

Formative Tools for Addressing HIV Prevention Preferences Among Adolescent Men Who Have Sex with Men (AMSM)

(Note: this Word version of the survey taken by both populations includes the skip patterns that account for time differences)

Attachment 1c AMSM Web Survey

AMSM Web Survey-Att 1d

Public reporting burden of this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attn: OMB-PRA (0920-0840)

Transgender Web Survey- Att 1e

Public reporting burden of this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attn: OMB-PRA (0920-0840)

Now we would like to ask you a few questions about where you go when or if you need information about health and health related topics.

1. Do you have a doctor or nurse that you see when you are sick or need a physical or a yearly exam?
Unique Q
- Yes.....
No.....
Don't Know.....
Prefer not to Answer.....

2. **[If yes to #1] Have you ever talked to your nurse or doctor about any of the following sexual health issues? Check all that apply:**

NSFG
(varies)*
*modified
Answer options:
TALKPAR
BA-4.

How to say no to sex.....
Sexually transmitted diseases.....
How to prevent HIV/AIDS.....
How to use a condom.....
Methods of birth control.....
Where to get birth control.....
None of the above.....

<Q1=YES AND P_QUEX01=1>

2a. Please indicate the extent to which you agree or disagree with this statement:

CareGender The provider where I most often receive health care services is knowledgeable about health issues affecting transgender and gender nonconforming people.”

Strongly disagree.....
Somewhat disagree.....
Neither agree nor disagree.....
Somewhat agree.....
Strongly agree.....

<P_QUEX01=1>

2b. In the past 6 months, have you had any problems getting health or medical services because of your gender identity or gender presentation?

NeededCareGender

Yes.....
No.....

3. **[If yes to #1 & yes to attraction *in screener*] How comfortable would you be talking with your doctor or nurse about attraction to males?**

NSFG
RISKCHEK1
KK-6a.*
*modified

Very comfortable.....
Comfortable.....
Uncomfortable.....
Very uncomfortable.....
Don't Know.....
Prefer not to Answer

4. **[If yes to #1] Does your doctor or nurse routinely offer you testing for HIV or other sexually transmitted infections?**

C2P*
*modified

Yes.....
No.....
Don't Know.....
Prefer not to Answer.....

5. **Have you used any of these sources of information to learn about dating and relationships or HIV/STD prevention? Check all that apply:**

Unique Q

	HIV/STD Prevention	Dating and Relationships
Parent	<input type="checkbox"/>	<input type="checkbox"/>
Doctor or other health care provider outside the school	<input type="checkbox"/>	<input type="checkbox"/>
School nurse	<input type="checkbox"/>	<input type="checkbox"/>
Teacher or coach	<input type="checkbox"/>	<input type="checkbox"/>
Religious leader	<input type="checkbox"/>	<input type="checkbox"/>
Other trusted adult	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister		<input type="checkbox"/>
Boyfriend or girlfriend	<input type="checkbox"/>	<input type="checkbox"/>
Friends	<input type="checkbox"/>	<input type="checkbox"/>
Social media like Facebook, Twitter, etc.		
Internet	<input type="checkbox"/>	<input type="checkbox"/>
Television or radio	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>
I've not used any of these sources	<input type="checkbox"/>	<input type="checkbox"/>
Don't Know	<input type="checkbox"/>	<input type="checkbox"/>
Prefer not to answer	<input type="checkbox"/>	<input type="checkbox"/>

Now we are going to ask you a few questions about sex education you may have received at home or in school..

6a. (9.) Which of the following topics have you talked with a parent or guardian about? Check all that apply:

NSFG

(varies)*

*modified

- Abstinence.....
- Sexual orientation and identity (that is, what it means to be gay, straight, or bisexual)
- Gender identity and gender expression (that is, what it means to be transgender, or gender nonconforming)
- Pregnancy, how to get pregnant, or how babies are made.....
- Consent for sex
- How to say no to sex.....
- Sexually transmitted diseases.....
- How to prevent HIV/AIDS.....
- How to use a condom.....
- Methods of birth control.....
- Where to get birth control.....
- Getting tested for HIV.....
- Getting tested for STDs.....
- Lubricant use.....
- Vaginal sex.....
- Oral sex.....
- Anal sex.....
- Other, please specify _____
- None of the above.....

6b. (9b.) **[if yes on condom]** How old were you when you first received instruction from a parent or guardian on how to use a condom?

NSFG

SEDCONDG

BA-15* modified

Age in years [open response].....

7. (10.) Have you had any formal sex education at school?

NSFG

SEDSTD

BA-17.*

*modified

- Yes.....
- No.....
- Don't Know.....

7b. (10b.)
NSFG

[if yes] What grade were you in when you first received formal sex education at school?

(varies)*
*modified

- 3rd grade
- 4th grade
- 5th grade.....
- 6th grade
- 7th grade
- 8th grade.....
- 9th grade.....
- 10th grade.....
- 11th grade.....
- 12th grade.....
- Don't know

7c. (10c.)
NSFG

[if yes] Did you receive formal sex education at school before or after the first time you had sex?

(varies)*
*Modified

- I have never had sex.....
- I received sex education before the first time I had sex.....
- I received sex education after the first time I had sex.....
- Don't Know

7d. (10d.)
NSFG

[if yes] What topics did you learn about in your formal sex education at school? Check all that apply:

TALKPAR

BA-4.*
*modified

- Abstinence.....
- Sexual orientation and identity (that is, what it means to be gay, straight, or bisexual)
- Gender identity and gender expression (that is, what it means to be transgender, or gender nonconforming).....
- Pregnancy, how to get pregnant, or how babies are made.....
- Consent for sex
- How to say no to sex.....
- Sexually transmitted diseases.....
- How to prevent HIV/AIDS.....
- How to use a condom.....
- Methods of birth control.....
- Where to get birth control.....
- Getting tested for HIV.....
- Getting tested for STDs.....
- Lubricant use.....

Vaginal sex.....
 Oral sex.....
 Anal sex.....
 Other, please specify _____
 None of the above.....

7e. (10e.)
 Unique Q

[if yes] The formal sex education I received at school was useful to me.

Strongly Agree
 Agree.....
 Neither Agree nor Disagree.....
 Disagree.....
 Strongly Disagree.....

<P_QUEX01=0 AND GAY OR BISEXUAL IDENTIFIED IN SCREENER-complete full table below, IF QUESTIONING/UNSURE in screener, ask only Q15 (bottom row)]_

For the next question, we are going to ask you about your sexual identity. Please tell us whether you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with the following statements.

8. (13.) 9. (14.) 10. (15.)	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I feel that being gay/bisexual has allowed me to express a natural part of my sexual identity.					
I wish I weren't gay/bisexual.					
Most people who live near where I do are tolerant of gays and bisexuals.					

<P_QUEX01=1>

[IF TRANS OR OQUEER IDENTIFIED IN SCREENER. THIS INCLUDES SELECTING BORN MALE AND IDENTIFY AS FEMALE OR BORN FEMALE AND IDENTIFY AS MALE]

For the next question, we are going to ask you about your gender identity. Please tell us whether you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree with the following statements.

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
8a. I feel that being transgender or gender nonconforming has allowed me to express a natural part of myself					
9a. I wish I weren't transgender or gender nonconforming.					
10a. Most people who live near where I do are tolerant of transgender or gender nonconforming individuals					

<P_QUEX01=1>

[IF TRANS OR GENDERQUEER IDENTIFIED IN SCREENER]

10b. The next set of questions ask about your experiences with transitioning (that is, affirming your gender). If any of the following questions are not applicable to you, please select 'This does not apply to me.'

Have you told another person about being transgender or gender nonconforming?

Yes.....

No.....

This does not apply to me.....

<P_QUEX01=1>

[if yes, Parallel question and response options to outness question 56b]

Below is a list of people you may have told. Please check all that apply. Have you told:

56b.

NHBS YMSM

DM14b.1/2/3/4

5/7*

*modified

- Gay, lesbian, bisexual, or transgender friends.....
- Friends who are NOT gay, lesbian, bisexual or transgender.....
- Your mother or the woman who raised you.....
- Your father or the man who raised you.....
- Other family members.....
- A teacher.....
- A coach.....
- A school guidance counselor, social worker, or psychologist
- A counselor or therapist outside of school
- A religious leader (e.g., priest, rabbi, imam, or preacher)
- A health care provider.....
- Don't Know.....
- Prefer not to Answer.....

<P_QUEX01=1>

[if yes to mother] How did your mother or the woman who raised you respond?

56b-b.

NHBS YMSM

DM14b.3./3a.*

*modified

- Very Positively.....
- Positively.....
- Neither positively nor negatively.....
- Negatively.....
- Very Negatively.....
- Don't Know.....
- Prefer not to Answer.....

<P_QUEX01=1>

[if yes to father] How did your father or the man who raised you respond?

56b-c.

NHBS YMSM

DM114b.4/4a*

*modified

- Very Positively.....
- Positively.....
- Neither positively nor negatively.....
- Negatively.....
- Very Negatively.....

Don't Know.....
Prefer not to Answer.....

<P_QUEX01=1>

10b1. [if yes] How old were you when you FIRST told another person about being transgender or gender nonconforming?
AgeTransDisclose

| ____ | ____ | Years-old/ _____

<P_QUEX01=1>

54c. [if yes] In general, how supportive is your family of you being transgender or gender nonconforming?
FamSupportGender

- 1 Very supportive
- 2 Somewhat supportive
- 3 Not very supportive
- 4 Not at all supportive
- 5 This does not apply to me

<P_QUEX01=1>

10c. Have you changed your outward appearance to affirm your gender (e.g., clothing, hairstyle)?

Yes.....
No.....
This does not apply to me.....

<P_QUEX01=1>

10d. [if yes] Do you live full-time in your identified gender?
SocialGenderAffirm

Yes
No (*Skip to MedicalGenderAffirm*)
This does not apply to me

<P_QUEX01=1>

10e. [if yes] How old were you when you FIRST began living full-time in your identified gender?
AgeSocialGenderAffirm

| ____ | ____ | Years-old

10f. Have you taken cross-sex hormones or pubertal blockers or had any surgery to affirm your gender?

MedicalGenderAffirm

- Yes
- No but I plan to (*Skip to LegalGenderAffirm*)
- No and I do not plan to (*Skip to LegalGenderAffirm*)
- This does not apply to me

<P_QUEX01=1>

10g. [if yes] How old were you when you first sought out any form of gender-affirming medical services (i.e., cross-sex hormones, pubertal blockers, surgery to transition)?

AgeMedicalGenderAffirm

| ____ | ____ | Years-old

<P_QUEX01=1>

10h. [if yes] Which medical interventions have you used to affirm your gender? Check all that apply:

TypesMedicalAffirm

- Pubertal blockers (to inhibit puberty)
- Hormones (estrogen or testosterone)
- Breast Implants (breast augmentation)
- Chest Reconstruction/Mastectomy (that is, top surgery)
- Breast Reduction (no mastectomy)
- Facial or neck surgery (for example, nose job, cheek implants, forehead lift, tracheal shave)
- Abdominal surgery (hysterectomy, oophorectomy)
- Lower feminizing surgery (vaginoplasty - creation of a vagina)
- Lower masculinizing surgery (metoidioplasty, phalloplasty - creation of a microphallus, phallus, or penis)
- Other (Please Specify: _____)
- This does not apply to me

<P_QUEX01=1>

10i. [if yes to injection practices in AMSM survey] Have you ever injected hormones (or been injected by someone else with hormones) that were NOT given to you in a doctor's office or by a doctor or nurse?

Non-RXhormone1

- 1 Yes
- 0 No

<P_QUEX01=1>

10j. Have you legally affirmed your gender (i.e., changed your name on your state issued ids and/or birth certificate)?

LegalGenderAffirm

- 1 Yes
- 2 No
- 3 This does not apply to me

The next few questions will ask about gender expression or the way in which we express our gender every day.

10k (55). A person's appearance, style, or dress may affect the way people think of them. On average, how do you think people would describe your appearance, style, or dress? (Choose one answer)

Appear

- 1 Very feminine
- 2 Somewhat feminine
- 3 Equally feminine and masculine
- 4 Somewhat masculine
- 5 Very masculine

10l. A person's mannerisms (such as the way they walk or talk) may affect the way people think of them. On average, how do you think people would describe your mannerisms? (Choose one answer)

Manner

- 1 Very feminine
- 2 Somewhat feminine
- 3 Equally feminine and masculine
- 4 Somewhat masculine
- 5 Very masculine

<P_QUEX01=1>

10m. People can tell I'm transgender or gender nonconforming even if I don't tell them.

VisibleNonconform

- 1 Always
- 2 Most of the time
- 3 Sometimes
- 4 Occassionally
- 5 Never
- 6 This does not apply to me

<P_QUEX01=1>

10n. For each of the following items, please tell us how much you agree (select one option for each statement).

	Strongly agree	somewhat agree	neither agree/disagree	somewhat disagree	strongly disagree	Does not apply to me
It is important to me that my preferred name and pronouns (he, she, they) are always used at home						
It is important to me that my preferred name and pronouns are always used at school						
It is important to me that my preferred name and pronouns are always used at the places where I receive healthcare						
<u>It is important to me</u> that my health care provider asks me what words I use for my body parts and describes my body using those words.						

[IF SC10=MALES OR MALES AND FEMALES, CONTINUE TO Q22. ELSE SKIP TO Question 19 (questions on social media use)]

17. (22.) Thinking about your entire life, how many male sex partners have you had?
NSFG
MALEPRTS [numerical answer].....
KJ-1. Don't Know.....
Prefer not to Answer.....

<P_QUEX01=1>

[IF SC10 IN [2,3,4] THEN CONTINUE TO Q17a. ELSE SKIP TO Question 19 (questions on social media use)]

17a. Thinking about your entire life, how many sex partners have you had?
NSFG [numerical answer].....
MALEPRTS
KJ-1. Don't Know.....
Refuse to Answer.....

<P_QUEX01=1>

17b.
[If 17a='1 person' Was this person] [if respond to 17a with a number Were any of these people]:

Please check all that apply.

- Male (cisgender, not transgender)
- Female (cisgender, not transgender)
- Trans-male (trans man, female to male, trans masculine person)
- Trans-female (trans woman, male to female, trans feminine person)

12. (17.) Thinking back to the first time you ever had any sexual experience of any kind with a male partner, how old were you?

NHBS YMSM
SX1f. Age in years [open response].....
M_MDBUTM*
*modified

<P_QUEX01=1>

12a. Thinking back to the first time you ever had any sexual experience of any kind with another person, how old were you?

NHBS YMSM
SX1f. Age in years [open response].....
M_MDBUTM*
*modified

13. (19.) Have you ever performed oral sex on a male, that is, put his penis in your mouth?

NSFG
GIVORALM
KH-1.

Yes.....
No.....
Don't Know.....
Prefer not to Answer.....

<P_QUEX01=1>

13a. Have you ever performed oral sex on someone with a penis, that is, put their penis in your mouth?

NSFG
GIVORALM
KH-1.

Yes.....
No.....
Don't Know.....
Refuse to Answer.....

14. (19b.)

Has a male ever performed oral sex on you, that is, put your penis in his mouth?

NSFG
GETORALM
KH-2.

Yes.....
No.....
Don't Know.....
Prefer not to Answer.....

<P_QUEX01=1>

14a. Has someone ever performed oral sex on you, that is, put their mouth on your genitals?

NSFG
GETORALM
KH-2.

Yes.....
No.....
Don't Know.....
Refuse to Answer.....

14c. (19c.)

[if yes oral sex] How old were you when you had oral sex with a male for the first time?_

Unique Q

Age in years [open response].....
Don't Know.....
Prefer not to Answer.....

<P_QUEX01=1>

14d. [if yes oral sex] How old were you when you had oral sex for the first time (performed or received)?_

Unique Q

Age in years [open response].....
Don't Know.....
Refuse to Answer.....

14e. (19d.) **[if yes oral sex/Q14 (Q19)] How many males have you had oral sex with during your lifetime?**

Unique Q

1 male.....

2 males.....

3 males.....

4-5 males.....

6-10 males.....

11-20 males.....

More than 20 males.....

Don't Know.....

<P_QUEX01=1>

14f. **[if yes oral sex/Q14 (Q19)] How many people have you had oral sex with during your lifetime?**

Unique Q

1 person.....

2 people.....

3 people.....

4-5 people.....

6-10 people.....

11-20 people.....

More than 20 people.....

Don't Know.....

<P_QUEX01=1>

14g. **[If 14f='1 person' Was this person] [if respond to 14f with a number Were any of these people]:**

Please check all that apply.

Male (cisgender, not transgender)

AMSM QUESTIONNAIRE - 14

Female (cisgender, not transgender)
Trans-male (trans man, female to male, trans masculine person)
Trans-female (trans woman, male to female, trans feminine person)

15. (20.) **Has another male ever put his penis in your anus or butt (receptive anal sex, when you were the bottom)?**

NSFG
ANALSEX2 Yes.....
KH-3. No.....
 Don't Know.....
 Prefer not to Answer.....

<P_QUEX01=1>

15a. **Has someone ever put their penis in your anus or butt (receptive anal sex, when you were the bottom)?**

NSFG
ANALSEX2 Yes.....
KH-3. No.....
 Don't Know.....
 Refuse to Answer.....

15b. (20b.) **[if yes R anal sex/Q15 (Q20)] How old were you when you had receptive anal sex, where he put his penis in your anus (butt), for the first time?**

Unique Q [Age _ _].....
 Don't Know.....
 Prefer not to Answer.....

<P_QUEX01=1>

15b1. **[if yes R anal sex/Q15 (Q20)] How old were you when you had receptive anal sex, where someone put their penis in your anus (butt), for the first time?**

Unique Q [Age _ _].....
 Don't Know.....
 Refuse to Answer.....

15c. (20c.) **[if yes R anal sex/Q15] During your lifetime, with how many males have you had receptive anal sex with, where he put his penis in your anus (butt)?**

AMSM QUESTIONNAIRE - 15

Unique Q

1 male.....

2 males.....

3 males.....

4-5 males.....

6-10 males.....

11-20 males.....

More than 20 males.....

Don't Know.....

Prefer not to Answer.....

15d. (20d.) **[if yes R anal sex/Q15]** Did your partner use a condom the last time you had receptive anal sex with a male?

NSFG

ANALCONDM1 Yes.....

KH-3b. No.....

Don't Know.....

Prefer not to Answer.....

<P_QUEX01=1>

15e. **[if yes R anal sex/Q15]** Did your partner use a condom the last time you had receptive anal sex?

NSFG

ANALCONDM1 Yes.....

KH-3b. No.....

Don't Know.....

Refuse to Answer.....

16. (21.) **Have you ever put your penis in a male's anus or butt (insertive anal sex, when you were the top)?**

NSFG
ANALSEX3
KH-4.

Yes.....
No.....
Don't Know.....
Prefer not to Answer.....

<P_QUEX01=1>

16a.

NSFG
ANALSEX3
KH-4.

[FILTER out R's with no penis, SC7=1 AND 10H=8 OR SC7=2 AND 10H NOT EQUAL TO 9]] Have you ever put your penis in someone's anus or butt (insertive anal sex, when you were the top)?

Yes.....
No.....
Don't Know.....
Refuse to Answer.....

16b. (21b.)

[if yes I anal sex/Q16] How old were you when you had insertive anal sex, where you put your penis in his anus (butt), for the first time?

Unique Q

[Age _ _].....
Don't Know.....
Prefer not to Answer.....

<P_QUEX01=1>

16b1.

[if yes I anal sex/Q16] How old were you when you had insertive anal sex, where you put your penis in their anus (butt), for the first time?

Unique Q

[Age _ _].....
Don't Know.....

Prefer not to Answer.....

16c. (21c.)

[if yes I anal sex/Q16] During your lifetime, with how many males have you had insertive anal sex, where you put your penis in his anus (butt)?

Unique Q

1 male.....
2 males.....

- 3 males.....
- 4-5 males.....
- 6-10 males.....
- 11-20 males.....
- More than 20 males
- Don't Know.....
- Prefer not to Answer.....

<P_QUEX01=1>

16c1.

[if yes I anal sex/Q16] During your lifetime, with how many people have you had insertive anal sex, where you put your penis in their anus (butt)?

Unique Q

- 1 person.....
- 2 people.....
- 3 people.....
- 4-5 people.....
- 6-10 people.....
- 11-20 people.....
- More than 20 people

<P_QUEX01=1>

16c2.

[If 16c1='1 person' Was this person] [if respond to 16c1 with a number Were any of these people]:

Please check all that apply.

- Male (cisgender, not transgender)
- Female (cisgender, not transgender)
- Trans-male (trans man, female to male, trans masculine person)
- Trans-female (trans woman, male to female, trans feminine person)

16d. (21d.)

[if yes I anal sex/Q16] Did you use a condom the last time you had insertive anal sex with a male?

NSFG

ANALCONDM2

KH-4b.

- Yes.....
- No.....
- Don't Know.....
- Prefer not to Answer.....

<P_QUEX01=1>

16d1.

[if yes I anal sex/Q16] Did you use a condom the last time you had insertive anal sex?

NSFG

ANALCONDM2

KH-4b.

- Yes.....
- No.....
- Don't Know.....
- Refuse to Answer.....

<P_QUEX01=1>

17c. [For those who respond that they have a vagina (SC7=2 and 10h not equal to 9 OR 10h=8)]

Has someone ever put their penis in your vagina (frontal sex)?

- Yes.....
- No.....
- Don't Know.....
- Prefer not to Answer.....

<P_QUEX01=1>

17d. [if yes R vaginal sex] How old were you when you had vaginal (frontal) sex, where someone put their penis in your vagina (front hole), for the first time? _

- Unique Q
- [Age _ _].....
 - Don't Know.....
 - Prefer not to Answer.....

<P_QUEX01=1>

17e. [if yes R vaginal sex] During your lifetime, with how many people have you had receptive vaginal (frontal) sex with, where they put their penis in your vagina (front hole)?

- Unique Q
- 1 person.....
 - 2 people.....
 - 3 people.....
 - 4-5 people.....
 - 6-10 people.....
 - 11-20 people.....
 - More than 20 people.....
 - Don't Know.....
 - Prefer not to Answer.....

<P_QUEX01=1>

17f. [if yes R vaginal sex] Did your partner use a condom the last time you had receptive vaginal (frontal) sex?

NSFG
ANALCONDM1 Yes.....
KH-3b. No.....
Don't Know.....
Prefer not to Answer.....

18. (18.) Have you ever been forced to have sexual intercourse when you did not want to?

YRBS Q20 Yes.....
No.....

[If yes to Q18 (Q18), provide weblink to the following websites for additional resources: childwelfare.gov or another fed resource on child/abuse and neglect]

The following questions ask about how you use social media.

19. (6.) About how often do you use social networking sites/apps (e.g., Facebook, Twitter, Instagram)?
Please do not include dating sites or apps.

PEW
Several times a day.....
About once a day.....
4 to 6 days a week.....
1 to 3 days a week.....
Every few weeks.....
Less often.....
Never.....
Don't Know.....
Prefer not to Answer.....

19b. (6b.) (if more than never to Q6 & yes to sexually active in screener) How many of your male sex partners have you ever met using social networking sites/apps (e.g., Facebook, Twitter, Instagram)?

Provide actual number____
I have never used a social media site to meet a male sex partner.....
Don't Know.....
Prefer not to Answer.....

20. (7.) About how often do you visit dating or hook-up apps (e.g., Grindr, Tinder, Scruff)?

Several times a day.....
About once a day.....
4 to 6 days a week.....
1 to 3 days a week.....
Every few weeks.....

Every few months.....
Less often.....
Never.....
Don't Know.....
Prefer not to Answer.....

20b. (7b.)

(if more than never to Q19 & yes to sexually active in screener) How many of your male sex partners have you ever met using dating or hook-up apps (e.g., Grindr, Tinder, Scruff)?

Provide actual number____

I have never used a a dating or hook-up app to meet a male sex partner.....

Don't Know.....

Prefer not to Answer.....

21. (8.)

YRBS Optional Q

During the past 30 days, have you texted, e-mailed, or posted electronically a revealing or sexual photo of yourself to someone?

Yes.....

No.....

Don't Know.....

For the following section, skip logic programmed for the following:

[If no to sexually contact in the screener, then skip to Substance Use Section]

[Continue to this section if sexually active in screener with females and/or males.]

This next section is about the last person with whom you have had sexual contact. That person might be male, female, or transgender and you might have had oral, vaginal, or anal sex with them. By oral sex, we mean putting your mouth on someone else's penis or vagina or when your partner does this to you. By vaginal sex, we mean when a penis is inside a vagina. By anal sex, we mean when your penis is inside your partner's anus or rectum, or your partner's penis is inside your anus or rectum.

22. (23.)

AGE

[Last sex partner] How old is the person you last had sex with?

NHBS YMSM
SX53.
AGEP2*
*modified

[Age __]
Don't Know
Prefer not to Answer

[Last sex partner] Please indicate this person's race or ethnic background. Are they...?

23. (24.)

RACE

NHBS YMSM

SX23.

RACEP1

Select One.

Ethnicity:

Hispanic or Latino.....

Not Hispanic or Latino.....

Don't know.....

Prefer not to answer.....

Select One or More.

Race:

White.....

Black or African American.....

American Indian or Alaska Native.....

Native Hawaiian or Other Pacific Islander.....

Asian.....

Don't Know.....

Prefer not to Answer.....

24. (25.) **[Last sex partner] What is this person's gender?**

GENDER
NHBS YMSM
SX24.
SEXP1*

Male (cisgender, not transgender).....
 Female (cisgender, not transgender).....
 Trans-male (trans man, female to male, trans masculine person)
 Trans-female (trans woman, male to female, trans feminine person)
 Don't Know.....
 Prefer not to Answer.....

*modified

25. (26.) **[Last sex partner] Which of the following best describes your relationship with the last person you had sex with?**

RELATIONSHIP
TYPE
REVISED FROM
BAGLY

Serious
 Casual.....
 Don't Know.....
 Prefer not to Answer

26. (27.) **[Last sex partner] At the time you first had sex with this person, how long had you known them?**

LENGTH KNOWN
NHBS YMSM
SX28.
KNOWNP1

Did not know this person/anonymous
 Less than 1 week.....
 1 week to 1 month.....
 2 to 5 months.....
 6 months to 11 months.....
 1 year or more.....
 Don't Know.....
 Prefer not to Answer.....

27. (28.) **[Last sex partner] [If last sex partner serious relationship or casually dating]**
As far as you know, was your last sex partner having sex with other people while you were in a relationship? Would you say he/she:

CONCURRENCY
Partner
NHBS YMSM
SX30.
ROTHPAP1*
*modified

Definitely was not.....
 Probably was not.....
 Not sure either way.....
 Probably was.....
 Definitely was.....
 Don't Know.....
 Prefer not to Answer.....

28. (29.) **[Last sex partner]** During your last sexual relationship, did you have sex with people other than your main partner?

CONCURRENCY

Self Yes.....

NHBS YMSM No.....

SX30. Don't Know.....

ROTHPAP1* Prefer not to Answer.....

*modified

29. (30.) **[Last sex partner]** The last time you had sex with this person, did you know their HIV status?

HIV STATUS

Known1

NHBS YMSM Yes.....

SX34. No.....

KNOHIVP1 Don't Know.....

Prefer not to Answer.....

30. (31.) **[if yes HIV status]** What was this person's HIV status?

HIV STATUS

Known2

NHBS YMSM Negative, that is no, this person does not have HIV.....

SX35. Positive, that is yes, this person does have HIV.....

HIVSTP1* I don't know.....

*modified Prefer not to Answer.....

[If Q22/Q17a=0 skip to Q32]

31. Now, thinking about all of the people you have ever had sex with, did any of them overlap in time? In other words, did you start a new sexual relationship before ending a previous sexual relationship?

NATSAL

Yes.....

No.....

Don't know.....

Prefer not to Answer.....

Some people your age report drinking alcohol or using other drugs. We have some questions about whether you have ever drunk or used drugs. Please answer as accurately as you can. Remember that your answers are confidential.

32. (32.)
YRBSS Q41

During your life, on how many days have you had at least one drink of alcohol?

- A. 0 days
- B. 1 or 2 days
- C. 3 to 9 days
- D. 10 to 19 days
- E. 20 to 39 days
- F. 40 to 99 days
- G. 100 or more days

If you have concerns or questions about your alcohol or drug use, more information can be found here: <https://teens.drugabuse.gov/have-a-drug-problem-need-help>.

[If response to Q32 is over 0 then continue to Q32b. Else Skip to Q33]

32b. (32b.)
YRBSS Q43

During the past 30 days, on how many days, if any, did you have at least one drink of alcohol?

- 0 days.....
- 1 or 2 days.....
- 3 to 5 days.....
- 6 to 9 days.....
- 10 to 19 days.....
- 20 to 29 days.....
- All 30 days.....

32c. (32c.)
YRBSS Q44

[if yes] During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?

- 0 days.....
- 1 day
- 2 days
- 3 to 5 days.....
- 6 to 9 days.....
- 10 to 19 days.....

- 20 to 29 days.....
- All 30 days.....

33. (33.)

YRBSS Q48

During your life, how many times have you used marijuana? (Marijuana is also called grass, pot, weed, or reefer)_

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 to 39 times
- F. 40 to 99 times
- G. 100 or more times

If you have concerns or questions about your alcohol or drug use, more information can be found here: <https://teens.drugabuse.gov/have-a-drug-problem-need-help>.

33b. (33b.)

YRBSS Q49

[if >0] During the past 30 days, how many times did you use marijuana?

- 0 times.....
- 1 or 2 times.....
- 3 to 9 times.....
- 10 to 19 times.....
- 20 to 39 times.....
- 40 or more times.....

34. (34.) During your life, how many times have you used any of the following substances?

Prescription drugs <u>without a doctor's prescription</u> (such as OxyContin, Percocet, Vicodin, Codeine, Adderall, Ritalin, or Xanax)	0 times, 1 or 2 times, 3-9 times, 10-19 times, 20-39 times, 40 or more times.
Methamphetamines (also called speed, crystal meth, ice)	0 times, 1 or 2 times, 3-9 times, 10-19 times, 20-39 times, 40 or more times.
Cocaine (also called powder, crack, or freebase)	0 times, 1 or 2 times, 3-9 times, 10-19 times, 20-39 times, 40 or more times.
Ecstasy (also called molly, MDMA)	0 times, 1 or 2 times, 3-9 times, 10-19 times, 20-39 times, 40 or more times.
Heroin (also called smack, junk, or China White)	0 times, 1 or 2 times, 3-9 times, 10-19 times, 20-39 times, 40 or more times.

If you have concerns or questions about your alcohol or drug use, more information can be found here: <https://teens.drugabuse.gov/have-a-drug-problem-need-help>.

35. (35.)

During your life, how many times, if any, did you use a needle to inject something into your body that wasn't prescribed to you (steroids, heroin or other drugs, peptides, silicone, someone else's hormones)?

YRBSS Q58*

*modified

- 0 times.....
- 1 or 2 times.....
- 3 to 9 times.....
- 10 to 19 times.....
- 20 to 39 times.....
- 40 or more times.....

35b. (35b.)

[if yes needle] If you used a needle to inject something into your body during the past 6 months, did you share a needle or works with anyone?

YRBSS

- Yes.....
- No.....

Next, we are going to ask you about your experience with testing for conditions such as HIV. While these questions can be sensitive, we ask that you do the best you can to answer them.

36. (36.)

NSFG (Male)

Section C

HIVTEST, IF-2.*

*modified

Have you ever been tested for HIV, the virus that causes AIDS?

- Yes.....
- No.....
- Don't Know.....

36b-yes.

(36b_yes.)

Unique Q

3/16 discussions

[if yes] Have you been tested for HIV, the virus that causes AIDS, during the past 12 months?

- Yes.....
- No.....
- Don't Know.....

[if yes] Last time you were tested, where did you get tested for HIV, the virus that causes AIDS?

36c-yes.
(36c_yes.)

Unique Q

3/16 discussions

- Private doctor's office or HMO
- Community health clinic, community clinic, public health clinic,
- Family planning or Planned Parenthood clinic
- Your employer or company clinic
- Parent's employer or company clinic
- School or school-based clinic
- Hospital outpatient clinic
- Hospital emergency room
- Urgent care center, urgi-care, or walk-in facility
- Sexually transmitted disease (STD) clinic
- Your home
- Mobile testing or community testing site
- Drug, alcohol or rehabilitation treatment center
- Don't know
- Other location [please explain]

.....

36b-no.
(36b_no)

Phillips et al.
2015

[if never tested for HIV] There are many reasons why people do not get tested for HIV. For each of the following items, please tell us how much you agree. Select one option for each statement.

	Strongly agree	somewhat agree	neither agree/disagree	somewhat disagree	strongly disagree
I don't have a way to get to the testing site/the site is too far away					
I don't know where to get tested					
I don't think the people who work at the testing site are friendly to LGBT					
I might run into people I know at the testing site					
I don't want people I know (like parents or friends) to find out I was tested					
I hate needles					
I would rather not know if I have HIV					
I'm not at risk for HIV					
I'm young—testing is something people do when they are older					

Other (write in)
Don't know
Refuse

36d-yes.
(36d_yes.)
NHBS YMSM
HT4e.

[if yes test] The last time you got tested for HIV, why was it that you got tested? Check all that apply:

- Because I thought I had symptoms of a recent HIV infection.....
- Because it was time for my regularly scheduled HIV test.....
- Because I did something risky.....
- Because a sexual partner disclosed they were HIV positive.....
- Because I had an STD.....
- Because I read something about HIV testing online.....
- Because an organization approached me to take a test.....
- Because I was starting a new relationship.....
- Because I wanted to stop using condoms.....
- Because my doctor offered me the test.....

OTHER, please explain [_____]

36e-yes.
(36e_yes.)
NHBS YMSM

[if yes test] What was the result of your most recent HIV test?

HT4b.

- Negative, that is no, I do not have HIV.....
- Positive, that is yes, I do have HIV.....
- Never obtained results.....
- Don't Know.....
- Refused to answer.....

36f-yes-pos.
(36f_yespos.)
NHBS YMSM
HT7a.

[if test positive, yes I do have HIV] When did you first test positive? Please identify the month and year below

- mm/yyyy.....
- Don't Know.....
- Refused to answer.....

36g-yes-pos.
(36g_yespos.)
NHBS YMSM
HT7f.

[if test positive, yes I do have HIV] Have you ever been seen by a doctor, nurse or other health care provider for a medical evaluation or care related to your HIV infection?

- Yes.....
- No.....
- Don't Know.....
- Refused to answer.....

36h-yes-pos.
(36h_yespos.)
NHBS YMSM
HT8.

[if test positive, yes I do have HIV] Are you currently taking antiretroviral medicines to treat your HIV infection?_

- Yes.....
- No.....
- Don't Know.....
- Refused to answer.....

36i-yes-pos.
(36i_yespos.)
Unique Q
3/16 discussions

[If yes, I am currently taking medicine to treat HIV] How often do you take your medication the way the doctor tells you or as you are supposed to take them?

- All the time.....
- Most of the time.....
- Some of the time.....
- Never.....
- Don't Know.....
- Refused to answer.....

36j-yes-neg.
(36j_yesneg.)
Unique Q
3/16 discussions

[if tested negative, not obtained results, never tested, or don't know] Which of these settings would be your preferred location or locations to be tested for HIV infection? Select all that apply.

- Private doctor's office or HMO
- Community health clinic, community clinic, public health clinic
- Family planning or Planned Parenthood clinic
- Parent's employer or company clinic
- Your employer or company clinic
- School or school-based clinic
- Hospital outpatient clinic
- Hospital emergency room
- Hospital regular room
- Urgent care center, urgi-care, or walk-in facility
- Sexually transmitted disease (STD) clinic
- Your home
- Mobile testing or community testing site
- Drug, alcohol or rehabilitation treatment center
- Some other place

36k-yes-neg.
(36k_yesneg.)
 Unique Q
 3/16 discussions

Of the ones you selected, please select the one you most prefer? (logic to only show the ones selected)
[AUTOFILL OPTIONS SELECTED "YES" FROM 35j]

Private doctor's office or HMO.....
 Community health clinic, community clinic,
 Public health clinic.....
 Family planning or Planned Parenthood clinic.....
 Parent's employer or company clinic.....
 Your employer or company clinic.....
 School or school-based clinic.....
 Hospital outpatient clinic.....
 Hospital emergency room.....
 Hospital regular room.....
 Urgent care center, urgi-care, or walk-in facility.....
 Sexually transmitted disease (STD) clinic.....
 Your home.....
 Mobile testing or community testing site.....
 Drug, alcohol, or rehabilitation treatment center.....
 Some other place.....

36l-yes-neg.
(36l_yesneg.)
 Unique Q
 3/16 discussions

[for tested negative, never tested, or don't know] How much do you agree or disagree with the following statement: "I am more likely to get tested somewhere a counselor speaks to me privately about how to use condoms and other ways to prevent HIV compared to a site that just offers me a test."

Strongly agree
 Somewhat agree.....
 Neither agree nor disagree.....
 Somewhat disagree.....
 Strongly disagree.....
 Don't Know.....
 Refused to answer.....

36m. (Q36m_yesneg.)

Project Connect **[for tested negative, never tested, or don't know] How likely is it that you will get tested for HIV in the next 12 months?**

I'm sure it won't happen.....
 It probably won't happen.....
 Even chance (50-50) that it will happen.....
 It probably will happen.....
 I'm sure it will happen.....

37. (37.)
Have you ever been tested for other sexually transmitted diseases (STDs) such as as gonorrhea, chlamydia, genital herpes, syphilis, or genital warts?

Unique Q
 3/16 discussions

Yes.....
 No.....
 Don't Know.....

38. (38.) [if yes test] How many times have you been tested for other sexually transmitted disease (STD) such as genital herpes, chlamydia, syphilis, or genital warts during your lifetime? If you are unsure, please enter your best guess.

Unique Q
3/16 discussions [open response].....

38b. (38b.) [if yes test] Have you ever been told by a doctor or nurse that you had a sexually transmitted disease (STD) such as gonorrhea, chlamydia, genital herpes, syphilis, or genital warts?

Yes.....
No.....
Don't Know.....

<P_QUEX01=1>

38c. When you have received HIV prevention services or programs, how specific were they to your needs as a transgender or gender nonconforming person?

PreventionTrans

- 1 Very specific to transgender and gender nonconforming people
- 2 Mostly specific to transgender and gender nonconforming people
- 3 Somewhat specific to transgender and gender nonconforming people
- 4 Not at all specific to transgender and gender nonconforming people
- 5 Never received HIV prevention services or programs

[IF TESTED POSITIVE FOR HIV, SKIP TO Q44]

The next set of questions ask you about different ways that people try to prevent infection with HIV.

PrEP (pre-exposure prophylaxis) is when a person is given medicine called Truvada before being exposed to HIV (like when they expect that they will be having unprotected sex with an infected partner) to prevent them from becoming infected. Typically, PrEP is one pill taken daily for an extended period of time.

39. (39.) Before today, had you heard of PrEP or Truvada?

CAANHS

110*

*modified

Yes.....
No.....
Don't Know.....
Prefer not to Answer.....

39b. (39b.)
Unique Q

[if yes] Where have you heard about PrEP or Truvada? Check all that apply:

- Friend.....
- Commercial or ad for Truvada/PrEP.....
- Medical provider.....
- Sex partner.....
- Internet or online search.....
- On a TV show or movie.....
- Social media.....
- Parent.....
- School or adult at school.....
- Other, specify.....
- Don't Know.....
- Prefer not to Answer.....

39c. (39c.)
CAANHS
111*
*modified

[if yes] Have you ever used PrEP before?

- Yes.....
- No.....
- Don't Know.....
- Prefer not to Answer.....

39d. (39d.)
Unique Q

[if yes used] Are you currently taking PrEP?

- Yes.....
- No.....
- Don't Know.....
- Prefer not to Answer.....

39e. (39e.)
Unique Q

[if yes taking] Over the past 7 days, on how many days did you take PrEP?

[note: answer options will be a slide bar from 0 to 7]

- 7 days.....
- 6 days.....
- 5 days.....
- 4 days.....
- 3 days.....
- 2 days.....
- 1 day.....
- Not at all.....
- Don't Know.....
- Prefer not to Answer.....

39no. (39_no.) **[if never used PrEP before or not currently taking]** How likely would you be to use PrEP, that is, to take an anti-HIV medicine every day to lower your chances of getting HIV?

Unique Q

- Very likely.....
- Somewhat likely.....
- Neither likely nor unlikely.....
- Somewhat unlikely.....
- Very unlikely.....
- Need more information.....
- Don't Know.....
- Prefer not to Answer.....

39no-b. (39_nob.) **[if neither likely..., somewhat unlikely, very unlikely, or need more information]** Which of the following are reasons that you do not wish to take PrEP? Check all that apply:

Project PrEPare
PrepBeliefReasons*

*Modified

- I am concerned about side effects from the pills.....
- I can avoid HIV in other ways.....
- I don't like taking pills.....
- I am concerned that people will think that I am HIV positive because I am taking PrEP
- I am concerned that people will know that I have sex with men and/or trans people because I am taking PrEP.....
- I fear developing resistance to HIV medications if I become positive.....
- I don't want to take a pill everyday.....
- I'm worried about what would happen if my parents found out.....
- Costs of medicine or going to the doctor to get it.....
- I don't know where to get it
- Transportation.....
- Other, please specify [verbatim response option]
- Don't Know.....
- Refused to Answer.....

39no-c. (39_noc.) **[if no taking]** Researchers are working on ways to change the medicine in PrEP so that it doesn't have to be taken every day. One of the alternatives they are working on is one or more injections (shots) taken several times a year. If PrEP were available like this, how likely would you be to take it?

Unique Q

- Very likely.....
- Somewhat likely.....
- Neither likely nor unlikely.....
- Somewhat unlikely.....
- Very unlikely.....
- Need more information.....
- Don't Know.....
- Prefer not to Answer.....

nPEP or PEP (post-exposure prophylaxis) is when a person is given medicine right after getting exposed to HIV (like after unprotected sex with an infected partner) to prevent becoming infected. Typically, nPEP is one or more pills taken daily right after the exposure and for the next 30 days.

40. (40.) Before today, had you heard of nPEP (sometimes just called PEP)?
 CAANHS
 114*
 *modified

Yes.....
 No.....
 Don't Know.....
 Prefer not to Answer.....

40b. (40b.) [if yes] Where have you heard about nPEP (sometimes just called PEP)? Check all that apply:
 Unique Q

Friend.....
 Commercial or ad for nPEP.....
 Medical provider.....
 Sex partner.....
 Internet or online search.....
 On a TV show or movie.....
 Social media.....
 Parent.....
 School or adult at school.....
 Other, specify.....
 Don't Know.....
 Prefer not to Answer.....

40c. (40c.) [if yes] Have you ever used nPEP (sometimes just called PEP) before?
 CAANHS
 115*
 *modified

Yes.....
 No.....
 Don't Know.....
 Prefer not to Answer.....

40no. (40_no.) [if no taking] How likely would you be to use nPEP (sometimes just called PEP) if you knew you were exposed to HIV (and not already taking PrEP)?
 Unique Q

Very likely.....
 Somewhat likely.....
 Neither likely nor unlikely.....
 Somewhat unlikely.....
 Very unlikely.....
 Need more information.....
 Don't Know.....
 Prefer not to Answer.....

40no-b. (40_nob.) [if neither likely...somewhat unlikely, very unlikely, or need more information] Why are you not willing to use PEP?
 Unique Q

Verbatim type-in.....

Research is also being done to develop a gel or lubricant that can be put in the butt to prevent someone from getting HIV. This is called a rectal microbicide. It would likely be put in before someone has anal or butt sex.

41. (41.) CAANHS 120 Before today, had you heard of a rectal microbicide?_

Yes.....
No.....
Don't Know.....
Prefer not to Answer.....

41b. (41b.) Unique Q [if yes] Where have you heard about a rectal microbicide? Check all that apply:

Friend.....
Commercial or ad for rectal microbicide.....
Medical provider.....
Sex partner.....
Internet or online search.....
On a TV show or movie.....
Social media.....
Parent.....
School or adult at school.....
Other, specify.....
Don't Know.....
Prefer not to Answer.....

42. (42.) Unique Q How likely would you be to use a rectal microbicide that could significantly decrease your risk to get HIV?

Very Likely.....
Somewhat likely.....
Neither likely nor unlikely.....
Somewhat unlikely.....
Very unlikely.....
Need more information.....
Don't Know.....
Prefer not to Answer.....

42b. (42b.) Unique Q [if neither likely...somewhat unlikely, very unlikely] Why are you not willing to use a rectal microbicide?

Verbatim type-in.....

We now have a few final questions just to help us understand a little more about who you are.

44. (44.) [if SC4=Yes] What grade are you currently in?

NHBS YMSM
DM5c.*
*modified

- Less than grade 6.....
- Grade 6.....
- Grade 7.....
- Grade 8.....
- Grade 9.....
- Grade 10.....
- Grade 11.....
- Grade 12.....
- Technical/vocational school.....
- GED program.....
- College.....
- Post-graduate program.....
- Not currently in school.....
- Don't Know.....
- Prefer not to Answer.....

45. (45.) [if SC4=Yes] During the past 12 months, how would you describe your grades in school?

YRBSS
Q89 (2015)

- Mostly A's.....
- Mostly B's.....
- Mostly C's.....
- Mostly D's.....
- Mostly F's.....
- None of these grades
- Not sure

46. (46.) What is the highest level of education that either of your parents or guardians completed?

NHBS YMSM
DM5d.

- Less than high school graduate.....
- High school graduate.....
- Technical/vocational school.....
- Some college.....
- Associate Degree
- Bachelor's Degree.....
- Master's Degree.....
- Professional Degree beyond a Bachelor's Degree
- Doctorate Degree.....
- Don't Know.....
- Not Applicable.....
- Prefer not to Answer.....

47. (48.) [if, in grades 6-12] Please answer the following statements by selecting the option that best represents how you feel:

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I feel like I am part of my school.					
The students at my school are prejudiced.					
I am happy to be at my school.					
The teachers at my school treat students fairly.					
I feel safe in my school.					

48. (49.) **Where are you currently living or staying most of the time?**

ATN130

DemWhere

LiveNow*

*modified

At your parents' house or apartment.....

At another family member's house or apartment.....

At a non-family member's house or apartment.....

Your own house or apartment.....

Foster home or group home.....

In a rooming, boarding halfway house, or a shelter/welfare hotel.....

On the street(s) (vacant lot, abandoned building, park, etc.)

Some other place not mentioned (Please Specify: _____)

49. (50.)

[if ethnicity=Latino *in screener*] What language are you most comfortable speaking with your family and friends?

NHBS YMSM

DM3b.*

*modified

English.....

Spanish.....

Creole.....

Portuguese.....

Other, please specify (_____).....

50. (51.) **In the past 12 months, was there a time where there wasn't enough money in your house or apartment for rent, food, or utilities such as gas, electric, or phone?**

NHBS YMSM
DM9

Yes.....
No.....
Don't Know.....
Prefer not to Answer.....

51. (52.) **Do you currently have health care coverage of any kind, government or private?**

NHBS YMSM
DM11.*
Modified

Yes.....
No.....
Don't Know.....
Prefer not to Answer.....

51b. (52b.) **[if yes] What kind of health insurance or coverage do you currently have?**

NHBS YMSM
Dm11a. *
Modified with
FoodNet options

Private insurance, such as an HMO, PPO, or a managed care plan

Public insurance, such as Medicaid, Medicare, or state assistance program

A combination of private and public insurance

Don't Know.....
Prefer not to Answer.....

52. (53.) **During the past 12 months, where did you most often receive your health care services? If you routinely receive services from a doctor at a community health clinic, please categorize this under community health clinic/community clinic/public health center.**

NHBS YMSM
DM11b.
SRCCAREA *
*modified

Private doctor's office or HMO.....
Community health clinic, community clinic, public health clinic.....
Family planning or Planned Parenthood clinic
Employer or company clinic.....
Parent's employer or company clinic.....
School or school-based clinic
Hospital outpatient clinic.....
Hospital emergency room.....
Hospital regular room.....
Urgent care center, urgi-care, or walk-in facility.....
Sexually transmitted disease (STD) clinic.....
Your home.....
Some other place.....
Don't seek healthcare.....

53. (54.) **During the past 12 months, was there any time when you needed medical care but didn't get it because it costs too much money?**

NHBS YMSM
DM12c.*
*modified

Yes.....
No.....
Don't Know.....
Prefer not to Answer.....

[IF SC9 IN (3,4,5) OR SC10 IN (3,4)]

54b. (56b.) **Which of the following people have you told that you are attracted to or have sex with males? Please check all that apply:**

NHBS YMSM
DM14b.1/2/3/4

5/7*
*modified

I have not told anyone.....
Gay, lesbian, or bisexual friends.....
Friends who are NOT gay, lesbian, or bisexual.....
Your mother or the woman who raised you.....
Your father or the man who raised you.....
Other family members.....
A teacher.....
A coach.....
A school guidance counselor, social worker, or psychologist
A counselor or therapist outside of school
A religious leader (e.g., priest, rabbi, imam, or preacher)
A health care provider.....
Don't Know.....
Prefer not to Answer.....

[if yes to mother] How did your mother or the woman who raised you respond?

54b-b. (56b_b.)
NHBS YMSM
DM14b.3./3a.*
*modified

Very Positively.....
Positively.....
Neither positively nor negatively.....
Negatively.....
Very Negatively.....
Don't Know.....
Prefer not to Answer.....

[if yes to father] How did your father or the man who raised you respond?

54b-c. (56b_c.)
NHBS YMSM
DM114b.4/4a*
*modified

Very Positively.....
Positively.....
Neither positively nor negatively.....
Negatively.....
Very Negatively.....
Don't Know.....
Prefer not to Answer.....

55. (57.) [if, lives with parent or other family member] Please answer the following statements by selecting the option that best represents how you feel:

Per Chris, 3/28 requested edits	Always	Most of the time	Sometimes	Rarely	Never
When I go out at night, my parents/guardians know where I am.					
I talk with my parents/guardians about the plans I have with my friends.					
When I go out, my parents/guardians ask me where I am going.					

56. (58.) In general, how is your health? Would you say it is...?

NSFG

GENHEALT KA-4

- Excellent.....
- Very good.....
- Good
- Fair.....
- Poor

[COMMENTS] If you have any comments about this survey, please enter those in the box below.

INCENTX

Congratulations, you are eligible for a \$10 [TYPE] gift card. Would you like to collect your gift card?

- Yes [GO TO INCENT2]
 No [GO TO CLOSING SCREEN]

INCENT2

Below is your gift card number:

[GIFT CARD NUMBER]

Would you like us to email or text the gift card number to you?

- Yes [GO TO WEBINEM1]
 No [GO TO CLOSING SCREEN]

WEBINEM1/WEBINEM2/WEBINPH1/WEBINPH2

For email:

Please enter your email address:

Please reenter your email address:

For text message:

Please enter your phone number:

Please reenter your phone number:

CLOSING SCREEN

This is the end of the survey.

Thank you very much for your time and effort.

If you would like information regarding counseling or treatment resources, please visit the following CDC webpage: <http://www.cdc.gov/lgbthealth/youth-resources.htm>.

If you would like more information about the study, please call 1-877-346-7151 or send an email to teen-health@norc.org. If you have questions about your rights as a survey participant, you may call the NORC Institutional Review Board Administrator (toll-free) at 1-866-309-0542.

