Appendix A

Demographics

1. How old are you? _______

2. Please provide your current education level at the University of Connecticut (Check one)
   ____ 1. Freshman
   ____ 2. Sophomore
   ____ 3. Junior
   ____ 4. Senior
   ____ 5. Fifth Year
   ____ 6. Other - please specify

3. What is your major? ______

4. What is your race? (Check one)
   ____ 1. White/Caucasian
   ____ 2. Black/African-American
   ____ 3. Native American
   ____ 4. American Indian or Alaska Native
   ____ 5. Native Hawaiian or other Pacific Islander
   ____ 6. Asian
   ____ 7. Other – please specify

5. What is your ethnicity? (Check one)
   ____ 1. Not Hispanic or Latino
   ____ 2. Hispanic or Latino

6. What is your total annual family income? (Check one)
   ____ 1. Less than $10,000 per year
   ____ 2. $10,000 – $19,999 per year
   ____ 3. $20,000 – $29,999 per year
   ____ 4. $30,000 – $39,999 per year
   ____ 5. $40,000 – $49,999 per year
   ____ 6. $50,000 – $74,999 per year
   ____ 7. $75,000 – $99,999 per year
   ____ 8. $100,000 - $150,000 per year
   ____ 9. More than $150,000 per year

7. Do you currently work outside of school?
   ____ 1. No
   ____ 2. Yes – Part Time
   ____ 3. Yes - Full Time
   ____ 4. Yes - Summer Job
8. What is your religion?
   ___1. None          ___4. Islamic
   ___2. Catholic       ___5. Jewish
   ___3. Protestant     ___6. Other

9. Please indicate who you live with (check all that apply):
   ___1. Self
   ___2. Partner/Spouse
   ___3. Parents/Sibling
   ___4. Roommate
   ___5. Other – please specify:___________

10. What is your sexual orientation?
    ___1. Heterosexual
    ___2. Bisexual
    ___3. Homosexual

General Health Background

11. Do you currently have health insurance?
    ___1. No
    ___2. Yes

12. Do you have a regular physician?
    ___1. No
    ___2. Yes

13. What is your current weight? ___________ Pounds

14. What is your current height? ____ Feet ____ Inches

15. Have you ever been diagnosed with depression, anxiety, substance use problems, or any
    another mental health issue?
    ___1. No
    ___2. Yes - Please describe: ____________________________________________

16. Have you ever been diagnosed with diabetes, heart disease, or any other chronic medical
    condition?
    ___1. No
    ___2. Yes - Please describe: ____________________________________________
17. Have you ever been diagnosed with cervical cancer?
   ___1. No
   ___2. Yes

18. Have you ever been diagnosed with any other kind of cancer?
   ___1. No
   ___2. Yes - Please describe: _____________________________________________

19. Have you ever been diagnosed with any sexually transmitted diseases (STDS) (e.g., Chlamydia, Gonorrhea, HIV, HEP-B, HPV, HIV, etc.,)?
   ___1. No
   ___2. Yes - Please describe: _____________________________________________

20. Do you have a history of genital warts?
   ___1. No
   ___2. Yes

21. Has anyone in your family ever been diagnosed with cervical cancer?
   ___1. No
   ___2. Yes - Who: _______________________________________________________

22. Do you have any other family history of cancer?
   ___1. No
   ___2. Yes - Please describe (who/type of cancer): __________________________

23. In general, how would you rate your health? (Boardman, 2006)
   ___1. Poor
   ___2. Fair
   ___3. Good
   ___4. Very good
   ___5. Excellent

**Health Behaviors**

1. What is your sexual experience status?
   ___1. Never had sexual intercourse
   ___2. Not currently involved in sexual relationship, but have had sexual intercourse
   ___3. Currently involved in sexual relationship
2. How old were you when you first had sexual intercourse?
   ___1. Less than 12 years old
   ___2. 12 - 14 years old
   ___3. 15 - 17 years old
   ___4. 18
   ___5. greater than 19 years old

3. How many sexual partners you have had in the past year?
   ___1. Zero (0)
   ___2. One (1)
   ___3. Two - Four (2 - 4)
   ___4. Five - Seven (5 - 7)
   ___5. More than 8

4. How many sexual partners have you had in your lifetime?
   ___1. Zero (0)
   ___2. One (1)
   ___3. Two - Four (2 - 4)
   ___4. Five - Seven (5 - 7)
   ___5. More than 8

5. Do you use condoms?
   ___0. Not applicable
   ___1. Never
   ___2. Rarely
   ___3. Occasionally
   ___4. Sometimes
   ___5. Usually
   ___6. Always

6. Do you currently use oral contraceptives?
   ___1. No
   ___2. Yes

7. Have you ever been pregnant?
   ___1. No
   ___2. Yes

8. Do you currently use illicit/illegal drugs?
   ___1. No
   ___2. Yes - please describe: ________________________________
9. Do you currently engage in regular exercise?
   ___1. No
   ___2. Yes - please list type of exercise and frequency: _____________________

10. Do you consume alcoholic beverages?
    ___1. No
    ___2. Yes – On average, how many drinks do you consume per day? ___________

11. Have you ever smoked cigarettes?
    ___1. No
    ___2. Yes

12. Do you currently smoke cigarettes?
    ___1. No
    ___2. Yes

13. Have you ever had a Pap screen?
    ___1. No
    ___2. Yes

14. Did you ever have an abnormal pap?
    ___1. No
    ___2. Yes

15. How old were you when you first had a pap screen?
    ___1. Younger than 16
    ___2. Sixteen
    ___3. Seventeen
    ___4. Eighteen
    ___5. Nineteen
    ___6. Twenty or older

16. When was the last time you had a pap screen?
    ___1. Less than 6 months ago
    ___2. About 6mos to 1 years ago
    ___3. About 1 to 2 years ago
    ___4. More than 2 years ago
17. How did you first learn about Pap screens?
   ___1. Never before heard about pap screens until today
   ___2. Parent
   ___3. Friend
   ___4. Teachers
   ___5. Doctor/nurse
   ___6. Media
   ___7. Other

18. How often do you anticipate getting a Pap screen done in the future?
   ___1. Every 6 months
   ___2. Every 12 months
   ___3. Every 18 months
   ___4. Every 24 months
   ___5. Less than every 24 months

19. Have you ever delayed/avoided getting a Pap test?
   ___1. No
   ___2. Yes

20. Have you been asked to have pap in 6 months?
   ___1. No
   ___2. Yes

21. Have you ever had a colposcopy?
   ___1. No
   ___2. Yes

22. Have you ever had an HPV test?
   ___1. No
   ___2. Yes

23. Before you came here for this study today, had you ever heard of HPV?
   ___1. No
   ___2. Yes

24. Before you came here for this study today, had you ever heard of the HPV vaccine?
   ___1. No
   ___2. Yes
25. Where did you first hear about the HPV vaccine (Check all that apply):
   - My PCP
   - My gynecologist
   - Other doctor or nurse
   - On the television
   - On the radio
   - From a friend
   - From a family member
   - In a magazine
   - On the internet
   - On a flyer
   - Other - Please describe: ________________________________

26. Has your Primary Care Physician (PCP) ever recommended the HPV vaccine to you?
   - 1. No
   - 2. Yes

27. Has your gynecologist every recommended the HPV vaccine to you?
   - 1. No
   - 2. Yes

28. How much would you say you know about the HPV vaccine?
   - 1. Nothing at all
   - 2. A little
   - 3. A moderate amount
   - 4. A lot

29. Where would you most want to get info about the HPV vaccine?
   - 1. My mom or dad
   - 2. My friends
   - 3. Doctor or nurse
   - 4. My school
   - 5. Internet
   - 6. TV or radio
   - 7. Newspaper or magazine
   - 8. Commercial or ad from a drug company

30. Have any of your friends talked about the HPV vaccine?
   - 1. No
   - 2. Yes
30. Before today, have you thought about getting the HPV vaccine?
   ___1. No
   ___2. Yes

31. Have you completed all 3 series of the Human Pappillomavirus (HPV) vaccine?
   ___1. No
   ___2. Yes

32. Have you had at least 1 of 3 of the HPV vaccine shots required in the vaccination series?
   ___1. No
   ___2. Yes

33. If you began the HPV vaccine series but did not complete it, do you plan to complete the series?
   ___1. No - (if no, why not: ____________________________________________)
   ___2. Yes - (if yes, approximately when: _________________________________)

34. Before today, where did you get any your information about HPV and the HPV vaccine?  Info about HPV: __________________________
    HPV vaccine: __________________________

CHIAS

1. The HPV vaccine might cause short term problems, like fever or discomfort.
   ___1. Strongly Disagree
   ___2. Somewhat Disagree
   ___3. Somewhat Agree
   ___4. Strongly Agree

2. The HPV vaccine is being pushed to make money for drug companies.
   ___1. Strongly Disagree
   ___2. Somewhat Disagree
   ___3. Somewhat Agree
   ___4. Strongly Agree
3. The HPV vaccine might cause lasting health problems.
   ___1. Strongly Disagree
   ___2. Somewhat Disagree
   ___3. Somewhat Agree
   ___4. Strongly Agree

4. If a teenage girl gets the HPV vaccine, she may be more likely to have sex.
   ___1. Strongly Disagree
   ___2. Somewhat Disagree
   ___3. Somewhat Agree
   ___4. Strongly Agree

5. I think the HPV vaccine is unsafe.
   ___1. Strongly Disagree
   ___2. Somewhat Disagree
   ___3. Somewhat Agree
   ___4. Strongly Agree

6. Adolescent girls are too young to get a vaccine for a sexually transmitted infection like HPV.
   ___1. Strongly Disagree
   ___2. Somewhat Disagree
   ___3. Somewhat Agree
   ___4. Strongly Agree

7. How hard do you think it would be to find a provider or clinic where you can afford the vaccine?
   ___1. Not hard at all
   ___2.5 Somewhat hard
   ___4. Very Hard

8. How hard do you think it would be to find a provider or clinic that is easy to get to?
   ___1. Not hard at all
   ___2.5 Somewhat hard
   ___4. Very Hard

9. How hard do you think it would be to find a provider or clinic that has the vaccine available?
   ___1. Not hard at all
   ___2.5 Somewhat hard
   ___4. Very Hard
10. I am concerned that the HPV vaccine costs more than I can pay.
   ___1. Strongly Disagree
   ___2. Somewhat Disagree
   ___3. Somewhat Agree
   ___4. Strongly Agree

11. How hard do you think it would be to find a provider or clinic where you don't have to wait long to get an appointment?
   ___1. Not hard at all
   ___2.5 Somewhat hard
   ___4. Very Hard

12. How effective do you think the HPV vaccine is in preventing genital warts?
   ___1. Slightly effective
   ___2. Moderately effective
   ___3. Very effective
   ___4. Extremely effective

13. How effective do you think the HPV vaccine is in preventing cervical cancer?
   ___1. Slightly effective
   ___2. Moderately effective
   ___3. Very effective
   ___4. Extremely effective

14. I don’t have enough information about the HPV vaccine to decide whether to get it.
   ___1. Strongly Disagree
   ___2. Somewhat Disagree
   ___3. Somewhat Agree
   ___4. Strongly Agree

15. The HPV vaccine is so new that I want to wait a while before deciding if I should get it.
   ___1. Strongly Disagree
   ___2. Somewhat Disagree
   ___3. Somewhat Agree
   ___4. Strongly Agree

16. Other women my age in my community are getting their daughters the HPV vaccine
   ___1. Strongly Disagree
   ___2. Somewhat Disagree
   ___3. Somewhat Agree
   ___4. Strongly Agree
VI

1. Girls/women who receive the HPV vaccine need less frequent pelvic exams.
   ___False
   ___True

2. Girls/Women who receive the HPV vaccine do not have to get Pap smears.
   ___False
   ___True

3. The HPV vaccine protects against all sexually transmitted infections.
   ___False
   ___True

4. The HPV vaccine protects against cervical cancer.
   ___False
   ___True

5. Girls/women who receive the HPV vaccine can worry less about getting all sexually transmitted infections.
   ___False
   ___True

6. Women who receive the HPV vaccine no longer have to use condoms during sexual intercourse.
   ___False
   ___True

AAHC

1. The virus associated with cervical cancer is transmitted by:
   a. Sexual intercourse
   b. Maternal-fetal transmission
   c. Blood transfusions
   d. Inanimate objects
   e. I don’t know

2. Cervical cancer and pre-cancer cells are associated with the presence of:
   a. Epstein-Barr virus
   b. Herpes simplex virus
   c. Human papillomavirus
   d. Human immunodeficiency virus
   e. I don’t know
3. Cervical cancer can be diagnosed by:
   a. X-rays
   b. Pap tests
   c. Blood tests
   d. Urine test
   e. I don’t know

4. Prevention of cervical cancer may require:
   a. Delayed onset of sexual activity
   b. Annual Pap test
   c. Use of condoms
   d. All of the above,
   e. I don’t know

5. Human papillomavirus (HPV) can cause:
   a. Vaginal discharge
   b. Genital warts
   c. Itching
   d. Burning urination
   e. I don’t know

6. HPV can live in the skin without causing growths or changes.
   a. No
   b. Yes
   c. I don’t know

   Please identify which of the following are risk factors of cervical cancer:

7. Multiple sex partners
   a. No
   b. Yes
   c. I don’t know

8. Having genital warts
   a. No
   b. Yes
   c. I don’t know

9. Sexual intercourse before age 18
   a. No
   b. Yes
   c. I don’t know
10. Taking illegal drugs
   a. No
   b. Yes
   c. I don’t know

11. Having contracted any sexually transmitted diseases
   a. No
   b. Yes
   c. I don’t know

12. Smoking cigarettes
   a. No
   b. Yes
   c. I don’t know

13. Poor diet or nutrition
   a. No
   b. Yes
   c. I don’t know

14. Using tampons
   a. No
   b. Yes
   c. I don’t know

15. Use of oral contraceptives
   a. No
   b. Yes
   c. I don’t know

Please respond to the following questions by choosing the best response:

16. I worry about getting cervical cancer.
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree
17. I worry about getting human papillomavirus (HPV).
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree

18. I believe that I am at risk for developing cervical cancer.
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree

19. I believe I am at risk for contracting HPV.
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree

20. All women have an equal chance of developing cervical cancer; it is beyond my personal control.
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree

21. My chances of getting cervical cancer are high.
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree

22. My chances of contracting HPV are low.
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree
23. I have the ability to avoid cervical cancer.
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree

24. I have the ability to avoid HPV infection.
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree

25. All women who develop cervical cancer must have their uterus removed.
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree

26. Among the diseases that I can imagine, getting cancer of the cervix is among the most serious.
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree

27. I believe HPV is curable with proper medical treatment.
   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree

   ___1. Strongly Disagree
   ___2. Disagree
   ___3. Neutral
   ___4. Agree
   ___5. Strongly Agree
29. HPV is a life-threatening disease.
___1. Strongly Disagree
___2. Disagree
___3. Neutral
___4. Agree
___5. Strongly Agree

30. No one dies anymore from cervical cancer.
___1. Strongly Disagree
___2. Disagree
___3. Neutral
___4. Agree
___5. Strongly Agree

**Attitudes**

1. Which of the following best describes how you feel about getting the HPV vaccine in the next year?

   ![Good Neutral Bad](image)

   Good Neutral Bad

2. Which of the following best describes how you feel about getting more information about the HPV vaccine?

   ![Good Neutral Bad](image)

   Good Neutral Bad

3. Which of the following best describes how you feel discussing the HPV vaccine with your friends?

   ![Good Neutral Bad](image)

   Good Neutral Bad

4. Which of the following best describes how you would feel considering getting the HPV vaccine?

   ![Good Neutral Bad](image)

   Good Neutral Bad

5. Which of the following best describes how you would feel getting the HPV vaccine in the next month?

   ![Good Neutral Bad](image)

   Good Neutral Bad
6. How likely is it that you will actually get the HPV vaccine in the next year?

   Good         Neutral               Bad

7. Which of the following best describes how you would feel actually getting the vaccine in the next 3 years?

   Good         Neutral               Bad

8. Which of the following best describes how it would be getting the HPV vaccine in the next year?

   Nice         Neutral              Awful

9. Which of the following best describes how it would be getting more information about the HPV vaccine?

   Nice         Neutral              Awful

10. Which of the following best describes how it would be discussing the HPV vaccine with your friends?

    Nice         Neutral              Awful

11. Which of the following best describes how it would be considering getting the HPV vaccine?

    Nice         Neutral              Awful

12. Which of the following best describes how it would be getting the HPV vaccine in the next month?

    Nice         Neutral              Awful
13. How likely is it that you will actually get the HPV vaccine in the next year?

Nice         Neutral              Awful

14. Which of the following best describes how it would be to actually getting the vaccine in the next 3 years?

Nice         Neutral              Awful

15. Which of the following best describes how it would be to get the HPV vaccine in the next year?

Pleasant        Neutral        Unpleasant

16. Which of the following best describes how it would be to get more information about the HPV vaccine?

Pleasant        Neutral        Unpleasant

17. Which of the following best describes how it would be to discuss the HPV vaccine with your friends?

Pleasant        Neutral        Unpleasant

18. Which of the following best describes how it would be to consider getting the HPV vaccine?

Pleasant        Neutral        Unpleasant

19. Which of the following best describes how it would be to get the HPV vaccine in the next month?

Pleasant        Neutral        Unpleasant

20. How likely is it that you will actually get the HPV vaccine in the next year?

Pleasant        Neutral        Unpleasant
21. Which of the following best describes how it would be to get the vaccine in the next 3 years?

Pleasant Neutral Unpleasant

NORMS

1. Most people who are important to me think I should get the HPV vaccine in the next year.
   ___1. Very untrue
   ___2. Untrue
   ___3. Neither True or Untrue
   ___4. True
   ___5. Very True

2. Most people who are important to me think I should get more information about the HPV vaccine.
   ___1. Very untrue
   ___2. Untrue
   ___3. Neither True or Untrue
   ___4. True
   ___5. Very True

3. Most people who are important to me think I should discuss the HPV vaccine with my friends.
   ___1. Very untrue
   ___2. Untrue
   ___3. Neither True or Untrue
   ___4. True
   ___5. Very True

4. Most people who are important to me think I should consider getting the HPV vaccine.
   ___1. Very untrue
   ___2. Untrue
   ___3. Neither True or Untrue
   ___4. True
   ___5. Very True
5. Most people who are important to me think I should get the HPV vaccine in the next month.
___1. Very untrue
___2. Untrue
___3. Neither True or Untrue
___4. True
___5. Very True

6. Most people who are important to me think I should get the HPV vaccine in the next year.
___1. Very untrue
___2. Untrue
___3. Neither True or Untrue
___4. True
___5. Very True

7. Most people who are important to me think I should get the vaccine in the next 3 years.
___1. Very untrue
___2. Untrue
___3. Neither True or Untrue
___4. True
___5. Very True

**Intentions**

1. Which of the following best describes how you feel about getting the HPV vaccine in the next year?
___1. Undecided
___2. I do not want to get the vaccine
___3. I want to get the vaccine

2. How likely is it that you will try to get more information about the HPV vaccine?
___1. Very unlikely
___2. Somewhat unlikely
___3. Moderately unlikely
___4. Moderately likely
___5. Somewhat likely
___6. Very likely
3. How likely is it that you will discuss the HPV vaccine with your friends?
   ___1. Very unlikely
   ___2. Somewhat unlikely
   ___3. Neutral
   ___4. Somewhat likely
   ___5. Very likely

4. How likely is it that you will consider getting the HPV vaccine?
   ___1. Very unlikely
   ___2. Somewhat unlikely
   ___3. moderately unlikely
   ___4. moderately likely
   ___5. Somewhat likely
   ___6. Very likely

5. How likely is it that you will actually get the HPV vaccine in the next month?
   ___1. Very unlikely
   ___2. Somewhat unlikely
   ___3. moderately unlikely
   ___4. moderately likely
   ___5. Somewhat likely
   ___6. Very likely

6. How likely is it that you will actually get the HPV vaccine in the next year?
   ___1. Very unlikely
   ___2. Somewhat unlikely
   ___3. moderately unlikely
   ___4. moderately likely
   ___5. Somewhat likely
   ___6. Very likely

7. How likely is it that you will actually get the HPV vaccine in the next 3 years?
   ___1. Very unlikely
   ___2. Somewhat unlikely
   ___3. moderately unlikely
   ___4. moderately likely
   ___5. Somewhat likely
   ___6. Very likely
1. How would you describe your motivation to get the vaccine?
   ___1. Not at all Strong
   ___2. A little strong
   ___3. Moderately Strong
   ___4. Very Strong

Skills

1. How effectively can you get vaccinated completely against HPV; that is get all three vaccine shots?
   ___1. Very ineffectively
   ___2. Slightly ineffectively
   ___3. Neither effectively nor effectively
   ___4. Slightly effectively
   ___5. Completely effectively

2. How effectively can you find the time to go to your health care provider for three visits to get vaccinated against HPV?
   ___1. Very ineffectively
   ___2. Slightly ineffectively
   ___3. Neither effectively nor effectively
   ___4. Slightly effectively
   ___5. Completely effectively

3. How effectively are you in affording to get vaccinated against HPV; that is, be able to pay for the three vaccine shots?
   ___1. Very ineffectively
   ___2. Slightly ineffectively
   ___3. Neither effectively nor effectively
   ___4. Slightly effectively
   ___5. Completely effectively

4. How effectively do you think you could get the HPV vaccine in the next month?
   ___1. Very ineffectively
   ___2. Slightly ineffectively
   ___3. Neither effectively nor effectively
   ___4. Slightly effectively
   ___5. Completely effectively
5. How effectively do you think you could get the HPV vaccine in the next year?
   __1. Very ineffectively
   __2. Slightly ineffectively
   __3. Neither effectively nor effectively
   __4. Slightly effectively
   __5. Completely effectively

6. How effectively can you get more information about the HPV vaccine?
   __1. Very ineffectively
   __2. Slightly ineffectively
   __3. Neither effectively nor effectively
   __4. Slightly effectively
   __5. Completely effectively

7. How effectively can you discuss the HPV vaccine with your friends?
   __1. Very ineffectively
   __2. Slightly ineffectively
   __3. Neither effectively nor effectively
   __4. Slightly effectively
   __5. Completely effectively

8. How effectively can you consider getting the HPV vaccine?
   __1. Very ineffectively
   __2. Slightly ineffectively
   __3. Neither effectively nor effectively
   __4. Slightly effectively
   __5. Completely effectively

9. How effectively can you get the HPV vaccine in the next 3 years?
   __1. Very ineffectively
   __2. Slightly ineffectively
   __3. Neither effectively nor effectively
   __4. Slightly effectively
   __5. Completely effectively

**Difficulty**

1. How difficult would it be to get vaccinated completely against HPV; that is get all three vaccine shots?
   __1. Very hard to do
   __2. Slightly hard to do
   __3. Neither hard nor easy to do
   __4. Slightly easy to do
   __5. Very easy to do
2. How difficult would it be to find the time to go to your health care provider for three visits to get vaccinated against HPV?
   ___1. Very hard to do
   ___2. Slightly hard to do
   ___3. Neither hard nor easy to do
   ___4. Slightly easy to do
   ___5. Very easy to do

3. How difficult would it be to get vaccinated against HPV; that is, be able to pay for the three vaccine shots?
   ___1. Very hard to do
   ___2. Slightly hard to do
   ___3. Neither hard nor easy to do
   ___4. Slightly easy to do
   ___5. Very easy to do

4. How difficult would it be to get the HPV vaccine in the next month?
   ___1. Very hard to do
   ___2. Slightly hard to do
   ___3. Neither hard nor easy to do
   ___4. Slightly easy to do
   ___5. Very easy to do

5. How difficult would it be to get the HPV vaccine in the next year?
   ___1. Very hard to do
   ___2. Slightly hard to do
   ___3. Neither hard nor easy to do
   ___4. Slightly easy to do
   ___5. Very easy to do

6. How difficult would it be to get more information about the HPV vaccine?
   ___1. Very hard to do
   ___2. Slightly hard to do
   ___3. Neither hard nor easy to do
   ___4. Slightly easy to do
   ___5. Very easy to do

7. How difficult would it be to discuss the HPV vaccine with your friends?
   ___1. Very hard to do
   ___2. Slightly hard to do
   ___3. Neither hard nor easy to do
   ___4. Slightly easy to do
   ___5. Very easy to do
8. How difficult would it be to consider getting the HPV vaccine?
   ___ 1. Very hard to do
   ___ 2. Slightly hard to do
   ___ 3. Neither hard nor easy to do
   ___ 4. Slightly easy to do
   ___ 5. Very easy to do

9. How difficult would it be to get the HPV vaccine in the next 3 years?
   ___ 1. Very hard to do
   ___ 2. Slightly hard to do
   ___ 3. Neither hard nor easy to do
   ___ 4. Slightly easy to do
   ___ 5. Very easy to do

Preventative Behaviors

1. In the past month, have you tried getting more information about Gardasil?
   ___ No
   ___ Yes

2. In the past month, have you discussed Gardasil with your family?
   ___ No
   ___ Yes

3. In the past month, have you discussed Gardasil with your friends?
   ___ No
   ___ Yes

4. In the past month, have you discussed Gardasil with your doctor?
   ___ No
   ___ Yes

5. In the past month, have you made any attempts to begin the HPV vaccination series (e.g., set up an appointment)?
   ___ No
   ___ Yes

6. In the past month, have you begun the HPV vaccination series?
   ___ No
   ___ Yes
7. In the past month, how often have you used condoms?
   ___ 0. Not applicable
   ___ 1. Never
   ___ 2. Rarely
   ___ 3. Occasionally
   ___ 4. Sometimes
   ___ 5. Usually
   ___ 6. Always

8. In the past month, have you taken steps to schedule a pap smear?
   ___ No
   ___ Yes

9. In the past month, have you had a pap smear?
   ___ No
   ___ Yes

10. What is the main reason you would not want to get the HPV vaccine?
    ___ 1. I don’t need the vaccine
    ___ 2. Not sexually active
    ___ 3. Too expensive
    ___ 4. Too old for vaccine
    ___ 5. Doctor didn’t recommend it
    ___ 6. Worried about safety of vaccine
    ___ 7. Don’t know where to get the vaccine
    ___ 8. My spouse/family would be against it
    ___ 9. Don’t know enough about the vaccine
    ___ 10. I already have HPV
    ___ 11. I already got the HPV vaccine
    ___ 12. Other - please describe
    ___ 13. Don’t know