I am a Public health officer from the city health department. I am carrying out a study to determine the risk factors for contracting STIs in Kuwadzana. The study findings will be used to make recommendations for interventions. No names will be taken. All data will be handled with strict confidence.

Social Cabita	Social	Capital
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I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	(2)
2 Religious groups	1	(2)
3 Burial society	1	$(\widehat{2})$
4 Savings club	1	Ð

D2 Which two groups are the most important in your household?

1	Group	1	
	•		

	1-Yes	2-No
1 Education		
2 Health services		
3 Receive credit		
4 Funeral assistance		

E8 Why do you think you have this illness?	1		
From my husbau	d	T-0.2 A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
RISKY SEXUAL B	EHAVIOR		
(For both cases and	d controls)		
2 How old were you when you first had sex?			
20 Years			•
3. Have you had a sexually transmitted infection i	n the past 3 month	ıs?	
What did you do?			
	Mentioned	P	rompted
		Y	N
1 Buy the prescribed antibiotics			
2 Complete course of			

7. How many sexual partners have had in the past 1 year?
Number of partners
8. How many sexual partners have you had in your lifetime?
1 Less than three (3) 2 Three (3) or more
9. What was your relationship to the last person you had sex with?
1 Husband/Wife/live in partner
2 Fiancee/lover
3 Friend
4 Occasional partner
5 Just met/stranger
6 Prostitute
7 Family member/relative
8 Other (specify
9 Refused
10. Did you give or receive money or goods in exchange for sex?
1 Yes 2 No
3 Don't remember 4 No response
11. Did you or your partner use a condom the last time you had sex?
1 Yes 2 No 3 Don't know
12.Do you use a condom every time you have sex?
1 Yes 2 No 3 Don't remember
13. Had you or your partner taken alcohol the last time you had sex?
1 Yes 2 No 3 Don't know

14. Do you have a regular sexual partner? (Regular partner: had sex with in more than 3
times in the past one year)
1 Yes 2 No
15. Have you been living together in the past 6 months? 1-Yes 2-No
16. How old is your regular sexual partner? 39 (years)
17. Do you suspect that your regular partner is having a sexual relationship with
somebody else?
1 Yes 2 No 3 Don't know
(Qn 18, for women only)
18. Sometimes women are forced to have sex and end up getting STIs. Were you forced
to have sex in the past 1 year?
1 Yes 2 No 3 I don't remember 4 Refused to answer 5- N/A
19. Which is your usual area of residence? (suburb)
Kunadzana
19b. How long have you been living in this place for?
(Years)(months)
(For those who live outside city only)
19c. When did you come to city? (year)
19d. What was the purpose of coming to city?

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HEALTH SEEKING BEHAVIOUR
SECTION A Personal information:
Identification number 7 Sex 1) Male 2) Female
Case 1 Case 2 Control Type of STI CUD
Al How old are you? 33
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill? 1 never 2 <1 year ago 3 1-3 years ago 4 >3 years ago 5 can't remember 6 I don't know
C3 Was last illness an STI? Yes (No)

Social Capital				
I would like to ask you about th	e groups, or or	ganizations to	which you or any member of	
your household belong.				
D1 Does anyone in your house	hold belong to	any of these g	groups. Tick the appropriate.	
	Y	7es	No	
1 Traders or business as	ssociation	1	2	
2 Religious groups		1 (2	
3 Burial society		1 (3	
4 Savings club		1	2	
D2 Which two groups are the r	nost important	in your house	ehold?	
1 Group 1				
2 Group 2				
D3 Do the groups help your household to access any of the following services?				
	1-Yes	2-No		

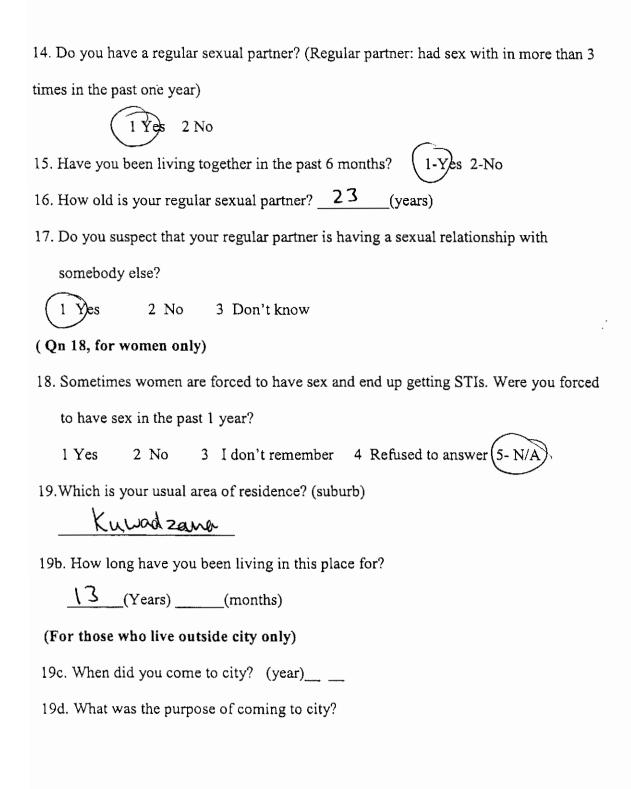
1 Education

2 Health services

3 Receive credit

4 Funeral assistance

For cases only			
E8 Why do you think you have this illness? Infected by wife		· · · · ·	
RISKY SEXUAL BE	<u>HAVIOR</u>		
(For both cases and	controls)		
2 How old were you when you first had sex?			,
Years			•
3. Have you had a sexually transmitted infection in	the past 3 montl	ns?	
1 Yes 2 No			
What did you do?			
	Mentioned	P	rompted
		Y	N
1 Buy the prescribed antibiotics			
2 Complete course of			
5. Does your current sexual partner have an STI? 1 Yes 2 No 3 Don't kno 6. How many sexual partners have you had in the partners of partners			



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HEALTH SEEKING BEHAVIOUR

SECTION A Personal information: Identification number 2) Female Case 1 Case (2 Control Type of STI A1 How old are you? 2 Informal employment A2 What is your occupation? 1 Unemployed 3 Formal employment 4 Other (specify) A3 Which church do you go to? 1 Catholic 2 Apostolic 3 Methodist 4 Anglican 5 Pentecostal (6 Athleist 7 Roman Catholic 8 Other (specify) A4 What is the highest level of education you attained? 3 Secondary 2 Primary 1 None 4 Tertiary A5 What is your marital status? 1 Single 2 Married 3 Co-habiting 4 Divorcee

5 Widowed 6 Other(specify)_____

2 <1 year ago
3 1-3 years ago
4 >3 years ago
5 can't remember
6 I don't know

C2 When were you last ill? 1 never

C3 Was last illness an STI? Yes

Social Capital

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	(3)
2 Religious groups	1	②
3 Burial society	1	2
4 Savings club	(1)	2

D2 Which two groups are the most important in your household?

1 Group 1	Sovings	and	
	U		
2 Group 2			

	1-Yes	2-No
1 Education		
		V
2 Health services		~
3 Receive credit	~	
4 Funeral assistance	V	

For cases only			
8 Why do you think you have this illness?			
RISKY SEXUAL	BEHAVIOR		
(For both cases a	and controls)		
How old were you when you first had sex?			
Years			
. Have you had a sexually transmitted infection	n in the past 3 months	?	
1 Yes 2 No			
What did you do?			
	Mentioned	Prompted	
		37	
		Y	N
Buy the prescribed antibiotics			
2 Complete course of			
		#	
5. Does your current sexual partner have an ST	71?		
1 Yes 2 No 3 Don'	t know		
6. How many sexual partners have you had in	the past 3 months?		
Number of partners			

7. How many sexual partners have had in the past 1 year?
Number of partners
8. How many sexual partners have you had in your lifetime?
1 Less than three (3) 2 Three (3) or more
9. What was your relationship to the last person you had sex with?
1 Husband/Wife/live in partner
2 Fiancee/lover
3 Friend
4 Occasional partner
5 Just met/stranger
6 Prostitute
7 Family member/relative
8 Other (specify
9 Refused
10. Did you give or receive money or goods in exchange for sex?
1 Yes 2 No
3 Don't remember 4 No response
11. Did you or your partner use a condom the last time you had sex?
1 Yes 2 No 3 Don't know
12.Do you use a condom every time you have sex?
1 Yes 2 No 3 Don't remember
13. Had you or your partner taken alcohol the last time you had sex?
1 Yes 2 No 3 Don't know

14. Do you have a regular sexual partner? (Regular partner: had sex with in more than 3
times in the past one year)
1 Yes 2 No
15. Have you been living together in the past 6 months? 1-Yes 2-No
16. How old is your regular sexual partner? 26 (years)
17. Do you suspect that your regular partner is having a sexual relationship with
somebody else?
1 Yes 2 No 3 Don't know
(Qn 18, for women only)
18. Sometimes women are forced to have sex and end up getting STIs. Were you forced
to have sex in the past 1 year?
1 Yes 2 No 3 I don't remember 4 Refused to answer 6-N/A
19. Which is your usual area of residence? (suburb)
Kuladzana
19b. How long have you been living in this place for?
(Years)(months)
(For those who live outside city only)
19c. When did you come to city? (year)
19d. What was the purpose of coming to city?

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HEALTH SEEKING BEHAVIOUR
SECTION A Personal information:
Identification number _9 Sex (1) Male 2) Female
Case 1 Case 2 Control Type of STI CUD
Al How old are you? 63
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
l None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill? 1 never 2 <1 year ago 3 1-3 years ago 4 >3 years ago 5 can remember 6 I don't know
C3 Was last illness an STI? Yes No

Social Capital

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	(2)
2 Religious groups	1	2
3 Burial society	1	(2)
4 Savings club	1	2

D2 Which two groups are the most important in your household?

1 Group 1	
2 Group 2	

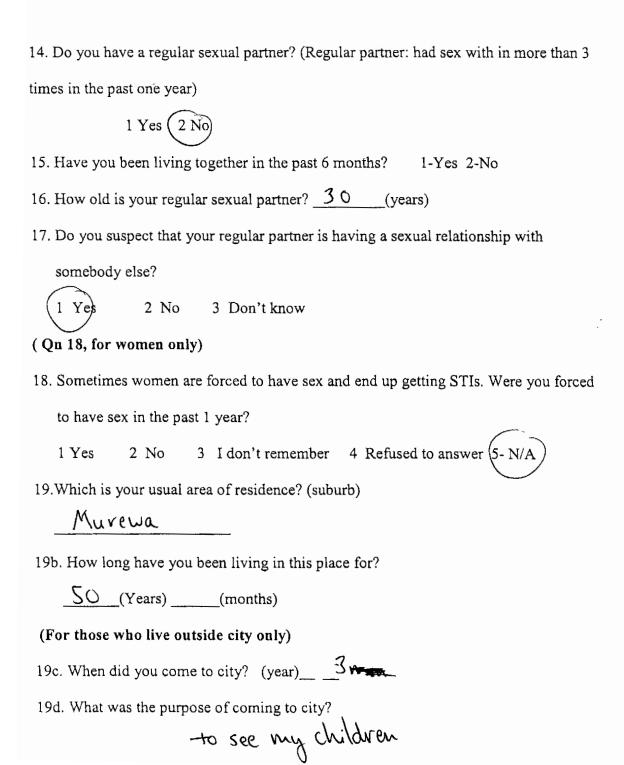
	1-Yes	2-No
1 Education		
2 Health services		
3 Receive credit		
4 Funeral assistance		

For cases only			
E8 Why do you think you have this illness?			
Because of	mu an	Wien	nd
	0 0	4	
RISKY SEXUAL BE	HAVIOR		
(For both cases and	controls)		
2 How old were you when you first had sex?			
<u>3</u> O Years			•
3. Have you had a sexually transmitted infection in	the past 3 mont	ns?	
1 Yes (2 No)			
What did you do?			
	Mentioned	Pı	rompted
		Y	N
1 Buy the prescribed antibiotics		1.5.11.11	
2 Complete course of			
5. Does your current sexual partner have an STI? 1 Yes 2 No 3 Don't known to be a second on the second of the second on the sec			
6. How many sexual partners have you had in the	past 3 months?		

Number of partners__

7. How many sexual partners have had in the past 1 year?			
Number of partners			
8. How many sexual partners have you had in your lifetime?			
1 Less than three (3) 2 Three (3) or more			
9. What was your relationship to the last person you had sex with?			
1 Husband/Wife/live in partner			
2 Fiancee/lover			
3 Friend			
4 Occasional partner			
5 Just met/stranger			
6 Prostitute			
7 Family member/relative			
8 Other (specify			
9 Refused			
10. Did you give or receive money or goods in exchange for sex?			
1 Yes 2 No			
3 Don't remember 4 No response			
11. Did you or your partner use a condom the last time you had sex?			
1 Yes 2 No 3 Don't know			
12.Do you use a condom every time you have sex?			
1 Yes 2 No 3 Don't remember			
13.Had you or your partner taken alcohol the last time you had sex?			
I Yes 2 No 3 Don't know			

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SECTION A
Personal information:
Identification number 10 Sex 1) Male 2) Female
Case 1 Case 2 Control Type of STI
A1 How old are you? 63
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill? 1 never 2 <1 year ago 3 1-3 years ago 4 >3 years ago 5 can't remember 6 I don't know C3 Was last illness an STI? Yes (No)
CO W as last Hilless all STT: Tes (INO)

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	2
2 Religious groups	(1)	2
3 Burial society	1	2
4 Savings club	1	2

D2 Which two groups are the most important in your household?

	1-Yes	2-No
1 Education		2
2 Health services	V	
3 Receive credit		1
4 Funeral assistance	V	

or cases only			
8 Why do you think you have this illness?			
	ado 44 Artikala artika di samana da artika di samana da artika di samana da artika di samana da artika di sama		
RISKY SEXUAL	BEHAVIOR		
(For both cases a	and controls)		
How old were you when you first had sex?			,
Years			•
. Have you had a sexually transmitted infectio	n in the past 3 month	ns?	
1 Yes 2 No			
What did you do?			
	Mentioned	P	rompted
		Y	N
1 Buy the prescribed antibiotics			
2 Complete course of			
5. Does your current sexual partner have an ST	T?		
1 Yes 2 No 3 Don't	t know		
6. How many sexual partners have you had in	the past 3 months?		
Number of partners			
-			

7. How many sexual partners have had in the past 1 year?			
Number of partners_\			
8. How many sexual partners have you had in your lifetime?			
1 Less than three (3) 2 Three (3) or more			
9. What was your relationship to the last person you had sex with?			
1 Husband/Wife/live in partner			
2 Fiancee/lover			
3 Friend			
4 Occasional partner			
5 Just met/stranger			
6 Prostitute			
7 Family member/relative			
8 Other (specify			
9 Refused			
10. Did you give or receive money or goods in exchange for sex?			
1 Yes 2 No			
3 Don't remember 4 No response			
11. Did you or your partner use a condom the last time you had sex?			
1 Yes 2 No 3 Don't know			
12.Do you use a condom every time you have sex?			
1 Yes 2 No 3 Don't remember			
13. Had you or your partner taken alcohol the last time you had sex?			
1 Yes 2 No 3 Don't know			

14. Do you have a regular sexual partner? (Regular partner, had sex with in more than 3
times in the past one year)
1 Yes 2 No
15. Have you been living together in the past 6 months? 1-Yes 2-No
16. How old is your regular sexual partner? <u>57</u> (years)
17. Do you suspect that your regular partner is having a sexual relationship with
somebody else?
1 Yes 2 No 3 Don't know
(Qn 18, for women only)
18. Sometimes women are forced to have sex and end up getting STIs. Were you forced
to have sex in the past 1 year?
1 Yes 2 No 3 I don't remember 4 Refused to answer 5-N/A
19. Which is your usual area of residence? (suburb)
Kuwadzana
19b. How long have you been living in this place for?
(Years)(months)
(For those who live outside city only)
19c. When did you come to city? (year)
19d. What was the purpose of coming to city?

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HEALTH SEEKING BEHAVIOUR
SECTION A Personal information:
Identification number 1\(\frac{1}{2}\) Sex (1) Make 2) Female
Case 1 Case 2 Control Type of STI CUD
Al How old are you? 22
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill? 1 never 2 < 1 year ago 3 1-3 years ago 4 > 3 years ago 5 can't remember
6 I don't know C3 Was last illness an STI? Yes (No)

Social Capital

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	2
2 Religious groups	1	(2)
3 Burial society	1	2
4 Savings club	1	(2)

D2 Which two groups are the most important in your household?

1 Group	1		
2 Group	2		

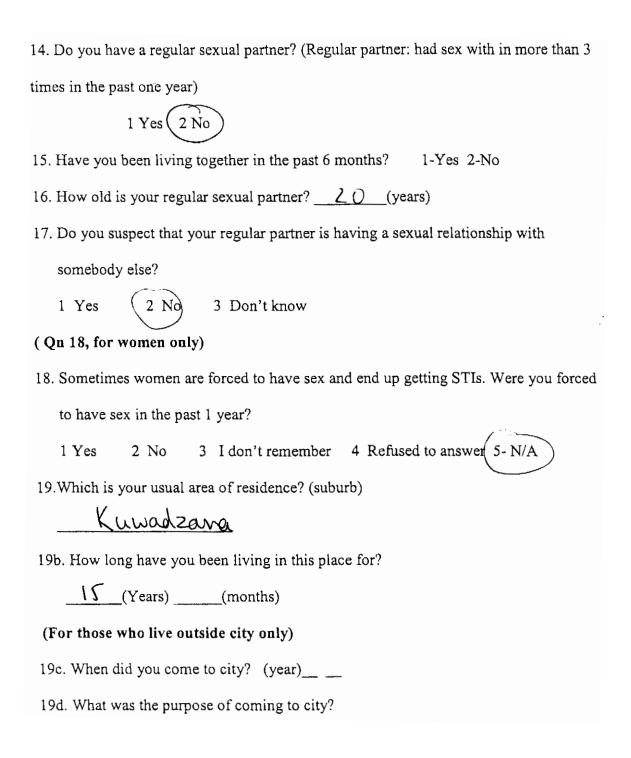
	1-Yes	2-No
1 Education		
2 Health services		
3 Receive credit		
4 Funeral assistance		

For cases only	-

E8 Why do you think you have this illness?	•			
From my girlfriend				
0 0	0		-	
RISKY SEXUAL BEHAVIOR				
(For both cases and controls)				
2 How old were you when you first had sex?				
1 Q Years				
3. Have you had a sexually transmitted infection in	the past 3 mor	iths?		
1 Yes (2 No)				
What did you do?				
	Mentioned	Pr	ompted	
		Y	N	
1 Buy the prescribed antibiotics				
2 Complete course of				
		L		
5. Does your current sexual partner have an STI?				
1 Yes 2 No 3 Don't know				
6. How many sexual partners have you had in the	past 3 months	?		
Number of partners 2				

٠,

7. How many sexual partners have had in the past 1 year?
Number of partners 4
8. How many sexual partners have you had in your lifetime?
1 Less than three (3) 2 Three (3) or more
9. What was your relationship to the last person you had sex with?
1 Husband/Wife/live in partner
2 Fiancee/lover
3 Friend
4 Occasional partner
5 Just met/stranger
6 Prostitute
7 Family member/relative
8 Other (specify
9 Refused
10. Did you give or receive money or goods in exchange for sex?
1 Yes 2 No
3 Don't remember 4 No response
11. Did you or your partner use a condom the last time you had sex?
1 Yes 2 No 3 Don't know
12.Do you use a condom every time you have sex?
1 Yes 2 No 3 Don't remember
13.Had you or your partner taken alcohol the last time you had sex?
1 Yes 2 No 3 Don't know



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HEALTH SEEKING BEHAVIOUR
SECTION A
Personal information:
Identification number 17 Sex (1) Male 2) Female
<u> </u>
Case 1 Case 2 Control Type of STI UD
Al How old are you? 21
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
l None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill? 1 never 2 <1 year ago 3 1-3 years ago 4 >3 years ago 5 cap't remember 6 I don't know
C3 Was last illness an STI? Yes No

Social	Car	nital
DUCIAL	$\sim a$	JILUI

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	l	$\binom{2}{2}$
2 Religious groups	1	(2)
3 Burial society	1	2
4 Savings club	1	(2)

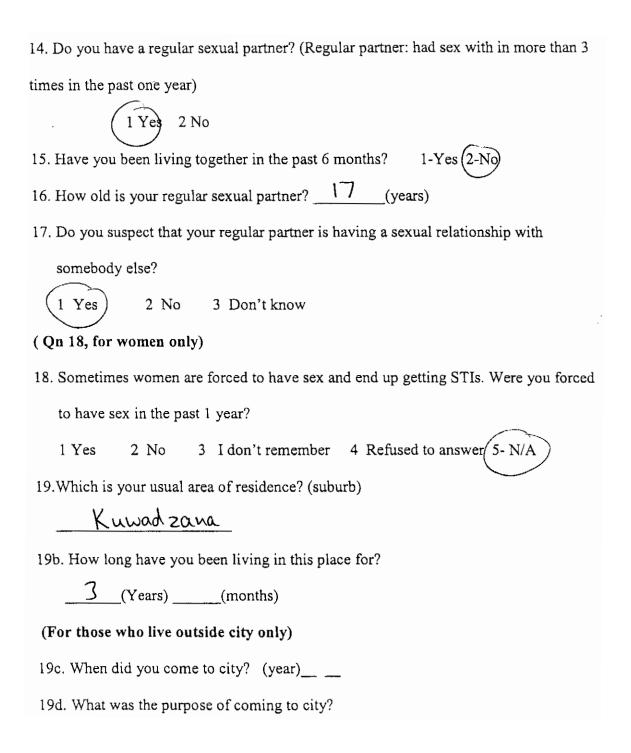
D2 Which two groups are the most important in your household?

1	Group	1	

	1-Yes	2-No
1 Education		
2 Health services		
3 Receive credit		
4 Funeral assistance		

E8 Why do you think you have this illness?			
Don't k	now		······································
RISKY SEXUAI	_ BEHAVIOR		
(For both cases	and controls)		
2 How old were you when you first had sex?			
17 Years			•
3. Have you had a sexually transmitted infecti	on in the past 3 month	ıs?	
1 Yes 2 No			
What did you do?			
	Mentioned	P	rompted
		Y	N
1 Buy the prescribed antibiotics			
2 Complete course of			
5. Does your current sexual partner have an S	TI?		
1 Yes 2 No 3 Don	i't know		
6. How many sexual partners have you had i	n the past 3 months?		
Number of partners 2			

7. How many sexual partners have had in the past 1 year?
Number of partners 2
8. How many sexual partners have you had in your lifetime?
1 Less than three (3) 2 Three (3) or more
9. What was your relationship to the last person you had sex with?
1 Husband/Wife/live in partner
2 Fiancee/lover
3 Friend
4 Occasional partner
5 Just met/stranger
6 Prostitute
7 Family member/relative
8 Other (specify
9 Refused
10. Did you give or receive money or goods in exchange for sex?
1 Yes 2 No
3 Don't remember 4 No response
11. Did you or your partner use a condom the last time you had sex?
1 Yes 2 No 3 Don't know
12.Do you use a condom every time you have sex?
1 Yes 2 No 3 Don't remember
13. Had you or your partner taken alcohol the last time you had sex?
1 Yes 2 No 3 Don't know



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HEALTH SEEKING BEHAVIOUR
SECTION A Personal information:
Identification number 3 1 Sex 1) Male (2) Female
Case 1 Case 2 Control Type of STI GAD
A1 How old are you? $\frac{2}{3}$
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill? 1 never
2×1 year ago 3 1-3 years ago
4 >3 years ago
5 can't remember
6 I don't know
C3 Was last illness an STI? (Yes) No

Social	Car	pita
~~~~~		

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

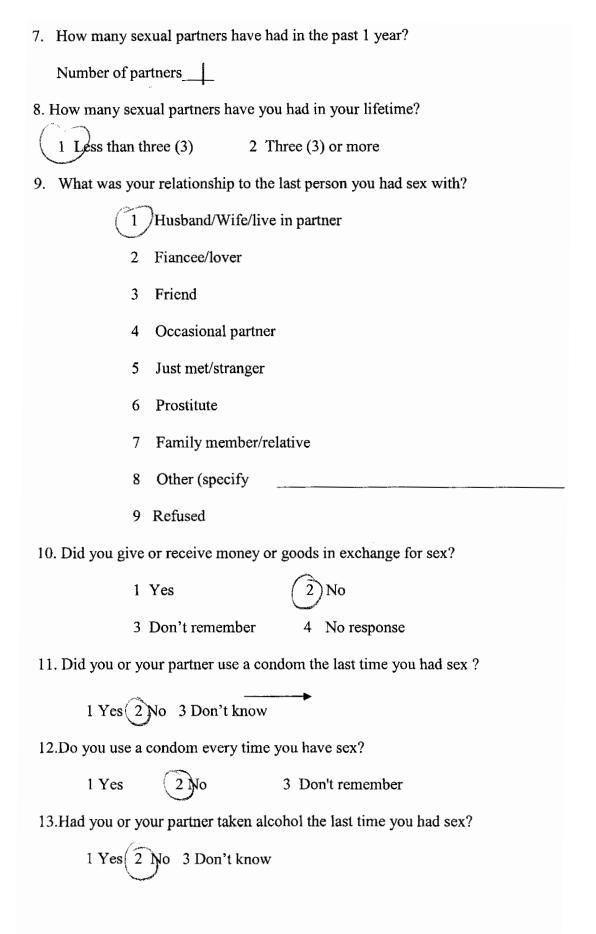
	r es	NO
1 Traders or business association	1	<b>(3</b> )
2 Religious groups	P	2
3 Burial society	(1)	2
4 Savings club	1	(2)

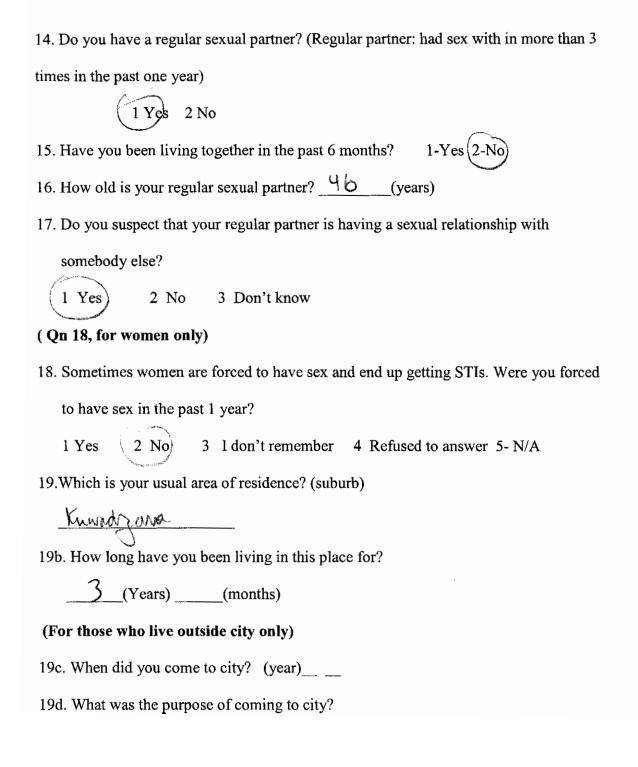
D2 Which two groups are the most important in your household?

1 Group 1	18/10/1001 allow
2 Group 2	phinos tound

	1-Yes	2-No
1 Education		V
2 Health services		~
3 Receive credit		/
4 Funeral assistance	V	

For cases only			
E8 Why do you think you have this illness?			
and hundowl you	dischor		
RISKY SEXUA	L BEHAVIOR		
(For both case	s and controls)		
2 How old were you when you first had sex?			
1 & Years			
3. Have you had a sexually transmitted infec	tion in the past 3 month	ns?	
1 Yes 2 No			
What did you do?			
	Mentioned	P	rompted
		Y	N
1 Buy the prescribed antibiotics		V	
2 Complete course of		<b>V</b>	
5. Does your current sexual partner have an S  1 Yes 2 No 3 Does  6. How many sexual partners have you had it	n't know		
Number of partners			





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HEALTH SEEKING BEHAVIOUR
SECTION A
Personal information:
Identification number 33 Sex 1) Male (2) Female
Case 1 Case 2 Control Type of STI CWD
Al How old are you? $\frac{\lambda}{2} \frac{\Psi}{\Psi}$
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment Other (specify) student
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary (3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill?  1 never  2 < 1 year ago  3 1-3 years ago  4 > 3 years ago  5 can't remember  6 I don't know  C3 Was last illness an STI? Yes (No)
C3 Was last illness an STI? Yes (No)

I would like to ask-you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	(2)
2 Religious groups	1	2
3 Burial society	1	$\binom{2}{2}$
4 Savings club	1	(2)

D2 Which two groups are the most important in your household?

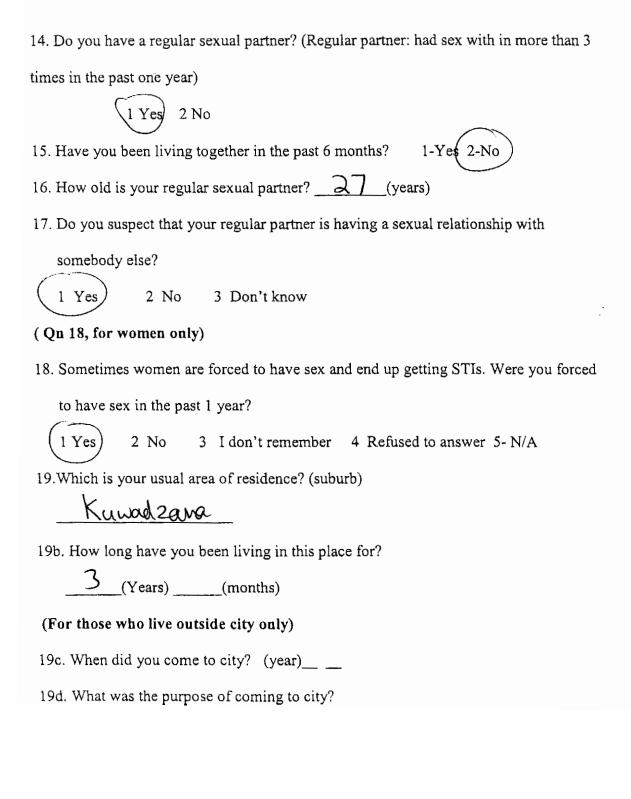
1	Group 1	
2	Group 2	

	1-Yes	2-No
1 Education		
2 Health services		
3 Receive credit		
4 Funeral assistance		

For cases only			
E8 Why do you think you have this illness?	0		
husbandi	fault		
	<b>)</b>		
RISKY SEXUAL I	<u>BEHAVIOR</u>		
(For both cases an	nd controls)		
2 How old were you when you first had sex?			
<u>\</u> <u>9</u> Years			,
3. Have you had a sexually transmitted infection	in the past 3 month	ıs?	
1 Yes (2 No			
What did you do?			
ME-1		· · · · · · · · · · · · · · · · · · ·	
	Mentioned	P	rompted
		Y	N
1 Buy the prescribed antibiotics		-	
2 Complete course of			
L	<u> </u>		
5. Does your current sexual partner have an STI	?		
1 Yes 2 No 3 Don't	know		
6. How many sexual partners have you had in t	he past 3 months?		
Number of partners			

7. How many sexual partners have had in the past 1 year?
Number of partners
8. How many sexual partners have you had in your lifetime?
1 Less than three (3) 2 Three (3) or more
9. What was your relationship to the last person you had sex with?
1 Husband/Wife/live in partner
2 Fiancee/lover
3 Friend
4 Occasional partner
5 Just met/stranger
6 Prostitute
7 Family member/relative
8 Other (specify
9 Refused
10. Did you give or receive money or goods in exchange for sex?
1 Yes 2 No
3 Don't remember 4 No response
11. Did you or your partner use a condom the last time you had sex?
1 Yes 2 No 3 Don't know
12.Do you use a condom every time you have sex?
1 Yes 2 No 3 Don't remember
13.Had you or your partner taken alcohol the last time you had sex?
(1 Yes)2 No 3 Don't know

.



I am a Public health officer from the city health department. I am carrying out a study to determine the risk factors for contracting STIs in Kuwadzana. The study findings will be used to make recommendations for interventions. No names will be taken. All data will be handled with strict confidence.

HEALTH SEEKING BEHAVIOUR
SECTION A Personal information:
Identification number $46$ Sex (1) Male 2) Female
Case 1 Case 2 Control Type of STI
A1 How old are you? $33$
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill? 1 never 2 <1 year ago 3 1-3 years ago 4 >3 years ago 5 can't remember 6 1 don't know
C3 Was last illness an STI2 Ves No.

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	(2)
2 Religious groups	1	(2)
3 Burial society	1	2
4 Savings club	1	(2)

D2 Which two groups are the most important in your household?

	1-Yes	2-No
1 Education		~
2 Health services		V
3 Receive credit	V	
4 Funeral assistance	/	

For cases only			
E8 Why do you think you have this illness?			
			·
RISKY SEXUAL	BEHAVIOR		
(For both cases a	and controls)		
2 How old were you when you first had sex?			
16 Years			
3. Have you had a sexually transmitted infection	on in the past 3 month	ıs?	
1 Yes 2 No			
What did you do?			
	Mentioned	Pr	ompted
		Y	N
1 Buy the prescribed antibiotics		-	
2 Complete course of			
5. Does your current sexual partner have an ST	ri?		
1 Yes 2 No 3 Don'	't know		
6. How many sexual partners have you had in	the past 3 months?		
Number of partners			

7. How many sexual partners have had in the past 1 year?		
Number of partners 1		
8. How many sexual partners have you had in your lifetime?		
1 Less than three (3) 2 Three (3) or more		
9. What was your relationship to the last person you had sex with?		
1 Husband/Wife/live in partner		
2 Fiancee/lover		
3 Friend		
4 Occasional partner		
5 Just met/stranger		
6 Prostitute		
7 Family member/relative		
8 Other (specify		
9 Refused		
10. Did you give or receive money or goods in exchange for sex?		
1 Yes 2 No		
3 Don't remember 4 No response		
11. Did you or your partner use a condom the last time you had sex?		
1 Yes 2 No 3 Don't know		
12.Do you use a condom every time you have sex?		
1 Yes 2 No 3 Don't remember		
13.Had you or your partner taken alcohol the last time you had sex?		
1 Yes 2 No 3 Don't know		

.

14. Do you have a regular sexual partner? (Regular partner: had sex with in more than 3
times in the past one year)
1 Yes 2 No
15. Have you been living together in the past 6 months? (1-Yes) 2-No
16. How old is your regular sexual partner? 22 (years)
17. Do you suspect that your regular partner is having a sexual relationship with
somebody else?
1 Yes 2 No 3 Don't know
(Qn 18, for women only)
18. Sometimes women are forced to have sex and end up getting STIs. Were you forced
to have sex in the past 1 year?
1 Yes 2 No 3 I don't remember 4 Refused to answer (5- N/A)
19. Which is your usual area of residence? (suburb)  Snake Park
19b. How long have you been living in this place for?
(Years)(months)
(For those who live outside city only)
19c. When did you come to city? (year)
19d. What was the purpose of coming to city?

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HEALTH SEEKING BEHAVIOUR
SECTION A Personal information:
Identification number 48 Sex 1) Male 2) Female
Case 1 Case 2 Control Type of STI
A1 How old are you? 38
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill?  1 never 2 <1 year ago 3 1-3 years ago 4 3 years ago 5 can't remember 6 I don't know
C3 Was last illness an STI? Yes (No)

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	(2)
2 Religious groups	(p	2
3 Burial society	1	(2)
4 Savings club	1	(2)

D2 Which two groups are the most important in your household?

	1-Yes	2-No
1 Education		V
2 Health services		V
3 Receive credit	<b>/</b>	
4 Funeral assistance	v	

For cases only			
E8 Why do you think you have this illness?			
RISKY SEXUAL	BEHAVIOR		
(For both cases a	nd controls)		
How old were you when you first had sex?			
17 Years			
3. Have you had a sexually transmitted infection	n in the past 3 month	ıs?	
1 Yes 2)No			
What did you do?			
	Mentioned	P	rompted
		Y	N
1 Buy the prescribed antibiotics			
2 Complete course of			
5. Does your current sexual partner have an ST	[?		
1 Yes 2 No 3 Don't	know		
6. How many sexual partners have you had in t	the past 3 months?		
Number of partners			

7.	. How many sexual partners have had in the past 1 year?			
	Number of partners 1			
8. ]	8. How many sexual partners have you had in your lifetime?			
(	Less than th	aree (3) 2	Three (3) or more	
9.	What was you	ır relationship to th	e last person you had sex with?	
	$\bigcirc$ 1	) Husband/Wife/liv	ve in partner	
	2	Fiancee/lover		
	3	Friend		
	4	Occasional partne	er	
	5	Just met/stranger		
	6	Prostitute		
	7	Family member/	relative	
	. 8	Other (specify		
	9	Refused		
10	). Did you give	or receive money	or goods in exchange for sex?	
	1	Yes	(2) No	
	3	Don't remember	4 No response	
11	l. Did you or y	our partner use a co	ondom the last time you had sex?	
	1 Yes 2	No 3 Don't knov	······ <b>&gt;</b>	
12	2.Do you use a	condom every tim	e you have sex?	
	1 Yes	2 No	3 Don't remember	
13	3.Had you or y	our partner taken a	Icohol the last time you had sex?	
	1 Yes 2	No 3 Don't kno	w	

14. Do you have a regular sexual partner? (Regular partner: had sex with in more than 3
times in the past one year)
(1) Yes 2 No
15. Have you been living together in the past 6 months? 1-Yes 2-No
16. How old is your regular sexual partner? 31 (years)
17. Do you suspect that your regular partner is having a sexual relationship with
somebody else?
1 Yes 2 No 3 Don't know
( Qn 18, for women only)
18. Sometimes women are forced to have sex and end up getting STIs. Were you forced
to have sex in the past 1 year?
1 Yes 2 No 3 I don't remember 4 Refused to answer 5- N/A
19. Which is your usual area of residence? (suburb)
Kuwadzana
19b. How long have you been living in this place for?
_\ (Years)(months)
(For those who live outside city only)
19c. When did you come to city? (year)
19d. What was the purpose of coming to city?

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# **QUESTIONNAIRE: PART 1**

I am a Public health officer from the city health department. I am carrying out a study to determine the risk factors for contracting STIs in Kuwadzana. The study findings will be used to make recommendations for interventions. No names will be taken. All data will be handled with strict confidence.

### **HEALTH SEEKING BEHAVIOUR**

SECTION A
Personal information:
Identification number 5 1 Sex 1) Male 2) Female
Case Case 2 Control Type of STI Wav
Al How old are you? 21
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill? 1 never
2 <1 year ago 3 1-3 years ago
4>3 years ago
3 dan't remember
6 I don't know C3 Was last illness an STI? Ves No

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	2
2 Religious groups	( <del>b</del> )	2
3 Burial society	1	2
4 Savings club	1	<b>②</b>

D2 Which two groups are the most important in your household?

1 Group 1	religious	Swarb	
• —	0	9	, , , ,
2 Group 2			

	1-Yes	2-No
1 Education		
2 Health services		V
3 Receive credit		1
4 Funeral assistance	v	

For cases only		
E8 Why do you think you have this illness?		
wanit chan		
		-
RISKY SEXUA	AL BEHAVIOR	
(For both case	s and controls)	
2 How old were you when you first had sex?	?	
2 1 Years		•
3. Have you had a sexually transmitted infec	ction in the past 3 months	?
1 Yes 2 No		
What did you do?		
		-
	Mentioned	Prompted
		Y N
1 Buy the prescribed antibiotics		
2 Complete course of		
5. Does your current sexual partner have an	STI?	
1 Yes 2 No 3 Do	on't know	
6. How many sexual partners have you had	in the past 3 months?	
Number of partners		

7. How many sexual partners have had in the past 1 year?			
Number of partners 1			
8. How many sexual partners have you had in your lifetime?			
1 Less than three (3) 2 Three (3) or more			
9. What was your relationship to the last person you had sex with?			
1 Husband/Wife/live in partner			
2 Fiancee/lover			
3 Friend			
4 Occasional partner			
5 Just met/stranger			
6 Prostitute			
7 Family member/relative			
8 Other (specify			
9 Refused			
10. Did you give or receive money or goods in exchange for sex?			
1 Yes 2 No			
3 Don't remember 4 No response			
11. Did you or your partner use a condom the last time you had sex?			
1 Yes 2 No 3 Don't know			
12.Do you use a condom every time you have sex?			
1 Yes 2 No 3 Don't remember			
13. Had you or your partner taken alcohol the last time you had sex?			
1 Yes 2 No 3 Don't know			

14. Do you have a regular sexual partner? (Regular partner: had sex with in more than 3			
times in the past one year)			
1 Yes 2 No			
15. Have you been living together in the past 6 months? 1-Yes 2-No			
16. How old is your regular sexual partner?(years)			
17. Do you suspect that your regular partner is having a sexual relationship with			
somebody else?			
1 Yes 2 No 3 Don't know			
( Qn 18, for women only)			
18. Sometimes women are forced to have sex and end up getting STIs. Were you forced			
to have sex in the past 1 year?			
1 Yes 2 No 3 I don't remember 4 Refused to answer 5-N/A			
19. Which is your usual area of residence? (suburb)			
kuwadzana			
19b. How long have you been living in this place for?			
(Years)(months)			
(For those who live outside city only)			
19c. When did you come to city? (year)			
19d. What was the purpose of coming to city?			

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HEALTH SEEKING BEHAVIOUR
SECTION A
Personal information:
Identification number 5 2 Sex (1) Male 2) Female
Case 1 Case 2 Control Type of STI
Al How old are you? 24
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
l None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Martied 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill?  1 never  2 <1 year ago  3 1-3 years ago  4 >3 years ago  5 can't remember  6 I don't know
C3 Was last illness an STI? Yes No

Social (	Capital
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I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	$\binom{2}{2}$
2 Religious groups	1	2
3 Burial society	1	2
4 Savings club	1	0

D2 Which two groups are the most important in your household?

1 Group 1	 
2 Group 2	

	1-Yes	2-No
1 Education		
2 Health services	****	7-14-1
3 Receive credit		
4 Funeral assistance		

For cases only			
E8 Why do you think you have this illness?			
	P-350-311.	• • • • • • • • • • • • • • • • • • • •	
RISKY SEXUAL I	<u>BEHAVIOR</u>		
(For both cases ar	nd controls)		
2 How old were you when you first had sex?			
<u>IS</u> Years			
3. Have you had a sexually transmitted infection	in the past 3 month	ıs?	
1 Yes 2 No			
What did you do?			
	Mentioned	Pr	ompted
		Y	N
1 Buy the prescribed antibiotics			
2 Complete course of			
5. Does your current sexual partner have an STI			
1 Yes 2 No 3 Don't l	know		
6. How many sexual partners have you had in the	he past 3 months?		
Number of partners 2			

'. How many sexual partners have had in the past 1 year?								
Number of partners 2								
8. How many sexual partners have you had in your lifetime?								
1 Less than three (3) 2 Three (3) or more								
9. What was your relationship to the last person you had sex with?								
1 Husband/Wife/live in partner								
2 Fiancee/lover								
3 Friend								
4 Occasional partner								
5 Just met/stranger								
6 Prostitute								
7 Family member/relative								
8 Other (specify								
9 Refused								
10. Did you give or receive money or goods in exchange for sex?								
1 Yes 2 No								
3 Don't remember 4 No response								
11. Did you or your partner use a condom the last time you had sex?								
1 Yes 2 No 3 Don't know								
12.Do you use a condom every time you have sex?								
l Yes 2 No 3 Don't remember								
13. Had you or your partner taken alcohol the last time you had sex?								
I Yes 2 No 3 Don't know								

14. Do you have a regular sexual partner? (Regular partner: had sex with in more than 3
times in the past one year)
1 Yes 2 No
15. Have you been living together in the past 6 months? 1-Yes 2-No
16. How old is your regular sexual partner? 20 (years)
17. Do you suspect that your regular partner is having a sexual relationship with
somebody else?
1 Yes 2 No 3 Don't know
(Qn 18, for women only)
18. Sometimes women are forced to have sex and end up getting STIs. Were you forced
to have sex in the past 1 year?
1 Yes 2 No 3 I don't remember 4 Refused to answer 5-N/A
19. Which is your usual area of residence? (suburb)
Kuwadzana
19b. How long have you been living in this place for?
20 (Years) (months)
(For those who live outside city only)
19c. When did you come to city? (year)
19d. What was the purpose of coming to city?

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### **HEALTH SEEKING BEHAVIOUR**

HEALTH SEEKING BEHAVIOUR
SECTION A
Personal information:
Identification number 121 Sex (1) Male 2) Female
Case 1 Case 2 Control Type of STI UD
Al How old are you? $23$
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary (3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill? I never
3 1-3 years ago
4 >3 years ago
5 can't remember 6 I don't <u>k</u> now
C3 Was last illness an STI? Yes (No)

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	2
2 Religious groups	1	2
3 Burial society	1	2
4 Savings club	1	2

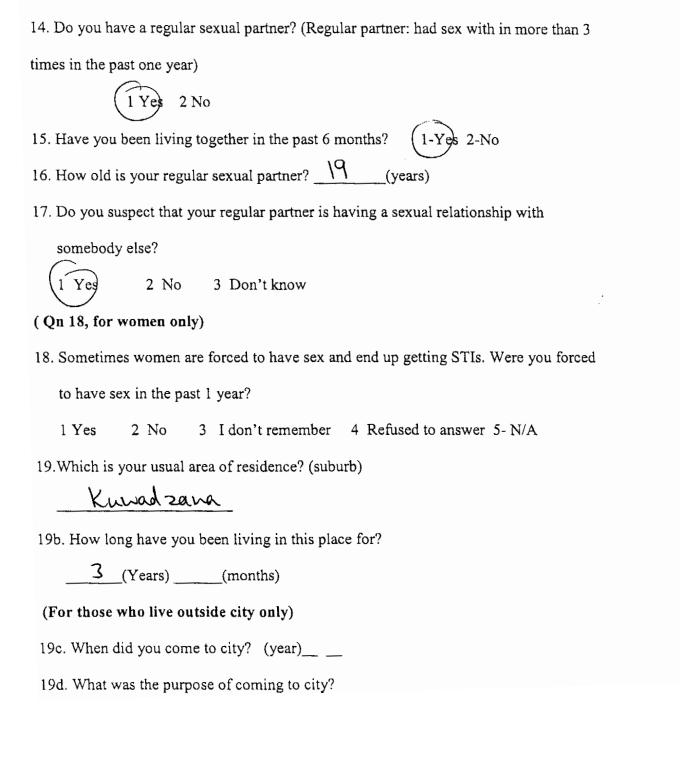
D2 Which two groups are the most important in your household?

1 Group 1_	Savings	club	
	O		
2 Group 2			

	1-Yes	2-No
1 Education		
2 Health services		
3 Receive credit		
4 Funeral assistance		

For cases only						
E8 Why do you think you have this illness?						
RISKY SEXUAL BE	HAVIOR					
(For both cases and controls)						
2 How old were you when you first had sex?						
23 Years			,			
3. Have you had a sexually transmitted infection in	the past 3 mont	hs?				
1 Yes 2 No						
What did you do?						
Mentioned Prompted						
		Y	N			
1 Buy the prescribed antibiotics						
2 Complete course of						
5. Does your current sexual partner have an STI?  (Yes 2 No 3 Don't know  6. How many sexual partners have you had in the past 3 months?  Number of partners						

7. How many sexual partners have had in the past 1 year?							
Number of partners \(\frac{1}{2}\)							
8. How many sexual partners have you had in your lifetime?							
1 Less than three (3) 2 Three (3) or more							
9. What was your relationship to the last person you had sex with?							
I Husband/Wife/live in partner							
2 Fiancee/lover							
3 Friend							
4 Occasional partner							
5 Just met/stranger							
6 Prostitute							
7 Family member/relative							
8 Other (specify							
9 Refused							
10. Did you give or receive money or goods in exchange for sex?							
1 Yes 2 No							
3 Don't remember 4 No response							
11. Did you or your partner use a condom the last time you had sex?							
1 Yes 2 No 3 Don't know							
12.Do you use a condom every time you have sex?							
1 Yes 2 No 3 Don't remember							
13.Had you or your partner taken alcohol the last time you had sex?							
1 Ves 2 No 3 Don't know							



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### **HEALTH SEEKING BEHAVIOUR**

SECTION A Personal information:
Identification number 123 Sex 1) Male 2) Female
Case 1 Case 2 Control Type of STI CUD
Al How old are you? 29
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill?  1 never  2 <1 year ago 3 1-3 years ago 4 >3 years ago 5 can't remember 6 I don't know  C3 Was last illness an STI2 Yes (NA)

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	2
2 Religious groups	1	2
3 Burial society	1	2
4 Savings club	1	2

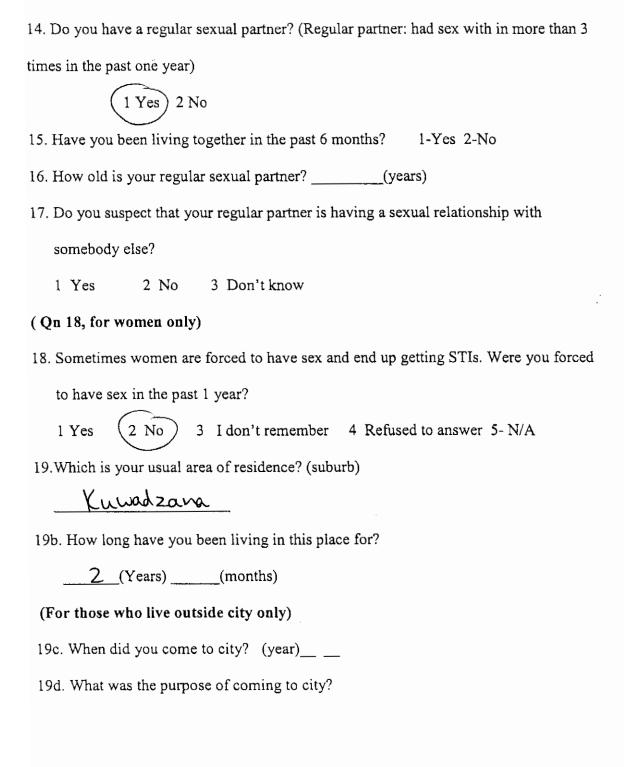
D2 Which two groups are the most important in your household?

1	Group	1_	 _	 	
	_				
2	Group	2			

	1-Yes	2-No
1 Education		
2 Health services		
3 Receive credit		
4 Funeral assistance		

For cases only				
E8 Why do you think you have this illness?  Don't know				
DON'T KNOW				
RISKY SEXUAL BEHAVIOR				
(For both cases and	(For both cases and controls)			
2 How old were you when you first had sex?				
Years			•	
3. Have you had a sexually transmitted infection i	n the past 3 month	ns?		
1 Yes 2 No	1 Yes 2 No			
What did you do?				
	Mentioned	Pro	ompted	
		Y	N	
1 Buy the prescribed antibiotics				
2 Complete course of				
5. Does your current sexual partner have an STI?				
1 Yes 2 No 3 Don't ke	now			
6. How many sexual partners have you had in the	e past 3 months?			
Number of partners				

/. How many sexual partners have had in the past 1 year?				
Number of partners \(\begin{align*}\limits \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\				
8. How many sexual partners have you had in your lifetime?				
1 Less than three (3) 2 Three (3) or more				
9. What was your relationship to the last person you had sex with?				
Husband/Wife/live in partner				
2 Fiancee/lover				
3 Friend				
4 Occasional partner				
5 Just met/stranger				
6 Prostitute				
7 Family member/relative				
8 Other (specify				
9 Refused				
10. Did you give or receive money or goods in exchange for sex?				
1 Yes (2 No				
3 Don't remember 4 No response				
11. Did you or your partner use a condom the last time you had sex?				
1 Yes 2 No 3 Don't know				
12.Do you use a condom every time you have sex?				
1 Yes 2 No 3 Don't remember				
13. Had you or your partner taken alcohol the last time you had sex?				
1 Yes 2 No 3 Don't know				



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HEALTH SEEKING BEHAVIOUR
SECTION A
Personal information:
Identification number 139 Sex 1) Male 2) Female
Case 1 Case 2 Control Type of STI
Al How old are you? 23
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill? 1 never  2 <1 year ago 3 1'-3 years ago 4 >3 years ago 5 can't remember 6 I don't know
C3 Was last illness an STI? Yes (No)

Social	Ca	nital
SUCIAL	ı Ca	pitai

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	2
2 Religious groups	1	2
3 Burial society	1	2
4 Savings club	1	<b>②</b>

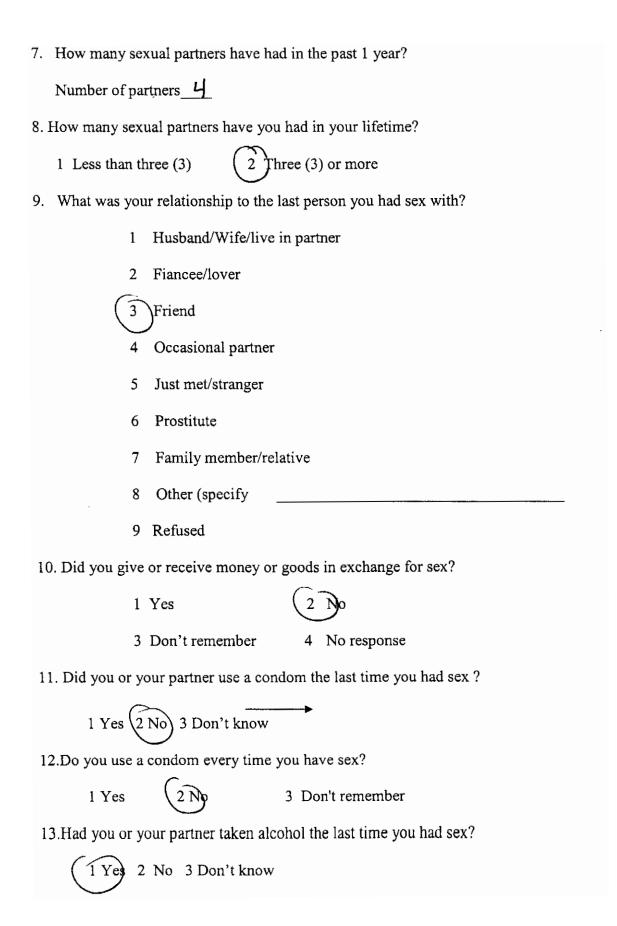
D2 Which two groups are the most important in your household?

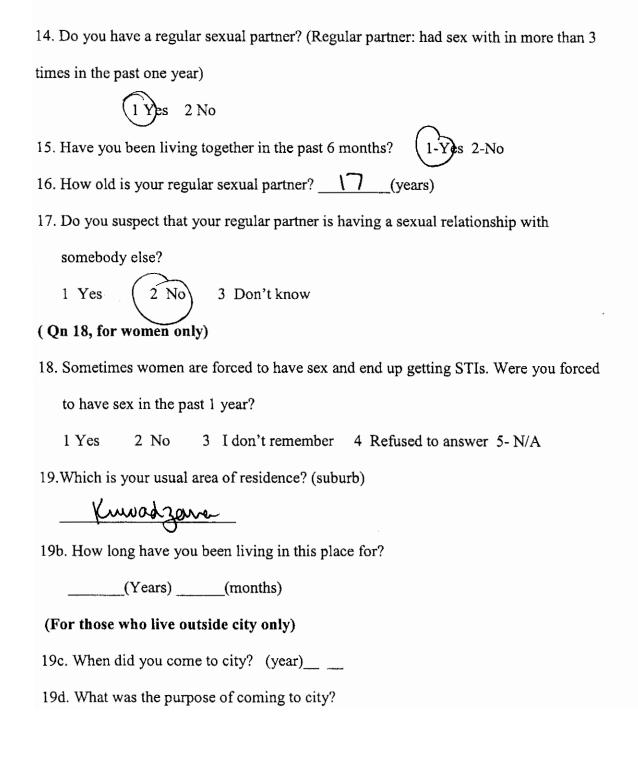
1 Group 1	
2 Group 2	

	1-Yes	2-No
1 Education		
2 Health services		
3 Receive credit		
4 Funeral assistance		

For cases	only

E8 Why do you think you have this illness?			
From my gir	Mind		
0 0	0		****
RISKY SEXUA	L BEHAVIOR		
(For both cases	and controls)		
2 How old were you when you first had sex?			
Years			
3. Have you had a sexually transmitted infect	ion in the past 3 month	ns?	
1 Yes 2 No			
What did you do?			
191.2		74770	, n v m = 2.01
	Mentioned	P	rompted
		Y	N
1 Buy the prescribed antibiotics			
2 Complete course of			
		- "-	
5. Does your current sexual partner have an S	TI?		
1 Yes 2 No 3 Don	't know		
6. How many sexual partners have you had i	n the past 3 months?		
Number of partners 2			





I am a Public health officer from the city health department. I am carrying out a study to determine the risk factors for contracting STIs in Kuwadzana. The study findings will be used to make recommendations for interventions. No names will be taken. All data will be handled with strict confidence.

Personal information:
Identification number \(\frac{1}{2}\) Sex (1) Male 2) Female
Case 1 Case 2 Control Type of STI UD
Al How old are you? $\underline{\underline{9}}\underline{\underline{6}}$
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill?  1 never  2 > year ago 3 1-3 years ago 4 > 3 years ago 5 can't remember
6 I don't know C3 Was last illness an STI? Yes (No)

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

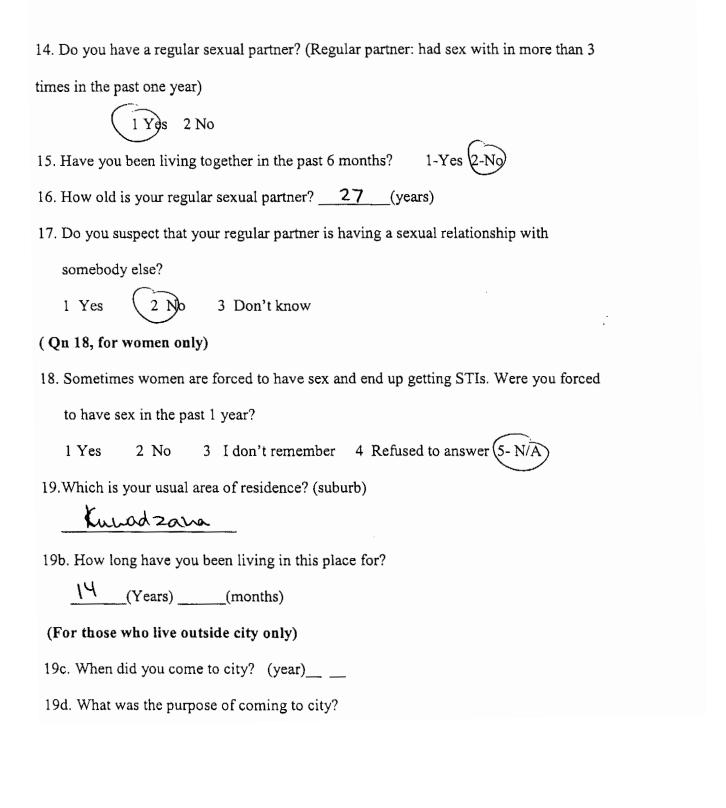
	y es	No
1 Traders or business association	1	(2)
2 Religious groups	1	(2)
3 Burial society	(1)	2
4 Savings club	(1)	2

D2 Which two groups are the most important in your household?

	1-Yes	2-No
1 Education		
2 Health services		1
3 Receive credit		J
4 Funeral assistance	J	

For cases only			
E8 Why do you think you have this illness?			
Don't ku	ωW		
RISKY SEXUAL	BEHAVIOR		
(For both cases a	nd controls)		
2 How old were you when you first had sex?			
Years			
3. Have you had a sexually transmitted infection	in the past 3 month	ıs?	
1 Yes 2 No			
What did you do?			
	Mentioned	P	rompted
	_	Y	N
1 Buy the prescribed antibiotics			
2 Complete course of			
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
5. Does your current sexual partner have an STI	?		
1 Yes 2 No 3 Don't	know		
6. How many sexual partners have you had in t	the past 3 months?		
Number of partners			

7. How many sexual partners have had in the past 1 year?
Number of partners \
8. How many sexual partners have you had in your lifetime?
1 Less than three (3) 2 Three (3) or more
9. What was your relationship to the last person you had sex with?
1 Husband/Wife/live in partner
2 Fiancee/lover
3 Friend
4 Occasional partner
5 Just met/stranger
6 Prostitute
7 Family member/relative
8 Other (specify
9 Refused
10. Did you give or receive money or goods in exchange for sex?
1 Yes 2 No
3 Don't remember 4 No response
11. Did you or your partner use a condom the last time you had sex?
1 Yes 2 No 3 Don't know
12.Do you use a condom every time you have sex?
1 Yes 2 No 3 Don't remember
13. Had you or your partner taken alcohol the last time you had sex?
1 Yes 2 No 3 Don't know



I am a Public health officer from the city health department. I am carrying out a study to determine the risk factors for contracting STIs in Kuwadzana. The study findings will be used to make recommendations for interventions. No names will be taken. All data will be handled with strict confidence.

SECTION A
Personal information:
Identification number 198 Sex 1) Male 2) Female
Case 1 Case 2 Control Type of STI
Al How old are you? 32
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic (3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Wildowed 6 Other(specify)
C2 When were you last ill? 1 never
2 <1 year ago 3 1-3 years ago
$\frac{4}{2}$ years ago
5 can't remember
6 I don't know
C3 Was last illness an STI? Yes No

Social Capita	So	cial	Ca	pita
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I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	( <u>2</u> )
2 Religious groups	1	2
3 Burial society	1	2
4 Savings club	1	<b>(2)</b>

D2 Which two groups are the most important in your household?

1	Group	1
2	Group	2

	1-Yes	2-No
1 Education		
2 Health services		
3 Receive credit		
4 Funeral assistance		

For cases only			
E8 Why do you think you have this illness?			
, , , , , , , , , , , , , , , , , , ,			***************************************
RISKY SEXUAL	BEHAVIOR		
(For both cases	and controls)		
2 How old were you when you first had sex?			
20 Years			,
3. Have you had a sexually transmitted infection	on in the past 3 month	ıs?	
1 Yes 2 No			
What did you do?			
		-	
	Mentioned	P	rompted
		Y	N
1 December 21 and a self-inclination			14
1 Buy the prescribed antibiotics			
2 Complete course of			
5. Does your current sexual partner have an Si	CI?		
1 Yes (2 No) 3 Don'	t know		
6. How many sexual partners have you had in	the past 3 months?		
Number of partners\			

7. How many sexual partners have had in the past 1 year?
Number of partners 1
3. How many sexual partners have you had in your lifetime?
1 Less than three (3) 2 Three (3) or more
9. What was your relationship to the last person you had sex with?
Husband/Wife/live in partner
2 Fiancee/lover
3 Friend
4 Occasional partner
5 Just met/stranger
6 Prostitute
7 Family member/relative
8 Other (specify
9 Refused
10. Did you give or receive money or goods in exchange for sex?
1 Yes 2 No
3 Don't remember 4 No response
11. Did you or your partner use a condom the last time you had sex?
1 Yes 2 No 3 Don't know
12.Do you use a condom every time you have sex?
l Yes 2 No 3 Don't remember
13.Had you or your partner taken alcohol the last time you had sex?
1 Yes 2 No 3 Don't know

14. Do you have a regular sexual partner? (Regular partner: had sex with in more than 3
times in the past one year)
1 Yes 2 No
15. Have you been living together in the past 6 months? 1-Yes 2-No
16. How old is your regular sexual partner? 33 (years)
17. Do you suspect that your regular partner is having a sexual relationship with
somebody else?
1 Yes 2 No 3 Don't know
( Qn 18, for women only)
18. Sometimes women are forced to have sex and end up getting STIs. Were you forced
to have sex in the past 1 year?
1 Yes 2 No 3 I don't remember 4 Refused to answer 5- N/A
19. Which is your usual area of residence? (suburb)
Kuwadzana
19b. How long have you been living in this place for?
(For those who live outside city only)
19c. When did you come to city? (year)
19d. What was the purpose of coming to city?

I am a Public health officer from the city health department. I am carrying out a study to determine the risk factors for contracting STIs in Kuwadzana. The study findings will be used to make recommendations for interventions. No names will be taken. All data will be handled with strict confidence.

HEALTH SEEKING BEHAVIOUR
SECTION A Personal information:
Personal information:
Identification number 213 Sex 1) Male (2) Female
Case 1 Case 2 Control Type of STI CUD
Al How old are you? $\frac{4}{2}$
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill?  1 never  2 <1 year ago  3 1-3 years ago  4 >3 years ago  5 can't remember  6 I don't know
C3 Was last illness an STI? Yes No

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	2
2 Religious groups	1	<b>②</b>
3 Burial society	1	2
4 Savings club	1	3

D2 Which two groups are the most important in your household?

	1-Yes	2-No
1 Education		J
2 Health services		
3 Receive credit		✓ <b>/</b>
4 Funeral assistance	<b>✓</b>	

E8 Why do you think you have this illness?	.//		
My husband also has	cam/li o		<del></del>
RISKY SEXUAL	_ BEHAVIOR		
(For both cases	and controls)		
2 How old were you when you first had sex?			
$\sqrt{2}$ Years			•
3. Have you had a sexually transmitted infecti-	on in the past 3 month	ns?	
1 Yes 2 No			
What did you do?			
	Mentioned	Prompted	
		Y	N
1 Buy the prescribed antibiotics			
2 Complete course of		· <u>,</u>	
5. Does your current sexual partner have an S	TIO	p	

Number of partners_\

7. How many sexual partners have had in the past 1 year?
Number of partners
8. How many sexual partners have you had in your lifetime?
1)Less than three (3) 2 Three (3) or more
9. What was your relationship to the last person you had sex with?
1 Husband/Wife/live in partner
2 Fiancee/lover
3 Friend
4 Occasional partner
5 Just met/stranger
6 Prostitute
7 Family member/relative
8 Other (specify
9 Refused
10. Did you give or receive money or goods in exchange for sex?
1 Yes (2) No
3 Don't remember 4 No response
11. Did you or your partner use a condom the last time you had sex?
1 Yes 2 No 3 Don't know
12.Do you use a condom every time you have sex?
1 Yes 2 No 3 Don't remember
13. Had you or your partner taken alcohol the last time you had sex?
1 Yes 2 No 3 Don't know

14. Do you have a regular sexual partner? (Regular partner, had sex with in more than 3
times in the past one year)
1 Yes 2 No
15. Have you been living together in the past 6 months? 1-Yes 2-No
16. How old is your regular sexual partner? 41 (years)
17. Do you suspect that your regular partner is having a sexual relationship with
somebody else?
1 Yes 2 No 3 Don't know
( Qn 18, for women only)
18. Sometimes women are forced to have sex and end up getting STIs. Were you forced
to have sex in the past 1 year?
1 Yes 2 No 3 I don't remember 4 Refused to answer 5- N/A
19. Which is your usual area of residence? (suburb)
Mustoko
19b. How long have you been living in this place for?
(Years)(months)
(For those who live outside city only)
19c. When did you come to city? (year)
19d. What was the purpose of coming to city?

I am a Public health officer from the city health department. I am carrying out a study to determine the risk factors for contracting STIs in Kuwadzana. The study findings will be used to make recommendations for interventions. No names will be taken. All data will be handled with strict confidence.

HEALTH BEEKING BEHAVIOUR
SECTION A Personal information:
Identification number 217 Sex 1) Male (2) Female
Case 1 Case 2 Control Type of STI Chi
Al How old are you? 22
A2 What is your occupation? (1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican
5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill?  1 never  2 < 1 year ago 3 1-3 years ago 4 >3 years ago 5 can't remember 6 I don't know  C3 Was last illness an STI?  Yes  No

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	Yes	No
1 Traders or business association	1	2
2 Religious groups	1	2
3 Burial society	(B)	(2)
4 Savings club	(i)	2

D2 Which two groups are the most important in your household?

1 Group 1_	Religion	Svup	
	0	,, ,	
2 Group 2_	Service	and	_

	1-Yes	2-No
1 Education		
2 Health services		V
3 Receive credit		<i>J</i>
4 Funeral assistance	/	

For cases only			
E8 Why do you think you have this illness?  In Jected by Se	pouse		
RISKY SEXUAL I	BEHAVIOR		
(For both cases ar	nd controls)		
2 How old were you when you first had sex?			
Years			·
3. Have you had a sexually transmitted infection	in the past 3 month	ns?	
1 Yes 2 No			
What did you do?			
	Mentioned	Prompted	
	_	Y	N
1 Buy the prescribed antibiotics			
2 Complete course of			
5. Does your current sexual partner have an STI	)		
1 Yes 2 No 3 Don't k	cnow		
6. How many sexual partners have you had in the	ne past 3 months?		
Number of partners			

14. Do you have a regular sexual partner? (Regular partner: had sex with in more than 3
times in the past one year)
1 Yes 2 No
15. Have you been living together in the past 6 months? 1-Yes 2-No
16. How old is your regular sexual partner?(years)
17. Do you suspect that your regular partner is having a sexual relationship with
somebody else?
1 Yes 2 No 3 Don't know
(Qn 18, for women only)
18. Sometimes women are forced to have sex and end up getting STIs. Were you forced
to have sex in the past 1 year?
1 Yes 2 No 3 I don't remember 4 Refused to answer 5- N/A
19. Which is your usual area of residence? (suburb)
Kuwadzana
19b. How long have you been living in this place for?
(Years)(months)
(For those who live outside city only)
19c. When did you come to city? (year)
19d. What was the purpose of coming to city?

I am a Public health officer from the city health department. I am carrying out a study to determine the risk factors for contracting STIs in Kuwadzana. The study findings will be used to make recommendations for interventions. No names will be taken. All data will be handled with strict confidence.

HEALTH SEEKING BEHAVIOUR
SECTION A Personal information:
Identification number 226 Sex 1) Male 2) Female
Case 1 Case 2 Control Type of STI
Al How old are you? 27
A2 What is your occupation? 1 Unemployed 2 Informal employment
3 Formal employment 4 Other (specify)
A3 Which church do you go to?
1 Catholic 2 Apostolic 3 Methodist 4 Anglican 5 Pentecostal 6 Atheist 7 Roman Catholic 8 Other (specify)
A4 What is the highest level of education you attained?
1 None 2 Primary 3 Secondary 4 Tertiary
A5 What is your marital status?
1 Single 2 Married 3 Co-habiting 4 Divorcee
5 Widowed 6 Other(specify)
C2 When were you last ill? 1 never  2 <1 year ago 3 1-3 years ago 4 >3 years ago 5 can't remember 6 I don't know

I would like to ask you about the groups, or organizations to which you or any member of your household belong.

D1 Does anyone in your household belong to any of these groups. Tick the appropriate.

	y es	190
1 Traders or business association	1	(2)
2 Religious groups	1	2
3 Burial society		2
4 Savings club	1	6

D2 Which two groups are the most important in your household?

1 Group 1_	Burial	society	
2 Group 2			

	1-Yes	2-No	
1 Education	V		
2 Health services	V		
3 Receive credit		V	
4 Funeral assistance		V	

E8 Why do you think you have this illness?			
RISKY SEXUAL I	BEHAVIOR		
(For both cases an	nd controls)		
How old were you when you first had sex?			
20 Years			•
3. Have you had a sexually transmitted infection	in the past 3 mon	ths?	
1 Yes 2 No			
What did you do?			
	Mentioned	Prompted	
		Y	N
1 Buy the prescribed antibiotics			
2 Complete course of			
<ul> <li>5. Does your current sexual partner have an STI'</li> <li>1 Yes</li> <li>2 No</li> <li>3 Don't I</li> <li>6. How many sexual partners have you had in the Number of partners</li> </ul>	know		

For cases only

7. How many sexual partners have had in the past I year?
Number of partners 1
8. How many sexual partners have you had in your lifetime?
1 Less than three (3) 2 Three (3) or more
9. What was your relationship to the last person you had sex with?
1 Husband/Wife/live in partner
2 Fiancee/lover
3 Friend
4 Occasional partner
5 Just met/stranger
6 Prostitute
7 Family member/relative
8 Other (specify
9 Refused
10. Did you give or receive money or goods in exchange for sex?
1 Yes 2 No
3 Don't remember 4 No response
11. Did you or your partner use a condom the last time you had sex?
1 Yes 2 No 3 Don't know
12.Do you use a condom every time you have sex?
1 Yes 2 No 3 Don't remember
13.Had you or your partner taken alcohol the last time you had sex?
1 Yes 2 No 3 Don't know

14. Do you have a regular sexual partner? (Regular partner: had sex with in more than 3
times in the past one year)
1 Yes 2 No
15. Have you been living together in the past 6 months? (1-Yes 2-No
16. How old is your regular sexual partner? 36 (years)
17. Do you suspect that your regular partner is having a sexual relationship with
somebody else?
1 Yes 2 No 3 Don't know
(Qn 18, for women only)
18. Sometimes women are forced to have sex and end up getting STIs. Were you forced
to have sex in the past 1 year?
1 Yes 2 No 3 I don't remember 4 Refused to answer 5- N/A
19. Which is your usual area of residence? (suburb)
Kuwadzana
19b. How long have you been living in this place for?
$\sqrt{3}$ (Years) (months)
(For those who live outside city only)
19c. When did you come to city? (year)
19d. What was the purpose of coming to city?