

B4. PERSONAL SEXUAL BEHAVIORS - NATIVE STAND EVALUATION QUESTIONNAIRE

USE WHEN YOU WANT TO EVALUATE:

Outcomes :

- ✓ Healthy behavior

Intervention types:

- ✓ Skill building sessions to increase capacity to engage in risk reduction behaviors
- ✓ Outreach to priority populations to increase their capacity to engage in risk reduction behaviors

Worked well with these populations:

- ✓ Aboriginal youth

Interventions for:

- ✓ HIV
- ✓ STIs

DESCRIPTION

This is a section of a longer questionnaire that covers a range of issues relevant to healthy decision-making that affects HIV risk. This section assesses Personal Sexual Behaviors, with sections for male, female and transgender, in 36 questions. This tool was used in an evaluation of a peer education program with Aboriginal youth. Results showed significant gains among peer leaders in talking to peers about sexual health; STI/HIV prevention and reproductive health knowledge; intention to use condoms to avoid pregnancy and STIs; and in condom self-efficacy.

WHY THIS TOOL MIGHT BE USEFUL FOR COMMUNITY-BASED INTERVENTIONS

- ✓ Some sections are suitable for before and after testing of a program's effects.
- ✓ Appropriate for use with all sexually active populations.
- ✓ Easily completed and analysed.
- ✓ Could easily be programmed to be given electronically.

Developed in:

- ✓ English

ADMINISTRATION, DESIGN, SCORING and ANALYSIS CONSIDERATIONS

ADMINISTRATION

- The full questionnaire is lengthy so if administering all questions would take about 20 minutes to fill out each time. However, sections of the questionnaire as described below in design options, will take no more than 10 minutes to fill out each time.
- Tell participants why you are using the questionnaire, being clear that it is to evaluate the program and not them, to help make the program better.
- Participation should be voluntary, so tell participants that it is ok if they do not complete the questionnaire, and give them a way to do something else at the same so that the confidentiality of this decision is protected.
- If used in a group setting, ensure that people feel safe and that the space is confidential; no one can see their answers (can see their screen or papers), and put completed questionnaires into a sealed envelope.

B4. PERSONAL SEXUAL BEHAVIORS - NATIVE STAND EVALUATION QUESTIONNAIRE

DESIGN OPTIONS

Since this is a long questionnaire, you may want to use only the questions indicated below. For example, you may want to only use the questions about vaginal sex: questions 4 through 17; you may want to only ask about past behavior in vaginal sex, and not future intentions: questions 4 through 9, and 12 through 17. Please note that the complete questionnaire would be programmed with skip patterns based on specific responses and for gender appropriate questions: these have been removed from this version to avoid numbering confusion.

Measuring before and after intervention (this is the best option because it measures actual change)

1. **WHEN TO USE:** Have the questionnaires filled out before the intervention or at the very beginning of it, and again after, as close to the end as possible (often the very last session is not suitable because it may be a celebration, or have low attendance).
2. **LINKING RESULTS:** Include a way to match the same person's pre and post questionnaires while protecting confidentiality, for example using a [password](#) or unique identifier that respondents generate and remember.
3. **SCORING:** Assign a numerical value to each of the possible answers except for the responses of "Don't know" and "Prefer not to answer". It is easiest if the higher numbers always mean the same thing (e.g., more positive response in terms of youth outcomes): give a score of 1 to the answers that are less risky, and a score of 0 to answers that are more risky. For example, for question 8 the least risky or more positive response to "*When you have vaginal sex, how often do you use a condom?*" would be "every time" so you would give this response a score of 1. Create each person's score for each of the relevant sections, by adding up the total for the questions answered.
4. **ANALYSIS:** Compare the pre and post scores for each individual, noting how many people improve, how many stay the same, and how many get worse.

Measuring change only after the end of an intervention: (this is the second best option, because people often think the intervention has had more effect than it really did.)

1. Adapt all the questions so that they ask people what their answer is now and what it was before the intervention
For example, for question 8, ask: *When you have vaginal sex, how often do you use a condom?* AND *Before the workshop, when you had vaginal sex, how often did you use a condom?* (see an [example](#))
2. **SCORING:** Assign a numerical value to each of the possible answers except "Don't know" and "Prefer not to answer". It is easiest if the higher numbers always mean the same thing (e.g., more positive response in terms of youth outcomes): give a score of 1 to the answers that are less risky, and a score of 0 to answers that are more risky. For example, for question 8 the least risky or more positive response to "*When you have vaginal sex, how often do you use a condom?*" would be "Every time" so you would give this response a score of 1. Create each person's score for each of the relevant sections, by adding up the total for the questions answered.
3. **ANALYSIS:** Compare the pre and post scores for each individual, noting how many people say they improve, how many stay the same, and how many get worse.

B4. Personal Sexual Behaviors

Please note: this questionnaire would be programmed with skip patterns based on specific responses and for gender appropriate questions: these have been removed from this version to avoid numbering confusion.

These questions ask you about your personal sexual behavior. Remember, your answers are completely CONFIDENTIAL and will not be shared with anyone beyond the project team. (*Note: Vaginal sex is when a guy puts his penis in a girl's vagina. Oral sex is when you put your mouth on your partner's penis or vagina. Anal sex is when a guy puts his penis in his partner's anus or butt.*) (Choose one answer for each question unless instructed to do otherwise.)

1. Which best describes your gender? (Choose one)

- Male
- Female
- Transgender

2. Are you a (choose one):

- Male to female transgender
- Female to male transgender

3. Which of the following best describes you?

- Straight (heterosexual)
- Gay/lesbian
- Bisexual
- Not sure
- Other (specify: ____)
- Prefer not to answer

4. Have you ever had vaginal, oral, or anal sex?

- Yes
- No
- Prefer not to answer

5. Have you ever had vaginal, oral, or anal sex with a male?

- Yes
- No
- Prefer not to answer

6. Have you ever had vaginal, oral, or anal sex with a female?

- Yes
- No
- Prefer not to answer

7. First you'll be asked about vaginal sex. Have you ever had vaginal sex?

- Yes
- No
- Prefer not to answer

8. **When you have vaginal sex, how often do you use a condom?**
- Every time
 - Almost every time
 - Half the time
 - Less than half the time
 - Never
 - Prefer not to answer
9. **How long have you been using a condom every time you have vaginal sex?**
- Less than 6 months
 - 6 months or more
 - Prefer not to answer
10. **Do you think in the next 6 months that you will start using condoms every time you have vaginal sex?**
- Yes
 - No
 - Prefer not to answer
11. **Do you think in the next 30 days you will start using condoms every time you have vaginal sex?**
- Yes
 - No
 - Prefer not to answer
12. **In your entire life, how many different people have you had vaginal sex with?**
- None
 - Number: _____ (or if you don't remember exactly, between ____ and ____)
 - Don't know
 - Prefer not to answer
13. **In the past 3 months, how many different people have you had vaginal sex with?**
- None
 - Number: _____ (or if you don't remember exactly, between ____ and ____)
 - Don't know
 - Prefer not to answer
14. **In the past 3 months, how many times have you had vaginal sex?**
- None
 - Number: _____ (or if you don't remember exactly, between ____ and ____)
 - Don't know
 - Prefer not to answer
15. **The last time you had vaginal sex did you or your partner use a condom?**
- Yes
 - No
 - Prefer not to answer
16. **The last time you had vaginal sex, what other type(s) of protection did you or your partner use?
(Check all that apply)**
- Birth control pill
 - Depo (shot)
 - Withdrawal

- Spermicide
- Other (specify ____)
- None
- Don't know
- Prefer not to answer

17. Did you drink alcohol or use drugs before you had vaginal sex the last time?

- Yes
- No
- Prefer not to answer

<p>The next few questions are about anal sex. Anal sex is when a guy puts his penis in his partner's anus or butt.</p> <p>18. Have you <u>ever</u> had anal sex with a female?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer 	<p>The next few questions are about anal sex. Anal sex is when a guy puts his penis in his partner's anus or butt.</p> <p>19. Have you <u>ever</u> had anal sex with a male?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer
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<p>20. When you have anal sex with a female, how often do you use a condom?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Every time <input type="checkbox"/> Almost every time <input type="checkbox"/> Half the time <input type="checkbox"/> Less than half the time <input type="checkbox"/> Never <input type="checkbox"/> Prefer not to answer 	<p>21. When you have anal sex with a male, how often do you use a condom?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Every time <input type="checkbox"/> Almost every time <input type="checkbox"/> Half the time <input type="checkbox"/> Less than half the time <input type="checkbox"/> Never <input type="checkbox"/> Prefer not to answer
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<p>22. How long have you been using a condom every time you have anal sex with a female?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Less than 6 months <input type="checkbox"/> 6 months or more <input type="checkbox"/> Prefer not to answer 	<p>23. How long have you been using a condom every time you have anal sex with a male?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Less than 6 months <input type="checkbox"/> 6 months or more <input type="checkbox"/> Prefer not to answer
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<p>24. Do you think <u>in the next 6 months</u> that you will start using condoms every time you have anal sex with a female?</p> <p>19. Yes 20. No 21. Prefer not to answer</p>	<p>25. Do you think <u>in the next 6 months</u> that you will start using condoms every time you have anal sex with a male?</p> <p>22. Yes 23. No 24. Prefer not to answer</p>
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<p>26. Do you think <u>in the next 30 days</u> you will start using condoms every time you have anal sex with a female?</p> <p>25. Yes 26. No 27. Prefer not to answer</p>	<p>27. Do you think <u>in the next 30 days</u> you will start using condoms every time you have anal sex with a male?</p> <p>28. Yes 29. No 30. Prefer not to answer</p>
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<p>28. <u>In your entire life</u>, how many different females have you had anal sex with?</p> <p><input type="checkbox"/> None <input type="checkbox"/> Number of partners: _____ <input type="checkbox"/> Prefer not to answer</p>	<p>29. <u>In your entire life</u>, how many different males have you had anal sex with?</p> <p><input type="checkbox"/> None <input type="checkbox"/> Number of partners: _____ <input type="checkbox"/> Prefer not to answer</p>
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<p>30. <u>In the past 3 months</u>, how many different females have you had anal sex with?</p> <p><input type="checkbox"/> None <input type="checkbox"/> Number of partners: _____ <input type="checkbox"/> Prefer not to answer</p>	<p>31. <u>In the past 3 months</u>, how many males have you had anal sex with?</p> <p><input type="checkbox"/> None <input type="checkbox"/> Number of partners: _____ <input type="checkbox"/> Prefer not to answer</p>
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<p>32. <u>In the past 3 months</u>, how many times have you had anal sex with a female?</p> <p><input type="checkbox"/> None <input type="checkbox"/> Number of times: _____ <input type="checkbox"/> Prefer not to answer</p>	<p>33. <u>In the past 3 months</u>, how many times have you had anal sex with a male?</p> <p><input type="checkbox"/> None <input type="checkbox"/> Number of times: _____ <input type="checkbox"/> Prefer not to answer</p>
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<p>34. The last time you had anal sex with a female, did you or your partner use a condom?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer</p>	<p>36. The last time you had anal sex with a male, did you or your partner use a condom?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer</p>
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<p>37. The very last time you had anal sex with a female, what other type(s) of protection did you or your partner use? (Check all that apply)</p> <p><input type="checkbox"/> Withdrawal <input type="checkbox"/> Spermicide <input type="checkbox"/> Other (specify _____) <input type="checkbox"/> None <input type="checkbox"/> Don't know <input type="checkbox"/> Prefer not to answer</p>	<p>38. The very last time you had anal sex with a male, what other type(s) of protection did you or your partner use? (Check all that apply)</p> <p><input type="checkbox"/> Withdrawal <input type="checkbox"/> Spermicide <input type="checkbox"/> Other (specify _____) <input type="checkbox"/> None <input type="checkbox"/> Don't know <input type="checkbox"/> Prefer not to answer</p>
<p>39. Did you drink alcohol or use drugs before you had anal sex the last time with a female?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer</p>	<p>40. Did you drink alcohol or use drugs before you had anal sex the last time with a male?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer</p>

The next question is about performing oral sex. Oral sex is when a person puts their mouth on their partner's penis or vagina.

41. Have you ever given or received oral sex?

- Yes
- No
- Prefer not to answer

42. In the past 30 days, have you given or received oral sex?

- Yes
- No
- Prefer not to answer

43. The last time you gave or received oral sex, did you or your partner use a condom or other latex barrier?

- Yes
- No
- Prefer not to answer

Source: Obtained from authors of:

De Ravello, L., Rushing, S. C., Doshi, S., Smith, M. U., & Tulloch, S. (2011). **Evaluating native stand: A peer education curriculum for healthy decision-making for native youth.** *Sexually Transmitted Infections*, 87, A226.