Baseline questionnaire - Face to face interview

Respondent's ID	No.			
Name in SNS:	Facebook		Email:	
	Instagram		Tel:	
	Zalo			
	Line			
1.0 General info	ormation			
101. What is you	ır age? Year	rs		
102. Please choo	se your gender.			
1. Male	2.Femal	e	3.Others	
103. Which distr	rict in Vietnam/Ne	epal are you from	?	
104. What is you	ır marital status?			
1. Unmarrie	ed	2. Married	3. Long term relations	ship 4. Others
105. Please choo	se the level of edu	ucation you have	completed (only one)	
1. Illiterate/N	Jon-formal 2. Pr	rimary/secondary	level 3.Higher sec	ondary level
4. Bachelors	5. Abov	e bachelors	6. Others	
106. With whom	are you staying c	currently?		
1. With wife	e/husband 2. Wi	ith male friends	3. With female frien	ds 4. Alone
5. With chil	dren 6. With	wife/husband and	d children 7. Others	
107. What is you	ir present occupat	ion?		
1. Student (apart from langua	ge school student	t) 2. Agricultur	e 3. Business
4. No jo	b	5. Others (Special	fy)	
108. Current ave	rage income per r	nonth- Don/Rupe	e	
109. Have you e	ver gone abroad to	o work?		
1. Yes	a) Country	b) Length of st	taymonths	
	c) Type of work.			
2. No				
110 . When will	you come to Japa	an?		
111. Which com	pany or school wi	ll you work for o	r study after coming to	Japan?

2.0 About your language skill

201. Please indicate your current Japanese language				
skill.				
1. Japanese conversation	1. Not at all	2. So-so	3. Good	4.
				Excellent
2. Reading Hiragana and Katakana	1. Not at all	2. So-so	3. Good	4.

				Excellent
3. Writing Hiragana and Katakana	1. Not at all	2. So-so	3. Good	4.
				Excellent
4. Reading Kanji	1. Not at all	2. So-so	3. Good	4.
				Excellent
5. Writing Kanji	1. Not at all	2. So-so	3. Good	4.
				Excellent
6. Reading Japanese books/ newspaper	1. Not at all	2. So-so	3. Good	4.
				Excellent
7. Writing email/letters in Japanese	1. Not at all	2. So-so	3. Good	4.
				Excellent

3.0 Alcohol use and self-rated health status

	301.	During the	last 30 days	s how often	did vou	have drinks	containing alcohol?
--	------	------------	--------------	-------------	---------	-------------	---------------------

1. Everyday

2. 2-3 times a week

3. At least once a week

4. Less than once a week

5. Never

302. During the last 3 months did you use drug including amphetamine, ice heroin, heavy popper, balloon?

1. Yes

2. No (go to 306)

3. I do not know (go to 306)

303. How many times did you use the drugs in the last 3 months

1. once 2. More than once but not often

3. Almost every week

304. Which way did you use them?

1. inhale only

2. Pill only

3. Inject 4. Combination of 1 -3.

305. How did you get the drugs?

1. from friends

2. From people selling them online

3. Someone gave me

4. Others

306. How do you rate your current general health status?

1. Excellent

2. Very good

3. Good

4. Fair

5. Poor

4.0 Information on sexual behavior

401. Do you think of yourself as:

1. Straight or heterosexual

2. Lesbian, gay, or homosexual

3.Bisexual

4. Others.....(Please specify)

5.Don't know

402. Have you ever had sexual intercourse (penetrative vaginal and/or anal intercourse)?

1. Yes

2. No (Go directly to **Qn.no. 501**)

403. How old were you at your first sexual intercourse?

year's old			
404. Have you had sexual interco	ourse during last 6 month	s?	
(If "No", go directly to Qn.no. 5 0	01)		
1. Yes	2. No		
405. How many sex partners you	had during the last 6 mo	nths?	
(Number)			
406. How often you used condon	n with your sex partner/s	during the last 6 m	onths?
1. All of the time	2. Most of the time	3. Sometimes	4. Rarely
5. Never			
407. Have you had sex with a cor	nmercial sex worker duri	ing last 6 months?	
(If "No", go directly to Qn.no. 40	09)		
1. Yes	2. No		
408. How often you used condon	n with commercial sex we	orker during the las	st 6 months?
1. All of the time	2. Most of the time	3. Sometimes	4. Rarely
5. Never			
409. (Only for men) Have you h	ad anal sex with a man d	uring the last 6 mor	nths?
(If "No", go directly to Qn.no. 4 2	11)		
1. Yes	2. No		
410. (Only for men)How often y	ou used condom while h	aving anal sex with	a man during the last
12 months?			
1. All of the time	2. Most of the time	3. Sometimes	4. Rarely
5. Never			
411. Have you had any sexually t	ransmitted diseases (STI	Os) in last 12 month	ns?
1. Yes (go to 411-1)	2. No (go to 5.0)		
·		_	ers allowed)
404. Have you had sexual intercourse during last 6 month (If "No", go directly to Qn.no. 501) 1. Yes 2. No 405. How many sex partners you had during the last 6 m (Number) 406. How often you used condom with your sex partner/s 1. All of the time 2. Most of the time 5. Never 407. Have you had sex with a commercial sex worker du (If "No", go directly to Qn.no. 409) 1. Yes 2. No 408. How often you used condom with commercial sex worker du (If "No", go directly to Qn.no. 409) 1. All of the time 2. Most of the time 5. Never 409. (Only for men) Have you had anal sex with a man of (If "No", go directly to Qn.no. 411) 1. Yes 2. No 410. (Only for men)How often you used condom while sex worker du (If "No", go directly to Qn.no. 411) 2. Most of the time 3. No 410. (Only for men)How often you used condom while sex worker du (If the time and Ithe time a)		
FOX: 11 ******			
5.U Knowledge on HIV/AIDS			

501	Have you ever heard of an illness called AIDS?	1. Yes	2.No	3. Don`t
		know		
502	Do you have a close relative or close friend who is	1. Yes	2.No	3. Don`t
	infected with HIV or has died of AIDS?	know		
503	Can people protect themselves from HIV by using	1. Yes	2.No	3. Don`t
	condom correctly in each sexual contact?	know		
504	Do you think a healthy looking person can be	1. Yes	2.No	3. Don`t
	infected with HIV?	know		

505	Can a person get the HIV from mosquito bite?	1. Yes	2.No	3. Don`t
		know		
506	Can a person get HIV by sharing a meal with an	1. Yes	2.No	3. Don`t
	HIV infected person?	know		
507	Can a pregnant women infected with HIV transmit	1. Yes	2.No	3. Don`t
	the virus to her unborn child?	know		
508	Can a woman with HIV transmit the virus to her	1. Yes	2.No	3. Don`t
	newborn child through breastfeeding?	know		
509	Can people protect themselves from HIV by	1. Yes	2.No	3. Don`t
	abstaining from sexual intercourse?	know		
510	Can a person get HIV by holding on with HIV	1. Yes	2.No	3. Don`t
	infected person's hand?	know		
511	Can a person get HIV by using previously used	1. Yes	2.No	3. Don`t
	needle/syringe?	know		
512	Can blood transfusion from HIV infected person	1. Yes	2.No	3. Don`t
	transmit HIV to others?	know		

6.0 Perceived risk of HIV

No.	Questions and Filters	Coding categories
601	What is your gut feeling about how likely	Extremely unlikely1
	you are to get infected with HIV?	Very unlikely2
		Somewhat likely3
		Very likely4
		Extremely likely5
602	I worry about getting	None of the time
	infected with HIV	Rarely2
		Some of the time3
		A moderate amount of time4
		A lot of the time5
		All of the time6
603	Picturing self getting HIV	Very hard to do1
	is something I find:	Hard to do2
		Easy to do
		Very easy to do4
604	I am sure I will NOT get	Strongly disagree1
	infected with HIV	Disagree2
		Somewhat disagree3
		Somewhat agree4

		Agree5
		Strongly agree6
605	I feel vulnerable to HIV infection	Strongly disagree1
		Disagree2
		Somewhat disagree3
		Somewhat agree4
		Agree5
		Strongly agree6
606	There is a chance, no matter how small, I	Strongly disagree1
	could get	Disagree2
	HIV	Somewhat disagree3
		Somewhat agree4
		Agree5
		Strongly agree6
607	I think my chances of getting infected with	Zero1
	HIV are:	Almost zero2
		Small
		Moderate4
		Large5
		Very Large6
608	Getting HIV is something	Never thought about1
	I have	Rarely thought about2
		Thought about some of the
		time3
		Thought about often4

7.0 Access to HIV testing services

701. Do you think you have easy	access to HIV testing service in Vietnam/Nepal?
1. Yes	2. No
702. Do you know where to go for	or HIV testing in Vietnam?/Nepal
1. Yes	2. No
703. I don't want to know the res	sult, but have you ever had an HIV test in Vietnam/Nepal?
1. Yes (go to 703-1)	2. No (go to 703-2)

703-1 Why did you have an HIV test? Please choose the only one reason which was most important to you.

- 1. My friends suggested me 2. My family suggested me
- 3. Doctor suggested me 4. I am worried about getting infected with HIV

	03-2 Why haven't you had an loortant to you.	HIV test? Pleas	se choose the	only one reasor	n which wa	is most	
	1. I am not infected with	HIV (low risk	of infection)				
	2. I do not know where t	•	ŕ				
	3. It is expensive	\mathcal{E}	J				
	4. There is no HIV testin	g facility near	my home				
	5. I am worried about be	ing gossiped b	y other people	e when I access	HIV test		
	6. Others (Please specify)			
704	4. Do you know about free and	•	IIV testing ser	rvice in Vietnan	n/ Nepal?		
	1. Yes	2. No		_			
70:	5. To what extent are you inter-	_					
		2. Not very in		3. Neither inter	ested or no	r uninteres	ted
	4. Somewhat interested	5. Very inter	rested				
80	Stigma and discrimination I. If a member of your family to the or him in your own household.		ith HIV infect	tion, would you	be willing	to care for	r
	1. Yes	2. No	3. Don't	know			
802 HI	2. Would you buy food from a V?	shopkeeper or	vendor if you	ı knew that this	person is i	nfected wi	th
	1. Yes	2. No	3. Don't	know			
803	3. In your opinion, if a teacher	is HIV positiv	e but is not si	ck, should he/sh	ne be allow	red to	
cor	ntinue teaching in the school?						
	1. Yes	2. No	3. Don't	know			
804	4. If a member of your family §	got infected wi	th the AIDS v	virus, would you	ı want it to	remain a	
sec	ret or not?						
	1. Yes	2. No	3. Don't	know			
9.0	Feeling of sadness/ Depres	sion		1	ı	T	
	Below is a list of some of the ways	you may have fel	lt or behaved.	Rarely or	Some or	Occasion	All of
	Please indicate how often you've for	elt this way during	g the past week.	none of the	a little of	ally or a	the
	Respond to all items.			time (less	the time	moderate	time

)

(5-7

days)

amount

of time

than1 day)

(1-2

days)

5. Others (please specify

1.	I was bothered by things that usually don't bother me.	1	2	3	4
2.	I did not feel like eating; my appetite was poor.	1	2	3	4
3.	I felt that I could not shake off the blues even with help from my family.	1	2	3	4
4.	I felt that I was just as good as other people.	1	2	3	4
5.	I had trouble keeping my mind on what I was doing.	1	2	3	4
6.	I felt depressed.	1	2	3	4
7.	I felt that everything I did was an effort.	1	2	3	4
8.	I felt hopeful about the future	1	2	3	4
9.	I thought my life had been a failure.	1	2	3	4
10.	I felt fearful.	1	2	3	4
11.	My sleep was restless.	1	2	3	4
12.	I was happy.	1	2	3	4
13.	I talked less than usual	1	2	3	4
14.	I felt lonely.	1	2	3	4
15.	People were unfriendly	1	2	3	4
16.	I enjoyed life.	1	2	3	4
17	I had crying spells.	1	2	3	4
18	I felt sad.	1	2	3	4
19	I felt that people disliked me.	1	2	3	4
20	I could not "get going."	1	2	3	4

$10.0 \ Social \ support \ (MSPSS)$

Multidimensional Scale of Perceived Social Support

	We are interested in how you feel about the following	Very	Strongly	Mildly	Neutral	Mildly	Strongly	Very
	statements. Read each statement carefully. Indicate how you	Strongly	Disagree	Disagree		Agree	Agree	Strongly
	feel about each statement.	Disagree						Agree
1	There is a special person who is around when I am in need.	1	2	3	4	5	6	7
2	There is a special person with whom I can share my joys	1	2	3	4	5	6	7
	and sorrows							

3	My family really tries to help me.	1	2	3	4	5	6	7
4	I get the emotional help and support I need from my family.	1	2	3	4	5	6	7
5	I have a special person who is a real source of comfort to	1	2	3	4	5	6	7
	me							
6	My friends really try to help me.	1	2	3	4	5	6	7
7	I can count on my friends when things go wrong	1	2	3	4	5	6	7
8	I can talk about my problems with my family	1	2	3	4	5	6	7
9	I have friends with whom I can share my joys and sorrows	1	2	3	4	5	6	7
10	There is a special person in my life that cares about my feelings.	1	2	3	4	5	6	7
11	My family is willing to help me make decisions.	1	2	3	4	5	6	7
12	I can talk about my problems with my friends	1	2	3	4	5	6	7

11.0 Health-related QOL questionnaires: WHO- BREF HRQOL -26

Thinking about last two weeks in the past, how well you feel about your standards, hopes, pleasures and concerns, please the one that you think most appropriate. In each question, assess your feelings, and tell about the number on the scale that gives the best answer for you.

		·			
	Very poor	Poor	Neither poor nor good	Good	Very good
1. How do you rate your quality of life?					
	Very dissatisfied	Dissatisfied	Neither dissatisfied nor satisfied	Satisfied	Very satisfied
2. How satisfied are you with your health?	1	2	3	4	5

The following questions ask about how you have experienced certain things in last two weeks									
	Not at all	A little	A moderate amount	Very much					
3. To what extent do you feel that physical pain prevents you from doing what you need to do?	1	2	3	4					
4. How much do you need any medical treatment to function in your daily life?	1	2	3	4					

5. How much do you enjoy your life?	1	2	3	4
6. To what extent do you feel your life to be meaningful?	1	2	3	4
7. How well are you able to concentrate?	1	2	3	4
8. How safe do you feel in your daily life?	1	2	3	4
9. How healthy is your physical environment?	1	2	3	4

The following questions ask about how completely you experience or were able to do certain things in the last two weeks.									
	Not at all	A little	Moderately	Mostly	Completely				
10. Do you have enough energy for everyday life?	1	2	3	4	5				
11. Are you able to accept your bodily appearance	1	2	3	4	5				
12. Have you enough money to meet your needs?	1	2	3	4	5				
13. How available to you is the information that you need in your day-to-day life?	1	2	3	4	5				
14. To what extent do you have the opportunity for leisure activities?	1	2	3	4	5				
15. How capable you are to cope with your own problems?	1	2	3	4	5				

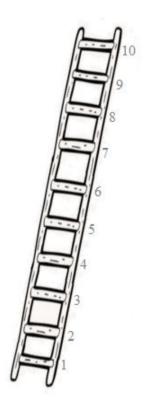
The following questions ask you how good or satisfied you have felt about various aspects of your life over the last two weeks

	Very	Dissatisfied	Never	Satisfied	Very
	dissatisfied		Satisfied nor		satisfied
			Dissatisfied		
16. How satisfied are you with your sleep?	1	2	3	4	5
17. How satisfied with your ability to perform your daily living activities?	1	2	3	4	5
18. How satisfied are you with your capacity for work?	1	2	3	4	5
19. How satisfied are you with yourself?	1	2	3	4	5
20. How satisfied are you with your personal relationship?	1	2	3	4	5
21. How satisfied are you with your sex life?	1	2	3	4	5
22. How satisfied are you with the support you get from your friends?	1	2	3	4	5
23. How satisfied are you with the conditions of living place?	1	2	3	4	5
24. How satisfied are you with your access to health services?	1	2	3	4	5
25. How satisfied are you with your transport?	1	2	3	4	5
	Never	Seldom	Quite often	Very often	Always
26. How often do you have negative feelings such as blue mood, despair, anxiety, depression	1	2	3	4	5

12. Subjective Social Status

Think of this ladder as showing where you stand in Vietnam/Nepal.

Circle where you are (1; lowest, 10; highest in wealth/education/working position)



THANK YOU!