

National Substance Abuse, HIV, and Hepatitis Prevention Initiative

Cohort 6

Adult Baseline Questionnaire

First Data Collection Point

TO BE COMPLETED BY THE LOCAL GRANT SITE DATA COLLECTOR

Last Name _____, First Name _____, M.I. _____

ID #:

Site ID			Grp.Type	Adm.Fmt.	Individual Identifier				
					A				

RESPONDENT OR PARTICIPANT: Before answering any of the questions, please make sure your name is correct. If incorrect, make the change in the box above. Do not write your name on any other page in this questionnaire. Thank you.

INSTRUCTIONS

1. Answer each question by marking one of the answer circles. Some questions allow you to mark more than one answer. If you don't find an answer that fits exactly, choose the one that comes closest.
2. Mark your answers carefully so we can tell which answer circle you chose. Do not mark between the circles.
3. It is very important that you answer each question truthfully. Your responses will not be helpful unless you tell the truth.

MARKING YOUR ANSWERS

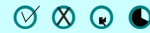
- Use a No. 2 black lead pencil.
- Do not use an ink or ballpoint pen.
- Make heavy dark marks that fill the circle completely.
- Erase cleanly any answer you wish to change.
- Make no stray marks on this questionnaire.

EXAMPLES

Correct Marks:



Incorrect Marks:



Section One: Facts About You

First, we'd like to ask some basic questions about you. Your answers will not be used to identify you and what you say. Instead, your answers will help us understand how different groups (like men or women, or people of similar ages) feel about substance abuse, HIV, and hepatitis prevention.

1. How would you describe yourself? (Gender)

- Male
- Female
- Transgender
- Male to female
- Female to male

2. In what year were you born? (Write the last two digits and then mark the matching circles below)

19	
0 <input type="radio"/>	0 <input type="radio"/>
1 <input type="radio"/>	1 <input type="radio"/>
2 <input type="radio"/>	2 <input type="radio"/>
3 <input type="radio"/>	3 <input type="radio"/>
4 <input type="radio"/>	4 <input type="radio"/>
5 <input type="radio"/>	5 <input type="radio"/>
6 <input type="radio"/>	6 <input type="radio"/>
7 <input type="radio"/>	7 <input type="radio"/>
8 <input type="radio"/>	8 <input type="radio"/>
9 <input type="radio"/>	9 <input type="radio"/>

3. In what month were you born?

- January
- February
- March
- April
- May
- June
- July
- August
- September
- October
- November
- December

4. On what day of the month were you born?

- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25
- 26
- 27
- 28
- 29
- 30
- 31

5. Are you Hispanic or Latino?

- Yes
- No

6. What is your race? (Select one or more)

- White
- Black or African American
- American Indian
- Native Hawaiian or Other Pacific Islander
- Asian
- Alaskan Native
- Other

7. **How would you describe yourself?** (Sexual orientation)
- Straight or heterosexual
 - Bisexual
 - Gay or lesbian
 - Unsure
8. **What is your primary spoken language?**
- English
 - Spanish
 - Asian (Chinese, Japanese, or other)
 - American Indian (Apache, Blackfoot, Navajo, or other)
 - Other
9. **How long have you lived in the United States?**
- Less than a year
 - 1 to 2 years
 - 3 to 4 years
 - 5 or more years
 - All my life
10. **With whom do you live?**
(Mark all that apply)
- Alone
 - With my mother
 - With my father
 - With my brother(s) and/or sister(s)
 - With my grandparent(s)
 - With other relatives or guardian
 - With my spouse or significant other
 - With my child or my children
 - With roommates
 - Other
11. **Describe where you live.**
- In my own home or apartment
 - In a relative's home
 - In a group home
 - In a foster home
 - Homeless or in a shelter
 - Other
12. **At what age did you have your first child?**
- No children
 - 9 to 13 years old
 - 14 to 18 years old
 - 19 to 25 years old
 - 26 to 34 years old
 - 35 years old or older
13. **How many children under the age of 18 are living with you?**
- 0
 - 1 to 2
 - 3 to 4
 - 5 to 6
 - More than 6
14. **What is the highest level of education you have finished, whether or not you received a degree?** (Mark only the grades you have completed)
- | | |
|--|--|
| <input type="radio"/> 1 st grade | <input type="radio"/> College freshman |
| <input type="radio"/> 2 nd grade | <input type="radio"/> College sophomore |
| <input type="radio"/> 3 rd grade | <input type="radio"/> College junior |
| <input type="radio"/> 4 th grade | <input type="radio"/> College completion |
| <input type="radio"/> 5 th grade | <input type="radio"/> Some graduate school, but no degree received |
| <input type="radio"/> 6 th grade | <input type="radio"/> Master's degree |
| <input type="radio"/> 7 th grade | <input type="radio"/> Some professional school, (such as medical or law school) but no degree received or doctoral program |
| <input type="radio"/> 8 th grade | <input type="radio"/> Doctorate or professional degree |
| <input type="radio"/> 9 th grade | |
| <input type="radio"/> 10 th grade | |
| <input type="radio"/> 11 th grade | |
| <input type="radio"/> 12 th grade | |
15. **If less than 12 years of education, do you have a GED (General Equivalency Diploma)?**
- Yes
 - No
16. **Have you completed a technical or trade school program (such as beautician, cosmetology, business, appliance repair, computer etc.)?**
- Yes
 - No
17. **Which of the following best describes you?**
(Mark the one that fits best.)
- Employed full time (35+ hours per week)
 - Employed part time
 - Unemployed (looking for work)
 - Unemployed (disabled)
 - Unemployed (volunteer work)
 - Unemployed (retired)
 - Unemployed (full-time student)
 - Unemployed (full-time homemaker)
 - Unemployed (other reason)

18. Think about the household members that live with you right now. About how much income have you and/or your family members made in the last year before taxes? (Include child support, and/or cash payments from the government, for example, welfare [TANF], SSI, or unemployment compensation)

- \$0–\$10,000
- \$10,001–\$20,000
- \$20,001–\$30,000
- \$30,001–\$40,000
- \$40,001–\$50,000
- \$50,001–\$60,000
- More than \$60,000

19. Would you be more or less likely to want to work for an employer that tests its employees for drug or alcohol use on a random basis? Would you say more likely, less likely, or would it make no difference to you? (Mark one)

- More likely
- Less likely
- Would make no difference
- Don't know or can't say

20. During the past 12 months, have you driven a vehicle while you were under the influence of alcohol?

- Yes
- No
- Don't know or can't say

21. Have you ever been in adult detention, jail, or prison for more than 3 days?

- Yes
- No

22. If **YES** to question 21, how long has it been since you last got out of an adult detention, jail, or prison?

- Never in adult detention, jail, or prison
- Fewer than 30 days
- Between 30 days and 1 year
- Between 1 and 2 years
- Between 2 and 3 years
- Between 3 and 4 years
- Between 4 and 5 years
- More than 5 years

Section Two: Cigarettes, Alcohol and Drugs

The next two questions ask about how substance use may have affected your personal life or about how your personal life may have caused you to use substances.

23. During the past 30 days, how **stressful** have things been for you because of your use of alcohol or drugs?

- I have not used alcohol or drugs in the past 30 days
- Not at all
- Somewhat
- Considerably
- Extremely

24. During the past 30 days, has your use of alcohol or drugs caused you to have **emotional problems**?

- I have not used alcohol or drugs in the past 30 days
- Not at all
- Somewhat
- Considerably
- Extremely

The next two questions are about **CIGARETTES and OTHER TOBACCO PRODUCTS**.

Think back over the past 30 days and record on how many days, if any, you used cigarettes and/or other tobacco products.

25. During the past 30 days, on how many days did you smoke part or all of a **cigarette**? (Include menthol and regular cigarettes and loose tobacco rolled into cigarettes)

- 12 days
- 13 days
- 14 days
- 15 days
- 4 days
- 5 days
- 18 days
- 19 days
- 20 days
- 21 days
- 22 days
- 11 days
- 24 days
- 25 days
- 26 days
- 27 days
- 16 days
- 17 days
- 30 days
- Don't know or can't say
- 28 days
- 29 days
- 23 days

26. During the past 30 days, on how many days did you use **other tobacco products**? (Include any tobacco product other than cigarettes such as snuff, chewing tobacco, and smoking tobacco from a pipe)

- 12 days
- 13 days
- 14 days
- 15 days
- 4 days
- 5 days
- 18 days
- 19 days
- 20 days
- 21 days
- 22 days
- 23 days
- 24 days
- 25 days
- 26 days
- 27 days
- 16 days
- 17 days
- 28 days
- 29 days
- 30 days
- Don't know or can't say

The next two questions are about **ALCOHOL**. By alcohol, we mean BEER, WINE, WINE COOLERS, MALT BEVERAGES or HARD LIQUOR.

Different groups of people in the United States may use alcohol for religious reasons. However, this may not be true for your religious, cultural, or ethnic group. For example, some churches serve wine during a church service. If you drink wine at church or for some other religious reason, **do not** count these times in your answers to the questions below.

Think back over the past 30 days and record on how many days, if any, you consumed alcohol.

27. During the past 30 days, on how many days did you drink one or more drinks of an **alcoholic beverage**?

- 12 days
- 13 days
- 14 days
- 15 days
- 4 days
- 5 days
- 18 days
- 19 days
- 20 days
- 21 days
- 22 days
- 23 days
- 24 days
- 25 days
- 26 days
- 27 days
- 16 days
- 17 days
- 28 days
- 29 days
- 30 days
- Don't know or can't say

28. During the past 30 days, on how many days have you been **drunk or very high from drinking alcoholic beverages**?

- 12 days
- 13 days
- 14 days
- 15 days
- 4 days
- 5 days
- 18 days
- 19 days
- 20 days
- 21 days
- 22 days
- 23 days
- 24 days
- 25 days
- 26 days
- 27 days
- 16 days
- 17 days
- 28 days
- 29 days
- 30 days
- Don't know or can't say

The next question is about **MARIJUANA or HASHISH**. Marijuana is sometimes called weed, blunt, hydro, grass, or pot. Hashish is sometimes called hash or hash oil.

Think back over the past 30 days and record on how many days, if any, you used marijuana or hashish.

29. During the past 30 days, on how many days did you use **marijuana or hashish**?

- 12 days
- 13 days
- 14 days
- 15 days
- 4 days
- 5 days
- 18 days
- 19 days
- 20 days
- 21 days
- 22 days
- 23 days
- 24 days
- 25 days
- 26 days
- 27 days
- 16 days
- 17 days
- 28 days
- 29 days
- 30 days
- Don't know or can't say

The next question is about OTHER ILLEGAL DRUGS, excluding marijuana or hashish.

These include substances like inhalants or sniffed substances such as glue, gasoline, paint thinner, cleaning fluid, or shoe polish (used to feel good or get high), heroin, crack, or cocaine, methamphetamine, hallucinogens (drugs that cause people to see or experience things that are not real) such as LSD (sometimes called acid), Ecstasy (MDMA), PCP, peyote (sometimes called angel dust), and prescription drugs used without a doctor's orders, just to feel good or to get high.

Think back over the past 30 days and record on how many days, if any, you used other illegal drugs.

30. During the past 30 days, on how many days did you use any other illegal drug?

- 12 days
- 13 days
- 14 days
- 15 days
- 4 days
- 5 days
- 24 days
- 25 days
- 26 days
- 27 days
- 16 days
- 17 days
- 28 days
- 29 days
- 18 days
- 19 days
- 20 days
- 21 days
- 22 days
- 23 days
- 30 days
- Don't know or can't say

Now we would like to ask about your use of several specific drugs.

31. During the past 30 days, on how many days did you use cocaine or crack?

- 12 days
- 13 days
- 14 days
- 15 days
- 4 days
- 5 days
- 24 days
- 25 days
- 26 days
- 27 days
- 16 days
- 17 days
- 28 days
- 29 days
- 18 days
- 19 days
- 20 days
- 21 days
- 22 days
- 23 days
- 30 days
- Don't know or can't say

32. During the past 30 days, on how many days did you use methamphetamine? (Also called meth, crystal meth, crank, go, and speed)

- 12 days
- 13 days
- 14 days
- 15 days
- 4 days
- 5 days
- 24 days
- 25 days
- 26 days
- 27 days
- 16 days
- 17 days
- 28 days
- 29 days
- 18 days
- 19 days
- 20 days
- 21 days
- 22 days
- 23 days
- 30 days
- Don't know or can't say

33. During the past 30 days, on how many days have you used prescription drugs without a doctor's orders, in order to feel good or to get high?

- 12 days
- 13 days
- 14 days
- 15 days
- 4 days
- 5 days
- 24 days
- 25 days
- 26 days
- 27 days
- 16 days
- 17 days
- 28 days
- 29 days
- 18 days
- 19 days
- 20 days
- 21 days
- 22 days
- 23 days
- 30 days
- Don't know or can't say

34. During the past 30 days, on how many days have you injected any drugs? (Count only injections without a doctor's orders, those you had just to feel good or to get high.)

- 12 days
- 13 days
- 14 days
- 15 days
- 4 days
- 5 days
- 24 days
- 25 days
- 26 days
- 27 days
- 16 days
- 17 days
- 28 days
- 29 days
- 18 days
- 19 days
- 20 days
- 21 days
- 22 days
- 23 days
- 30 days
- Don't know or can't say

The next few questions ask about the **FIRST TIME** you used a substance.

Think back whether you have EVER used any substances. If so, what was your age the FIRST TIME you used the following substances.

35. How old were you the first time you smoked part or all of a cigarette? (Include menthols and regular cigarettes and loose tobacco rolled into cigarettes)

- I have never smoked part or all of a cigarette
- 5 years old or younger
- 6 years old
- 7 years old
- 8 years old
- 9 years old
- 10 years old
- 11 years old
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old
- 18 years old
- 19 years old
- 20 years old
- 21 years old
- 22 years old
- 23 years old
- 24 years old
- 25 years old
- 26 years old
- 27 years old
- 28 years old
- 29 years old
- 30 years old
- Over 30 years old
- Don't know or can't say

36. How old were you the first time you used any other tobacco product? (Include any tobacco product other than cigarettes such as snuff, chewing tobacco, and smoking tobacco from a pipe)

- I have never used any other tobacco products
- 5 years old or younger
- 6 years old
- 7 years old
- 8 years old
- 9 years old
- 10 years old
- 11 years old
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old
- 18 years old
- 19 years old
- 20 years old
- 21 years old
- 22 years old
- 23 years old
- 24 years old
- 25 years old
- 26 years old
- 27 years old
- 28 years old
- 29 years old
- 30 years old
- Over 30 years old
- Don't know or can't say

37. How old were you the first time you had a drink of an alcoholic beverage? (Includes beer, wine, wine coolers, malt beverages, and liquor) DO NOT include any time when you only had a sip or two from a drink.

- I have never had a drink of an alcoholic beverage
- 9 years old
- 10 years old
- 11 years old
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old
- 18 years old
- 19 years old
- 20 years old
- 21 years old
- 22 years old
- 23 years old
- 24 years old
- 25 years old
- 26 years old
- 27 years old
- 28 years old
- 29 years old
- 30 years old
- Over 30 years old
- Don't know or can't say

38. How old were you the first time you used marijuana or hashish? (Also known as grass, pot, hash, or hash oil)

- I have never used marijuana or hashish
- 5 years old or younger
- 6 years old
- 7 years old
- 8 years old
- 9 years old
- 10 years old
- 11 years old
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old
- 18 years old
- 19 years old
- 20 years old
- 21 years old
- 22 years old
- 23 years old
- 24 years old
- 25 years old
- 26 years old
- 27 years old
- 28 years old
- 29 years old
- 30 years old
- Over 30 years old
- Don't know or can't say

39. How old were you the first time you used any other illegal drug?

I have never used any other illegal drugs

- 20 years old
- 21 years old
- 22 years old
- 23 years old
- 9 years old
- 10 years old
- 11 years old
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old
- 18 years old
- 19 years old
- 24 years old
- 25 years old
- 26 years old
- 27 years old
- 28 years old
- 29 years old
- 30 years old
- Over 30 years old
- Don't know or can't say

The next few questions ask about HOW MUCH you think people RISK HARMING themselves physically or in other ways by using alcohol, tobacco, and drugs.

40. How much do people risk harming themselves physically or in other ways when they smoke one or more packs of cigarettes per day?

- Moderate risk
- Great risk
- Don't know or can't say

41. How much do people risk harming themselves physically or in other ways when they smoke marijuana once or twice a week?

- Moderate risk
- Great risk
- Don't know or can't say

42. How much do people risk harming themselves physically or in other ways when they have five or more drinks of an alcoholic beverage once or twice a week?

- Moderate risk
- Great risk
- Don't know or can't say

Section Three: Your Family and Relationships

The next few questions ask about your relationships.

43. Describe your current relationship status.

- Single (never married)
- Informally married or living with a permanent partner
- Legally married
- Separated
- Divorced or broken up from an informal marriage
- Widowed

44. If you have children, during the past 12 months, how many times have you talked with your children about the dangers or problems associated with the use of tobacco, alcohol, or drugs?

I don't have any children

Many times

Don't know or can't say

Describe your family's relationships:

45. I'm available when others in my family want to talk to me.

- I don't have any family
- Not true
- Sometimes true
- Usually true
- Always true

46. I listen to what other family members have to say, even when I disagree.

- I don't have any family
- Not true
- Sometimes true
- Usually true
- Always true

47. Members of my family ask each other for

help.

- I don't have any family
- Not true
- Sometimes true
- Usually true
- Always true

48. **Members of my family like to spend free time with each other.**

- I don't have any family
- Not true
- Sometimes true
- Usually true
- Always true

49. **Members of my family feel very close to each other.**

- I don't have any family
- Not true
- Sometimes true
- Usually true
- Always true

50. **We can easily think of things to do together as a family.**

- I don't have any family
- Not true
- Sometimes true
- Usually true
- Always true

More about your relationships...

51. **Thinking about all the people you know, are there any people you could go to when you want to talk about things having to do with your own health?**

- Yes, there are people I can talk with
- No, there is no one I can talk with

52. **Are there any people you could talk with about personal issues having to do with sex?**

- Yes, there are people I can talk with
- No, there is no one I can talk with

53. **Are there any people you could talk with about personal issues having to do with alcohol or drug use?**

- Yes, there are people I can talk with
- No, there is no one I can talk with

54. **Are there certain people you could go to if you need to talk about other personal matters that you wouldn't tell just anyone?**

- Yes, there are people I can talk with
- No, there is no one I can talk with

The next few questions ask about your religious or spiritual beliefs and how they may affect your daily life.

55. **In general, how important are religious or spiritual beliefs in your day-to-day life?**

- Not at all important
- Not too important
- Fairly important
- Very important

56. **When you have problems or difficulties with your school (education), work, family, friends, or personal life, how often do you seek spiritual guidance and support?**

- Never
- Rarely
- Sometimes
- Often
- Almost always

57. **How spiritual or religious would you say you are?**

- Not spiritual or religious at all
- Not too spiritual or religious
- Fairly spiritual or religious
- Very spiritual or religious

Section Four: Sexual Behavior

The next questions are about **SEX** and things that are related to sex.

Some of the questions ask about *having sex*. By *sex* or *sexual activity*, we mean a situation where two partners get sexually excited or aroused (turned on) by touching each other's genitals (penis or vagina) or anus (butt) with their own genitals, hands, or mouths.

When a male inserts his penis into his female partner's vagina, the partners are considered to be having *vaginal sex*.

When one partner's mouth is in contact with the other partner's genitals (penis or vagina) or anus during sex, the partners are considered to be having *oral sex*.

When a male's penis is inserted into his male or female partner's anus, the partners are considered to be having *anal sex*.

Some questions ask about *sexual partners*. A sexual partner is someone with whom you have sex, that is, engage in sexual activity.

Some questions refer to *protected sex and unprotected sex*. Protected sex is when a latex or polyurethane condom (rubber) is used to cover the penis; or a dental dam, or a female condom such as "Reality" is used to cover the vagina; or a dental dam is used to cover the anus. By unprotected sex, we mean vaginal, oral, or anal sex without a barrier such as a latex condom, dental dam, or female condom.

58. Have you **ever** had sex (either vaginal, oral, or anal)?

- Yes
- No

59. Have you had **oral** sex in the past 30 days?

- Yes
- No

60. The last time you had oral sex, was it protected or unprotected?

- I have never had oral sex
- Protected
- Unprotected

61. Have you had **vaginal** sex in the past 30 days?

- Yes
- No

62. The last time you had vaginal sex, was it protected or unprotected?

- I have never had vaginal sex
- Protected
- Unprotected

63. Have you had **anal** sex in the past 30 days?

- Yes
- No

64. The last time you had anal sex, was it protected or unprotected?

- I have never had anal sex
- Protected
- Unprotected

The next few questions ask more about your sexual behavior in general and your sexual behavior in the past 3 months.

65. In the **past 3 months**, have you had sex with any men?

- Yes
- No

66. Are you a woman who has sex with men?

- Yes
- No

67. Are you a man who has sex with men?

- Yes
- No

68. In the **past 3 months**, have you had sex with any women?

- Yes
- No

69. Are you a man who has sex with women?
- Yes
 No
70. Are you a woman who has sex with women?
- Yes
 No
71. During the past 3 months, how many sexual partners have you had?
- None 6 people
 1 person 7 people
 2 people 8 people
 3 people 9 people
 4 people 10 people or more
 5 people

The next few questions ask about your experiences with unprotected sex.

72. Have you ever had unprotected sex (vaginal, anal, or oral) with someone in exchange for money, drugs, or shelter?
- Yes
 No
73. In the past 3 months, have you had unprotected sex (vaginal, anal, or oral) with someone in exchange for money, drugs, or shelter?
- Yes
 No
74. Have you ever had unprotected sex (vaginal, anal, or oral) with a partner you know had, or suspected of having a sexually transmitted disease (STD)?
- Yes
 No
75. In the past 3 months, have you had unprotected sex (vaginal, anal, or oral) with a partner you know had, or suspected of having a sexually transmitted disease (STD)?
- Yes
 No
76. Have you ever had unprotected sex (vaginal, anal, or oral) with a partner you know had, or suspected of having HIV/AIDS?
- Yes
 No
77. In the past 3 months, have you had

- unprotected sex (vaginal, anal, or oral) with a partner you know had, or suspected of having HIV/AIDS?
- Yes
 No
78. Have you ever had unprotected sex (vaginal, anal, or oral) with someone whom you knew was, or suspected of being an injected drug user?
- Yes
 No
79. In the past 3 months, have you had unprotected sex (vaginal, anal, or oral) with someone whom you knew was, or suspected of being an injected drug user?
- Yes
 No

The next two questions ask about sexual activity while under the influence of drugs or alcohol.

80. Have you ever had sex while you were under the influence of drugs or alcohol?
- Yes
 No
81. In the past 3 months, have you had sex while you were under the influence of drugs or alcohol?
- Yes
 No

How much do you think people risk harming themselves physically:

82. If they have oral sex without a condom or dental dam?
- No risk
 Slight risk
 Moderate risk
 Great risk
83. If they have vaginal sex without a condom?
- No risk
 Slight risk
 Moderate risk
 Great risk

84. If they have anal sex without a condom?

- No risk
- Slight risk
- Moderate risk
- Great risk

85. If they share nonsanitized needles or work when using drugs?

- No risk
- Slight risk
- Moderate risk
- Great risk

86. If they have sex under the influence of alcohol?

- No risk
- Slight risk
- Moderate risk
- Great risk

87. If they have sex while high on drugs?

- No risk
- Slight risk
- Moderate risk
- Great risk

In the past 3 months, how often has anyone with whom you had an intimate relation, sexual or not...

88. Emotionally abused you (swore at you, called you negative names, kept you from seeing family or friends)?

- Never
- Rarely
- Sometimes
- Often
- Very often

89. Physically abused you (slapped, beat, kicked, or choked you; threatened you with a knife or a gun)?

- Never
- Rarely
- Sometimes
- Often
- Very often

90. Sexually abused you (forced you to have sex, physically hurt the sexual parts of your body)?

- Never
- Rarely
- Sometimes
- Often
- Very often

91. Forced you to use drugs or alcohol?

- Never
- Rarely
- Sometimes
- Often
- Very often

In your relationship with your PRIMARY (MAIN) partner, how confident are you that you could:

92. Refuse to have sex with your partner because you weren't in the mood?

- Not at all
- A little
- Somewhat
- Very much

93. Ask your partner to wait while you got a condom or dental dam?

- Not at all
- A little
- Somewhat
- Very much

94. Tell your partner how to treat you sexually?

- Not at all
- A little
- Somewhat
- Very much

95. Refuse to engage in sexual practices you didn't like?

- Not at all
- A little
- Somewhat
- Very much

96. Ask your partner to use a condom or dental dam?

- Not at all
- A little
- Somewhat
- Very much

97. Refuse to have sex because your partner did not want to use a condom or dental dam?

- Not at all
- A little
- Somewhat
- Very much

In the next 6 months, how likely are you...

98. To drink five or more alcoholic drinks in one sitting?

- Not at all likely
- A little likely
- Somewhat likely
- Very likely

99. To use any illegal drugs (including prescription drugs) to get high?

- Not at all likely
- A little likely
- Somewhat likely
- Very likely

100. To use injection drugs without a doctor's orders, just to feel good or to get high?

- Not at all likely
- A little likely
- Somewhat likely
- Very likely

101. To use clean needles when injecting drugs?

- I do not use injected drugs
- Not at all likely
- A little likely
- Somewhat likely
- Very likely

102. To practice safe sex?

- Not intending to have sex during the next 6 months
- Not at all likely
- A little likely
- Somewhat likely
- Very likely

Section Five: Knowledge – What You Know

Please indicate whether you think each of the following statements about HIV/AIDS is true or false, or if you don't know.

103. Only people who look sick can spread the HIV/AIDS virus.

- True
- False
- Don't know

104. Only people who have sexual intercourse with gay (homosexual) people get HIV/AIDS.

- True
- False
- Don't know

105. Birth control pills protect women from getting the HIV/AIDS virus.

- True
- False
- Don't know

106. There are drugs available to treat HIV that can lengthen the life of a person infected with the virus.

- True
- False
- Don't know

107. There is no cure for AIDS.

- True
- False
- Don't know

108. Young people under age 18 need their parents' permission to get an HIV test.

- True
- False
- Don't know

Please indicate whether you think each of the following statements about hepatitis is true or false, or if you don't know.

109. Hepatitis consists of the inflammation of your liver.

- True
- False
- Don't know

110. The causes of hepatitis include viruses, bacteria, alcohols and toxins, parasites, and blood transfusions.

- True
- False
- Don't know

111. Hepatitis (A, B, or C) is not a dangerous disease.

- True
- False
- Don't know

112. The most common types of hepatitis are hepatitis A, hepatitis B, and hepatitis C.

- True
- False
- Don't know

113. Hepatitis A is transmitted through contaminated food and water, while B and C are transmitted through exchanging bodily fluids.

- True
- False
- Don't know

114. The best way to protect yourself from hepatitis is to get immunized (vaccinated).

- True
- False
- Don't know

115. Hepatitis immunizations (vaccines) are common in the United States and can protect you for a lifetime for certain types of hepatitis.

- True
- False
- Don't know

116. Everyone who has the hepatitis C virus develops symptoms.

- True
- False
- Don't know

117. There is a medical treatment for the chronic hepatitis C virus.

- True
- False
- Don't know

118. There is no vaccine for the hepatitis C virus.

- True
- False
- Don't know

119. The hepatitis C virus can live outside of the body for days.

- True
- False
- Don't know

120. If a mother is infected with the hepatitis C virus, her newborn will more likely be infected.

- True
- False
- Don't know

Section Six: Health Care

The next group of questions are about health care and your experiences related to health care, and other use of health care.

121. Do you have health care or medical insurance?

- Yes
- No

122. In the past 30 days, have you been in any classes or programs where they talked about preventing HIV/AIDS?

- Yes
- No

123. Would you know where to go in your neighborhood to see a health care professional regarding HIV/AIDS or other sexually transmitted health issues?
- Yes
 - No
124. In the past 30 days, have you been in any classes or programs where they talked about preventing hepatitis?
- Yes
 - No
125. Would you know where to go in your neighborhood to see a health care professional regarding hepatitis health issues?
- Yes
 - No
126. In the past 30 days, have you been in any classes or programs where they talked about prevention of drug or alcohol abuse?
- Yes
 - No
127. Would you know where to go in your neighborhood to see a health care professional regarding a drug or alcohol problem?
- Yes
 - No
128. Have you ever been tested for the HIV virus that causes AIDS?
- Yes
 - No
129. If YES to Question 128, what type of HIV test was it?
- Never tested for HIV/AIDS
 - Oral (Mouth) test (OraSure/OraQuick Rapid Saliva Test or other)
 - Urine test
 - Blood test in a clinic or doctor's office (Western Block or other)
 - More than one test conducted in a clinic or doctor's office
 - Home test kit
 - Don't know

back to get your results?

- Never tested for HIV/AIDS
- Yes
- No

131. Have you ever been tested for hepatitis A, B, or C?

- Yes
- No

132. If YES to question 131, did you receive or go back to get your results?

- I have never been tested
- Yes
- No

133. Have you received the hepatitis A or B vaccination?

- Yes
- No

The last two questions are about your answers to this survey.

134. How comfortable was it for you to answer the questions in this survey?

- Very comfortable
- Somewhat uncomfortable
- Somewhat comfortable
- Very uncomfortable

135. How truthful were you when answering the questions?

- Very truthful
- Somewhat untruthful
- Somewhat truthful
- Very untruthful

YOU ARE DONE!
Thank you for your help!

130. If YES to question 128, did you receive or go