SECTION I Health Conditions and Health Services

VARIABLES IMPORTED FROM EARLIER SECTIONS:
RSTATE STATE OF RESIDENCE FROM SCREENER PRELOADS
CMINTVW: CENTURY MONTH OF INTERVIEW (FROM A)
CMLSTYR_FILL MO/YR FILL FOR CMLSTYR (FROM A)
AGESCRN R'S AGE AT SCREENER (FROM A)
AGE_R R'S AGE AT INTERVIEW (FROM A)
CMBIRTH CENTURY MONTH OF R'S BIRTH (FROM A)
MARSTAT INFORMAL MARITAL STATUS (FROM A)
FMARIT FORMAL MARITAL STATUS (FROM A)
RHADSEX WHETHER R EVER HAD SEX OR NOT (FROM B)
LIFEPRT # OF FEMALE SEXUAL PARTNERS IN LIFETIME (BC-6, ASKED)
LIFEPRTS # OF FEMALE SEXUAL PARTNERS IN LIFETIME (COMPUTED IN B)
CMFSXCWP CM DATE OF 1ST SEX W/ CURRENT WIFE/COHAB PARTNER (FROM C)

 VARIABLES
 CREATED IN THIS SECTION & OUTPUT TO DATA FILE:

 CMINFVIS
 CM DATE OF LAST/MOST RECENT INFERTILITY VISIT (FLOW CHECK I-9)

 CMHIVTST
 CM DATE OF LAST/MOST RECENT HIV TEST (FLOW CHECK I-10)

VARIABLES CREATED IN THIS SECTION & ARE NOT OUTPUT TO DATA FILE: CMHIVTST_FILLMO/Yr fill for CMHIVTST (Flow Check I-10)

{ ASKED FOR ALL

INTRO_I1

- IA-0. The next questions are about your experiences with health care providers, health insurance, and health problems.
 - ENTER [1] to continue

Access to Health Care (IA)

USUALCAR

IA-1. Is there a place that you usually go to when <u>you</u> are sick or need advice about health?

Yes1 No5

FLOW CHECK I-0: IF IA-1 USUALCAR = 5 or DK/RF, GO TO IA-3 COVER12.

{ ASKED IF R REPORTED A USUAL SOURCE OF CARE USLPLACE IA-2. Please look at Card 25a. What kind of place is it?

[SHOW CARD 25a]

Private doctor's office or HMO1
Community health clinic, community clinic,
public health clinic2
Family planning or Planned Parenthood Clinic3
Employer or company clinic4
School or school-based clinic5
Hospital outpatient clinic6
Hospital emergency room7
Hospital regular room8
Urgent care center, urgi-care, or walk-in facility9
Sexually transmitted disease (STD) clinic10
Some other place20

NSFG MALE CRO FOR 2013-2015 OMB Number 0920-0314 { ASKED IF R REPORTED A USUAL SOURCE OF CARE IN USUALCAR USL12MOS IA-2a. Have you gone to this place in the last 12 months, that is, since (CMLSTYR FILL)? Yes1 No5 { ASKED FOR ALL COVER12 IA-3. Card 75 lists some examples of types of health care coverage. In the past 12 months, that is, since (CMLSTYR_FILL), was there any time that you did not have any health insurance or coverage? [SHOW CARD 75] [HELP AVAILABLE] Yes1 { ASKED IF R HAD NO HEALTH INSURANCE AT SOME TIME IN THE PAST YEAR NUMNOCOV IA-4. In how many of the past 12 months were you without coverage? [HELP AVAILABLE] • ENTER number of months. • If R went less than one month without coverage, enter [1]. UNDERLYING RANGE: 1-12 FLOW CHECK I-1: IF R HAD INSURANCE COVERAGE FOR ANY OF THE PAST 12 MONTHS (IA-4 NUMNOCOV < 12) OR IF IA-4 NUMNOCOV = DK OR RF, THEN ASK IA-5 COVERHOW. ELSE IF UNINSURED ALL 12 MONTHS (IA-4 NUMNOCOV=12), GO TO IB-1 YOUGOFPC. { IF UNINSURED ALL 12 MONTHS, GO TO IB-1 YOUGOFPC. { STATE FILLS BASED ON RSTATE PRELOAD. (INC: MEDICAID_FILL, CHIP_FILL, & { STATEPLAN FILL) COVERHOW IA-5. Card 76 shows different types of health care coverage. In the past 12 months, that is, since (CMLSTYR_FILL), which of these were you covered by? • ENTER all that apply • ENTER space or [-] to separate responses. [HELP AVAILABLE] [SHOW CARD 76] A private health insurance plan (from employer or workplace; purchased directly; through a state or local government program or community program).....1 Medicaid-additional name(s) for Medicaid in this state: [MEDICAID_FILL]....2 Medi-Gap......4 Military health care, including: the VA, CHAMPUS, TRICARE, CHAMP-VA.....5

Indian Health Service......6 CHIP (Children's Health Insurance Program) additional name(s) for CHIP in this state: [CHIP FILL]......7 Single-service plan (e.g., dental, vision, prescriptions)......8 State-sponsored health plan (called [STATEPLAN_FILL] in this state).....9 Other government health care.....10 FLOW CHECK I-2: IF IA-3 COVER12 = 1 (Yes), DK, RF OR IF IA-3 COVER12 = 5 (No) AND MORE THAN 1 RESPONSE IN IA-5 COVERHOW) OR IF IA-5 COVERHOW = DK/RF, THEN ASK IA-6 NOWCOVER. ELSE IF IA-3 COVER12 = 5 (No) AND IA-5 COVERHOW HAS ONLY ONE RESPONSE, GO TO Flow Check I-2A. { ASKED IF R REPORTED ANY MONTHS WITHOUT COVERAGE IN LAST YEAR OR { IF R REPORTED MORE THAN 1 FORM OF COVERAGE NOWCOVER IA-6. IF IA-5 COVERHOW<>DK/RF, ASK: Which of these, if any, are you covered by now? IF IA-5 COVERHOW=DK/RF, ASK: Are you covered by any of these health care plans now? • READ list and enter all that apply • ENTER all that apply • Press [Space] or [-] to separate responses [Display responses from IA-5 COVERHOW] [For cases that skipped IA-5 COVERHOW or IA-5 COVERHOW = DK/RF, display all 10 responses from IA-5 COVERHOW plus] Not covered by any insurance.....11 EDIT CHECK IA6 1: IF IA-6 NOWCOVER = 11 AND ANY OTHER COMBINATION THEN **DISPLAY:** "Not covered" answer cannot be chosen as part of a group of answers. Either de-select that answer or de-select all other answers but "Not covered". HARD, NONSUPPRESSIBLE EDIT CHECK. FLOW CHECK I-2A: IF AGER < 18 OR AGER > 25, THEN GO TO IB-1 YOUGOFPC. ELSE IF AGER >= 18 AND AGER <=25 AND IF IA-3 COVER12 = 5 (NO) AND IA-5 COVERHOW HAS ONLY ONE RESPONSE AND IA-5 COVERHOW = 1 (PRIVATE HEALTH INSURANCE), OR IF IA-3 COVER12 = 5 (NO) AND MORE THAN ONE RESPONSE IN IA-5 COVERHOW AND ANY MENTION OF IA-6 NOWCOVER = 1 (PRIVATE HEALTH INSURANCE), OR IF IA-3 COVER12 = 1 (YES), DK, OR RF AND ANY MENTION OF IA-6 NOWCOVER = 1 (PRIVATE HEALTH INSURANCE), ASK IA-7 PARINSUR.

ELSE GO TO IB-1 YOUGOFPC.

NSFG MALE CRQ FOR 2013-2015 OMB Number 0920-0314

{ ASKED IF R IS 18-25 AND CURRENTLY HAS PRIVATE INSURANCE COVERAGE **PARINSUR** IA-7. Are you covered on your parents' private health insurance plan?

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Yes .....1
No .....5
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Use of Family Planning Clinics (IB)

{asked of all men YOUGOFPC

IB-1. Now please look at Card 69, which shows some family planning and health services. Have you, yourself, ever received services such as these from a family planning clinic or Planned Parenthood clinic?

[SHOW CARD 69]

Yes1 No5 (IC-1 DEAF)

WHENGOFP

IB-2. When was the last time you received services from a family planning clinic or Planned Parenthood clinic? Was it within the last 12 months, that is, since (CMLSTYR_FILL), or more than 12 months ago?

Within the last 12 months1 More than 12 months ago2 (IC-1 DEAF)

YOUFPSVC

- IB-3. Please look again at Card 69. Which of these services did <u>you</u> receive at that visit?
 - ENTER all that apply

[SHOW CARD 69]

Health Problems or Impairments; Cancer (IC)

DEAF

IC-1. The following questions are about other health problems or impairments you may have. Do you have serious difficulty hearing?

> Yes1 No5

BLIND

IC-2. Do you have serious difficulty seeing, even when wearing glasses?

Contact lenses should be considered in the same way as glasses.

OMB Number 0920-0314

Yes1 No5

DIFDECIDE

IC-3. Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering or making decisions?

> Yes1 No5

DIFWALK

IC-4 Do you have serious difficulty walking or climbing stairs? Yes1 No5

DIFDRESS

IC-5. Do you have difficulty dressing or bathing?

Yes1 No5

DIFOUT

IC-6. Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

> Yes1 No5

{ Asked for all

EVRCANCER

IC-7. Now I would like to ask you about cancer. Have you ever been told by a doctor or other health care provider that you had cancer?

> Yes1 No5 (ID-1 VISIT12MO)

{ Asked if R has ever had cancer

AGECANCER

IC-7a. At what age were you first told that you had cancer?

• If necessary: if you have had more than one cancer, please tell me about your first cancer.

• ENTER age in years

UNDERLYING RANGE = 0 to 45

EDIT CHECK IC7a_1: IF AA-1 AGE_R > IC-7a AGECANCER, DISPLAY TEXT: R has reported that his first cancer was diagnosed at an age older than his current age. Please correct the age of his first cancer diagnosis (AGECANCER). HARD, NONSUPPRESSIBLE EDIT CHECK.

INTERVIEWER NOTE: Code based on what respondent reports for his first type of cancer. The list is alphabetical. Read the list only if necessary. You may stop reading the list when the respondent states a cancer.

- 01 Bladder cancer
- 02 Bone cancer
- 03 Brain cancer or tumor, spinal cord cancer, or other cancer of the central nervous system
- 04 Breast cancer
- 05 BLANK
- 06 Colon cancer
- 07 BLANK
- 08 Head and neck cancer
- 09 Heart cancer
- 10 Leukemia/blood cancer
- 11 Liver cancer
- 12 Lung cancer
- 13 Lymphoma including Hodgkins disease/lymphoma and non-Hodgkins lymphomas
- 14 Melanoma
- 15 Neuroblastoma
- 16 Oral (mouth) cancer
- 17 BLANK
- 18 Pancreatic cancer
- 19 Pharyngeal (throat) cancer
- 20 Prostate cancer
- 21 Rectal cancer
- 22 Renal (kidney) cancer
- 23 Stomach cancer
- 24 Thyroid cancer
- 25 Other

[IF CODE 25 NOT REPORTED, GO TO ID-1 VISIT12MO]

SP_CANCTYPE

IC-7sp. IF IC-7b CANCTYPE = 25 (other): INTERVIEWER: Record verbatim what R reports for his type of cancer.

TYPE: STRING [250]

Health Services (ID)

VISIT12MO

ID-1. Please look at card 69a. In the past 12 months, that is, since (CMLSTYR_FILL), did you have any of these types of visits to a doctor or health care provider ...

[SHOW CARD 69a]

- ENTER all that apply
- ENTER space or [-] to separate responses.

A routine physical exam1 A physical exam for sports or work.....2 A doctor visit when you were sick or hurt....3 Did not have any visits to a doctor4 EDIT CHECK ID1_1: IF VISIT12MO = 4 AND ANY OTHER CODE, DISPLAY TEXT: "Did not have any visits to a doctor" may not be used in combination with any other answer for this question. Verify the answer with R and re-enter." HARD, NONSUPPRESSIBLE EDIT CHECK.

FLOW CHECK I-3: IF ID-1 VISIT12MO = 4 GO TO ID-9 BARRIER. ELSE if ID-1 VISIT12MO=DK or RF, GO TO Flow Check I-7 ELSE ASK ID-2 SVC12MO.

{ Asked only if ID-1 VISIT12MO=1,2,3 SVC12MO

ID-2. Please look at Card 69b. Did you receive any of the services shown on this card at those visits in the past 12 months?

[SHOW CARD 69b]

- ENTER all that apply
- ENTER space or [-] to separate responses.
- 1. A testicular exam (had your testicles examined)
- 2. Testing for sexually transmitted disease
- 3. Treatment for sexually transmitted disease
- 4. Information or advice about using condoms
- 5. Information or advice about your partner using female methods of birth control
- Information or advice about you getting a vasectomy (surgically sterilized)
- 7. Information or advice about HIV or AIDS
- Information or advice about other sexually transmitted infections, such as gonorrhea, Chlamydia, syphilis, or genital herpes
- 9. None of the above.

EDIT CHECK ID2_1: IF SVC12MO = 9 AND ANY OTHER CODE, DISPLAY TEXT: "None of the above" may not be used in combination with any other answer for this question. Verify the answer with R and re-enter." HARD, NONSUPPRESSIBLE EDIT CHECK.

{ Asked only if ID-1 VISIT12MO=1,2,3 NUMVISIT

ID-3. How many visits did you have in the last 12 months in order to receive these services from a doctor or other health care provider?

• ENTER number of visits {Underlying range 1 to 95}

{Asked of everyone 15-44 if VISIT12MO = 1,2 or 3
PLACEVIS
ID-4. Please look at Card 25a. What place or places did you go for these
 service(s)?

- ENTER all that apply
- ENTER space or [-] to separate responses.

[SHOW CARD 25a]

{ Asked only if ID-1 VISIT12MO=1,2,3 SVCPAY

ID-5.

Please look at Card 16a. In which of the ways shown on this card was the bill for these visits paid?

- ENTER all that apply.
- PROBE: Any other ways?

[SHOW CARD 16a]

Insurance1
Co-payment2
Out-of-pocket payment3
Medicaid4
No payment required5
Some other way6

{ Asked only if ID-1 VISIT12MO=1,2,3

TALKSA

During your visit(s) in the past 12 months did a doctor or health care provider ask you if you were sexually active?

Yes						1
No						5
If vol:	Provider	already	knew	R's	status	7

TALKEC

ID-7. During your visit in the past 12 months, did a doctor or health care provider talk with you about emergency contraception?

Yes1 No5

TALKDM

ID-8. During your visit in the past 12 months, did a doctor or health care provider talk with you about using a condom at the same time as a female method of contraception?

Yes1 No5

FLOW CHECK I-4: IF any of the responses to ID-2 SVC12MO = 2 GO TO ID-8a WHYPSTD. care?

ELSE GO TO Flow Check I-7.

{ IF R RECEIVED AN STD TEST IN LAST 12 MONTHS (SVC12MO =2)
WHYPSTD
ID-8a. Please look at Card 25b. In the past 12 months you received a
 test for a sexually transmitted disease from a [Display response
 to where received services in the last 12 months separated by an
 "or"]. What is the main reason that you chose this place for

Could walk in or get same-day appointment1
Cost2
Privacy concern
Expert care here4
Embarrassed to go to usual provider5
Other

BARRIER

ID-9. If ID-1 VISIT12MO = 4 then ASK:

You reported that you did not go to a doctor in the past 12 months. Please look at Card 69c. Which of the reasons shown on this card explain why you did not see a doctor?

- ENTER all that apply.
- ENTER space or [-] to separate responses.

[SHOW CARD 69c]

{ Asked if R said "something else" on ID-9 BARRIER BARRIER_SP ID-9sp. What other reason(s) made it difficult for you to see a doctor in

past 12 months?

TYPE: STRING [100]

Infertility Services (IE)

FLOW CHECK I-7: IF RHADSEX= 2 (R NEVER HAD SEX), GO TO INTRO_I2
 (start of IF Series on HIV testing).

{ For all who have had sex (RHADSEX=yes)
{ lst 3 variants deal with Rs with only 1 partner in lifetime
{ last 2 variants deal with Rs with > 1 partner in lifetime or dk/rf on
number of partners in lifetime

INFHELP

IE-1. IF (LIFEPRTS=1 AND BC-6 LIFEPRT NE DK OR RF) AND AB-1 MARSTAT= 1 or 5
 (currently married or separated), ASK:
 Have you or your wife ever been to a doctor or other medical care
 provider to talk about ways to help you have a baby together?

ELSE IF (LIFEPRTS=1 and BC-6 LIFEPRT NE DK OR RF) AND (AB-1 MARSTAT=2 (currently cohabiting)), ASK: Have you or your partner ever been to a doctor or other medical care provider to talk about ways to help you have a baby together?

ELSE IF (LIFEPRTS = 1 AND BC-6 LIFEPRT NE DK OR RF) AND AB-1 MARSTAT= 3 OR 4 (WIDOWED OR DIVORCED), ASK: Did you or your wife ever go to a doctor or other medical care provider to talk about ways to help you have a baby together?

ELSE IF FMARIT EQ 0 or 5 (never married), ASK: During any of your relationships, have you or your partner at the time ever been to a doctor or other medical care provider to talk about ways to help you have a baby together?

ELSE ASK: During any of your relationships, have you or your wife or partner at the time ever been to a doctor or other medical care provider to talk about ways to help you have a baby together?

• Do <u>not</u> code yes if main purpose of visit was for something other than seeking help to have a baby.

YES1 NO5 (INTRO_12)

INFSVCS

IE-2. IF (LIFEPRTS = 1 AND BC-6 LIFEPRT NE DK OR RF) AND MARSTAT= 1 or 5
 (married or separated), ASK:
 Which of the services shown on Card 70 have you or your wife had to
 help you have a baby together?

ELSE IF (LIFEPRTS = 1 AND BC-6 LIFEPRT NE DK OR RF) AND (AB-1 MARSTAT = 2 (currently cohabiting)), ASK: Which of the services shown on Card 70 have you or your partner had to help you have a baby together?

ELSE IF (LIFEPRTS = 1 AND (AB-1 MARSTAT NE 1, 2, OR 5 (MARRIED, COHABITING, OR SEPARATED)), ASK: Which of the services shown on Card 70 did you or your partner have to help you have a baby together?

ELSE ASK: Think about all of the medical help you or your partners have <u>ever</u> received to help you have a baby together. Which of the services shown on Card 70 have you or they had (to help you have a baby together)?

- ENTER all that apply
- ENTER space or [-] to separate responses.

[SHOW CARD 70]

Advice.....1 Infertility testing2 Drugs to improve ovulation3 Surgery to correct blocked tubes4 Artificial insemination5 Treatment for varicocele6 NSFG MALE CRQ FOR 2013-2015 OMB Number 0920-0314

Other types of medical help7

FLOW CHECK I-7b: IF IE-2 INFSVCS RESPONSE INCLUDES MENTION OF INFERTILITY TESTING (code 2), ASK IE-3 INFTEST. ELSE IF NO MENTION OF CODE 2, GO TO FLOW CHECK I-7c.

INFTEST

IE-3. Who was it that had infertility testing? Was it you, her, or both of you?

You1 Her2 Both of you3

FLOW CHECK I-7c: IF IE-2 INFSVCS RESPONSE INCLUDES MENTION OF ARTIFICIAL INSEMINATION (code 5), ASK IE-4 WHOINSEM. ELSE IF NO MENTION OF CODE 5, GO TO FLOW CHECK I-8.

WHOINSEM

IE-4. Was your wife or partner inseminated with sperm from you only, from some other donor only, or from both?

You only1 Some other donor only2 Both3

FLOW CHECK I-8: IF R IS CURRENTLY MARRIED OR COHABITING (AB-1 MARSTAT = 1 or 2), ASK IE-5 INFHLPNW. ELSE GO TO IE-6 LASTVIS_M.

INFHLPNW

IE-5. IF R IS CURRENTLY MARRIED (AB-1 MARSTAT = 1), ASK: Are you and your wife currently pursuing medical help to have a baby together?

ELSE IF R IS CURRENTLY COHABITING (AB-1 MARSTAT=2), ASK: Are you and your partner currently pursuing medical help to have a baby together?

• "Currently pursuing help" means that R or his (wife/partner) plan to visit the doctor or infertility clinic again.

Yes1 No5

LASTVIS_M

1 OF 2

IE-6m.IF IE-5 INFHLPNW = YES, ASK: In what month and year was your most recent visit for medical help to have a baby together?

ELSE IF IE-5 INFHLPNW=NO, BLANK, DK, OR RF, ASK: In what month and year was your <u>last</u> visit for medical help to have a baby together?

• ENTER MM/YYYY

• PROBE for season if DK month.

1.	January	5.	May	9.	September	13.	Winter
2.	February	б.	June	10.	October	14.	Spring
3.	March	7.	July	11.	November	15.	Summer

NSEG MALE CRO FOR 2013-2015 OMB Number 0920-0314 4. April 8. August 12. December 16. Fall LASTVIS Y 2 OF 2 IE-6y.IF IE-5 INFHLPNW = YES, ASK: (In what month and year was your most recent visit for medical help to have a baby together?) ELSE IF IE-5 INFHLPNW NO, BLANK, DK, OR RF, ASK: (In what month and year was your last visit for medical help to have a baby together?) ENTER (LASTVIS M)/YYYY UNDERLYING RANGE: 1984 to 2020 FLOW CHECK I-9: COMPUTE CMINFVIS: (Century month for date of last or most recent infertility visit) SET CMINFVIS = null/blank. IF LASTVIS Y = RF, SET CMINFVIS = 9998. ELSE IF LASTVIS Y = DK, SET CMINFVIS = 9999. ELSE IF LASTVIS M LE 12, COMPUTE CMINFVIS = (LASTVIS_Y - 1900)*12 + LASTVIS_M ELSE IF 13 LE LASTVIS_M LE 16, USE MONTH APPROPRIATE TO SEASON & COMPUTE CMINFVIS AS ABOVE. ELSE IF LASTVIS_M = DK OR RF, ASSIGN MONTH = 6 (June) & COMPUTE CMINFVIS AS ABOVE. IF (LASTVIS_M LE 12) AND CMINFVIS > CMINTVW, DISPLAY: Edit Check IE6_1: The date entered cannot be after the date of interview. Please correct. HARD, NONSUPPRESSIBLE EDIT CHECK. Edit Check IE6 2: IF (LASTVIS M LE 12) AND CMINFVIS < CMBIRTH, DISPLAY: The date entered cannot be before his date of birth. Please correct. HARD, NONSUPPRESSIBLE EDIT CHECK. IF (13 LE LASTVIS_M LE 16) AND CMINFVIS > (CMINTVW + Edit Check IE6_3: 2), DISPLAY: The date entered cannot be after the date of interview. Please correct. HARD, NONSUPPRESSIBLE EDIT CHECK. Edit Check IE6 4: IF (13 LE LASTVIS M LE 16) AND CMINFVIS < (CMBIRTH -3), DISPLAY: The date entered cannot be before his date of birth. Please correct. HARD, NONSUPPRESSIBLE EDIT CHECK. Edit Check IE6_5: IF (LASTVIS_M = DK OR RF) AND LASTVIS_Y > (CMINTVW/12 +1900), DISPLAY: The date entered cannot be after the date of interview. Please correct. HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IE6_6: IF (LASTVIS_M = DK OR RF) AND LASTVIS_Y < (CMBIRTH/12

+1900)- 1, DISPLAY: The date entered cannot be before his date of birth. Please correct. HARD, NONSUPPRESSIBLE EDIT CHECK.

EDIT CHECK IE6_7: PROBE IF LIFEPRTS = 1 AND MARSTAT = 1 OR 2 AND CMINFVIS < CMFSXCWP. DISPLAY TEXT: R has reported a date of last/most recent visit that is earlier than when he first had sex with his current wife/partner. Confirm if this is correct. INVOLVING (LASTVIS_M,LASTVIS_Y,WPSX1WN_M,CWPSX1WN_Y)

INFRTHIS

IE-7. When you and your wife or partner went for medical help to have a baby together, were you ever told that you had any of the following male infertility problems shown on Card 71?

- ENTER all that apply
- ENTER space or [-] to separate responses.

[SHOW CARD 71]

EDIT CHECK IE7_1: IF INFRTHIS=6 AND ANY OTHER CODE DISPLAY TEXT: "None of the above" cannot be chosen with any other answer for this question. Either de-select all other answers or de-select "None of the above". HARD, NONSUPPRESSIBLE EDIT CHECK.

HIV TESTING AND AIDS KNOWLEDGE/COUNSELING (IF)

 $\{ \mbox{ Asked for all } Rs$

INTRO_I2

IF-0. Now I would like to ask you about testing for HIV, the virus that causes AIDS.

•ENTER [1] to continue

{ Asked for all Rs DONBLOOD

IF-1. First, I'll ask you about blood and blood product donations you may have made to the Red Cross or other blood banks. By blood products, we mean such things as plasma, platelets, and marrow. Have you ever donated blood or blood products at the Red Cross, at a bloodmobile, at a blood drive, or at other blood banks?

[HELP AVAILABLE]

Yes 1 No 5

{ Asked for all Rs
HIVTEST
IF-2. IF IF-1 DONBLOOD = YES, ASK:

NSFG MALE CRO FOR 2013-2015 OMB Number 0920-0314 Not counting tests you may have had as part of donating blood or blood products, have you ever been tested for HIV? ELSE IF IF-1 DONBLOOD = 5, DK, or RF, ASK: Have you ever been tested for HIV? • Explain, if necessary, that you will not be asking for the results of any test he may have ever had. Yes 1 No 5 FLOW CHECK I-9b: IF IF-2 HIVTEST = 5, ASK IF-2b NOHIVTST. ELSE IF HIVTEST = DK or RF, GO TO IF-6 TALKDOCT. (We do not want to ask NOHIVTST for DK/RF responses on HIVTEST.) ELSE IF HIVTEST = 1 (yes), GO TO IF-3 WHENHIV_M. { Asked if R never had an HIV test (HIVTEST=5) NOHIVTST IF-2b. IF IF-2 HIVTEST = NO ASK: Which one of these reasons shown on Card 88 would you say is the MAIN reason why you have not been tested for HIV? [SHOW CARD 88] You have never been offered an HIV test.....1 You are worried about what other people would think if you got tested for HIV.....2 You were afraid to find out if you were HIV positive (that you had HIV)4 You don't like needles5 FLOW CHECK I-9b2: IF IF-2b NOHIVTST = 20, ASK IF-2sp SP NOHIVTST. ELSE GO TO IF-6 TALKDOCT. { Asked if R reported 'some other reason' SP_NOHIVTST IF-2sp. What was the MAIN reason why you have not been tested for HIV? TYPE: STRING [250] FLOW CHECK I-9c: IF IF-2 HIVTEST = 5 (no), GO TO IF-6 TALKDOCT. { Asked if R ever was tested for HIV outside of blood donation (HIVTEST=1) WHENHIV_M 0 of 0 IF-3m.IF IF-1 DONBLOOD = 1 THEN ASK: Not including tests you may have had as part as part of donating blood or blood products, in what month and year was your last test for HIV, the virus that causes AIDS? ELSE IF IF-1 DONBLOOD = 5, DK, or RF, THEN ASK: In what month and year was your last test for HIV, the virus that causes AIDS? NSFG_2013-15_MaleI_CRQ •ENTER MM/YYYY •PROBE for season if DK month.

1. January	5. May	9. September	13. Winter
2. February	6. June	10. October	14. Spring
3. March	7. July	11. November	15. Summer
4. April	8. August	12. December	16. Fall

{ Asked if R ever was tested for HIV outside of blood donation (HIVTEST=1)
WHENHIV_Y
@ of @
IF-3y.If IF-1 DONBLOOD = 1 THEN ASK:
 (Not including tests you may have had as part as part of donating blood
 or blood products, in what month and year was your <u>last</u> test for HIV,
 the virus that causes AIDS?)

ELSE IF IF-1 DONBLOOD = 5, DK, or RF, THEN ASK: (In what month and year was your <u>last</u> test for HIV, the virus that causes AIDS?)

ENTER (WHENHIV_M)/YYYY

UNDERLYING RANGE: 1984 to 2020

FLOW CHECK I-10: COMPUTE CMHIVTST Century month for date of last or most recent HIV test outside of blood or blood product donation.

SET CMHIVTST = null/blank.

IF WHENHIV_Y = RF, SET CMHIVTST = 9998. ELSE IF WHENHIV Y = DK, SET CMHIVTST = 9999.

ELSE IF WHENHIV_M LE 12, COMPUTE CMHIVTST = (WHENHIV_Y - 1900)*12 + WHENHIV_M

ELSE IF 13 LE WHENHIV_M LE 16, USE MONTH APPROPRIATE TO SEASON & COMPUTE CMHIVTST AS ABOVE.

ELSE IF WHENHIV_M = DK OR RF, ASSIGN MONTH = 6 (June) & COMPUTE CMHIVTST AS ABOVE.

IF CMHIVTST NE blank AND 1 LE WHENHIV_M LE 12 AND CMHIVTST LT 9996, ESTABLISH CMHIVTST_FILL.

Edit Check IF3_1: IF (WHENHIV_M LE 12) AND CMHIVTST > CMINTVW, DISPLAY: The date entered cannot be after the date of interview. Please correct. HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IF3_2: IF (WHENHIV_M LE 12) AND CMHIVTST < CMBIRTH, DISPLAY: The date entered cannot be before his date of birth. Please correct. HARD, NONSUPPRESSIBLE EDIT CHECK.

Edit Check IF3_3: IF (13 LE WHENHIV_M LE 16) AND CMHIVTST > (CMINTVW +
2), DISPLAY: The date entered cannot be after the
date of interview. Please correct.

NSFG MALE CRQ FOR 2013-2015 OMB Number 0920-0314

HARD, NONSUPPRESSIBLE EDIT CHECK.

- Edit Check IF3_4: IF (13 LE WHENHIV_M LE 16) AND CMHIVTST < (CMBIRTH -3), DISPLAY: The date entered cannot be before his date of birth. Please correct. HARD, NONSUPPRESSIBLE EDIT CHECK.
- Edit Check IF3_5: IF (WHENHIV_M = DK OR RF) AND WHENHIV_Y > (CMINTVW/12 +1900), DISPLAY: The date entered cannot be after the date of interview. Please correct. HARD, NONSUPPRESSIBLE EDIT CHECK.
- Edit Check IF3_6: IF (WHENHIV_M = DK OR RF) AND WHENHIV_Y < (CMBIRTH/12
 +1900)- 1, DISPLAY: The date entered cannot be before
 his date of birth. Please correct.
 HARD, NONSUPPRESSIBLE EDIT CHECK.</pre>

FLOW CHECK I-10a: If CMHIVTST= 9999 (DK) or 9998 (RF) or (CMHIVTST > CMINTVW - 24 AND IF-3 WHENHIV_M = 13-16, DK, or RF), then ask IF-3b HIVTSTYR

{ Asked if R does not report specific month and year and year is within last 2 years HIVTSTYR

IF-3b. Did you have this last HIV test since (CMLSTYR_FILL)? Yes1 No5

FLOW CHECK I-10b: IF IF-3b HIVTSTYR=1 AND (CMHIVTST= 9999 (DK) or 9998 (RF)), THEN SET CMHIVTST = CMINTVW - 6

{ Asked if R ever was tested for HIV outside of blood donation (HIVTEST=1)
HIVRESULT
IF-3d. After your last test for HIV, did you find out your test result?

Yes1 No5

FLOW CHECK I-10b2: IF IF-3d HIVRESULT = 1, DK, or RF, GO TO IF-4 PLCHIV.

{ ASKED IF R DID NOT GET TEST RESULT (HIVRESULT=5)
WHYNOGET
IF-3e. What was the main reason why you did not receive your test
 result?

FLOW CHECK IF-3: IF IF-3e WHYNOGET = 20, ASK IF-3e_sp SP_WHYNOGET. ELSE GO TO IF-4 PLCHIV.

{IF IF-3e WHYNOGET=20, ASK: SP_WHYNOGET IF3e_sp. What was this other reason that you did not receive your HIV test result?

TYPE: STRING [250]

{ Asked if R ever was tested for HIV outside of blood donation (HIVTEST=1) $\ensuremath{\text{PLCHIV}}$

IF-4. IF IF-1 DONBLOOD = 1 THEN ASK:

Please look at Card 72. Not including tests you may have had as part of donating blood or blood products, where did you have that last test for HIV?

ELSE IF IF-1 DONBLOOD = 5, DK, or RF, THEN ASK: Please look at Card 72. Where did you have that last test for HIV?

[SHOW CARD 72]

Private doctor's office1 HMO facility2 Community health clinic, community clinic,
public health clinic
Family planning or Planned Parenthood clinic4
Employer or company clinic5
School or school-based clinic6
Hospital outpatient clinic7
Hospital emergency room8
Hospital regular room9
Urgent care center, urgi-care, or walk-in facility10
Your worksite11
Your home
Military induction or military service site13
Sexually transmitted disease (STD) clinic14
Laboratory or blood bank15
Some other place specify20

FLOW CHECK IF-4a: IF IF-4 PLCHIV=20, GO TO SP_PLCHIV HE-4sp ELSE GO TO FLOW CHECK IF-4b.

{IF IF-4 PLCHIV=20, ASK:
SP_PLCHIV
IF-4sp Where was this other place that you had your last HIV test?

TYPE: STRING [255]

FLOW CHECK IF-4b: IF IF-4 PLCHIV = 12 (your home), ASK IF-4a RHHIVT1. ELSE, GO TO IF-5 HIVTST.

you had an HIV test, did you use a rapid home HIV test?

Yes.....1 No.....5 (IF-5 HIVTST)

{ Asked if R reported their last HIV test was a rapid home HIV test
RHHIVT2
IF-4b. People use a rapid home HIV test for many different reasons.

Looking at Card 73, which of these reasons did you have for using the rapid home HIV test? ENTER all that apply I didn't want to get tested by a doctor or at an HIV testing site1 I didn't want other people to know I am getting tested ...2 I wanted to get tested together with someone, before I wanted to get tested by myself, before having sex4 I wanted to get tested by myself, after having sex5 A sex partner asked me to take a rapid home HIV test6 { Asked if R ever was tested for HIV outside of blood donation (HIVTEST=1) HIVTST IF-5. Please look at Card 73b. I am going to show you a list of reasons why some people have been tested for HIV, the virus that causes AIDS. IF IF-1 DONBLOOD = 1 THEN ASK: Not including tests you may have had as part of donating blood or blood products, which of these would you say was the main reason for your last HIV test? ELSE IF IF-1 DONBLOOD = 5, DK, or RF THEN ASK: Which of these would you say was the main reason for your last HIV test? [SHOW CARD 73b] Part of a medical checkup or surgical procedure (a doctor or medical provider asked for the test).....1 Required for health or life insurance coverage.....2 Required for marriage license or to get married......3 Required for military service or a job4 You wanted to find out if infected or not (you were the one who asked for the test).....5 Someone else suggested you should be tested6Intentionally Blank......7 You might have been exposed through sex or drug use8 You might have been exposed in some other way9 Some other reason - specify20 FLOW CHECK I-10c: IF IF-5 HIVTST=6, ASK IF-5b WHOSUGG. ELSE, GO TO FLOW CHECK I-10d.

{ Asked if HIVTST=6

WHOSUGG

IF-5b. Who suggested you should be tested - a doctor or other medical care provider, a sexual partner, or someone else?

> Doctor or other medical care provider.....1 Sexual partner.....2 Someone else3

FLOW CHECK I-10d: IF IF-5 HIVTST=20, ASK IF-5sp SP_HIVTST.

ELSE, GO TO IF-6 TALKDOCT.

SP HIVTST IF-5sp What was the main reason for your last HIV test? TYPE: STRING [255] { ASKED FOR ALL Rs. TALKDOCT IF-6. Has a doctor or other medical care provider ever talked with you about HIV, the virus that causes AIDS? Yes1 { ASKED FOR THOSE WITH TALKDOCT = YES AIDSTALK IF-7. Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other medical care provider? ENTER all that apply • ENTER space or [-] to separate responses. [SHOW CARD 74] How HIV/AIDS is transmitted.....1 Other sexually transmitted diseases like gonorrhea, herpes, or Hepatitis C.....2 Needle cleaning/using clean needles......4 Dangers of needle sharing......5 Abstinence from sex (not having sex)......6 Reducing your number of sexual partners......7 Condom use to prevent HIV or STD transmission.....8 "Safe sex" practices (abstinence, condom use, etc)....9 Getting tested and knowing your HIV status10 Other - specify......20 { Asked if AIDSTALK includes code 20 SP AIDSTALK IF IF-7 AIDSTALK=20 THEN ASK AND RECORD VERBATIM: IF-7sp. What was the other topic covered in your discussion with the doctor or medical care provider about HIV or AIDS? TYPE: STRING [50] { Asked for all RETROVIR IF-8. Please tell me if you think the following statement is definitely true, probably true, probably false, or definitely false, or if you don't know whether it is true or false. "There is a treatment available for pregnant women who are infected with the HIV virus to prevent passing the virus to their baby." Definitely true 1 Probably true 2 Probably false 3 Definitely false 4

Don't know if true or false 5