

Participant ID #: _____ Staff Initials: _____ Date __ / __ / ____

FLORIDA COHORT WAVE 3

PET QUESTIONNAIRE

(v1.0 – 3/29/2021)

Thank you for taking the time to fill out this survey!

There are no wrong or right answers, so we hope that you will feel comfortable answering each question as honestly as possible.

All your answers will be kept confidential. You will be compensated \$10 for completing this part of the survey.

----- SINCERELY-----

THE FLORIDA COHORT TEAM



We are interested in the ways that your pets may impact your health and wellbeing. By "pet" or "companion animal" we mean any non-human animal that you live with and/or are responsible for. Please complete the following questions regarding your pets.

1. How many pets/companion animals do you have currently?

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 or more

2. Think about a typical day. Approximately how many hours do you spend with your pets each day? Please include time spent on grooming, exercising, playing, cuddling, relaxing, etc.

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24

3. What types of pets do you have currently? (Check all that apply)

- Dog
- Cat
- Bird
- Horse
- Fish
- Reptile (e.g., snake, lizard, turtle, etc.)
- Small mammal (e.g., rat, guinea pig, rabbit, hedgehog, etc.)
- Other (**Please specify**) _____

IF YOU DO NOT HAVE A DOG, SKIP TO PAGE 4, ANSWER QUESTION 7.

4. Approximately how many hours do you spend walking your dog each day?

- 1
- 2
- 3
- 4
- 5 or more

5. Have you made at least one new friend while walking your dog?

- Yes
- Unsure
- No

6. Have you ever been harassed while walking your dog?

- Yes
- Unsure
- No

SKIP TO NEXT PAGE, ANSWER QUESTION 7

6a. If yes or unsure, please explain more.

7. Thinking about your favorite pet, please tell us how much you agree or disagree with the following statements.

	Strongly disagree	Disagree	Agree	Strongly agree
My pet provides me with companionship.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having a pet gives me something to care for.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pet provides me with activities I enjoy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pet is always there for me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pet makes me feel needed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pet makes me laugh.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I enjoy playing with my pet.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having a pet gives me something to love.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I get comfort from touching my pet.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I enjoy watching my pet.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pet makes me feel loved.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pet makes me feel trusted.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. In some circumstances, people have to give up their pets. If you were faced with these situations, how likely are you to give up your pets?

	Not likely	Somewhat likely	Very likely
My pets required extensive veterinary care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pets required special food.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pets had problems with housebreaking or the litter box.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pets being destructive (destroying furniture, rugs, clothing, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pets had problems that come with being old.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pets were hostile towards humans and other animals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Household move to a new home or apartment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospitalization or serious illness of a household member	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family conflict in the household (e.g., divorce, violence, fighting)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Loss of job or loss of income	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The following section will ask questions about your experiences from birth until age 18.

9. How many pets did you have when you were growing up, from birth until age 18?

0



SKIP TO PAGE 9, ANSWER QUESTION 16

1

2

3

4

5+



10. What types of pets did you have when you were growing up? (Check all that apply)

Dog

Cat

Bird

Horse

Fish

Reptile (e.g., snake, lizard, turtle, etc.)

Small mammal (e.g., rat, guinea pig, rabbit, hedgehog, etc.)

Other (**Please specify**) _____

11. Think about your favorite pet when you were growing up. On a scale of 1 to 100, where 1 is not at all attached, and 100 is extremely attached, please rate how attached you were to this pet.

_____ (1-100)

12. How often were your pets loved when you were growing up?

Never

Sometimes

Often

Always

13. By taken care of, we mean provided with food and water, shelter, and veterinary care. How often were your pets taken care of when you were growing up?

- Never
- Sometimes
- Often
- Always

14. When you were growing up, how many of your pets...

	0	1	2	3	4	5+
Died of natural causes (e.g., old age)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Died of unnatural causes (e.g., hit by a car)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ran away	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Were given away or re-homed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Were given to an animal shelter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disappeared/don't know what happened to them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Became sick or hungry due to neglect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. When you were growing up, how many of your pets were hurt by people on purpose?

0



SKIP TO PAGE 9, ANSWER QUESTION 16

1

2

3

4

5+

15a. Who hurts the pet on purpose? (Check all that apply)

Me

Parent or caregiver

Sibling

Neighbor

Friend

Stranger

Don't know

Other (***Please specify***) _____

The following questions will ask about the ways your pets impact your health behaviors and access to care. By health services, we mean any appointment or treatment outside of your home related to your physical or mental health, for example, your HIV care provider, your therapist, substance use treatment, the emergency room, etc.

16. Have you ever...?

	Yes	No	Unsure
<u>Delayed</u> seeking health services because you were <u>worried about</u> your pets?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<u>Delayed</u> seeking health services because you had to <u>take care of</u> your pets?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<u>Not received</u> health services because you were <u>worried about</u> your pets?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<u>Not received</u> health services because you had to <u>take care of</u> your pets?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<u>Left</u> in-patient health services because you were <u>worried about</u> your pets?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<u>Left</u> in-patient health services because you had to <u>take care of</u> your pets?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. Would you...?

	Yes	No	Unsure
<u>Delay</u> seeking health services if it meant your absence would <u>cause stress for</u> your pets?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<u>Delay</u> seeking health services if it meant you <u>could not</u> care for your pets?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<u>Miss</u> health services if it meant your absence would <u>cause stress for</u> your pets?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<u>Miss</u> health services if it meant you <u>could not care for</u> your pets?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. Have your pets ever impacted your ability to pay for medication?

- Yes
- Unsure
- No

19. Have your pets ever impacted your ability to pay for healthcare services other than medication?

- Yes
- Unsure
- No

20. Please explain more about the ways your pets impact your healthcare choices and access, including missing or delaying appointments and treatments, or your ability to pay for medication or services and treatments.

21. Have your pets ever prevented you from accessing rental housing?

- Yes
- Unsure
- No

SKIP TO NEXT PAGE, ANSWER QUESTION 22

21a. If yes or unsure, how have your pets prevented you from accessing rental housing?

22. Have you ever been evicted because of your pet, or because of an issue related to your pet (e.g., inability to pay fines or fees related to pets)?

Yes

Unsure

No

22a. If yes or unsure, how have your pets been related to your eviction?

23. Do you feel that you can provide all of the care your pets need?

Yes

Unsure

No

24. If necessary, can you afford to pay for pet boarding or a pet sitter?

Yes

Unsure

No

25. Do you have trouble affording pet food, medication, or supplies?

Yes

Unsure

No

26. Do you have trouble affording regular veterinary care for your pets?

Yes

Unsure

No

27. Does your relationship with your pet help you cope with living with HIV?

- Yes
- Maybe
- No
- Not applicable

27a. If yes or maybe, in what ways do you feel your pets have been helpful in coping with living with HIV?

28. Does your relationship with your pet impact your alcohol or substance use?

- Yes
- Maybe
- No
- Not applicable

SKIP TO NEXT PAGE, ANSWER QUESTION 29

28a. If yes or maybe, how does your relationship with your pet impact your alcohol or substance use?

We are interested in what services related to your pet you think might help you to better manage your own physical and/or mental health.

29. Would free pet food better enable you to access health services?

- Yes
- Unsure
- No

30. Would free veterinary care better enable you to access health services?

- Yes
- Unsure
- No

31. Would free boarding or foster services during in-patient treatments or hospitalizations better enable you to access health services?

- Yes
- Unsure
- No

32. Are there any other pet-related services that might help you to better manage your own health?

33. For you, what are the pros and cons of living with pets?

34. Is there anything else you would like us to know about your relationship with your pets, or how your pets impact your health, well-being, and/or everyday life?

We are interested in how people's relationships with pets while in foster care could impact their lives today.

35. Were you ever in foster care?

- Yes
- No

→ **SKIP TO NEXT PAGE, ANSWER QUESTION 36**

35a. How did you leave the foster care system?

- Reunification (i.e., you returned to your biological parents or people you lived with before entering foster care)
- Kinship Care or Guardianship (i.e., you were placed into the care of someone else while still maintaining legal connections with your biological parents)
- Adoption (i.e., you were legally adopted by someone else, severing legal ties to your biological parents)
- Emancipation (i.e., you 'aged out' of the foster care system)
- Other (**Please specify**) _____

35b. Is there anything you'd like to tell us about your experiences with pets while in foster care? Please include both positive and negative experiences.

36. We are interested in the amount of support you get from people in your life. Please tell us how strongly you agree or disagree with each of the following statements:

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
There is a special person who is around when I am in need.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is a special person with whom I can share my joys and sorrows.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My family really tries to help me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I get the emotional help and support I need from my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have a special person who is a real source of comfort to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My friends really try to help me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can count on my friends when things go wrong.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can talk about my problems with my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have friends with whom I can share my joys and sorrows.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is a special person in my life who cares about my feelings.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My family is willing to help me make decisions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can talk about my problems with my friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

THANK YOU FOR COMPLETING THE
SURVEY!

----- SINCERELY -----

THE FLORIDA COHORT TEAM

