

## Supplemental Information

### APPENDIX 1 Adolescent Hospital Experience Survey

Are you a:

- Male
- Female
- Other

Display this question:

If are you a: = other

Specify other

sex: \_\_\_\_\_

\_\_\_\_\_

Why are you in the hospital?

- Abdominal pain
- Mental health reason
- Took drugs/medications to harm myself
- Took drugs/medications to feel better
- Took drugs/medications by accident
- Other (please describe)

Display this question:

If why are you in the hospital? = other (please describe)

Please describe why you are in the hospital: \_\_\_\_\_

\_\_\_\_\_

During this hospital stay, your doctors:

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Listened carefully to you	0	0	0	0	0
Explained things in a way that was easy to understand	0	0	0	0	0
Showed respect for what you said	0	0	0	0	0
Spent enough time with you	0	0	0	0	0

During this hospital stay (not including when in the emergency department, if you went to the emergency department):

Did you speak with a doctor privately about your sexual health (meaning without your parents or other visitors in the room)?

- Yes
- No, never happened
- No, only in the emergency department

I don't remember

Display this question:

If did you speak with a doctor privately about your sexual health (meaning without your parents or o... = yes

Did a doctor tell you that what you talked about with them was confidential, meaning it would not be shared with anyone else?

- Yes
- No, never happened
- No, only in the emergency department
- I don't remember

Display this question:

If Did you speak with a doctor privately about your sexual health (meaning without your parents or o... = no, never happened

Would you have liked to talk with a doctor in private about your sexual health, without your parents or other visitors in the room?

- Yes
- No
- Unsure

During this hospital stay (not including when in the emergency department), did your doctors:

If talk with you about birth control? = yes

How helpful was this discussion in understanding how and/or why to use birth control?

- Not at all helpful
- Somewhat helpful
- Helpful
- Very helpful
- Not sure

Display this question:

If talk with you about birth control? = yes

Were you started on birth control during your hospital stay?

- Yes
- No
- I was already on birth control

Talk with you about condoms?

- Yes
- No, never happened
- No, only in the emergency department
- I don't remember

Display this question:

If talk with you about condoms? = yes

How helpful was this discussion in understanding how to use condoms to prevent HIV/AIDS and other STIs (like chlamydia, gonorrhea, etc)?

- Not at all helpful
- Somewhat helpful
- Helpful
- Very helpful
- Not sure

Were you given condoms during your hospital stay?

- Yes
- No

Talk with you about getting tested for HIV or other STIs (like chlamydia, gonorrhea, etc)?

- Yes
- No, never happened
- No, only in the emergency department
- I don't remember

Display this question:

If talk with you about getting tested for HIV or other STIs (like chlamyd ... = yes

Were you tested for these infections during your hospitalization?

- Yes
- No
- I don't know

Display this question:

If talk with you about getting tested for HIV or other STIS (like chlamyd ... = yes

How helpful was this discussion about testing for HIV/AIDS and other STIs?

- Not at all helpful
- Somewhat helpful
- Helpful
- Very helpful
- Not sure

Talk with you about sexual orientation (ie, if you are attracted to men, women, or both)?

- Yes
- No, never happened
- No, only in the emergency department
- I don't remember

Display this question:

If talk with you about sexual orientation (ie, if you are attracted to men, women, or both)? = yes

How helpful was this discussion about sexual orientation?

- Not at all helpful
- Somewhat helpful
- Helpful
- Very helpful
- Not sure

These questions ask about sexual behavior. As with the rest of the survey, your answers are completely anonymous (cannot be traced back to you).

Have you ever had sexual intercourse?

- Yes
- No

Display this question:

If have you ever had sexual intercourse?

= yes

How old were you when you had sexual intercourse for the first time?

- 11 years old or younger
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old or older

Display this question:

If have you ever had sexual intercourse?

= yes

During your life, with how many people have you had sexual intercourse?

- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more people

Display this question:

If have you ever had sexual intercourse?

= yes

During the past 3 months, with how many people did you have sexual intercourse?

- 0 people
- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more people

Display this question:

If have you ever had sexual intercourse?

= yes

Did you drink alcohol or use drugs before you had sexual intercourse the last time?

- Yes
- No
- I don't remember

Display this question:

If have you ever had sexual intercourse?

= yes

The last time you had sexual intercourse, did you or your partner use a condom?

- Yes
- No
- I don't remember

Display this question:

If have you ever had sexual intercourse?

= yes

The last time you had sexual intercourse, what 1 method did you or your partner use to prevent pregnancy?

- No method was used to prevent pregnancy
- Birth control pills
- Condoms
- An intrauterine device (such as Mirena or ParaGard) or implant (such as Implanon or Nexplanon)
- A shot (such as Depo-Provera), patch (such as Ortho Evra), or birth control ring (such as NuvaRing)
- Withdrawal or some other method
- Not sure

Display this question:

If have you ever had sexual intercourse?

= yes

During your life, with whom have you had sexual contact?

- Females
- Males
- Females and males

Which of the following best describes you?

- Heterosexual (straight)
- Gay or lesbian
- Bisexual
- Not sure

Age

- 13
- 14
- 15
- 16
- 17

Race

- Asian American
- Black
- Other
- White

Display this question:

If race = other

Specify other race: \_\_\_\_\_

\_\_\_\_\_

Are you Hispanic?

- Yes
- No

Parents' marital status

- Married
- Divorced/separated
- Never married
- Widowed

Are you currently enrolled in school (including if on summer vacation)?

- Yes
- No

Current living arrangements

- With parent(s)
- With relative other than parent
- In foster care
- In a group home
- In a detention center
- Other

Display this question:

If current living arrangements = other

Specify other living arrangement: \_\_\_\_\_

\_\_\_\_\_

Do you have a job currently?

- Yes
- No

Please enter the password from your survey card. Your Amazon gift code will appear on the next page. \_\_\_\_\_

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