

## **GUM/HIV** clinic survey

- We're running this survey to find out about the use of recreational drugs by our users. We would really appreciate it if you'd answer these questions. The answers will be used to help us improve our service.

- It's completely anonymous, your answers won't be traceable back to you.
- You do not have to complete the survey if you do not want to.
- Your answers will not affect the care you are given today.

t is your HIV status?   Negative   Positive   I don't know   e last 6 months have you used   Yes   No   I don't know   Exposure Prophylaxis (PEP)? 5, was this following sex whilst using drugs?   Yes   No   e last 6 months have you had   Yes   No   e last 6 months have you used any of the following drugs before or during sex? (please tick all that apple BL/GHB (G, Gina)   Crystal Meth (Tina, T, Ice)   Mephedrone (Mepi   Dither   None   If you have used any drugs in the last 6 months, please continue   requently have you used recreational drugs before or during sex in the last 6 months? (Please circle)   Dince   Once a month A few times a   Once a week   More than   Dince a   Once a   Dince   Once a month A few times a   Once a week   More than   Dince a   Once a   Once a   Once a   Dince   Once a month A few times a   Once a week   Once a														
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Thank you. Now put this questionnaire in the box on the reception desk, or hand to a member of staff.