

ATTACHMENT A

QUESTION BY QUESTION SOURCE LIST AND CROSSWALK

BETWEEN TPP REPLICATION STUDY FOLLOW-UP AND THE OMB-APPROVED TPP REPLICATION STUDY BASELINE

Crosswalk between the TPP FOLLOW-UP MEASURES and the OMB-APPROVED BASELINE instrument for Safer Sex, Reducing the Risk and ¡Cuidate!

Items for the two TPP follow-up measures (the first for Safer Sex replications, the second for replications of Reducing the Risk and ¡Cuidate!) are listed first, followed by the corresponding item number noted for the two OMB-approved TPP baseline instruments for Safer Sex, Reducing the Risk, and ¡Cuidate!. Items found only on the first follow-up survey are indicated with an “N/A” in the baseline columns. The question source is listed for each item. Information on how the data will be used (for tracking, as a covariate, etc.) is shown. The “Notes” column provides additional information about the items.

TPP Safer Sex Follow-up #	TPP Reducing the Risk and iCuidate! Follow-up #	TPP Safer Sex Baseline #	TPP Reducing the Risk & iCuidate! Baseline #	First Follow-up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Final Risk Outcome	Other (Con. Model)	Notes
Section 1: You and Your Background												
1.1	1.1	1.1	1.1	In what month and year were you born? SELECT ONE MONTH AND SELECT ONE YEAR		✓	✓					
1.2	1.2	1.2	1.2	What grade are you in? SELECT ONE <input type="checkbox"/> 6th <input type="checkbox"/> 7th <input type="checkbox"/> 8th <input type="checkbox"/> 9th <input type="checkbox"/> 10th <input type="checkbox"/> 11th <input type="checkbox"/> 12 th <input type="checkbox"/> Ungraded <input type="checkbox"/> College/Technical school <input type="checkbox"/> Not currently in school	All About Youth (AAY) <i>ade14</i> . The next questions ask you about school. What grade are you in? <i>AGRADE</i>		✓					
N/A	1.3	N/A	1.3	Are you male or female? SELECT ONE <input type="checkbox"/> Male <input type="checkbox"/> Female		✓	✓					Not asked For Safer Sex which targets females only
1.3	1.4	1.4	1.4	Are you Hispanic / Latino? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No	Add Health, Wave 1 4. Are you of Hispanic or Latino origin? Yes No		✓					
1.4	1.5	1.5	1.5	What is your race? YOU MAY SELECT MORE THAN ONE ANSWER <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	Add Health, Wave 1 6. What is your race? White Black or African American American Indian or Native American Asian or Pacific Islander		✓					

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				<input type="checkbox"/> Some other race _____ (PRINT OTHER RACE)	Other							
1.5	1.6	1.9	1.9	<p>In the past 12 months, have you received any information or learned about any of the following topics?</p> <p>SELECT ONE FOR EACH Yes/No</p> <ul style="list-style-type: none"> a. Relationships or dating b. Marriage, or family life c. Abstinence from sex d. Methods of birth control e. Where to get birth control f. Sexually transmitted diseases (STDs)/ sexually transmitted infections (STIs) or HIV g. How to talk to your partner about whether to have sex h. How to talk to your partner about whether to use birth control i. How to say no to sex j. How babies are made 	<p>National Survey of Family Growth (NSFG) combined with MPR Abstinence: From NSFG (Female, Cycle 6): Now I'm interested in knowing about formal sex education you may have had. (Before you were 18, did you ever have/ Have you ever had) any formal instruction at school, church, a community center or some other place ... About how to say no to sex? About methods of birth control?</p> <p>MPR Abstinence (Wave 4V-3Female-Section 1): The following questions are about any classes or special programs you might have participated in during the last year that talked about sexual activity and health. 1.7 In the past year, did you take a class or participate in a special program that talked about any of the following things? These could be classes that you took in school or someplace else.</p> <ul style="list-style-type: none"> a. The female menstrual cycle—that is, the monthly cycle or period? b. Physical development and puberty? c. Dating? d. Marriage and family life? e. The human body/reproduction/how girls get pregnant? f. Ways people who have sex can prevent making babies? g. Abstinence—that is, not having sexual intercourse? 			✓				

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1.5a	1.6a →	N/A	N/A	Did you say “yes” to any item a through j in question 1.6 above? (1.5 for SSI) SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No GO TO 1.8 (1.7 for SSI)	h. How to say “no” to sex? i. Sexually transmitted diseases (STDs)? Developed by the PPA Team as a filter question.							✓	Filter question
1.6	1.7	N/A	N/A	Thinking about the past 12 months, how often did you get information or learn about relationships, abstinence, birth control, or sexually transmitted diseases (STDs)/ sexually transmitted infections (STIs) or HIV at each of the following places? SELECT ONE FOR EACH <i>Very Often, Often, Sometimes, Rarely, Never</i> a. School class, workshop, or event b. Church, synagogue, mosque, or religious classes outside of school c. Community center, youth organization, or after-school activity d. Doctor, nurse, or clinic e. Friends or other students f. Parents and other relatives or family members g. Internet and media h. Other LIST OTHER SOURCE	Developed by the PPA Team for the First Follow-up questionnaire.			✓					
1.7	1.8	N/A	N/A	In the past 30 days, how often have you felt that you were unable to control the important things in your life? SELECT ONE <input type="checkbox"/> Always <input type="checkbox"/> Most of the Time	Child Trends’ Research to Results Brief (Perceived Stress Scale): In the last month: 2. How often have you felt that you were unable to control the important things in your life? 0 = Never		✓						

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				<input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely <input type="checkbox"/> Never	1 = Almost never 2 = Sometimes 3 = Fairly often 4 = Very often							
1.8	1.9	N/A	N/A	In the past 30 days, how often have you felt difficulties were piling up so high that you could not overcome them? SELECT ONE <input type="checkbox"/> Always <input type="checkbox"/> Most of the time <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely <input type="checkbox"/> Never	Child Trends' Research to Results Brief (Perceived Stress Scale): In the last month: 10. How often have you felt difficulties were piling up so high that you could not overcome them? 0 = Never 1 = Almost never 2 = Sometimes 3 = Fairly often 4 = Very often		✓					
1.9	1.10	1.7	1.7	How likely is it that you will do each of the following things? SELECT ONE FOR EACH <i>Not at all likely, A little bit likely, Somewhat likely, Very likely</i> A. Graduate from high school B. Go to a technical or vocational school after high school C. Go to college D. Graduate from a 2-year or community college program E. Graduate from a 4-year college program	All About Youth, Baseline ade16. How much education do you intend to get? 0 = Don't plan to finish high school 1 = Plan to finish high school 2 = Attend a technical or vocational school after high school 3 = Graduate from a 2-year community college program 4 = Graduate from a 4-year college 5 = Graduate with an advanced degree (doctor, lawyer, dentist) 8 = Refuse to Answer			✓				

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N/A	1.11 Life-works only	N/A	6.26	<p>Thinking about this past summer, did you participate in any Summer Youth Employment programs?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No → GO TO END</p> <p><input type="checkbox"/> Don't know → GO TO END</p> <p>→ 6.26b Did you participate in a week-long workshop called Gen.M (Gender Matters)?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't know</p>	Abt question developed with LifeWorks program staff. To be used in one site only.		✓					These questions reflect site level interest in understanding other programs operating in Austin/Travis County. They will only be included on the survey instrument for one grantee (LifeWorks).
Section 2: Knowledge, Views, Perceptions												
2.1	2.1	N/A	N/A	<p>In this section, we will ask you about what you know and your ideas about sex, pregnancy, birth control, and preventing sexually transmitted disease (STD)/sexually transmitted infection (STI) or HIV. Read each statement below and check the answer that fits best.</p> <p>SELECT ONE FOR EACH <i>I am sure it's true, I think it's true, I don't know, I think it's false, I am sure it's false</i></p> <p>a. You can't get infected with HIV if you have sex only once or twice without a condom.</p>	<p>From a combination of items: ETR Associates -Reducing the Risk Student Knowledge, Attitudes, and Skills Survey (RTR-SKASS)</p> <ol style="list-style-type: none"> 1. Most high school students are having sex. 2. A woman is protected from pregnancy the day she begins taking the pill. 3. All STIs can be cured by taking medicine. 4. Some STIs put you at a higher risk of getting infected with HIV. 5. About 1 out of 4 sexually active teenagers get an STI each year. 6. The best way to use a condom is to leave 			✓				

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				<ul style="list-style-type: none"> b. Most high school students are having sex c. Once you are infected with HIV, you are infected for life. d. If a young couple has had unprotected sex a few times and a pregnancy did not happen, then they do not have to worry about her getting pregnant. e. There is a vaccine or shot available to prevent girls from becoming infected with certain types of HPV (also known as Human Papilloma virus). f. A woman is protected from pregnancy the day she begins taking the pill. g. All STDs/STIs can be cured by taking medicine h. A person with a STD/STI who looks and feels healthy cannot transmit the infection to others. i. Some STDs/STIs put you at a higher risk of getting infected with HIV. j. About 1 out of 4 sexually active teenagers get an STD/ STI each year. k. The best way to use a condom is to leave some space at the tip for the sperm. l. A condom should be completely unrolled before it is placed on the penis. m. You can get a sexually transmitted disease (STD) from having oral sex 	<p>some space at the tip for the sperm. 7. A condom should be completely unrolled before it's placed on the penis. <i>True, False, Not Sure</i></p> <p>From Handbook for Evaluating HIV Education Division of Adolescent and School Health, CDC: 1. You can't get AIDS if you have sex only once or twice without a condom. 2. Once you are infected with HIV, you are infected for life. <i>I am sure it's true, I think it's true, I don't know, I think it's false, I am sure it's false</i></p> <p>From Caitlin Wetzel, Abigail Tissot, Linda M. Kollar, Paula A. Hillard, Rachel Stone, and Jessica A. Kahn, "Development of an HPV Educational Protocol for Adolescents" J Pediatr Adolesc Gynecol. 2007 October ; 20(5): 281-287 1. There is a vaccine available to prevent girls from becoming infected with certain types of HPV infection</p> <p>From National Survey of Adolescent Males (NSAM): 1. If a young couple has had unprotected sex a few times and a pregnancy did not happen, then they do not have to worry about her getting pregnant. <i>I am sure it's true, I think it's true, I don't know, I think it's false, I am sure it's false</i></p>							

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2.2	2.2	3.6	3.6	<p>The next set of questions is about your views on condom use.</p> <p>If <u>condoms</u> are used correctly and consistently, how much can they decrease the risk of pregnancy?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Not at all</p> <p><input type="checkbox"/> A little</p> <p><input type="checkbox"/> A lot</p> <p><input type="checkbox"/> Completely</p> <p><input type="checkbox"/> Don't know</p> <p style="text-align: right;">GO TO 2.5</p>	<p>MPR Abstinence (Wave 4-V3, female, Section 3)</p> <p>3.3 Mark the answer that comes closest to what you think.</p> <p>a. If a condom is used correctly, it prevents girls from getting pregnant.</p>				✓				
2.3	2.3	→ 3.7	3.7	<p>If <u>condoms</u> are used correctly and consistently, how much can they decrease the risk of getting HIV, the virus that causes AIDS?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Not at all</p> <p><input type="checkbox"/> A little</p> <p><input type="checkbox"/> A lot</p> <p><input type="checkbox"/> Completely</p> <p><input type="checkbox"/> Don't know</p>	<p>MPR Abstinence (Wave 4-V3, female, Section 3)</p> <p>3.3 Mark the answer that comes closest to what you think.</p> <p>b. If a condom is used correctly, it prevents HIV</p>				✓				
2.4	2.4	3.8	3.8	<p>If <u>condoms</u> are used correctly and consistently, how much can they decrease the risk of getting gonorrhea?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Not at all</p> <p><input type="checkbox"/> A little</p> <p><input type="checkbox"/> A lot</p> <p><input type="checkbox"/> Completely</p> <p><input type="checkbox"/> Don't know</p>	<p>MPR Abstinence (Wave 4-V3, female, Section 3)</p> <p>3.3 Mark the answer that comes closest to what you think.</p> <p>c. If a condom is used correctly, it prevents Chlamydia and gonorrhea</p>				✓				
2.5	2.5	3.4	3.4	<p>How strongly do you agree or disagree with the following statements?</p>	<p>AAV (All About Youth) Study from file AAY Baseline v1</p> <p>I believe condoms should always be used if a</p>		✓						

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				<p>SELECT ONE FOR EACH <i>Strongly Agree, Agree, Disagree, Strongly Disagree</i></p> <p>a. Condoms should always be used if a person your age has sexual intercourse b. Condoms are too much trouble to use c. Condoms are pretty easy to get d. Condoms are important to make sex safer e. Using condoms means you don't trust your partner f. Using condoms is morally wrong g. Condoms decrease sexual pleasure</p>	<p>person my age has sex. 0 = Strongly disagree 1 = Disagree</p> <p>From Add Health: How much do you agree or disagree with each of the following statements: -In general, birth control is too much of a hassle to use.</p> <p>NSAM 1995</p> <ul style="list-style-type: none"> o Using condoms to prevent the spread of AIDS is more trouble than it's worth. o If I used a condom with a female, she might think that I am worried about getting AIDS or other diseases from her. <p>-Agree a lot -Agree a little -Disagree a little -Disagree a lot</p>								
2.6	2.6	3.10	3.10	<p>The next questions are about your views on birth control pills</p> <p>If <u>birth control pills</u> are used correctly and consistently, how much can they decrease the risk of pregnancy?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Not at all <input type="checkbox"/> A little <input type="checkbox"/> A lot <input type="checkbox"/> Completely <input type="checkbox"/> Don't know</p> <p style="text-align: right;">GO TO 2.9</p>	<p>MPR Abstinence (Wave 4-V3, female, Section 3)</p> <p>Mark the answer that comes closest to what you think.</p> <p>a. If birth control pills are used correctly, they prevent girls from getting pregnant</p>				✓				

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2.7	2.7	3.11	3.11	<p>If <u>birth control pills</u> are used correctly and consistently, how much can they decrease the risk of getting HIV, the virus that causes AIDS?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Not at all</p> <p><input type="checkbox"/> A little</p> <p><input type="checkbox"/> A lot</p> <p><input type="checkbox"/> Completely</p> <p><input type="checkbox"/> Don't know</p>	<p>MPR Abstinence (Wave 4-V3, female, Section 3)</p> <p>Mark the answer that comes closest to what you think.</p> <p>b. If birth control pills are used correctly, they prevent HIV</p>				✓				
2.8	2.8	3.12	3.12	<p>If <u>birth control pills</u> are used correctly and consistently, how much can they decrease the risk of getting gonorrhoea?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Not at all</p> <p><input type="checkbox"/> A little</p> <p><input type="checkbox"/> A lot</p> <p><input type="checkbox"/> Completely</p> <p><input type="checkbox"/> Don't know</p>	<p>MPR Abstinence (Wave 4-V3, female, Section 3)</p> <p>Mark the answer that comes closest to what you think.</p> <p>c. If birth control pills are used correctly, they prevent Chlamydia and gonorrhoea</p>				✓				
2.9	2.9	N/A	N/A	<p>The next question asks about birth control, <i>including</i> condoms.</p> <p>What, if anything, would persuade you to use birth control? Check all that apply</p> <p><input type="checkbox"/> Your own desire to prevent an unplanned pregnancy</p> <p><input type="checkbox"/> To prevent STDs/ STIs or HIV</p> <p><input type="checkbox"/> A pregnancy scare</p> <p><input type="checkbox"/> Your partner insists</p> <p><input type="checkbox"/> Someone you know going through an unplanned pregnancy</p> <p><input type="checkbox"/> None of these – you won't use birth control</p>	<p>-- (2010). <i>That's What He Said: What Guys Think About Sex, Love, Contraception, and Relationships. Full Questionnaire and Results</i>, page 11. Washington, DC: The National Campaign to Prevent Teen and Unplanned Pregnancy. Retrieved on June 13, 2012, from http://www.thenationalcampaign.org/resources/pdf/pubs/ThatsWhatHeSaid-Questionnaire.pdf.</p>		✓						
2.10	2.10	3.9	3.9	<p>The next question is about methods of birth control, NOT including condoms.</p>			✓						

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				<p>How strongly do you agree or disagree with the following statements?</p> <p>SELECT ONE FOR EACH <i>Strongly Agree, Agree, Disagree, Strongly Disagree</i></p> <p>a. Birth control should always be used if a person your age has sexual intercourse b. Birth control is too much trouble to use c. Birth control is pretty easy to get d. Birth control is important to make sex safer e. Birth control has too many negative side effects f. Using birth control is morally wrong</p>								
2.11	2.11	N/A	N/A	<p>Now we'd like to know more about your views on engaging in sex.</p> <p>It's OK to have sex with someone...? Please check all that apply.</p> <p><input type="checkbox"/> Once you're in a committed relationship <input type="checkbox"/> Any time as long as you use protection <input type="checkbox"/> On your first date <input type="checkbox"/> The same night you meet them <input type="checkbox"/> If you're drunk or high <input type="checkbox"/> When you know that they are someone else's boyfriend/girlfriend <input type="checkbox"/> When you know that neither of you is using protection <input type="checkbox"/> If you know they're drunk or high <input type="checkbox"/> With several different people in the same month <input type="checkbox"/> None of the above</p>	<p>ETR Associates Reducing the Risk Student Knowledge, Attitudes, and Skills Survey (RTR-SKASS) Posttest, revised, 9.22.2010</p> <p>Please fill in the answer for each question that best describes what you believe. I believe that...</p> <p><i>Definitely Yes, Probably Yes, Probably Not, Definitely Not</i></p> <p>a. It's OK for people my age to have sex with a steady boyfriend or girlfriend. b. It's OK for people my age to have sex with several different people in the same month. c. People my age should wait until they are older before they have sex. d. It is OK for people my age to choose not to have sex.</p>				✓			

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					<p>e. Condoms should always be used if a person my age has sex.</p> <p>f. Condoms should always be used if a person my age has sex <u>even if the girl uses hormone-based birth control.</u></p> <p>g. Condoms should always be used if a person my age has sex <u>even if the two people know each other very well.</u></p>							
N/A	2.12	N/A	N/A	<p>The following question asks you about your FRIENDS and what they believe. Even if you're not sure, mark the answer that is your best guess of what they think.</p> <p>How strongly do your friends agree or disagree with the following statements? SELECT ONE FOR EACH <i>Strongly Agree, Agree, Disagree, Strongly Disagree</i></p> <p>a. It is OK for people my age to have sex with a steady boyfriend or girlfriend.</p> <p>b. It is OK for people my age to have sex with several different people in the same month.</p> <p>c. People my age should wait until they are older before they have sex.</p> <p>d. It is OK for people my age to choose not to have sex.</p> <p>e. Condoms should always be used if a person my age has sex.</p> <p>f. Condoms should always be used if a person my age has sex <u>even if the girl uses hormone-based birth control.</u></p> <p>g. Condoms should always be used if a person my age has sex <u>even if the two people know each other very well.</u></p>	<p>ETR Associates Reducing the Risk Student Knowledge, Attitudes, and Skills Survey (RTR-SKASS) Posttest, revised, September 2010</p> <p>Please fill in the answer for each question that best describes what you believe. I believe that...</p> <p><i>Definitely Yes, Probably Yes, Probably Not, Definitely Not</i></p> <p>a. It's OK for people my age to have sex with a steady boyfriend or girlfriend.</p> <p>b. It's OK for people my age to have sex with several different people in the same month.</p> <p>c. People my age should wait until they are older before they have sex.</p> <p>d. It is OK for people my age to choose not to have sex.</p> <p>e. Condoms should always be used if a person my age has sex.</p> <p>f. Condoms should always be used if a person my age has sex <u>even if the girl uses hormone-based birth control.</u></p> <p>g. Condoms should always be used if a person my age has sex <u>even if the two</u></p>				✓			

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2.12	2.13	N/A	N/A	<p>How sure are you that you would be able to say no to having sexual intercourse...</p> <p>SELECT ONE FOR EACH</p> <p><i>I'm sure I could, I probably could, I probably could not, I'm sure I could not</i></p> <p>a. If your partner really wanted to, but you were not ready?</p> <p>b. If you just met someone you really liked and that person wanted to have sex, but you didn't?</p> <p>c. If you had strong sexual feelings for that person?</p> <p>d. If neither you nor your partner had any form of birth control?</p> <p>e. If you have dated for a long time?</p> <p>f. After you have been drinking alcohol?</p>	<p>people know each other very well.</p> <p>A combination of sources from: Reducing the Risk Survey (ETR Associates Reducing the Risk Student Knowledge, Attitudes and Skills Survey (RTR-KASS), posttest, 2010) Kasen, S., Vaughan, R.D., and Walter, H.J. (1993) Self-efficacy for AIDS preventive behaviors among tenth grade students. Health Education Quarterly 19, 187-202.</p> <p>Kasen, Vaughan and Walter/ UCLA Center for Community Health:</p> <ol style="list-style-type: none"> 1. I can ask a new partner to use condoms 2. I can ask a partner I haven't been using condoms with to start using them 3. I can refuse sex when I don't have a condom available 4. I can get a partner to use condoms, even if I'm drunk or high 5. I can get every partner to use male condoms, even if they don't want to <p>RTR-KASS:</p> <ol style="list-style-type: none"> 1. Could you get or buy a condom? 2. Could you talk about using condoms with your partner before having sex? 3. Could you insist on using a condom if your partner didn't want to use one? 4. Could you ask your partner to use condoms even if the two of you had sex before without using condoms? 5. Could you use a condom without spoiling the mood? 				✓				
2.13	2.14	N/A	N/A	If you were going to have sex could you...	A combination of sources from: Reducing the Risk Survey (ETR Associates				✓				

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				<p>SELECT ONE FOR EACH <i>I'm sure I could, I probably could, I probably could not, I'm sure I could not</i></p> <p>a. Get or buy a condom? b. Talk about using condoms with your partner before having sex? c. Insist on using a condom if your partner didn't want to use one? d. Ask your partner to use condoms even if the two of you had sex before without using condoms? e. Use a condom without spoiling the mood? f. Ask a new partner to use condoms? g. Get a partner to use condoms, even if I'm drunk or high? h. Go to a clinic if you need to get tested for HIV/AIDS or another sexually transmitted disease (STD)/ sexually transmitted infection (STI)?</p>	<p>Reducing the Risk Student Knowledge, Attitudes and Skills Survey (RTR-KASS), posttest, 2010 Kasen, S., Vaughan, R.D., and Walter, H.J. (1993) Self-efficacy for AIDS preventive behaviors among tenth grade students</p> <p>Kasen, Vaughan and Walter/UCLA Center for Community Health: <i>How sure are you that you would be able to say NO to having sexual intercourse with someone...</i></p> <ol style="list-style-type: none"> You have known for a few days or less? Whose sex and drug history is not known to you? You have dated for a long time? You want to date again? You have already had sexual intercourse? You want to fall in love with you? Who is pushing you to have sexual intercourse? After you have been drinking alcohol? After you have been smoking marijuana? <p>RTR-KASS <i>How sure are you that you could do what is described?</i></p> <ol style="list-style-type: none"> Could you keep from having sex if your partner really wanted to, but you were not ready? Could you keep from having sex if you just met someone you really liked and that person wanted to have sex, but you didn't? Could you keep from having sex if you had strong sexual feelings for someone? Could you keep from having sex if neither you nor your partner had any form of birth control? 							

TPP Safer Sex Follow-up #	TPP Reducing the Risk and iCuidate! Follow-up #	TPP Safer Sex Baseline #	TPP Reducing the Risk & iCuidate! Baseline #	First Follow-up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Final Risk Outcome	Other (Can Not)	Notes
2.14	2.15	N/A	N/A	<p>Which, if any, of the following worries you or makes you anxious when it comes to sex?</p> <p><i>Please check all that apply.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Sexually-transmitted diseases (STDs)/ sexually transmitted infections (STIs) or HIV <input type="checkbox"/> Pregnancy <input type="checkbox"/> That I won't know what I'm doing <input type="checkbox"/> That my parents or guardians will find out <input type="checkbox"/> Being compared to his or her other sexual partners <input type="checkbox"/> That my feelings will get hurt <input type="checkbox"/> Ruining my reputation <input type="checkbox"/> That it will be painful <input type="checkbox"/> That my friends will find out <input type="checkbox"/> None of these 	<p>-- (2011). <i>Under Pressure: What African-American Teens Aren't Telling You About Sex, Love, and Relationships. Questionnaire and Data Summary By Age</i>, p.12. Washington, DC: The National Campaign to</p> <p>Prevent Teen and Unplanned Pregnancy. Retrieved on June 13, 2012 from http://www.thenationalcampaign.org/underpressure/PDF/under-pressure-data-age.pdf</p>							
2.15	2.16	N/A	N/A	<p>Thinking about your life right now, how important is it to you to avoid getting pregnant/ getting someone pregnant?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Not at all important <input type="checkbox"/> A little important <input type="checkbox"/> Somewhat important <input type="checkbox"/> Very important 	<p>Albert, B. (2012). <i>The Target Speaks: What Young Adults Think About Unplanned Pregnancy</i>, p.15. Washington, DC: The National Campaign to Prevent Teen and Unplanned Pregnancy. Retrieved on June 13, 2012 from http://www.thenationalcampaign.org/resources/pdf/pubs/thetargetspeaks.pdf</p>							
2.16	3.5 NSA; 3.23 SA	N/A	N/A	<p>What do you think are the benefits of waiting to have sexual intercourse?</p> <p>SELECT ONE FOR EACH <i>Strongly Agree, Agree, Disagree, Strongly Disagree</i></p> <ul style="list-style-type: none"> a. Respect for yourself b. Respect from parents c. Keeping true to religious values 	<p>Kaiser Family Foundation: SexSmarts (a series of national surveys of teens about sex, virginity, and the first time) 2003</p> <p>What do you think are the benefits for waiting to have sex?</p> <ul style="list-style-type: none"> • Respect for yourself • Stay in control of your relationship • Respect from parents 				✓			Additional Information on youth who remain abstinent (for possible descriptive analysis)

TPP Safer Sex Follow-up #	TPP Reducing the Risk and iCuidate! Follow-up #	TPP Safer Sex Baseline #	TPP Reducing the Risk & iCuidate! Baseline #	First Follow-up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Final Risk Outcome	Other (Can Monitor)	Notes
				d. Respect from friends e. Not having to worry about pregnancy f. Not having to worry about sexually transmitted diseases (STDs)/ sexually transmitted infections, (STIs) or HIV g. Better chance for a good marriage in the future h. Fewer distractions so you can focus on school work	<ul style="list-style-type: none"> Keeping true to religious values Respect from friends Don't have to worry about pregnancy or STDs One less thing to worry about 							
2.17	2.17	N/A	N/A	How likely is it that you will get pregnant (or get someone pregnant) between now and age 20? SELECT ONE <input type="checkbox"/> Not at all likely <input type="checkbox"/> A little likely <input type="checkbox"/> Somewhat likely <input type="checkbox"/> Very likely	Add Health, Wave 1: (modified) What do you think are the chances that each of the following things will happen to you? 12. You will live to age 35. H1EE12 13. You will be married by age 25. H1EE13 14. You will be killed by age 21. H1EE14 15. You will get HIV or AIDS. H1EE15				✓			
2.18	2.18	N/A	N/A	How likely is it that you will get pregnant (or get someone pregnant) before getting married? SELECT ONE <input type="checkbox"/> Not at all likely <input type="checkbox"/> A little likely <input type="checkbox"/> Somewhat likely <input type="checkbox"/> Very likely	Add Health, Wave 1: (modified) What do you think are the chances that each of the following things will happen to you? 12. You will live to age 35. H1EE12 13. You will be married by age 25. H1EE13 14. You will be killed by age 21. H1EE14 15. You will get HIV or AIDS. H1EE15				✓			

TPP Safer Sex Follow-up #	TPP Reducing the Risk and iCuidate! Follow-up #	TPP Safer Sex Baseline #	TPP Reducing the Risk & iCuidate! Baseline #	First Follow-up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Final Risk Outcome	Other (Can Monitor)	Notes	
2.19	2.19	N/A	N/A	Which of the following best describes how you would feel if you were to get {GUYS: someone} pregnant right now? SELECT ONE <input type="checkbox"/> It would be a disaster <input type="checkbox"/> It would be challenging, and I'm not sure how I would manage <input type="checkbox"/> It would be challenging, but I could manage <input type="checkbox"/> My life wouldn't change much <input type="checkbox"/> It would make my life better	-- (2011). Under Pressure: What African-American Teens Aren't Telling You About Sex, Love, and Relationships. Questionnaire and Data Summary By Age, p.14. Washington, DC: The National Campaign to Prevent Teen and Unplanned Pregnancy. Retrieved on June 13, 2012 from http://www.thenationalcampaign.org/underpressure/PDF/under-pressure-data-age.pdf		✓						
2.20	2.20	N/A	N/A	How strongly do you agree or disagree with the following statements? SELECT ONE FOR EACH <i>Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, Strongly Disagree</i> a. You have goals you want to accomplish before you have a child/another child. b. It is important for you to finish school before you have a child/another child. c. It is important for you to have a job and a stable income before you have a child/another child. d. Having a good marriage seems possible for you.	Combination of items from AAY and items developed by Lina Guzman at Child Trends through interviews with community college students for a qualitative study on relationships and birth control use: From AAY (All About Youth) Study: Having a good marriage seems realistic to me Strongly disagree, Disagree, Agree, Strongly Agree From Lina Guzman: 1. I have goals I want to accomplish before having kids/becoming a parent. 2. It is important to me to finish school, before becoming a parent. 3. It is important to me to have a job and be financially stable before becoming a parent.				✓				

TPP Safer Sex Follow-up #	TPP Reducing the Risk and iCuidate! Follow-up #	TPP Safer Sex Baseline #	TPP Reducing the Risk & iCuidate! Baseline #	First Follow-up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Final Risk Outcome	Other (Can Monitor)	Notes
2.21	2.21	N/A	N/A	Thinking about the future, how likely do you think it is that you will get HIV? SELECT ONE <input type="checkbox"/> Not at all likely <input type="checkbox"/> A little likely <input type="checkbox"/> Somewhat likely <input type="checkbox"/> Very likely	Add Health, Wave 1 What do you think your chances are of getting AIDS?				✓			
2.22	2.22	N/A	N/A	How likely do you think it is that you will get an STD/STI other than HIV? SELECT ONE <input type="checkbox"/> Not at all likely <input type="checkbox"/> A little likely <input type="checkbox"/> Somewhat likely <input type="checkbox"/> Very likely	Add Health, Wave 1 What do you think your chances are of getting another sexually transmitted disease, such as gonorrhea or genital herpes?				✓			
2.23	2.23	3.14	3.14	The next series of questions ask you about decisions you may make to engage in sexual activity <u>in the next year</u> . Do you intend to have oral sex in the next year, if you have the chance? SELECT ONE <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, probably <input type="checkbox"/> No, probably not <input type="checkbox"/> No, definitely not	All About Youth (AAY) Ain1. How likely is it that you will have oral sex in the next year? Ain2 Intent: VS next year 1 1 = Not at all likely 2 = Not very likely 3 = Somewhat likely 4 = Probably likely 5 = Definitely likely 8 = Refuse to Answer				✓			Required performance measure
2.24	2.24	3.15	3.15	Do you intend to have sexual intercourse in the next year, if you have the chance? SELECT ONE <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, probably <input type="checkbox"/> No, probably not	All About Youth (AAY) Ain2. How likely is it that you will have vaginal sex in the next year? Ain2 Intent: VS next year 1 1 = Not at all likely 2 = Not very likely				✓			Required performance measure

TPP Safer Sex Follow-up #	TPP Reducing the Risk and iCuidate! Follow-up #	TPP Safer Sex Baseline #	TPP Reducing the Risk & iCuidate! Baseline #	First Follow-up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Client Risk Outcome	Other (Can Not)	Notes
				<input type="checkbox"/> No, definitely not	3 = Somewhat likely 4 = Probably likely 5 = Definitely likely 8 = Refuse to Answer							
2.25	2.25	3.16	3.16	If you were to have sexual intercourse in the next year, do you intend to use (or have your partner use) a condom? SELECT ONE <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, probably <input type="checkbox"/> No, probably not <input type="checkbox"/> No, definitely not	Developed as a performance measure.				✓			Required performance measure
2.26	2.26	3.17	3.17	If you were to have sexual intercourse in the next year, do you intend to use (or have your partner use) any of these methods of birth control? <ul style="list-style-type: none"> • Condoms • Birth control pills • The shot (Depo-Provera) • The patch • The ring (NuvaRing) • IUD (Mirena or Paragard) • Implants (Implanon) SELECT ONE <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, probably <input type="checkbox"/> No, probably not <input type="checkbox"/> No, definitely not	Developed as a performance measure.				✓			Required performance measure

TPP Safer Sex Follow-up #	TPP Reducing the Risk and iCuidate! Follow-up #	TPP Safer Sex Baseline #	TPP Reducing the Risk & iCuidate! Baseline #	First Follow-up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Final Risk Outcome	Other (Con. Motnal)	Notes
2.27	2.27	6.4	6.4	<p>The next series of questions ask you about relationships.</p> <p>People are different in their sexual attraction to other people. Which of the following best describes your feelings?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> I am only attracted to males</p> <p><input type="checkbox"/> I am attracted to both males and females</p> <p><input type="checkbox"/> I am only attracted to females</p> <p><input type="checkbox"/> I am not attracted to either males or females</p> <p><input type="checkbox"/> I am not sure</p>			✓					
2.28	2.28	N/A	N/A	<p>Right now, do you have a boyfriend or girlfriend—someone in particular you are going out with?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	Added by the Replicate team.		✓					
2.28a →	2.28a	N/A	N/A	<p>For the next question, please indicate how often you have talked about each of the topics listed below with your partner (boyfriend or girlfriend) in the last month?</p> <p><input type="checkbox"/> I didn't have a partner in the last month GO TO 2.29 (Section 3 for SSI)</p> <p><i>10 or more times, 3-9 times, 1-2 times, Never</i></p> <p>a. Preventing pregnancy</p> <p>b. Birth control</p> <p>c. Preventing sexually transmitted diseases (STDs)/ sexually transmitted infections (STIs) or HIV</p> <p>d. What you feel comfortable doing sexually</p>	<p>Source: Teen Sexual Health Research Study. Developed by Johns Hopkins University for Teen PEP</p> <p>How often have you talked about each of the topics listed below with your partner in the last month?</p> <p><input type="checkbox"/> I did not have a partner in the last month</p> <p>MARK (X) ONE <i>Often, Sometimes, Never</i></p> <p>a. Expectations in the relationship</p> <p>b. Pregnancy</p> <p>c. Birth control</p>				✓			

TPP Safer Sex Follow-up #	TPP Reducing the Risk and iCuidate! Follow-up #	TPP Safer Sex Baseline #	TPP Reducing the Risk & iCuidate! Baseline #	First Follow-up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Final Risk Outcome	Other (Can Not)	Notes
				What you <u>do not</u> feel comfortable doing sexually	<ul style="list-style-type: none"> d. Sexually transmitted infections (STIs) e. What you feel comfortable doing sexually f. What you do not feel comfortable doing sexually g. Getting tested for sexually transmitted infections h. HIV/AIDS testing i. Previous number of sexual partners 							
N/A	2.29 → →	3.20	3.20	<p>Have you ever had any of the following: sexual intercourse, oral sex, or anal sex?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes GO TO PART B1</p> <p><input type="checkbox"/> No GO TO PART B2</p>	Developed for the PPA Baseline Survey		✓		✓			

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and ¡Cuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and ¡Cuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Essential Dist. Outcome	Other (non-interv.)	Notes
<p>Part B: Sections 3 and 4 of Part B will vary based on whether the respondent is sexually active (Part B1) or non-sexually active (Part B2). Part B1 is completed by all the participants in Safer Sex (who are all sexually active) and the participants in Reducing the Risk and ¡Cuidate! who are or have been sexually active. Section B2 is for Reducing the Risk and ¡Cuidate! participants who have not had sex. Items in sections 6 and 7 are the same for sexually active and non-sexually active respondents. Items in Sections 3 and 4 for sexually active respondents are listed below, followed by the items in Sections 3 and 4 for non-sexually active respondents and items in Sections 5 and 6.</p> <p>Section 3 B1 (completed by Safer Sex, Reducing the Risk, and ¡Cuidate! participants who have had sex)</p>												
N/A	3.1	4.1	4.1	<p>The next questions are about your sexual behaviors and experiences. Please be as honest as possible. Your answers are confidential and everything you say will be kept private.</p> <p>Just to confirm, have you ever had sexual intercourse, oral sex, or anal sex?</p> <p>SELECT ONE <input type="checkbox"/> No SKIP TO PART B2 <input type="checkbox"/> Yes CONTINUE WITH THIS BOOKLET</p>	Developed for the PPA Baseline Survey						✓	Confirming that respondents are in the correct Part B.
N/A	3.2	4.2	4.2	<p>The first questions are about sexual intercourse. By sexual intercourse, we mean a male putting his penis into a female's vagina.</p> <p>Have you <u>ever</u> had sexual intercourse?</p> <p>SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No GO TO 3.12</p>	<p>Add Health, Wave 1</p> <p>Have you ever had sexual intercourse? When we say sexual intercourse, we mean when a male inserts his penis into a female's vagina.</p>		✓					
3.1	3.3	4.3	4.3	<p>The very <u>first</u> time you had sexual intercourse, what month and year was it?</p> <p>SELECT ONE MONTH AND SELECT ONE YEAR</p>	<p>Add Health, Wave 1</p> <p>In what month [and year] did you have sexual intercourse for the very first time?</p>		✓					
3.2	3.4	4.4	4.4	<p>The very <u>first</u> time you had sexual intercourse, how old were you?</p> <p>____ NUMBER OF YEARS OLD YOU WERE -</p>	<p>Add Health, Wave 1</p> <p>How old were you the first time you had vaginal intercourse?</p>					✓		

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Intermediate Outcome	Intermediate Outcome	Overall Risk Outcome	Other (non-vector)	Notes
				Your best guess is fine.								
3.3	3.5 →	4.9	4.9	Have you had sexual intercourse more than one time? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No GO TO 3.8 (3.6 for SSI)	National Longitudinal Study of Youth (NLSY) R03501.00 YSAQ-303 Have you had intercourse more than once?					✓		
3.4	3.6	4.10	4.10	How many DIFFERENT PEOPLE have you <u>ever</u> had sexual intercourse with, even if only one time? _ _ NUMBER OF PEOPLE - Your best guess is fine.	National Longitudinal Study of Youth, 1997 (NLSY97) R03504.00 YSAQ-306 How many partners have you EVER had intercourse with? This includes any person you had intercourse with, even if it was only once, or if you did not know him or her well?					✓		
3.5	3.7	N/A	N/A	The <u>most recent</u> time you had sexual intercourse, what month and year was it? SELECT ONE MONTH AND SELECT ONE YEAR	Add Health, Wave 1 In what month [and year] did you have sexual intercourse for the very first time?					✓		
3.6	3.8	4.8	4.8	The most recent time you had sexual intercourse, did you or your partner use ...? SELECT ONE FOR EACH Yes/No a. Condoms b. Birth control pills or the patch c. Depo-Provera or other injectable birth control d. NuvaRing or the ring e. Withdrawal or pulling out f. Another method <i>PRINT OTHER METHOD USED</i>	National Longitudinal Study of Youth, 1997 (NLSY97) R USE BIRTH CONTROL FIRST TIME HAD SEX? R03499.00 [YSAQ-301] Survey Year: 1997 Did you or your sexual partner use any birth control method, or do anything to avoid pregnancy such as natural family planning, the FIRST TIME YOU HAD SEXUAL INTERCOURSE?		✓					
3.7	3.9	4.11	4.11	Now, please think about the past 3 months. In the past 3 months, have you had sexual intercourse even once?	From NLSY97 and AAY: From NLSY97: R03506.00 YSAQ-308		✓					

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Intermediate Outcome	Intermediate Outcome	Sexual Risk Outcome	Other (non-sexual)	Notes
	→			<input type="checkbox"/> Yes <input type="checkbox"/> No GO TO 3.12 (3.10 for SSI)	About HOW MANY TIMES have you had sexual intercourse in the last 12 months? From AAY: avs6. During the last 3 months, how many times have you had vaginal sex?							
3.7a	3.9a	4.11a	4.11a	In the past 3 months, how many <u>times</u> , have you had sexual intercourse? __ NUMBER OF TIMES - Your best guess is fine.	From NLSY97 and AAY: From NLSY97: R03506.00 YSAQ-308 About HOW MANY TIMES have you had sexual intercourse in the last 12 months? From AAY: avs6. During the last 3 months, how many times have you had vaginal sex?		✓					
3.8	3.10	4.12	4.12	In the past 3 months, have you had sexual intercourse <u>without</u> you or your partner using a condom? <input type="checkbox"/> Yes, I have had sexual intercourse without using a condom. <input type="checkbox"/> No, I have used a condom each time I have had sexual intercourse. GO TO 3.12 (3.10 for SSI)	All About Youth (AAY): avs7. During the last 3 months, how many times have you had vaginal sex without using a condom? AVS7 VS: times w/o condom (3 mo) 3 0 - 990 = range 998 = Refuse to Answer				✓			
3.8a	3.10a	4.12a	4.12a	In the past 3 months, how many <u>times</u> have you had sexual intercourse <u>without</u> using a condom? __ NUMBER OF TIMES - Your best guess is fine.	All About Youth (AAY): avs7. During the last 3 months, how many times have you had vaginal sex without using a condom? AVS7 VS: times w/o condom (3 mo) 3 0 - 990 = range 998 = Refuse to Answer				✓			

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Intermediate Outcome	Intermediate Outcome	Overall Risk Outcome	Other (non-vertex)	Notes	
3.9	3.11	4.13	4.13	<p>In the past 3 months, have you had sexual intercourse <u>without</u> you or your partner using any of these methods of birth control.</p> <ul style="list-style-type: none"> • Condoms • Birth control pills • The shot (Depo Provera) • The patch • The ring (NuvaRing) • IUD (Mirena or Paragard) • Implants (Implanon) <p><input type="checkbox"/> Yes, I have had sexual intercourse without using any of these types of birth control.</p> <p><input type="checkbox"/> No, I have used at least one of these types of birth control each time I had sexual intercourse.</p> <p>GO TO 3.12 (3.10 for SSI)</p>	<p>NLSY97 R03508.00 [YSAQ-310] Year: 1997</p> <p># TIMES R USED BIRTH CONTROL IN LAST YEAR</p> <p>Thinking about ALL THE TIMES that you have had sexual intercourse in the last 12 months, how many of those times did you or your sexual partner or partners use a method of birth control?</p> <p>0 (Go To R03511.00); 1 TO 4; 5 TO 8; 9 TO 14; 15 TO 19; 20 TO 24; 25 TO 29; 30 TO 34; 35 TO 39; 40 TO 44; 45 TO 49; 50 TO 99999999: 50+</p>						✓		Wording modified for consistency with performance measures
→ 3.9a	3.11a	4.13a	4.13a	<p>In the past 3 months, how many <u>times</u> have you had sexual intercourse <u>without</u> using any of these methods of birth control?</p> <p>____ NUMBER OF TIMES – Your best guess is fine</p>	<p>NLSY97 R03508.00 [YSAQ-310] Survey Year: 1997</p> <p># TIMES R USED BIRTH CONTROL IN LAST YEAR</p> <p>Thinking about ALL THE TIMES that you have had sexual intercourse in the last 12 months, how many of those times did you or your sexual partner or partners use a method of birth control?</p> <p>0 (Go To R03511.00); 1 TO 4; 5 TO 8; 9 TO 14; 15 TO 19; 20 TO 24; 25 TO 29; 30 TO 34; 35 TO 39; 40 TO 44; 45 TO 49; 50 TO 99999999: 50+</p>						✓		

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Immediate Outcome	Intermediate Outcome	Overall Risk Outcome	Other (non-vector)	Notes	
3.10	3.12 →	4.14	4.14	<p>Oral sex is when someone puts his or her mouth on another person's penis or vagina, OR lets someone else put his or her mouth on their penis or vagina.</p> <p>Have you <u>ever</u> had oral sex?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No GO TO 3.17 (3.15 for SSI)</p>	<p>All About Youth (AAY)</p> <p>aos1. These next questions are about oral sex. By oral sex we mean when someone puts his or her mouth on their partner's penis or vagina, or lets their partner put his or her mouth on their penis or vagina. The questions are very personal. Remember all of your answers are kept private.</p> <p>Have you ever had oral sex? AORAL OS: ever had oral sex 1 0 = No 1 = Yes 8 = Refuse to Answer</p>		✓						
3.11	3.13	4.15	4.15	<p>The very <u>first</u> time you had oral sex, what month and year was it?</p> <p>SELECT ONE MONTH AND SELECT ONE YEAR</p>	<p>Add Health, Wave 1:</p> <p>In what [month and] year did you have sexual intercourse for the very first time?</p>		✓						
3.12	3.14	4.16	4.16	<p>How many DIFFERENT PEOPLE have you <u>ever</u> had oral sex with, even if only one time?</p> <p>[_][_] NUMBER OF PEOPLE - Your best guess is fine.</p>	<p>All About Youth (AAY):</p> <p>aos3. How many different boys or girls have you had oral sex with in your life? AOS3 OS: # of partners 3 0 - 990 = range 998 = Refuse to Answer</p>		✓						
3.13	3.15 →	4.17	4.17	<p>Now please think about the past 3 months. In the past 3 months, have you had oral sex, even once?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No GO TO 3.17 (3.15 for SSI)</p>	<p>All About Youth (AAY):</p> <p>aos4. During the last 3 months, how many times have you had oral sex? AOS3MO OS: times in past 3 months 3 0 - 990 = range 998 = Refuse to Answer</p>		✓						
3.13a	3.15a	4.17a	4.17a	<p>In the past 3 months, how many <u>times</u> have you had oral sex?</p>	<p>All About Youth (AAY):</p> <p>aos4. During the last 3 months, how many times</p>		✓						

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Intervention Outcome	Intermediate Outcome	Overall Risk Outcome	Other (non-vertex)	Notes
				<p> NUMBER OF TIMES - Your best guess is fine.</p>	<p>have you had oral sex? AOS3MO OS: times in past 3 months 3 0 - 990 = range 998 = Refuse to Answer</p>							
3.14	3.16	4.18	4.18	<p>In the past 3 months, have you had oral sex <u>without</u> using a condom?</p> <p><input type="checkbox"/> Yes, I have had oral sex without using a condom</p> <p><input type="checkbox"/> No, I have used a condom each time I have had oral sex GO TO 3.17 (3.15 for SSI)</p>	<p>All About Youth (AAY):</p> <p>avs7. During the last 3 months, how many times have you had vaginal sex without using a condom? AVS7 VS: times w/o condom (3 mo) 3 0 - 990 = range 998 = Refuse to Answer</p>					✓		
3.14a	3.16a	4.18a	4.18a	<p>In the past 3 months, how many <u>times</u> have you had oral sex <u>without</u> using a condom?</p> <p> NUMBER OF TIMES – Your best guess is fine.</p>	<p>All About Youth (AAY):</p> <p>avs7. During the last 3 months, how many times have you had vaginal sex without using a condom? AVS7 VS: times w/o condom (3 mo) 3 0 - 990 = range 998 = Refuse to Answer</p>					✓	Modified for consistency with performance measures	
3.15	3.17	4.19	4.19	<p>Anal sex is when a male puts his penis in someone else's anus, or their butt, or someone lets a male put his penis in their anus or butt.</p> <p>Have you <u>ever</u> had anal sex?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No GO TO 3.22 (3.20 for SSI)</p>	<p>All About Youth (AAY):</p> <p>aas1. The next questions are about anal sex. By anal sex we mean when a boy puts his penis in his partner's anus (that is, their butt). The questions are very personal. Remember all of your answers are kept private.</p> <p>Have you ever had anal sex? AANAL Anal sex: ever 1 0 = No 1 = Yes 8 = Refuse to Answer</p>		✓					
3.16	3.18	4.20	4.20	<p>How many DIFFERENT PEOPLE have you <u>ever</u> had anal sex with, even if only one time?</p>	<p>All About Youth (AAY):</p> <p>aas5. How many different boys or girls have you</p>		✓					

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Immediate Outcome	Intermediate Outcome	Sexual Risk Outcome	Other (non-sexual)	Notes
				[_][_] NUMBER OF PEOPLE - Your best guess is fine.	had anal sex with in your life? AAS5 AS: # of partners 3 0 - 990 = range 998 = Refuse to Answer							
3.17	3.19	N/A	N/A	The very <u>first</u> time you had anal sex, what month and year was it? SELECT ONE MONTH AND SELECT ONE YEAR	All About Youth (AAY): aas2. How old were you the first time you had anal sex? AASAGE AS: age of init 2 0 - 17 = range 98 = Refuse to Answer		✓					
	→		4.21	Now please think about the past 3 months. In the past 3 months, have you had anal sex? <input type="checkbox"/> Yes <input type="checkbox"/> No GO TO 3.22 (3.20 for SSI)	All About Youth (AAY): aas6. During the last 3 months, how many times have you had anal sex? AAS3MO AS: # times past 3 mo 3 0 - 990 = range 998 = Refuse to Answer		✓					
3.18a	3.20a		4.21a	In the past 3 months, how many <u>times</u> have you had anal sex? [_][_] NUMBER OF TIMES – Your best guess is fine.	All About Youth (AAY): aas6. During the last 3 months, how many times have you had anal sex? AAS3MO AS: # times past 3 mo 3 0 - 990 = range 998 = Refuse to Answer		✓					
3.19	3.21	4.22	4.22	In the past 3 months, have you had anal sex, <u>without</u> using a condom? <input type="checkbox"/> Yes, I have had anal sex without using a condom <input type="checkbox"/> No, I have used a condom each time I have had anal sex GO TO 3.22 (3.20 for SSI)	All About Youth (AAY) : aas8. During the last 3 months, how many times did you have anal sex without using a condom? AAS8 AS: # times no condom past 3 mo 3 0 - 990 = range 998 = Refuse to Answer				✓			
		→										

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and ¡Cuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and ¡Cuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Immediate Autonomy	Intermediate Autonomy	Control Risk Autonomy	Other (see notes)	Notes
3.19a	3.21a	4.22a	4.22a	In the past 3 months, how many <u>times</u> have you had anal sex <u>without</u> using a condom? [] [] NUMBER OF TIMES – Your best guess is fine.	All About Youth (AAY) : aas8. During the last 3 months, how many times did you have anal sex without using a condom? AAS8 AS: # times no condom past 3 mo 3 0 - 990 = range 998 = Refuse to Answer					✓		
3.20	3.22	N/A	N/A	For the next question please answer how often you do each of the statements below. When you make a decision about your sexual behavior, how often do you... SELECT ONE FOR EACH <i>ALWAYS, MOST OF THE TIME, SOMETIMES, RARELY, NEVER</i> a. Think of the consequences of each possible choice b. First get as much information as you can c. Make it on the spot without worrying about the consequences.	Source: Teen Sexual Health Research Study. Developed by Johns Hopkins University for Teen PEP For the next questions please circle one answer to indicate how often you do each of the statements listed below. MARK (X) FOR EACH <i>Very Often, Often, Not Often, Never</i> 22. When you have to make a decision about your sexual behavior, how often do you think of the consequences of each possible choice? 23. When you have to make a decision about your sexual behavior, how often do you first get as much information as you can? 24. When you have to make a decision about your sexual behavior, how often do you make it on the spot without worrying about the consequences?				✓			
Section 4 B1 (completed by Safer Sex, Reducing the Risk, and ¡Cuidate! participants who have had sex)												
4.1	4.1	N/A	N/A	Have you or your partner ever taken a pregnancy test? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No	Developed by the PPA team.					✓		

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Overall Risk Outcome	Other (non-vector)	Notes
4.2a	4.2a →	4.26a	4.26a	<input type="checkbox"/> Don't know To the best of your knowledge, have you ever been pregnant or gotten someone pregnant, even if no baby was born? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No GO TO 4.3	Prevention Minimum Evaluation Data Set (PMEDS) by Sociometrics 3rd edition, 1999, P.40 Part B, Section 4 Have you ever been pregnant? Be sure to answer yes if you are currently pregnant or have had any past pregnancy that ended in a birth, an abortion, stillbirth, miscarriage, or a live birth after which the baby died. Yes No National Survey of Family Growth (NSFG) – male, Cycle 6, KD.1 To the best of your knowledge, have you ever made someone pregnant?						✓	
4.2b	4.2b	4.26b	4.26b	To the best of your knowledge, how many times have you been pregnant or gotten someone pregnant? _ _ NUMBER OF TIMES	Prevention Minimum Evaluation Data Set (PMEDS) by Sociometrics 3rd edition, 1999, P. 41 Part B, Section 4 Altogether, how many times have you been pregnant? _____ times		✓					
4.2c	4.2c	N/A	N/A	How old were you the first time you got pregnant or got someone pregnant? _ _ NUMBER OF YEARS OLD YOU WERE - Your best guess is fine.	Prevention Minimum Evaluation Data Set (PMEDS) by Sociometrics 3rd edition, 1999, P. 43 Part B, Section 4: How old were you when you had your first pregnancy? _____ years old					✓		

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4.2d	4.2d	4.206	4.26c	<p>Have you ever had a baby or has anyone you got pregnant actually had the baby?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p>	Developed by the PPA team.					✓		
4.3	4.3	4.27	4.27	<p>In the past 12 months, have you spoken with a doctor or nurse about sex, birth control or sexually transmitted diseases (STDs)/ sexually transmitted infections (STIs) or HIV?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p>From NSFG - male , Cycle 6:</p> <p>(In the past 12 months, have you...) Received advice or counseling from a doctor or other medical care provider about using methods of birth control, including condoms?</p> <p>1- =Yes</p> <p>5 = No</p>				✓			
4.4	4.4	4.28	4.28	<p>In the past 12 months, have you been tested by a doctor or nurse for a sexually transmitted disease (STD)/ sexually transmitted infection (STI) or HIV?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p>National Survey of Family Growth (NSFG) – female:</p> <p>STITST12</p> <p>JH-4. In the last 12 months, that is, since (INTERVIEW MONTH, 2001), have you been tested by a doctor or other medical care provider for a sexually transmitted disease like gonorrhea, chlamydia, herpes, or syphilis?</p> <p>1- =Yes</p> <p>5 = No</p>		✓					
4.5	4.5 →	4.29	4.29	<p>In the past 12 months, have you been told by a doctor or nurse that you had a sexually transmitted disease (STD)/ sexually transmitted infection (STI) or HIV?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No Go to Section 5</p>	<p>AAY (All About Youth) Study Baseline v1</p> <p>Have you ever been told by a doctor or other health professional you had an STD?</p> <p>0 = No</p> <p>1 = Yes</p>					✓		

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Intermediate Outcome	Intermediate Outcome	Overall Risk Outcome	Other (non-sexual)	Notes	
4.6	4.6	4.30	4.30	<p>The next series of questions is about the types of sexually transmitted diseases (STDs)/ sexually transmitted infections (STIs) or HIV you have had. In the past 12 months, did you have...?</p> <p>SELECT ONE FOR EACH Yes, No, Don't know</p> <p>a. Chlamydia b. Gonorrhea c. Genital herpes d. Syphilis e. HIV infection f. Human Papilloma virus, also called HPV or genital warts g. Another sexually transmitted disease (STD) or sexually transmitted infection (STI)? <i>PRINT OTHER STD/STI</i></p>	<p>AAY (All About Youth) Study Baseline v1</p> <p>st6. What did you have? Please choose all that apply. 0 = No 1 = Yes</p> <p>AST6A STD list: Chlamydia AST6B STD list: Genital herpes AST6C STD list: Genital Human Papillomavirus (HPV) or genital warts AST6D STD list: Gonorrhea AST6E STD list: HIV</p>						✓		
Section 3 B2 (completed by Reducing the Risk and Cuidate! participants who have not had sex													
N/A	3.1	N/A	4.1	<p>These next questions are for youth who have not had sex. We want to be sure you are in the correct booklet. We know we asked this before but...</p> <p>Just to confirm, have you ever had sexual intercourse, oral sex, or anal sex?</p> <p>SELECT ONE <input type="checkbox"/> Yes STOP! GO TO PART B1 INSTEAD. <input type="checkbox"/> No CONTINUE WITH THIS BOOKLET.</p>	Developed for the PPA Baseline Survey							✓	Confirming that respondents are in the correct Part B.
N/A	3.2	N/A	4.2	<p>The first two questions in this booklet are about your schooling.</p> <p>Do you expect that you will graduate from high school?</p>	Developed for the PPA Baseline Survey							✓	Main value is to maintain similarity in appearance of the first page of the sexually

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Sexual Risk Outcome	Other (non-sexual)	Notes
	→			SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> I already graduated from high school <input type="checkbox"/> No GO TO 3.4								active and non-sexually active versions.
N/A	3.3	N/A	4.3	In what month and year do you expect to graduate from high school? (If you already graduated, in what month and year did you graduate from high school?) SELECT ONE MONTH AND SELECT ONE YEAR	Developed for the PPA Baseline Survey						✓	Main value is to maintain similarity in appearance of the first page of the sexually active and non-sexually active versions.
N/A	3.4	N/A	4.13	Here are some reasons people your age might choose NOT to have sexual intercourse. How important is each of these reasons to you? SELECT ONE FOR EACH <i>Very Important, Somewhat Important, Not too Important, Not at all Important</i> a. I don't want to get a sexually transmitted disease (STD)/ sexually transmitted infection (STI) or HIV b. I don't want to disappoint my parents c. I am too young to have sex d. My boyfriend or girlfriend doesn't want to have sex e. I want to wait until I'm married f. It is against my personal values g. I haven't met the right person yet h. I haven't had the chance i. I don't want to j. FOR GIRLS I do not want to get pregnant k. FOR BOYS I do not want to get a girl pregnant	Kaiser Family Foundation: SexSmarts (a series of national surveys of teens about sex, virginity, and the first time) 2000, 2003 What is the major reason for your decision to wait to have sex? - Check all that apply Worried about pregnancy Worried about HIV/AIDS Worried about STDs Worried about what parents might think Because of what you learned in sex education You haven't met the right person Feel you are too young Concern for your reputation Your partner is not ready You don't have access to birth control or condoms You have not had the opportunity Because of your religion or moral beliefs None of your friends are doing it I could get hurt emotionally (Child Trends question)			✓				

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Intermediate Outcome	Intermediate Outcome	Overall Risk Outcome	Other (non-netco)	Notes
N/A	3.6	N/A	N/A	Do people need religion to have good values? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No	NLSY 97 I don't need religion to have good values. Yes No						<input checked="" type="checkbox"/>	Additional Information on youth who remain abstinent (for possible descriptive analysis)
N/A	3.7	N/A	N/A	Should religious teachings be obeyed in every situation? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No	National Survey of Children's Health (NSCH) The Bible/Koran/Torah/religious teachings should be obeyed in every situation. Yes No						<input checked="" type="checkbox"/>	Additional Information on youth who remain abstinent (for possible descriptive analysis)
N/A	3.8	N/A	N/A	Do you pray every day? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No	National Survey of Children's Health (NSCH) I pray more than once per day. Yes No						<input checked="" type="checkbox"/>	Additional Information on youth who remain abstinent (for possible descriptive analysis)
N/A	3.9	N/A	N/A	Do you think it's embarrassing for people your age to admit they are virgins? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No	National Campaign, Voices Heard 2007 Do you think it's embarrassing for teens to admit they are virgins? Yes No						<input checked="" type="checkbox"/>	Additional Information on youth who remain abstinent (for possible descriptive analysis)

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N/A	3.10	N/A	N/A	Do you think it's embarrassing for girls your age to get pregnant? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No	Developed by the PPA team for the First Follow-up Survey.						✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)
N/A	3.11	N/A	N/A	In the group you hang out with, how important is it to have a girlfriend or boyfriend or to be going out with someone? SELECT ONE <input type="checkbox"/> Very important <input type="checkbox"/> Not too important <input type="checkbox"/> Not important at all	Kaiser Family Foundation's National Survey of Teens, 1998 In the group you hang out with, how important is it to have a (girlfriend or boyfriend/ boyfriend or girlfriend) or be going out with someone? Is it . <input type="radio"/> Very important <input type="radio"/> Not too important <input type="radio"/> Not important at all <input type="radio"/> Don't know <input type="radio"/> Refused					✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)	

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Overall Risk Outcome	Other (non-vertex)	Notes	
N/A	3.12	N/A	N/A	<p>The next few questions are about your access to and use of TV, cell phones, computers and other forms of technology.</p> <p>Do you personally have a phone, computer, or other device that can connect to the internet?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p>Kaiser Family Foundation's <i>Generation M: Media in the Lives of 8-18 Year-Olds</i> study</p> <p>Which of the following items do you, personally, have? (MARK AS MANY ANSWERS AS YOU NEED)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Cell phone <input type="checkbox"/> A laptop computer <input type="checkbox"/> A handheld videogame player (such as Nintendo DS or Sony PSP) <input type="checkbox"/> iPod or other MP3 player <input type="checkbox"/> Discman or Walkman <input type="checkbox"/> Pager <input type="checkbox"/> A personal digital assistant (such as a Palm Pilot or Handspring) <input type="checkbox"/> Any handheld device that connects to the Internet (a Blackberry, a cell phone with Internet connection, etc.) <input type="checkbox"/> None of these 							✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)
N/A	3.13	N/A	N/A	<p>Do your parents have any rules about...?</p> <p>SELECT ONE FOR EACH <i>Yes, No, Not Applicable</i></p> <p>a. The amount of time or when you can text, talk on the phone, watch TV or be on the computer</p> <p>b. Whether or not you can have a profile on a social networking site like MySpace or Facebook</p>	<p>Kaiser Family Foundation's <i>Generation M: Media in the Lives of 8-18 Year-Olds</i> study</p> <p>Do your parents have any rules about...? (MARK ONE ANSWER NEXT TO EACH ITEM) Yes No</p> <ul style="list-style-type: none"> <input type="checkbox"/> How many text messages you can send <input type="checkbox"/> How late at night you can talk on a cell phone <input type="checkbox"/> Whether or not you can have a profile on a social networking site like MySpace and Facebook 							✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Immediate Outcome	Intermediate Outcome	Overall Risk Outcome	Other (see notes)	Notes
N/A	3.14	N/A	N/A	Do your parents have any rules about what you are allowed to watch on TV? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No	Kaiser Family Foundation's <i>Generation M: Media in the Lives of 8-18 Year-Olds</i> study Do your parents have any rules about...? (MARK ONE ANSWER NEXT TO EACH ITEM) Yes No o What you're allowed to watch on TV							✓ Additional Information on youth who remain abstinent (for possible descriptive analysis)
N/A	3.15	N/A	N/A	Do your parents have any rules about what sites you can access on the internet? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No	Kaiser Family Foundation's <i>Generation M: Media in the Lives of 8-18 Year-Olds</i> study Do your parents have any rules about...? (MARK ONE ANSWER NEXT TO EACH ITEM) Yes No o What you're allowed to do on the computer							✓ Additional Information on youth who remain abstinent (for possible descriptive analysis)

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Immediate Outcome	Intermediate Outcome	Short-Term Outcome	Other (non-vertex)	Notes	
N/A	3.16	N/A	N/A	<p>Some people exchange sexy text messages, videos, or pictures of themselves or their friends. How common would you say each of the following is among people your age?</p> <p>SELECT ONE FOR EACH <i>Not Common at all, Not very Common, Fairly Common, Very Common</i></p> <p>a. Sending or posting sexy text messages b. Sending or posting sexy pictures or video</p>	<p>The National Campaign, Sex and Technology Survey, 2008</p> <p>How common would you say each of the following is among people your age?</p> <p>Not Common At All, Not Very, Common, Fairly Common, Very Common</p> <ul style="list-style-type: none"> • Sending sexy messages to someone else • Sharing sexy messages with people other than the one(s) they were meant for • Sending of sexy pictures/video of oneself to someone else • Posting sexy pictures/video of oneself online • Sharing sexy pictures/video with people other than the one(s) they were meant for 							✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)
N/A	3.17 →	N/A	N/A	<p>Have you ever sent or posted a sexy message, picture, or video of yourself by email, IM or text?</p> <p>SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No GO TO 3.19</p>	<p>The National Campaign, Sex and Technology Survey, 2008</p> <p>{ASKED IF SENT OR POSTED SEXY MESSAGES OR PIX/VIDEO TO SOMEONE}</p> <p>What are the reasons that you've sent/posted suggestive messages or nude/semi-nude pictures/videos (of yourself)?</p> <p><i>Please think about any/all of those you've ever sent/posted and mark all that apply.</i></p> <ul style="list-style-type: none"> o Get a guy/girl's attention o Pressured to send it o As a "sexy" present for a boyfriend/girlfriend o To feel sexy 							✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)

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					<ul style="list-style-type: none"> <input type="radio"/> Get a guy/girl to like me <input type="radio"/> As a joke <input type="radio"/> To get positive feedback To be fun/flirtatious <input type="radio"/> To get noticed <input type="radio"/> In response to one that was sent to me <input type="radio"/> Other: _____ <input type="radio"/> Don't know 								
N/A	3.18	N/A	N/A	<p>Which of the following reasons did you have for sending or posting a sexy message, picture or video of yourself?</p> <p>SELECT ONE FOR EACH Yes, No</p> <p>a. To get or keep a guy's or girl's attention b. Your boyfriend/girlfriend pressured you to do it c. As a "sexy" present for a boyfriend or girlfriend d. To get back at someone or cause trouble e. Pressure from friends f. To be fun or to flirt g. Everybody does it h. Another reason? <i>PRINT REASON</i></p>	<p>The National Campaign, Sex and Technology Survey, 2008</p> <p>{ASKED IF SENT OR POSTED SEXY MESSAGES OR PIX/VIDEO TO SOMEONE}</p> <p>What are the reasons that you've sent/posted suggestive messages or nude/semi-nude pictures/videos (of yourself)?</p> <p><i>Please think about any/all of those you've ever sent/posted and mark all that apply.</i></p> <ul style="list-style-type: none"> <input type="radio"/> Get a guy/girl's attention <input type="radio"/> Pressured to send it <input type="radio"/> As a "sexy" present for a boyfriend/girlfriend <input type="radio"/> To feel sexy <input type="radio"/> Get a guy/girl to like me <input type="radio"/> As a joke <input type="radio"/> To get positive feedback To be fun/flirtatious <input type="radio"/> To get noticed <input type="radio"/> In response to one that was sent to me <input type="radio"/> Other: _____ <input type="radio"/> Don't know 						✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)	
N/A	3.19	N/A	N/A	Have you ever <u>received</u> a sexy text message, or a	The National Campaign, Sex and Technology							✓	Additional

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Sexual Risk Outcome	Other (non-sexual)	Notes
	→			<p>picture or video of someone you know?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No GO TO 3.21</p>	<p>Survey, 2008</p> <p>Which of the following, if any have personally ever done? Please mark all that apply.</p> <ul style="list-style-type: none"> <input type="radio"/> Sent a sexually suggestive message to someone (email, IM, text, etc.) <input type="radio"/> Posted a sexually suggestive message to someone's online profile (like on MySpace, Facebook, etc.) <input type="radio"/> NET sent/posted sexually suggestive messages <input type="radio"/> Received a sexually suggestive message from someone <input checked="" type="radio"/> Had a sexually suggestive message shared with me 							Information on youth who remain abstinent (for possible descriptive analysis)
N/A	3.20	N/A	N/A	<p>Have you ever <u>shared or forwarded</u> a sexy text message, or picture or video of someone you know?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p>The National Campaign, Sex and Technology Survey, 2008</p> <p>Which of the following, if any have personally ever done? Please mark all that apply.</p> <ul style="list-style-type: none"> <input type="radio"/> Shared a sexually suggestive with someone other than the one it was meant for 						✓	Additional information on youth who remain abstinent (for possible descriptive analysis)
N/A	3.21	N/A	N/A	<p>For the next question please answer how often you do each of the statements below. When you make a decision about your sexual behavior, how often do you...</p> <p>SELECT ONE FOR EACH ALWAYS, MOST OF THE TIME, SOMETIMES, RARELY, NEVER</p> <p>d. Think of the consequences of each possible choice</p>	<p>Source: Teen Sexual Health Research Study. Developed by Johns Hopkins University for Teen PEP</p> <p>For the next questions please circle one answer to indicate how often you do each of the statements listed below.</p> <p>MARK (X) FOR EACH Very Often, Often, Not Often, Never</p>						✓	

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and ¡Cuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and ¡Cuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Immediate Autonomy	Intermediate Autonomy	Sexual Risk Autonomy	Other (non-sexual)	Notes	
				e. First get as much information as you can f. Make it on the spot without worrying about the consequences.	22. When you have to make a decision about your sexual behavior, how often do you think of the consequences of each possible choice? 23. When you have to make a decision about your sexual behavior, how often do you first get as much information as you can? 24. When you have to make a decision about your sexual behavior, how often do you make it on the spot without worrying about the consequences?								
Section 4 B2 (For Reducing the Risk and ¡Cuidate! participants who have not had sex)													
N/A	4.1	N/A	N/A	The next few questions ask about your community. How often do you feel that there are teachers or other adults in your school who really know you and care about you? SELECT ONE <input type="checkbox"/> Never <input type="checkbox"/> Rarely <input type="checkbox"/> Sometimes <input type="checkbox"/> Most of the Time <input type="checkbox"/> Always	Every Child, Every Promise /America's Promise: How often do you feel teachers and other adults in your school really know you and care about you? Would you say... Never Sometimes Often Very often						✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)	
N/A	4.2	N/A	N/A	How often do you feel there are adults in your neighborhood, or in religious or youth organizations, who really know you and care about you? SELECT ONE <input type="checkbox"/> Never <input type="checkbox"/> Rarely <input type="checkbox"/> Sometimes <input type="checkbox"/> Most of the Time <input type="checkbox"/> Always	Every Child, Every Promise /America's Promise: How often do you feel the adults from your neighborhood or religious or youth organizations really know you and care about you? Never Sometimes Often Very often						✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)	
N/A	4.3	N/A	N/A	How often do you feel safe in your community or	National Survey of Children's Health (NSCH)							✓	Additional

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				neighborhood? SELECT ONE <input type="checkbox"/> Never <input type="checkbox"/> Rarely <input type="checkbox"/> Sometimes <input type="checkbox"/> Most of the Time <input type="checkbox"/> Always	2003 How often do you feel [CHILD] is safe in your community or neighborhood?							Information on youth who remain abstinent (for possible descriptive analysis)
N/A	4.4	N/A	N/A	How often do you feel safe at school? SELECT ONE <input type="checkbox"/> Never <input type="checkbox"/> Rarely <input type="checkbox"/> Sometimes <input type="checkbox"/> Most of the Time <input type="checkbox"/> Always	National Survey of Children's Health (NSCH) 2003 How often do you feel he/she is safe at school?						✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)
N/A	4.5	N/A	N/A	How often do you feel safe at home? SELECT ONE <input type="checkbox"/> Never <input type="checkbox"/> Rarely <input type="checkbox"/> Sometimes <input type="checkbox"/> Most of the Time <input type="checkbox"/> Always	National Survey of Children's Health (NSCH) 2003 How often do you feel he/she is safe at home?						✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)
N/A	4.6	N/A	N/A	During the past 12 months, were you on a sports team or did you take sports lessons after school or on weekends? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No	National Survey of Children's Health (NSCH) During the past 12 months, was [CHILD'S NAME] on a sports team or did he/she take sports lessons after school or on weekends?						✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)

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N/A	4.7	N/A	N/A	<p>During the past 12 months, did you participate in any clubs or organizations after school or on weekends, such as Scouts, a religious group, or Boy's/Girl's Club?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p>National Survey of Children's Health (NSCH)</p> <p>During the past 12 months, did he/she participate in any clubs or organizations after school or on weekends, such as Scouts, a religious group, or Boy/Girl's Club?</p>							✓	Additional Information on youth who remain abstinent (for possible descriptive analysis)
Section 5: Alcohol and Drug Use													
5.1	5.1	5.6	5.6	<p>The next questions are about alcohol and drug use. Please be as honest as possible, and remember that everything you tell us will be kept private.</p> <p>During the past 30 days, not including any times you just had a sip, on how many days did you have at least one alcoholic beverage?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> 0 (zero) days GO TO 5.4</p> <p><input type="checkbox"/> 1 to 4 days</p> <p><input type="checkbox"/> 5 to 10 days</p> <p><input type="checkbox"/> 11 to 25 days</p> <p><input type="checkbox"/> More than 25 days</p>	<p>NLSY 1997 combined with National Survey on Drug Use and Health (NSDUH) - answer choices are based on NSDUH:</p> <p>R03585.00 [YSAQ-365] Survey Year: 1997</p> <p># DAYS R DRINK ALCOHOL LAST 30 DAYS</p> <p>During the last 30 days, on how many days did you have one or more drinks of an alcoholic beverage?</p> <p>0; 1 TO 4; 5 TO 9; 10 TO 14; 15 TO 19; 20 TO 24; 25 TO 29; 30</p>							✓	
5.2	5.2	5.7	5.7	<p>During the past 30 days, on how many days did you have 5 or more drinks in a row?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> 0 (zero) days</p> <p><input type="checkbox"/> 1 to 4 days</p> <p><input type="checkbox"/> 5 to 10 days</p> <p><input type="checkbox"/> 11 to 25 days</p> <p><input type="checkbox"/> More than 25 days</p>	<p>NLSY 1997 combined with National Survey on Drug Use and Health (NSDUH) - answer choices are based on NSDUH:</p> <p>R03587.00 [YSAQ-367] Survey Year: 1997</p> <p># DAYS R HAD 5+ DRINKS PER DAY LAST 30 DAYS</p>							✓	

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					On how many days did you have five or more drinks on the same occasion during the past 30 days? By occasion we mean at the same time or within hours of each other. 0; 1 TO 4; 5 TO 9; 10 TO 14; 15 TO 19; 20 TO 24; 25 TO 29; 30							
5.3	5.3	N/A	N/A	During the past 30 days, on how many days did you get drunk or wasted? SELECT ONE <input type="checkbox"/> 0 (zero) days <input type="checkbox"/> 1 to 4 days <input type="checkbox"/> 5 to 10 days <input type="checkbox"/> 11 to 25 days <input type="checkbox"/> More than 25 days	Developed by the PPA team for the First Follow-up Survey.				✓			
5.4	5.4	5.9	5.9	During the past 30 days, on how many days did you use marijuana, also called weed or pot? SELECT ONE <input type="checkbox"/> 0 (zero) days <input type="checkbox"/> 1 to 4 days <input type="checkbox"/> 5 to 10 days <input type="checkbox"/> 11 to 25 days <input type="checkbox"/> More than 25 days	NLSY 1997 combined with National Survey on Drug Use and Health (NSDUH) - answer choices are based on NSDUH: R03591.00 [YSAQ-371] Survey Year: 1997 # DAYS USE MARIJUANA IN LAST 30 DAYS? On how many days have you used marijuana in the last 30 days? 0; 1 TO 4; 5 TO 9; 10 TO 14; 15 TO 19; 20 TO 24; 25 TO 29; 30				✓			
5.5	5.5	5.10, 5.11, and 5.12	5.10, 5.11, and 5.12	During the past 30 days, on how many days did you use any other type of illegal drugs, an inhalant, or prescription drugs that were not prescribed for you? SELECT ONE <input type="checkbox"/> 0 (zero) days	Combined from multiple baseline items, based on NLSY97, Round 2 YSAQ-372b R21915.00 Have you ever used any drugs like cocaine or crack or heroin, or any other substance not				✓			

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				<input type="checkbox"/> 1 to 4 days <input type="checkbox"/> 5 to 10 days <input type="checkbox"/> 11 to 25 days <input type="checkbox"/> More than 25 days	prescribed by a doctor, in order to get high or to achieve an altered state? 1 Yes (Go to YSAQ-372c) 0 No							
Section 6: Friends and Family												
6.1	6.1	6.3	6.3	In general, how much pressure, if any, do you feel from your friends to have sexual intercourse? SELECT ONE <input type="checkbox"/> A lot of pressure <input type="checkbox"/> Some pressure <input type="checkbox"/> A little pressure <input type="checkbox"/> No pressure	MPR Abstinence: 3.45 Is there any pressure from your friends to have sexual intercourse? No pressure at all A little pressure Some pressure A lot of pressure				✓			
6.2	6.2	N/A	N/A	How often is each of the following statements true for you? SELECT ONE FOR EACH <i>Never True, Sometimes True, Often True, Almost Always True</i> a. I can trust my friends b. My friends want the best for me in my life c. My friends care about me d. My friends are there for me if I need them	4H Study on Positive Youth Development: How true is each of these statements for you? Never True = 0, Always True = 3 I can trust my friends My friends want the best for me in my life My friends care about me My friends are there for me if I need them				✓			
6.3	6.3	2.1	2.1	The next questions ask what your parents know about your activities. By parents, we mean the parents or guardians you live with <u>most</u> of the time. Thinking about the past month, how often did your parent(s) know where you were after school? SELECT ONE <input type="checkbox"/> Always <input type="checkbox"/> Most of the time <input type="checkbox"/> Sometimes	All About Youth, Baseline The next questions ask about how much your parent or parents know about what you do. apm1. How much do your parents know about who your friends really are? apm2. How much do your parents know about where you are most afternoons after school? 0 = Don't know 1 = Know a little 2 = Know a moderate amount		✓					

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Overall Risk Outcome	Other (non-vertex)	Notes
				<input type="checkbox"/> Rarely <input type="checkbox"/> Never	3 = Know a lot 8 = Refuse to Answer AND From Silverberg and Small's Parental Monitoring Scale 1. My parents know where I am after school 3. I tell my parent(s) who I am going to be with before I go out. Never Rarely Sometimes Most of the time Always							
6.4	6.4	2.2	2.2	Thinking about the past month, how often did your parent(s) know who you were going to be with before you went out? SELECT ONE <input type="checkbox"/> Always <input type="checkbox"/> Most of the time <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely <input type="checkbox"/> Never <input type="checkbox"/> I did not go out	All About Youth, Baseline The next questions ask about how much your parent or parents know about what you do. apm1. How much do your parents know about who your friends really are? apm2. How much do your parents know about where you are most afternoons after school? 0 = Don't know 1 = Know a little 2 = Know a moderate amount 3 = Know a lot 8 = Refuse to Answer AND From Silverberg and Small's Parental Monitoring Scale 1. My parents know where I am after school 3. I tell my parent(s) who I am going to be with before I go out. Never Rarely Sometimes		✓					

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Immediate Outcome	Intermediate Outcome	Short-Term Outcome	Other (non-vertex)	Notes
					Most of the time Always							
6.5	6.5	2.3	2.3	Thinking about the past month, how often did your parent(s) know where you were when you went out at night? SELECT ONE <input type="checkbox"/> Always <input type="checkbox"/> Most of the time <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely <input type="checkbox"/> Never <input type="checkbox"/> I did not go out at night	Silverberg and Small's Parental Monitoring Scale Li X, Stanton B, Feigelman S. Impact of perceived parental monitoring on adolescent risk behavior over 4 years. J Adolescent Health 2000;27:49 –56 1. My parents know where I am after school. 2. If I am going to be home late, I am expected to call my parents. 3. I tell my parent(s) who I am going to be with before I go out. 4. When I go out at night, my parent(s) knows where I am. 5. I talk to my parent(s) about the plans I have with my friends. 6. When I go out, my parent(s) asks me where I am going. Answer categories: 1. Never 2. Rarely 3. Sometimes 4. Most of the time 5. Always		✓					

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Overall Risk Outcome	Other (non-netco)	Notes
6.6	6.6	2.4	2.4	<p>If you are going to be home late, do you call your parent(s)?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p>Silverberg and Small's Parental Monitoring Scale Li X, Stanton B, Feigelman S. Impact of perceived parental monitoring on adolescent risk behavior over 4 years. J Adolescent Health 2000;27:49 –56</p> <ol style="list-style-type: none"> 1. My parents know where I am after school. 2. If I am going to be home late, I am expected to call my parents. 3. I tell my parent(s) who I am going to be with before I go out. 4. When I go out at night, my parent(s) knows where I am. 5. I talk to my parent(s) about the plans I have with my friends. 6. When I go out, my parent(s) asks me where I am going. <p>Answer categories: Never, Rarely, Sometimes, Most of the Time, Always</p>		✓					

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Implementation Outcome	Intermediate Outcome	Overall Risk Outcome	Other (non-vertex)	Notes	
N/A	6.7	2.5	2.5	<p>In the last month, how often have you talked about each of the topics listed below with at least one of your parents or guardians?</p> <p>SELECT ONE FOR EACH <i>10 or More Times, 3-9 times, 1-2 Times, Never</i></p> <ul style="list-style-type: none"> a. Your feelings about engaging in sexual activity b. How to resist pressures to have sex c. Pregnancy or birth d. Getting condoms e. Getting birth control f. Ways to protect yourself from sexually transmitted diseases (STDs)/ sexually transmitted infections (STIs) or HIV g. How to have good romantic relationships 	<p>ETR Associates Reducing the Risk Student Knowledge, Attitudes & Skills Survey (RTR-SKASS) Posttest Revised September 2010</p> <p>Please fill in the answer for each question that best describes your conversations on the following topics with your parents or other adults in your family. <i>No, Yes a little, Yes a lot</i></p> <p>15. Have you ever talked about abstinence (not having sex) with your parents or other adults in your family? 16. Have you ever talked about condoms with your parents or other adults in your family? 17. Have you ever talked about ways to protect yourself from getting HIV or an STD with your parents or other adults in your family? 18. Have you ever talked about ways to prevent pregnancy with your parents or other adults in your family?</p>				✓				

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Immediate Autonomy	Intermediate Autonomy	Global Risk Autonomy	Other (non-actor)	Notes	
6.7	6.8	6.6	6.6	<p>This last set of questions, asks <u>about</u> you and your family. You cannot personally be identified by your answers. The information you provide will be combined with the information provided by all the other students completing this survey.</p> <p>Is the person you think of as your mother...?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Your biological mother, that is, the woman who gave birth to you</p> <p><input type="checkbox"/> Your stepmother or adoptive mother</p> <p><input type="checkbox"/> Your foster mother</p> <p><input type="checkbox"/> Your grandmother</p> <p><input type="checkbox"/> Your aunt or your older sister</p> <p><input type="checkbox"/> Some other adult</p> <p><input type="checkbox"/> Don't have a mother or person I think of as my mother GO TO 6.11 (6.10 for SSI)</p>	<p>MPR Abstinence Baseline Survey</p> <p>1.11 If you live with your mother answer the next questions about your mother and put a check here</p> <p>If you don't live with your mother but you see her a lot, answer the next questions about your mother and put a check here</p> <p>If you don't see your mother a lot, is there someone who lives with you and is like a mother to you? If yes, then move to this section and tell us who that person is</p> <p>Stepmother Foster Mother Grandmother Aunt Someone else</p>		✓						
6.8	6.9	N/A	N/A	<p>How well can you and she talk about things that are important to you?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> Not at all well</p> <p><input type="checkbox"/> Not very well</p> <p><input type="checkbox"/> Somewhat well</p> <p><input type="checkbox"/> Very well</p>	<p>National Survey of Children's Health (NSCH) 2007, Section 8:</p> <p>How well can you and [CHILD'S NAME] share ideas or talk about things that really matter?</p> <p>Very Well Somewhat well Not very well Not well at all</p>				✓				
6.9	6.10	6.9	6.9	<p>Is she working now?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> She is not working at a paid job</p> <p><input type="checkbox"/> Yes, she is working part-time or less than 30 hours a week</p>	<p>MPR Abstinence Baseline:</p> <p>1.13 Is she working now?</p> <p>0 She is not working at a job 1 Yes, working part-time (less than 30 hours a</p>		✓						

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				<input type="checkbox"/> Yes, she is working full-time or at more than one job for 30 hours a week or more <input type="checkbox"/> Yes, she works, but I don't know how many hours <input type="checkbox"/> Don't know if she is working	week) 2 Yes, working full-time (30 hours a week or more) -1 Don't know							
6.10	6.11 →	6.14	6.14	Is the person you think of as your father...? SELECT ONE <input type="checkbox"/> Your biological father, that is, the man who is genetically related to you <input type="checkbox"/> Your stepfather or adoptive father <input type="checkbox"/> Your foster father <input type="checkbox"/> Your grandfather <input type="checkbox"/> Your uncle or your older brother <input type="checkbox"/> Some other adult <input type="checkbox"/> Don't have a father or person I think of as a father GO TO 6.14 (6.13 for SS)	MPR Abstinence Baseline 1.20 If you live with your father answer the next questions about your father and put a check here If you don't live with your father but you see him a lot, answer the next questions about your father and put a check here If you don't see your father a lot, is there someone who lives with you and is like a father to you? If yes, then move to this section and tell us who that person is Stepfather Foster Father Grandfather Uncle Someone else		✓					
6.11	6.12	N/A	N/A	How well can you and he talk about things that are important to you? SELECT ONE <input type="checkbox"/> Not at all well <input type="checkbox"/> Not very well <input type="checkbox"/> Somewhat well <input type="checkbox"/> Very well	National Survey of Children's Health (NSCH) 2007, Section 8: How well can you and [CHILD'S NAME] share ideas or talk about things that really matter? Very Well Somewhat well Not very well Not well at all			✓				
6.12	6.13	6.17	6.17	Is he working now?	MPR Abstinence Baseline		✓					

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Immediate Autonomy	Intermediate Autonomy	Control Risk Autonomy	Other (non-vertex)	Notes
				SELECT ONE <input type="checkbox"/> He is not working at a paid job <input type="checkbox"/> Yes, he is working part-time or less than 30 hours a week <input type="checkbox"/> Yes, he is working full-time or at more than one job for 30 hours a week or more <input type="checkbox"/> Yes, he works, but I don't know how many hours. <input type="checkbox"/> Don't know if he is working	1.22 Is he working now? 0 He is not working at a job 1 Yes, working part-time (less than 30 hours a week) 2 Yes, working full-time (30 hours a week or more) -1 Don't know							
6.13	6.14	6.22a	6.22a	Which of the following best describes the relationship between your biological mother and biological father? If one or both of your biological parents have passed away, please answer about their relationship when both were alive. SELECT ONE <input type="checkbox"/> They are married to each other <input type="checkbox"/> They used to be married to each other, but are now separated <input type="checkbox"/> They used to be married to each other, but are now divorced <input type="checkbox"/> They have never been married to each other <input type="checkbox"/> I don't know	Original source: MPR Abstinence Wave 1 The next questions are about your family and family rules. 1.25 My parents . . . MARK (X) ONE 1 _ are married to each other 2 _ are divorced 3 _ are separated 4 _ have never been married to each other -1 _ I'm not sure		✓					
6.14	6.15	6.22b	6.22b	Do your biological mother and biological father live together now? SELECT ONE <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> One or both of my biological parents have passed away <input type="checkbox"/> I don't know	Original source: MPR Abstinence Wave 1 The next questions are about your family and family rules. 1.25 My parents . . . MARK (X) ONE 1 _ are married to each other 2 _ are divorced 3 _ are separated 4 _ have never been married to each other -1 _ I'm not sure		✓					

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Intermediate Outcome	Intermediate Outcome	Survival Risk Outcome	Other (non-vertex)	Notes	
6.15	6.16	6.23	6.23	<p>The next questions are about where you live and who lives with you.</p> <p>Which of the following best describes where you live?</p> <p>SELECT ONE</p> <p><input type="checkbox"/> You live in one home GO TO 6.17 (6.16 for SS)</p> <p><input type="checkbox"/> You live in two or more homes, and go back and forth GO TO 6.18 (6.17 for SS)</p> <p><input type="checkbox"/> You are homeless (living on the street, in a car or shelter, or staying with friends/ relatives) YOU HAVE FINISHED THE SURVEY</p>	<p>MPR Abstinence Wave 1</p> <p>Who do you live with now? MARK (X) ALL THAT APPLY</p> <ol style="list-style-type: none"> 1 My biological mother 2 My biological father 3 My stepmother, adoptive, or foster mother 4 My stepfather, adoptive, or foster father 5 Grandparent(s) 6 Aunt(s), uncle(s) 7 Other adult relative(s) (not brothers and sisters) 8 Other adults I am not related to 9 My older sister(s) 10 My older brother(s) 11 My younger sister(s) 12 My younger brother(s) 13 Cousin(s) 14 Other children I am related to 15 Other children I am not related to 		✓						

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuidate! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuidate! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Intermediate Outcome	Intermediate Outcome	Survival Risk Outcome	Other (non-vertex)	Notes
6.16	6.17	6.24	6.24	<p>Who lives with you in your home?</p> <p>SELECT ALL THAT APPLY</p> <ul style="list-style-type: none"> <input type="checkbox"/> Your biological mother <input type="checkbox"/> Your biological father <input type="checkbox"/> A stepmother or adoptive mother <input type="checkbox"/> A foster mother <input type="checkbox"/> A stepfather or adoptive father <input type="checkbox"/> A foster father <input type="checkbox"/> Your parent's partner, boyfriend, or girlfriend <input type="checkbox"/> Any grandmothers <input type="checkbox"/> Any grandfathers <input type="checkbox"/> Any older brothers or sisters <input type="checkbox"/> Any younger brothers or sisters <input type="checkbox"/> Any aunts, uncles, or other relatives <input type="checkbox"/> Any other people you are not related to <input type="checkbox"/> You live by yourself <p>YOU HAVE FINISHED THE SURVEY</p>	<p>MPR Abstinence Wave 1</p> <p>Who do you live with now? MARK (X) ALL THAT APPLY</p> <ol style="list-style-type: none"> 1 My biological mother 2 My biological father 3 My stepmother, adoptive, or foster mother 4 My stepfather, adoptive, or foster father 5 Grandparent(s) 6 Aunt(s), uncle(s) 7 Other adult relative(s) (not brothers and sisters) 8 Other adults I am not related to 9 My older sister(s) 10 My older brother(s) 11 My younger sister(s) 12 My younger brother(s) 13 Cousin(s) 14 Other children I am related to 15 Other children I am not related to 		✓					

TPP Safer Sex Follow-Up #	TPP Reducing the Risk and iCuide! Follow-Up #	TPP Safer Sex Baseline #	TPP Reducing the Risk and iCuide! Baseline #	TPP Follow-Up Question Text	Question Source(s)	Tracking	Covariate	Intermediate Outcome	Intermediate Outcome	Survival Risk Outcome	Other (non-vector)	Notes
6.17	6.18	6.25	6.25	<p>Who lives with you in each of your homes? SELECT ALL THAT APPLY</p> <p>Select all the people who live with you in your MAIN HOME.</p> <p>Select all the people who live with you in your OTHER HOME(S)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Your biological mother <input type="checkbox"/> Your biological father <input type="checkbox"/> A stepmother or adoptive mother <input type="checkbox"/> A foster mother <input type="checkbox"/> A stepfather or adoptive father <input type="checkbox"/> A foster father <input type="checkbox"/> Your parent's partner, boyfriend, or girlfriend <input type="checkbox"/> Any grandmothers <input type="checkbox"/> Any grandfathers <input type="checkbox"/> Any older brothers or sisters <input type="checkbox"/> Any younger brothers or sisters <input type="checkbox"/> Any aunts, uncles, or other relatives <input type="checkbox"/> Any other people you are not related to <input type="checkbox"/> You live by yourself <p>YOU HAVE FINISHED THE SURVEY</p>	<p>MPR Abstinence Wave 1</p> <p>Who do you live with now? <i>MARK (X) ALL THE PEOPLE WHO LIVE WITH YOU IN YOUR MAIN HOME</i> <i>MARK (X) ALL THE PEOPLE WHO LIVE WITH YOU IN YOUR OTHER HOME(S)</i></p> <ol style="list-style-type: none"> 1 My biological mother 2 My biological father 3 My stepmother, adoptive, or foster mother 4 My stepfather, adoptive, or foster father 5 Grandparent(s) 6 Aunt(s), uncle(s) 7 Other adult relative(s) (not brothers and sisters) 8 Other adults I am not related to 9 My older sister(s) 10 My older brother(s) 11 My younger sister(s) 12 My younger brother(s) 13 Cousin(s) 14 Other children I am related to 15 Other children I am not related to 		✓					