

Sexual Partner Social Benefits

01	Date documenting Sexual Partner’s Social Benefit:	___ / ___ / _____ (dd/mm/yyyy)
02	Concisely describe the social benefit including date(s):	
<div style="border: 1px solid black; border-radius: 15px; width: 90%; margin: auto;"></div>		
03	<p>The social benefit was related to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Pride about project participation: Feels pride about participation in research <input type="checkbox"/> Feeling better about oneself: Improved self-esteem or feeling of empowerment <input type="checkbox"/> Education: The study educated the participant or inspired /enabled participant to restart school or improve school performance. <input type="checkbox"/> Housing: The participant obtained better or improved her housing situation <input type="checkbox"/> Nutrition/food: The participant was able to improve nutrition or amount of food intake for self or family. <input type="checkbox"/> Improved communication: Participant learned more effective ways of communicating with family, friends, employers or others <input type="checkbox"/> Work: Obtained or improved employment situation (includes informal work) <input type="checkbox"/> Income: Obtained or increased income (includes getting study reimbursement) <input type="checkbox"/> HIV testing: The participant received regular HIV testing <input type="checkbox"/> Treatment of STIs: The participant was able to treat STIs <input type="checkbox"/> Treatment of other illnesses: The participant was able to treat/consult with a doctor about other illnesses (non-STIs) <input type="checkbox"/> Family Planning/Contraception: The participant was able to access contraception and family planning services <input type="checkbox"/> Preventative care services: The participant was able to receive preventative health care such as pap smears. <input type="checkbox"/> Staying HIV free: study provided more effective ways for the participant to avoid becoming infected with HIV <input type="checkbox"/> Altruism: Participant helping community/others by participating in research <input type="checkbox"/> Activities: Participant became involved in community activities <input type="checkbox"/> Peer Support: Participant felt supported by or was able to provide support to peers <input type="checkbox"/> New relationships: Participant created new relationships <input type="checkbox"/> Other (answer 03a) 	

ⓘ 03a. Complete only if had a period since their last visit/contact: Complete only if "Other" related social benefit was marked:

Other, specify: _____

04	What impact did this situation have on the participant’s quality of life?	<input type="checkbox"/> Minimal <input type="checkbox"/> Moderate --no significant impact <input type="checkbox"/> Major --significant impact <input type="checkbox"/> Unknown
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CRF Completed By: _____ (initials)

CRF Completion Date: ___ / ___ / _____ (dd/mm/yyyy)