

## Attachment 4 Survey Baseline Intervention

**The Girlpower Project**  
 join the health revolution

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**Survey**

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Form Approved  
 OMB No. 0920-XXXX  
 Exp. Date XX/XX/XXXX

**Your email \***

Enter the same email you used during registration.

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**[1] Have you ever visited a health clinic for any sexual and reproductive health service, such as gynecological exams, pregnancy tests, birth control counseling, testing or treatment for STIs or HIV/AIDS?**

Yes  
 No

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**[2] In the past 3 months, have you visited a health clinic for any sexual and reproductive health service?**

Yes  
 No

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**[3] In the past 3 months, did you make an appointment at a health clinic for any sexual and reproductive health service?**

Yes  
 No

**[4] What do you think about going to a health clinic?**

**Most girls my age go to a health clinic for sexual and reproductive health services.**

**I plan to visit a health clinic the next time I need any sexual or reproductive health services.**

**I am confident that I can go to a health clinic for sexual and reproductive health services.**

**Going to a health clinic for sexual and reproductive health services is hard.**

**Going to a health clinic for sexual and reproductive health services is expensive.**

**Only older woman visit health clinics for sexual and reproductive health services.**

**If I go to a health clinic for sexual and reproductive health services my parents will find out.**

The next questions are about sex. By sex we mean when a penis goes inside a vagina.

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**[5] Have you ever had sex?**

Yes  
 No

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**[6] How old were you the first time you had sex?**

**[7] What birth control methods did you use the first time you had sex? (Check all that you used).**

- I did not use any method
  - Pull out or withdrawal
  - Condoms (male)
  - Condoms (female)
  - Birth control pills
  - The shot (Depo-Provera)
  - The patch
  - The ring
  - IUD (Mirena, Paraguard or Skyla)
  - Implant (Nexplanon)
  - Emergency contraception
  - Other
- 

**[8] In the past 3 months, how many times have you had sex? If you have not had sex in the past 3 months, enter '0'.**

**[9] Of the times you had sex in the past 3 months, how many times did you NOT use each of these birth control methods:**

**Condoms**

**Birth control pills**

**The shot**

**The patch**

**The ring**

**IUD (Mirena or Paraguard)**

**Implant**

**[10] In the past 3 months, with how many different people have you had sex? Remember we are only talking about penis in vagina. If you have not had sexual intercourse in the past 3 months, enter '0'.**

**[11] What type of birth control method did you use the last time you had sexual intercourse? (Check all that you used).**

- I did not use any method
- Pull out or withdrawal
- Condoms (male)
- Condoms (female)
- Birth control pills
- The shot (Depo-Provera)
- The patch
- The ring
- IUD (Mirena, Paraguard or Skyla)
- Implant (Nexplanon)
- Emergency contraception

**[12] Have you ever been told by a doctor or nurse that you were pregnant?**

- Yes
  - No
- 

**[13] In the past 3 months, have you been told by a doctor or nurse that you were pregnant?**

- Yes
  - No
- 

**[14] In the past 3 months, have you had a pregnancy scare? (i.e. you really thought you were pregnant but you were not).**

- Yes
  - No
- 

**[15] Do you intend to have sex in the next 3 months?**

- Yes
- No

[16] In the past 3 months, have you started using a new method of birth control?

- Yes
- No

[17] If you were to have sex in the next 3 months, how likely are you to use any of the following methods to prevent a pregnancy?

**Condoms**

Very unlikely

**Birth Control pills**

Very unlikely

**The shot (Depo-Provera)**

Very unlikely

**The patch**

Very unlikely

**The ring**

Very unlikely

**IUD (Mirena, Paraguard or Skyla)**

[17] If you were to have sex in the next 3 months, how likely are you to use any of the following methods to prevent a pregnancy?

**Condoms**

Very unlikely

**Birth Control pills**

Very unlikely

**The shot (Depo-Provera)**

Very unlikely

**The patch**

Very unlikely

**The ring**

Very unlikely

**IUD (Mirena, Paraguard or Skyla)**

Very unlikely

**Implant (Nexplanon)**

Very unlikely

**Great job! You are half way there.**

[18] What do you think about birth control?

**In general, birth control is too much of a hassle to use.**

Strongly Disagree

**If you used birth control, your friends might think you were looking for sex.**

Strongly Disagree

**In general, birth control can make you sick.**

Strongly Disagree

**In general, it is a good thing to use birth control every time you have sex.**

Strongly Disagree

**The IUD (intra uterine device) and the implant are only for older women.**

Strongly Disagree

**The IUD and the implant can make you infertile.**

Strongly Disagree

**Most girls my age use birth control when they have sex.**

Strongly Disagree

**I have control whether birth control is used every time I have sex.**

Strongly Disagree

**I am confident that I can use birth control every time I have sex.**

Strongly Disagree

**If I have sex in the next 3 months, I intend to use birth control every time I have sex.**

Strongly Disagree

**If I have sex and do not use any birth control, it is likely that I will get pregnant.**

Strongly Disagree

**I would like to get pregnant in the next 12 months.**

Strongly Disagree

I would like to get pregnant in the next 12 months.

Strongly Disagree

[19] At what age would you like to have a baby for the first time?

[20] Have you ever been told by a doctor or a nurse that you had Chlamydia or Gonorrhea?

- Yes
- No

[21] In the past 3 months, have you been told by a doctor or a nurse that you had Chlamydia or Gonorrhea?

- Yes
- No
- Other

[22]: In the past three months, have you received counseling for, or have been tested or treated for Chlamydia or Gonorrhea?

- Yes
- No

[23] Would you have enrolled in the study if you needed to get permission from one of your parents to join?

- I would not have joined at all
- I would not have joined
- I may or may not have joined
- I would have joined
- I would definitely joined anyway

[24] In the past 3 months have you participated in any sexual education class?

- Yes
- No

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[25] In the past 3 months, did you or your partner smoke marijuana before or while you had sexual intercourse?

- Yes
- No
- Never had sex

[26] In the past three months, did you or your partner drink alcohol before or while you had sexual intercourse?

- Yes
- No
- Never had sex

Submit Survey

Save and Continue Later