sheets delivered to CBO office		_____
Date _____	Received by: _____	

Survey Date 6: Month _____ Day _____		
Number of ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Number of NON-ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Total number of surveys completed:		_____
Number of response sheets delivered to CBO office		_____
Date _____	Received by: _____	

Survey Date 7: Month _____ Day _____		
Number of ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Number of NON-ENROLLED KPs approached: _____	Number agreed to survey: _____	Number declined survey: _____
Total number of surveys completed:		_____
Number of response sheets delivered to CBO office		_____
Date _____	Received by: _____	

Resource 1. Effective interviewing techniques

1. Introduce yourself, your organization, and the purpose of the survey (show document or certificate if necessary).
2. Maintain confidentiality:
 - Do not interview the respondent in the presence of others (unless he/she indicates otherwise).
 - Explain that all answers will be kept confidential.
3. Ask questions exactly as written or with minor changes that were agreed upon during the orientation.
4. Wait for a response; be silent, then probe.
5. If the respondent doesn't understand or the answer is unclear, ask the question again, making as few changes in wording as possible.
6. Do not suggest—by tone of voice, facial expression, or body language—the answer you want.
7. Do not ask leading questions, questions that signal the correct answer, or questions that suggest the answer you would like.
8. Try not to react to answers in such a way as to show that you approve or disapprove.
9. If one answer is inconsistent with another, try to clear up the confusion.
10. Try to maintain a conversational tone of voice; don't make the interview seem like an interrogation.
11. Know the local words for sensitive/delicate topics.
12. Use neutral probes (e.g., anything more?)

Source: Valdez JJ, Weiss M, Leburg C, Davis R. Assessing Community Health Programs: A Participant's Manual and Workbook; Using LQAS for Baseline Surveys and Regular Monitoring. St. Albans (UK): TALC; 2002.