

Nevada Syndemic Plan Needs Assessment: Community Survey Summary Report

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*Nevada Office of Statewide Epidemiology
Larson Institute for Health Impact and Equity*

Table of Contents

Purpose.....	2
Recruitment Methods.....	2
Community Survey Results	3
Testing and Sexual History	5
PrEP and Doxy PEP.....	17
Substance Use	21
Exposure to Violence	26
Information and Services	28
Appendix: Nevada Syndemic Community Survey Questions	30

Purpose

A 57-question community survey was designed to better understand community experiences, knowledge, behaviors, and service needs related to HIV, sexually transmitted infections (STIs), Hepatitis C Virus (HCV), substance use, and related syndemic conditions across Nevada. The survey explored topics including HIV, STI, and HCV testing, sexual health behaviors, Doxy PEP, PrEP, injection drug use, substance use behaviors, exposure to violence and discrimination, and access to information and services. The survey instrument was developed by the Office of State Epidemiology team and the Nevada Office of HIV, reviewed by the Syndemic Planning Group, and piloted with individuals representing populations disproportionately impacted by syndemic conditions. The survey was created in Qualtrics, an online survey platform tool, and was conducted between October 7, 2025, and May 1, 2026. A total of 281 individuals completed the survey, and exclusion of ineligible or responses where only county of residence was answered, the final analytic sample included 250 respondents. Data were cleaned using Microsoft Excel and analyzed using SAS Version 9.4 (SAS Institute, Cary, NC).

Recruitment Methods

The community survey was distributed electronically through Qualtrics using targeted outreach methods across Nevada. Recruitment occurred through community organizations, public health partners, listservs, and statewide networks connected to sexual health and substance use prevention and services. Flyers with QR codes, direct outreach, and community-based recruitment efforts were also used to increase participation. Community partners were encouraged to print and display QR code flyers in offices, clinics, and other community spaces where individuals disproportionately impacted by HIV, sexually transmitted infections, HCV, substance use, and related syndemic conditions may see and access the survey. The survey was voluntary, anonymous, and did not collect personally identifiable information.

Community Survey Results

Table 1. Sociodemographic characteristics of community survey participants, Nevada 2027-2031 Syndemic Plan community assessment.

Demographic Characteristics (N=250)	N	Percent
County of Residence		
Clark County	181	72.4
Washoe County	50	20.0
Quad counties (Carson, Douglas, Storey, Lyon)	14	5.6
Other rural counties	5	2.0
Total	250	100.0
Age		
18-24	13	5.2
25-34	54	21.6
35-44	66	26.4
45-54	45	18.0
55-64	29	11.6
65 and older	21	8.4
Missing or prefer not to disclose	22	8.8
Total	250	100.0
Primary Race or Ethnicity		
American Indian or Alaska Native	6	2.4
Asian/ Native Hawaiian or Pacific Islander	31	12.4
Black or African American	39	15.6
Hispanic/ Latinx/o/a	37	14.8
White	97	38.8
Multi-race/ ethnicity	33	13.2
Other and missing	7	2.8
Total	250	100.0
Primary Gender Identity		
Male	64	25.6
Female	175	70.0
Transgender/ FTM (female to male)	2	0.8
Transgender/ MTF (male to female)	1	0.4
Genderqueer/ Non-binary/ Gender fluid	6	2.4
Other and missing	2	0.8
Total	250	100.0
Sexual Orientation		
Straight/ Heterosexual/ Heteroromantic	165	66.0
Gay	38	15.2
Lesbian	6	2.4
Bisexual	17	6.8

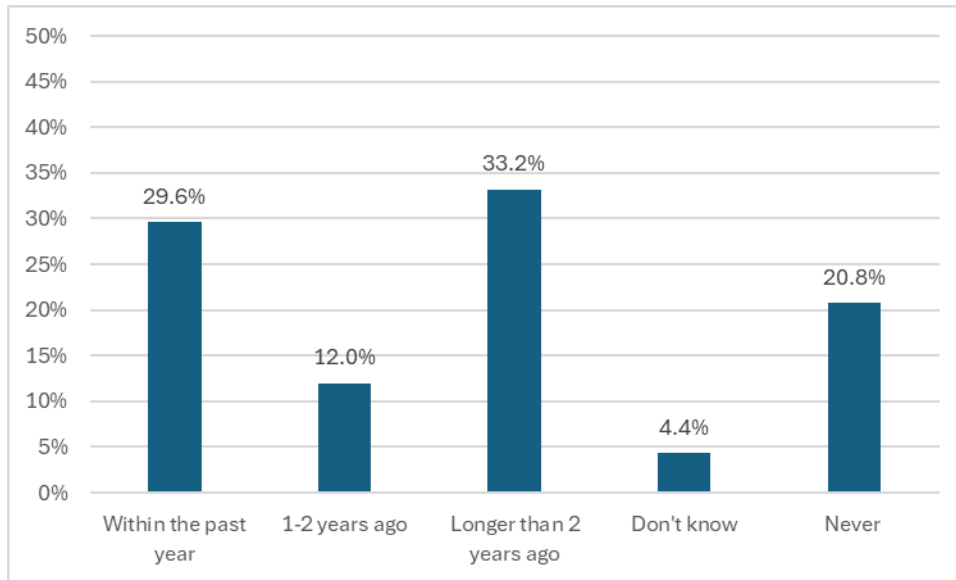
Queer	11	4.4
Asexual	2	0.8
Pansexual/ Panromantic	8	3.2
Questioning	2	0.8
Blank	1	0.4
Total	250	100.0
Educational Attainment		
Some high school (no diploma)	4	1.6
High school graduate (or equivalent, such as GED)	27	10.8
Technical school degree (such as cosmetology or computer technician)/ Associate degree (AA, AS, etc.)	44	17.6
Bachelor's degree (BA, BS, etc.)	74	29.6
Master's degree (MA, MS, MSW, etc.)/ Doctorate or professional degree (PhD, MD, JD, etc.)	100	40.0
Don't know	1	0.4
Total	250	100.0

Source: 2027-2031 Syndemic Plan community survey

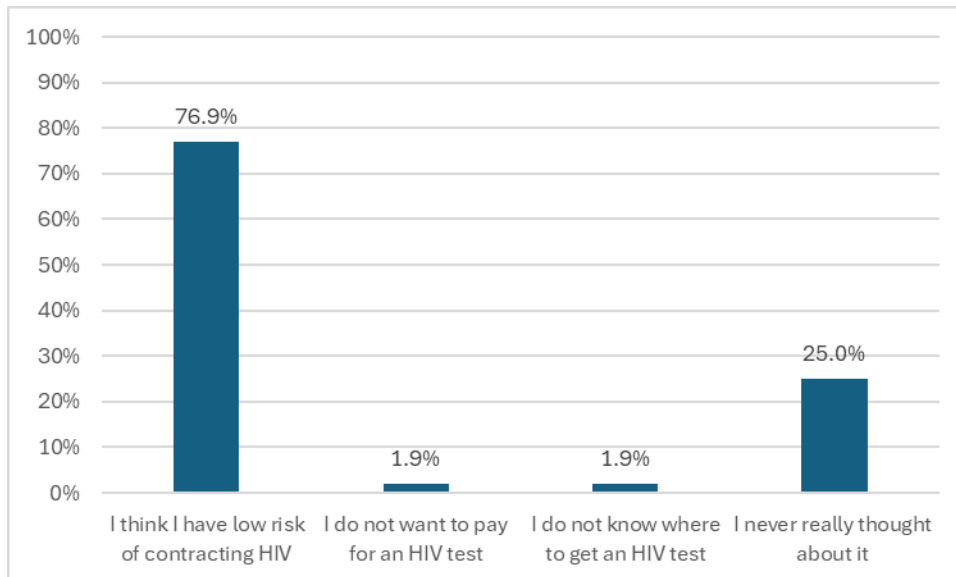
A total of 281 surveys were submitted. Of these, 31 responses were excluded due to ineligibility or insufficient survey completion, including respondents who were under 18 years of age (n=2), did not reside in Nevada (n=3), provided only county of residence information (n=11), completed only demographic questions (n=6), or indicated they were over 18 but left the eligibility question incomplete (n=9).

Testing and Sexual History

Q 9. History of HIV testing (n=250).

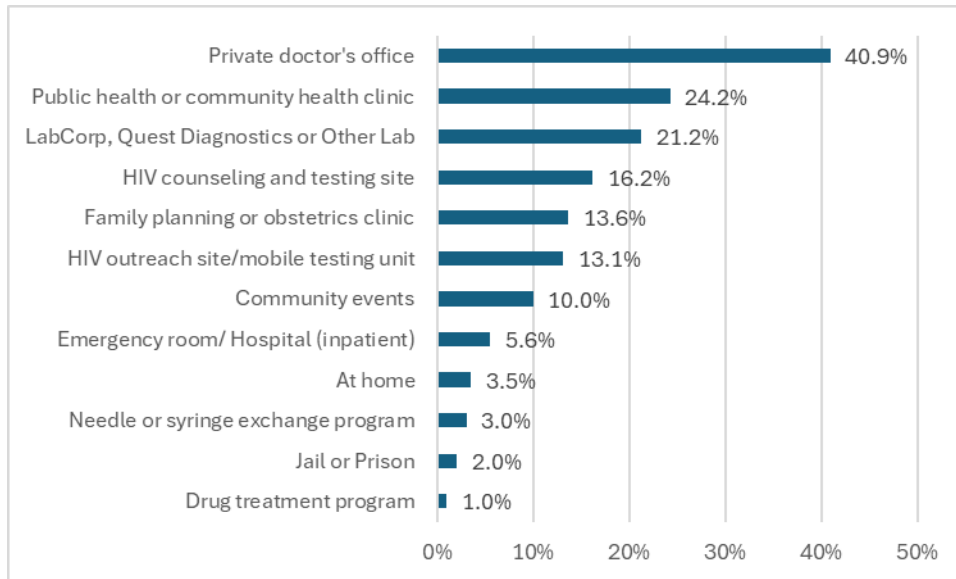


Q 10. Reasons for not being tested for HIV (n=52).



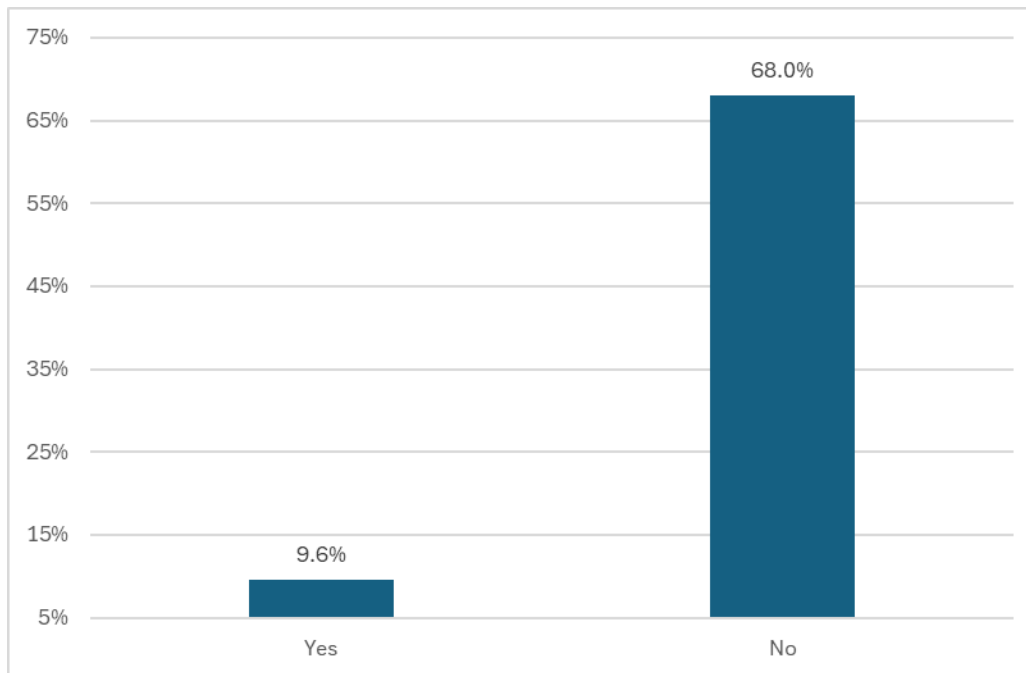
Missing n=4

Q 11. Testing locations for HIV (n=198).



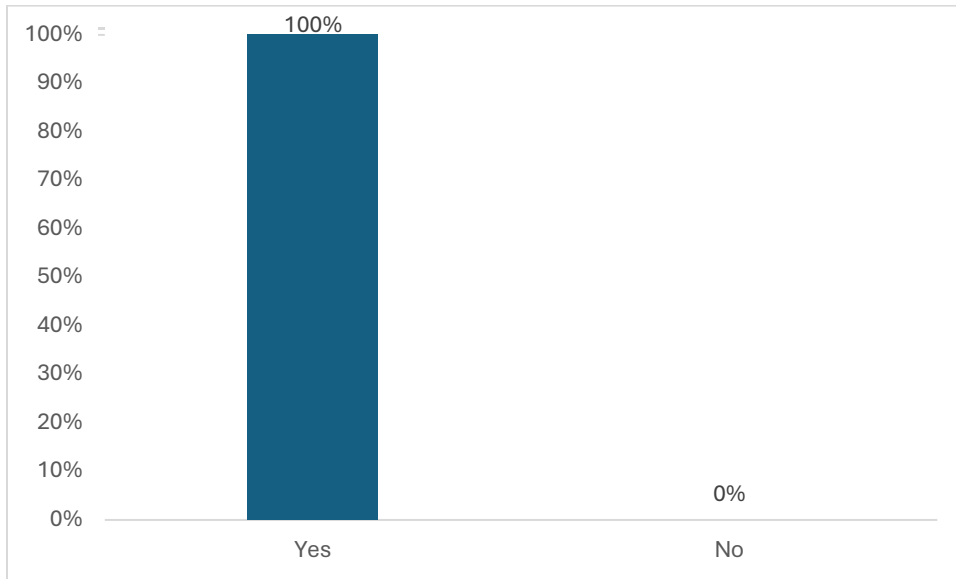
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Q 12. History of positive HIV tests (n=250).

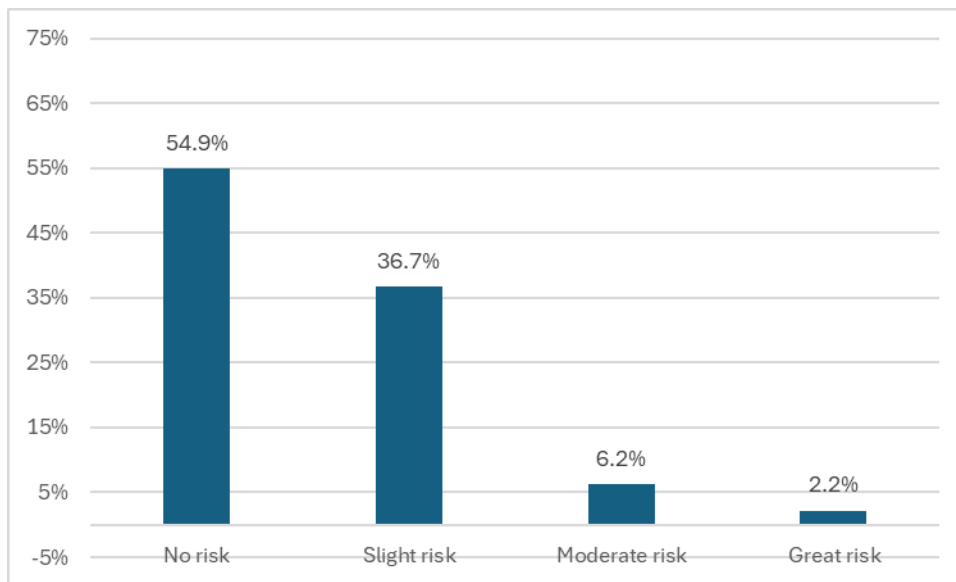


Missing n=56

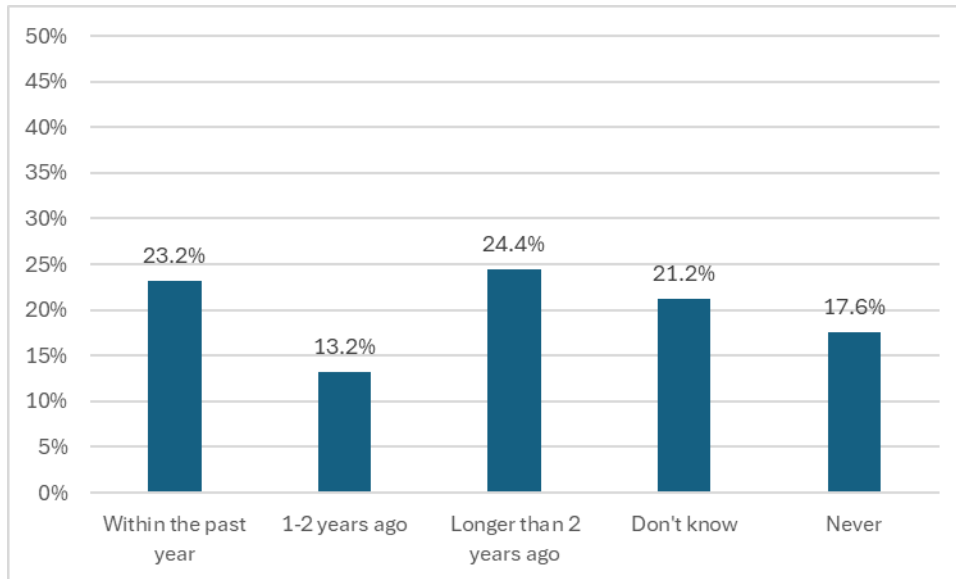
Q 13. Current antiretroviral medication use among individuals living with HIV (n=24).



Q 14. Perceived risk of contracting HIV, among individuals who have not tested positive (n=226).

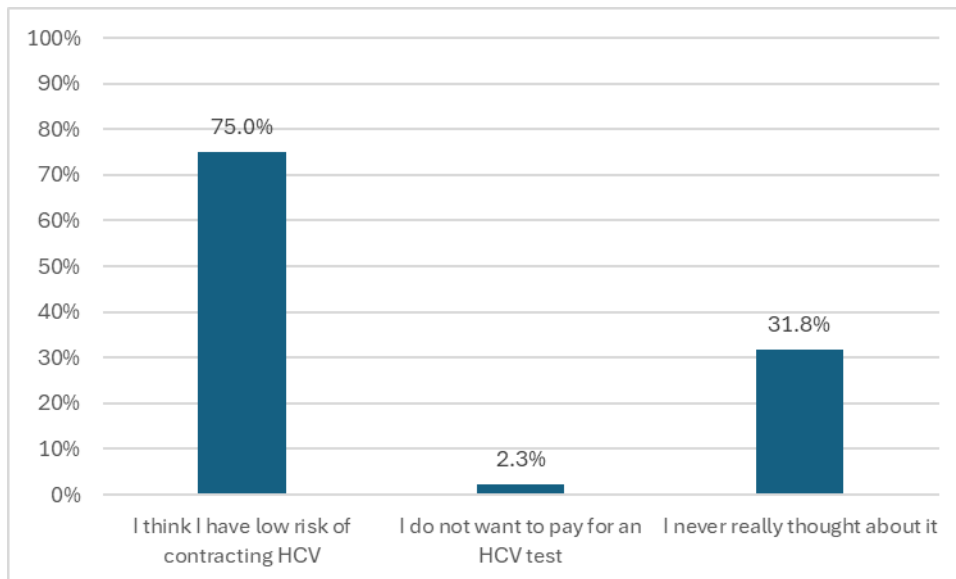


Q 15. History of Hepatitis C Virus testing (n=250).



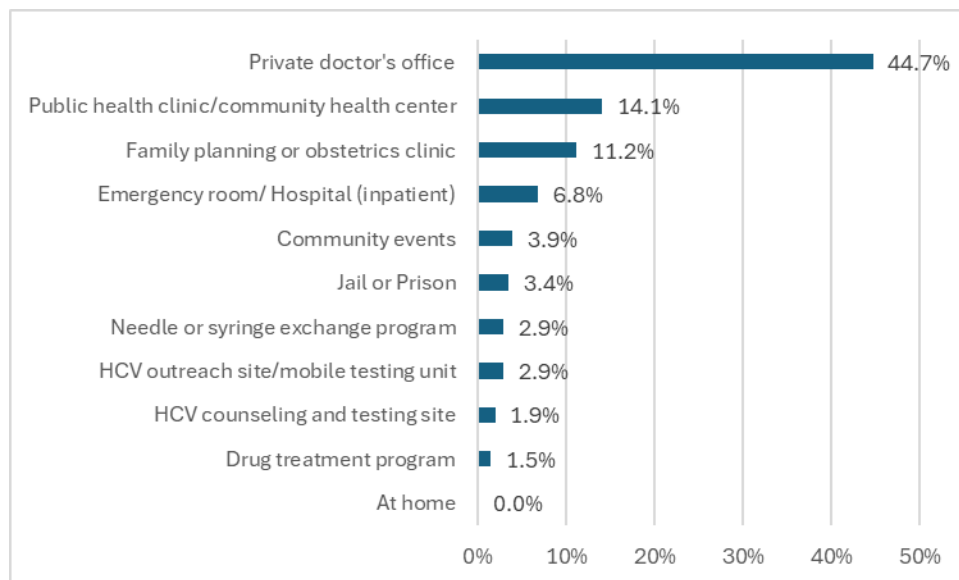
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Q 16. Reason for not receiving HCV testing (n=44).



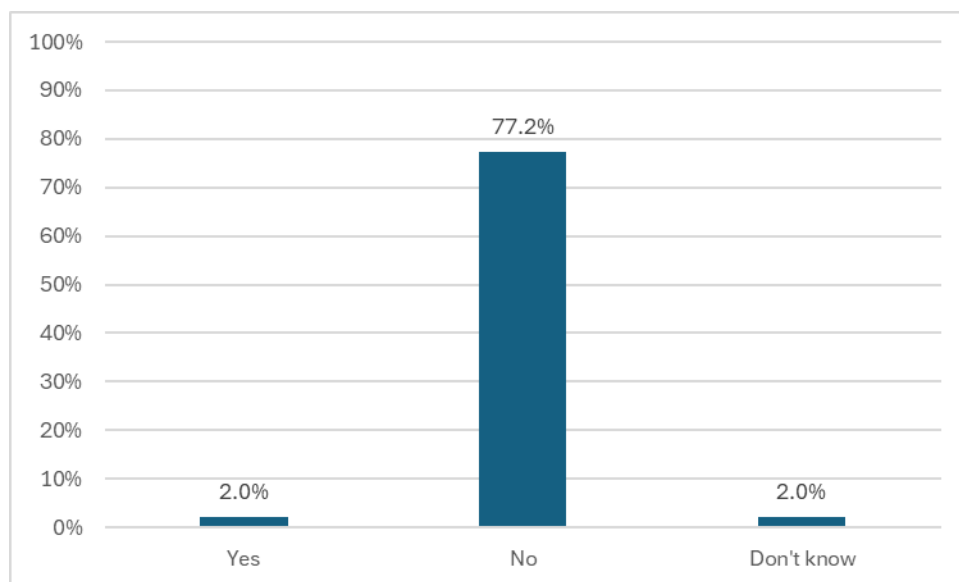
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Q 17. Testing locations for Hepatitis C (n=206).



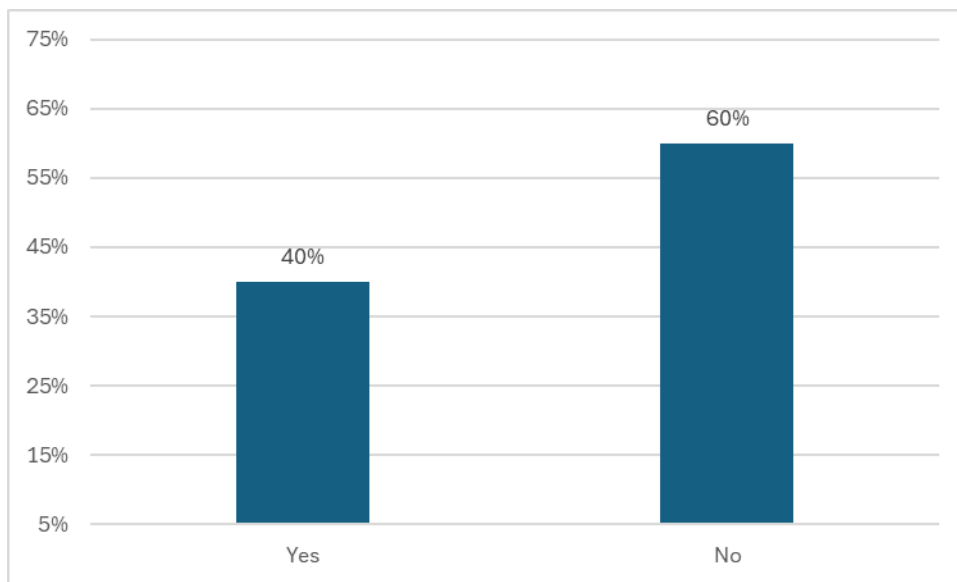
Missing n=50

Q 18. History of testing positive for HCV (n=250).

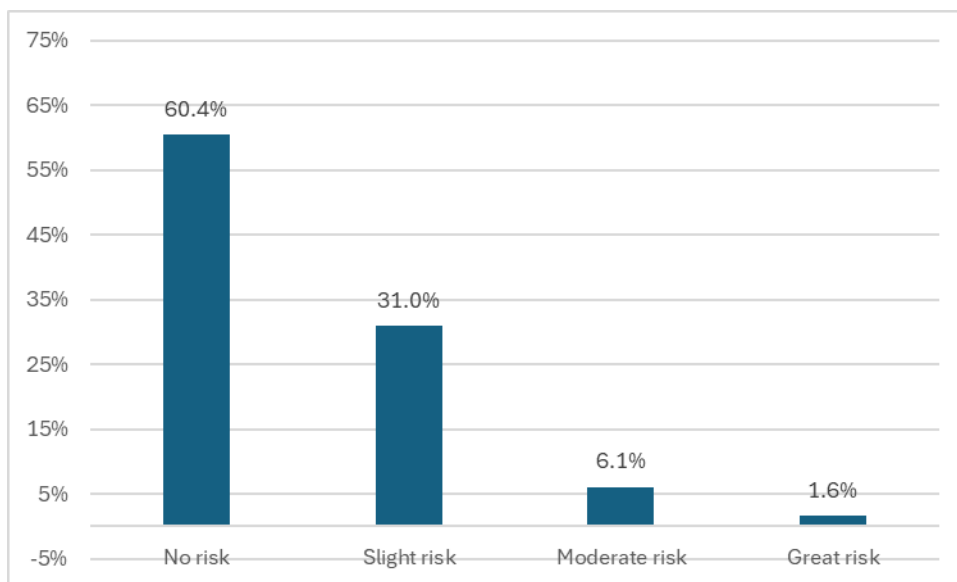


Missing n=47

Q 19. History of initiating treatment for HCV, among those who have tested positive (n=5).

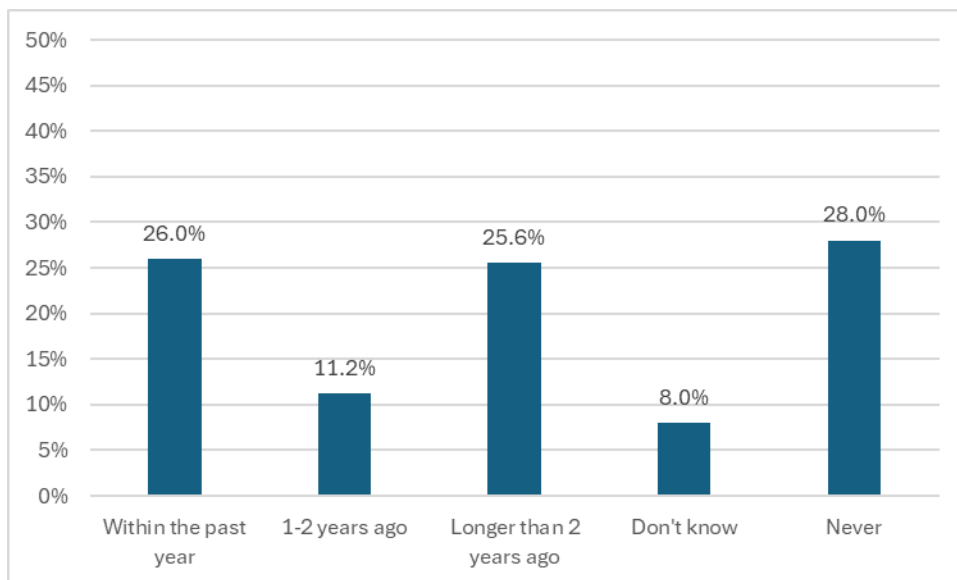


Q 20. Perceived risk of contracting HCV, among those who have not tested positive (n=245).



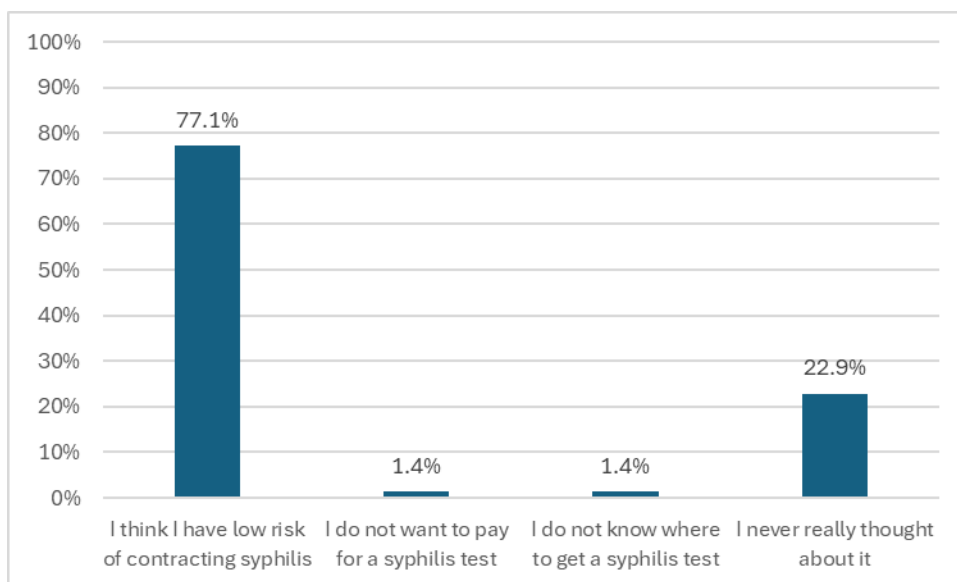
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Q 21. History of syphilis testing (n=250).



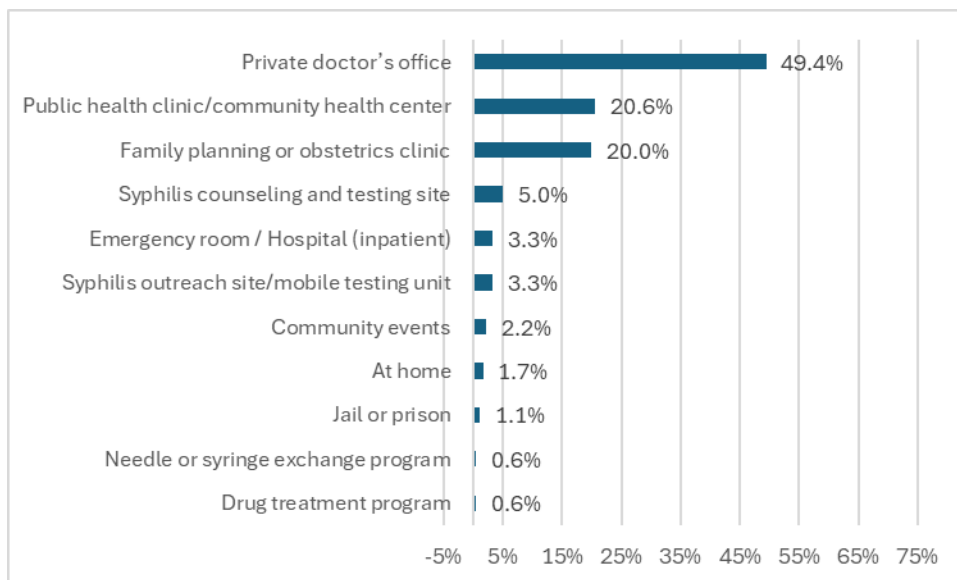
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Q 22. Reasons for not having been tested for syphilis (n=70).



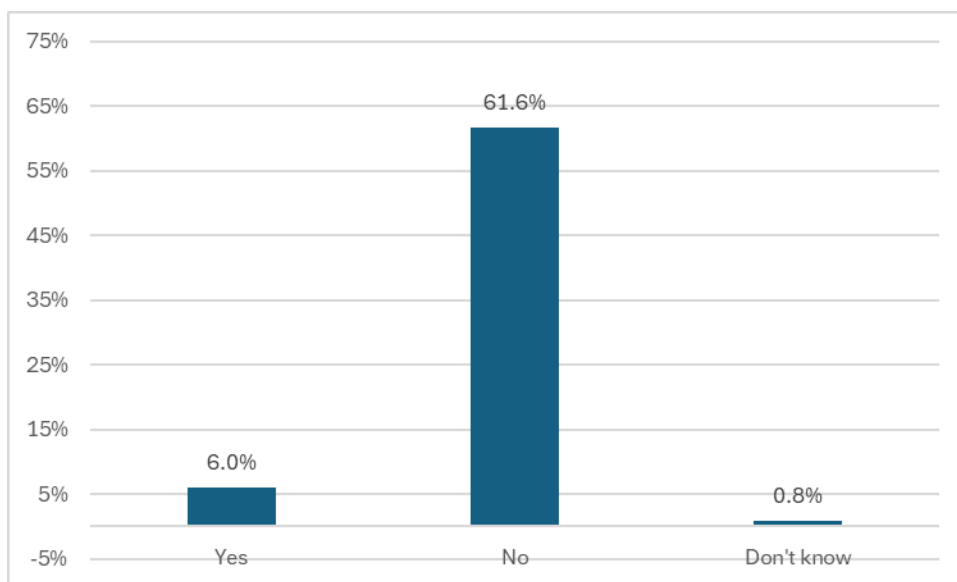
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Q 23. Testing locations for Syphilis (n=180).



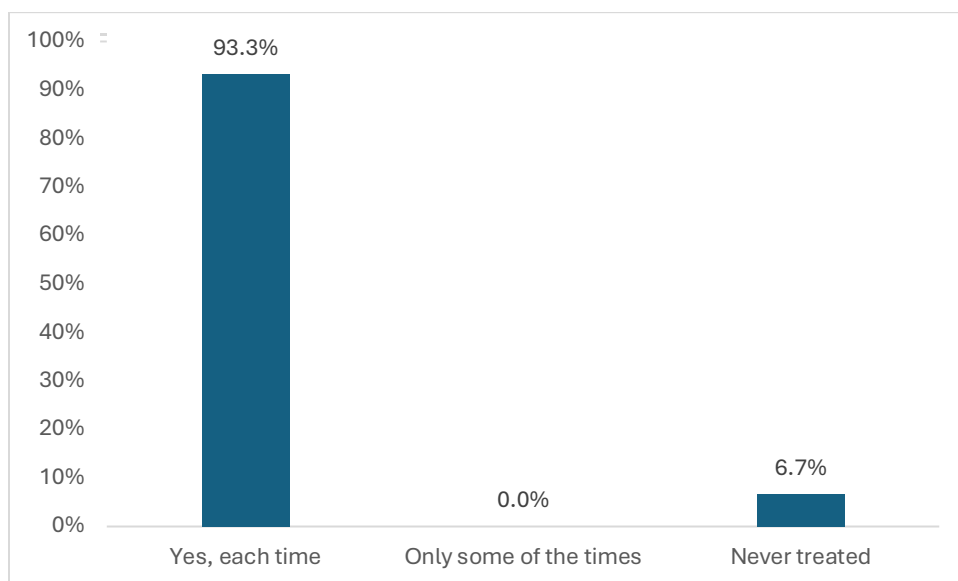
Missing n=30

Q 24. History of testing positive for syphilis (n=250).

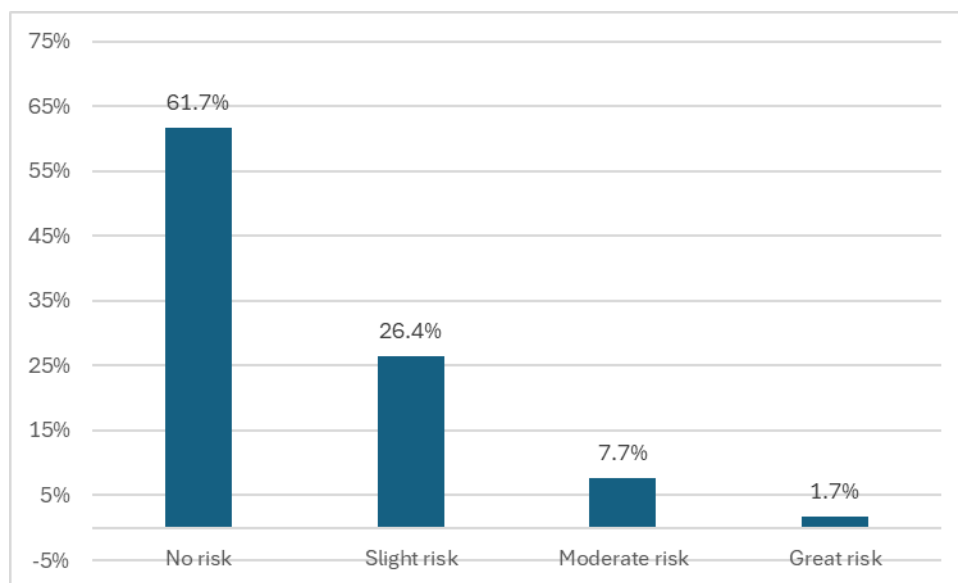


Missing n=79

Q 25. History of syphilis treatment among individuals who have tested positive (n=15).

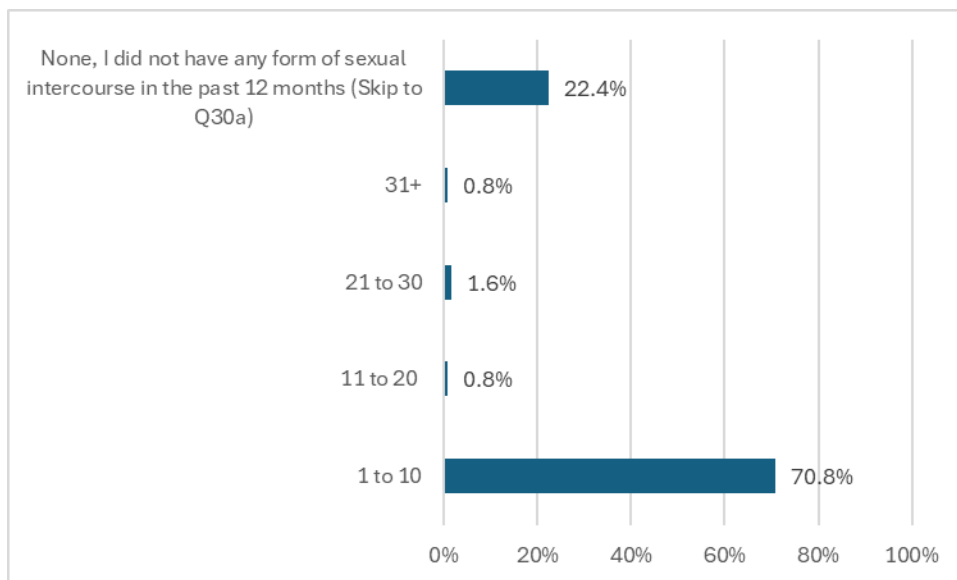


Q 26. Perceived risk of contracting syphilis, among individuals who have not tested positive (n=235).



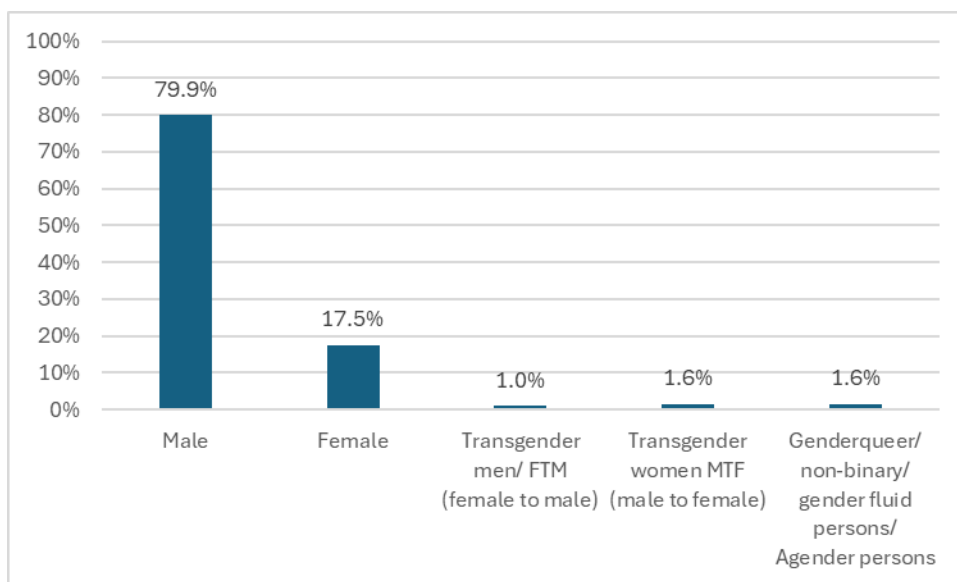
Missing n=6

Q 27. History of sexual partners in the last 12-months (n=250).



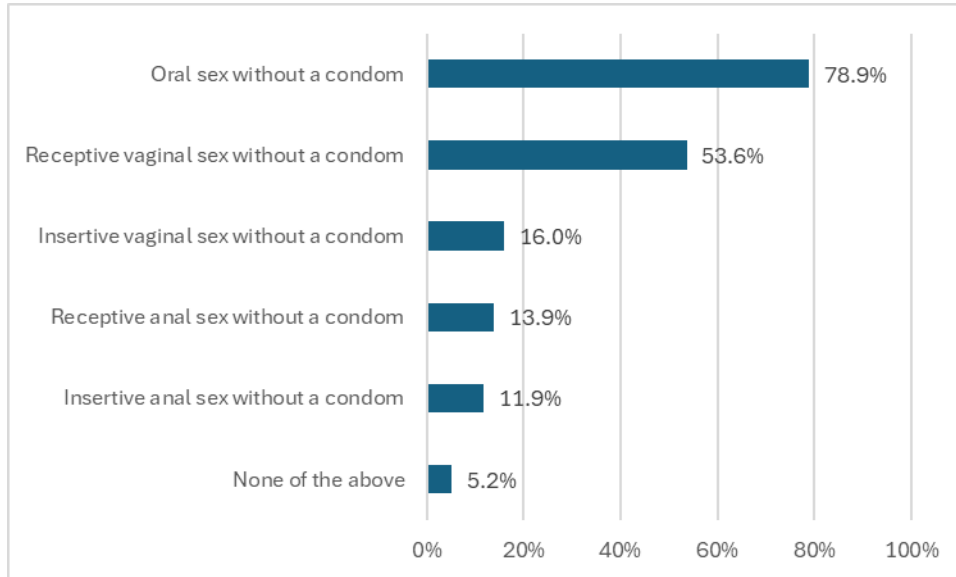
Missing n=9

Q 28. Gender of sexual partners in the last 12 months (n=194).



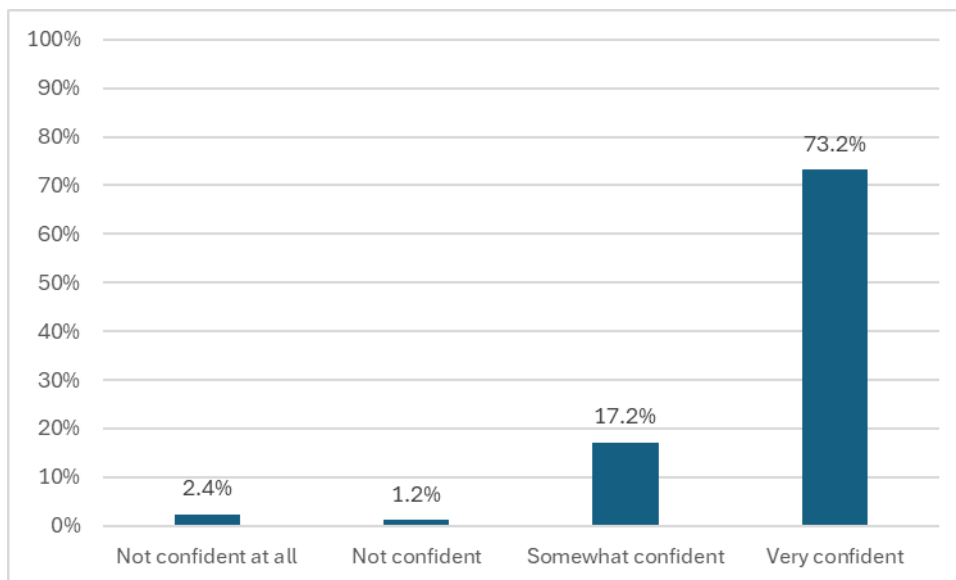
Missing n=13

Q 29. History of condomless sex in the last 12 months (n=194).



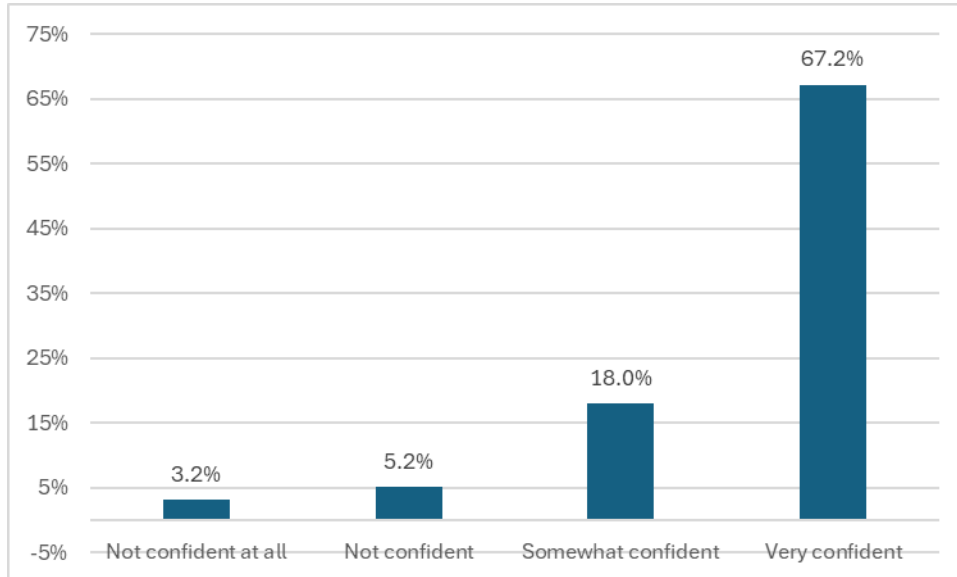
Missing n=12

Q 30a. Confidence in talking with a casual partner about safer sex (n=250).



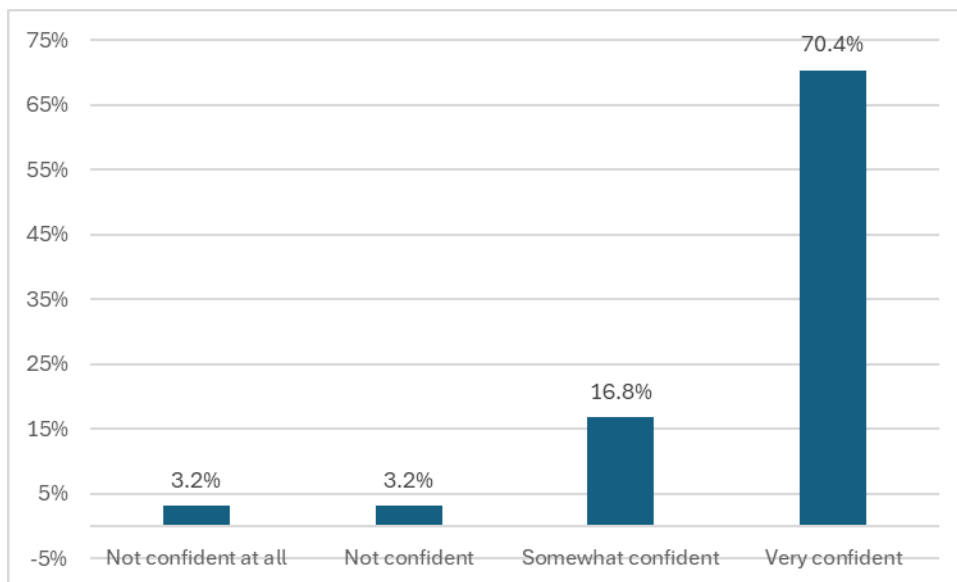
Missing n=15

Q 30b. Confidence asking a sexual partner about their other sexual partners (n=250).



Missing n=16

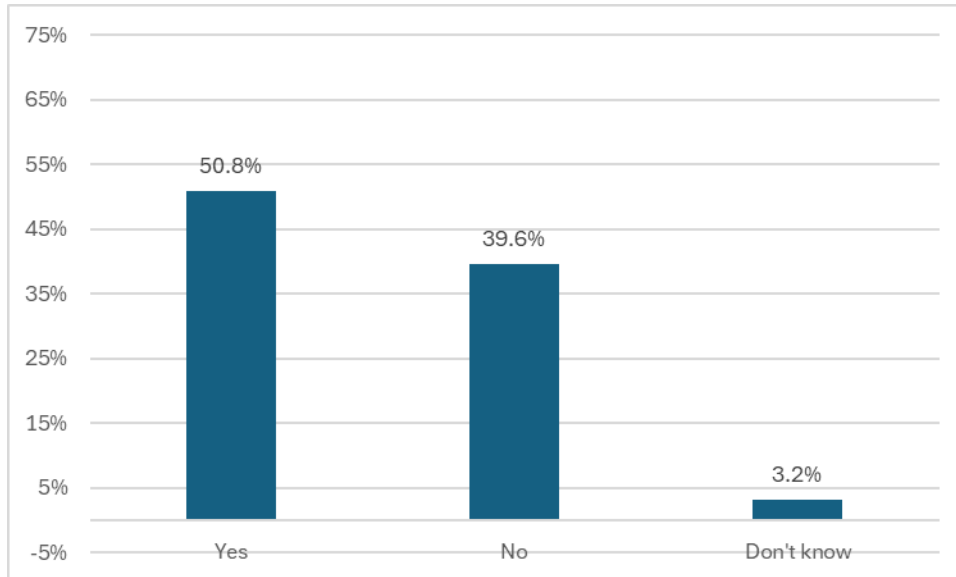
Q 30c. Confidence in convincing a partner that they should use a condom (n=250).



Missing n=16

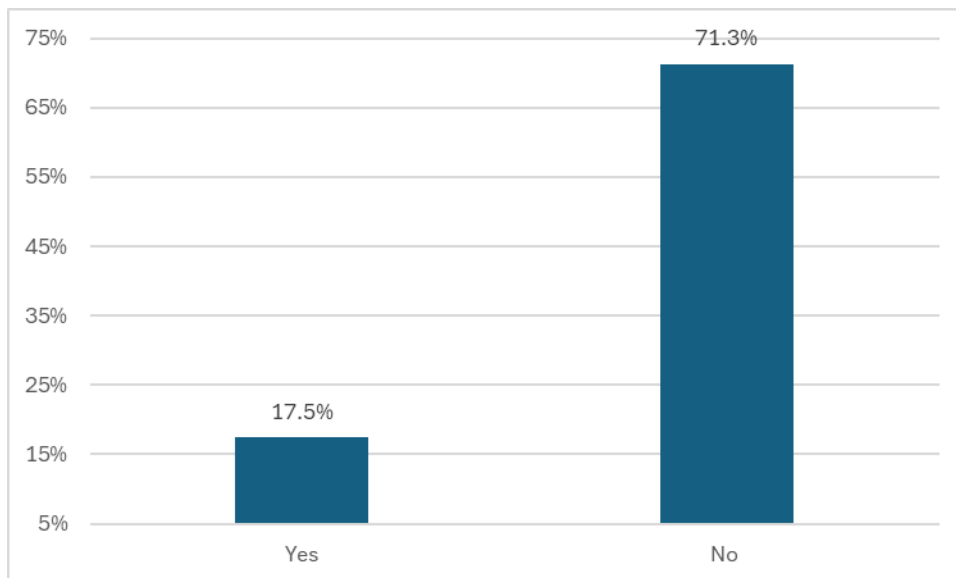
PrEP and Doxy PEP

Q 33. Knowledge of Doxy PEP prior to the survey (n=250).



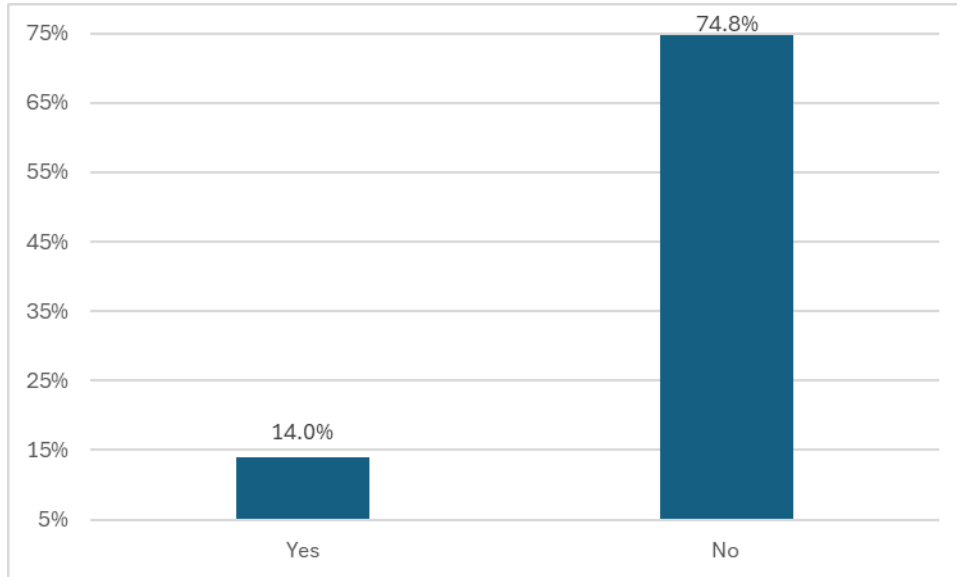
Missing n=24

Q 34. Past 12-month history of discussing Doxy PEP with a health care provider (n=143).



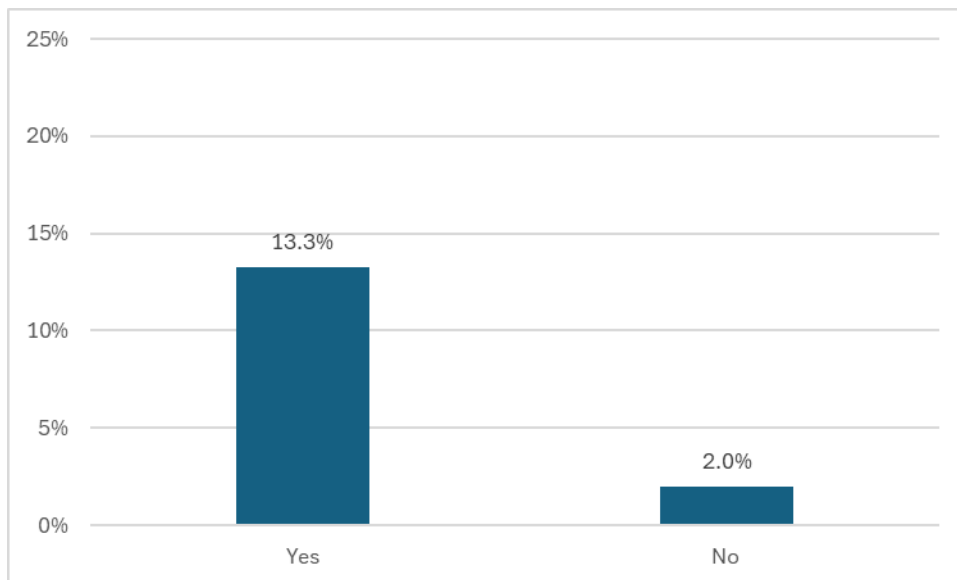
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Q 35. Past 12-month history of taking Doxy PEP to reduce the risk of getting syphilis (n=143).



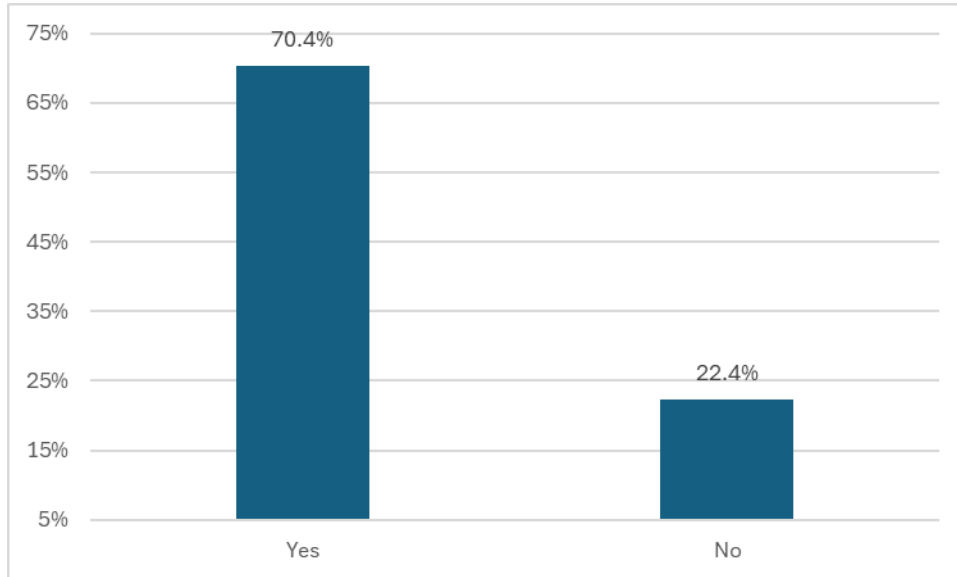
Missing n=16

Q 39. Willingness to use Doxy PEP in the future to reduce the risk of contracting chlamydia, gonorrhea, and/or syphilis (n=151).



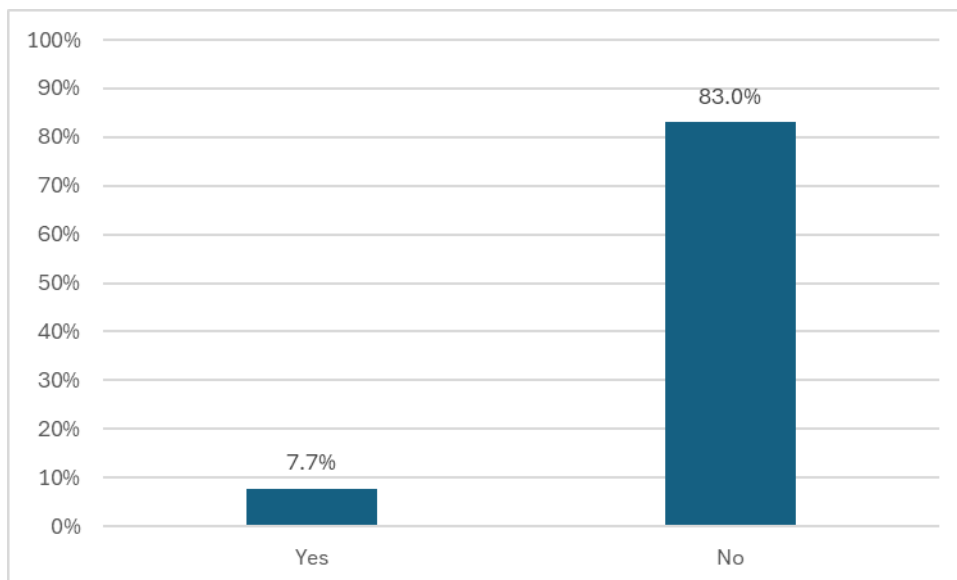
Missing n=124

Q 40. Knowledge of PrEP prior to the survey (n=250).



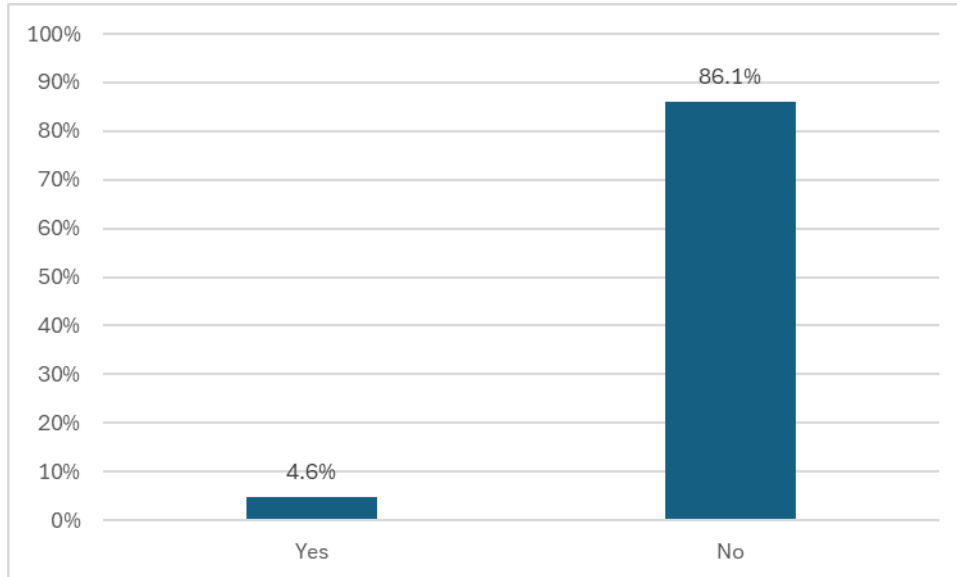
Missing n=18

Q 41. Past 12-month history of discussing PrEP with a health care provider (n=194).

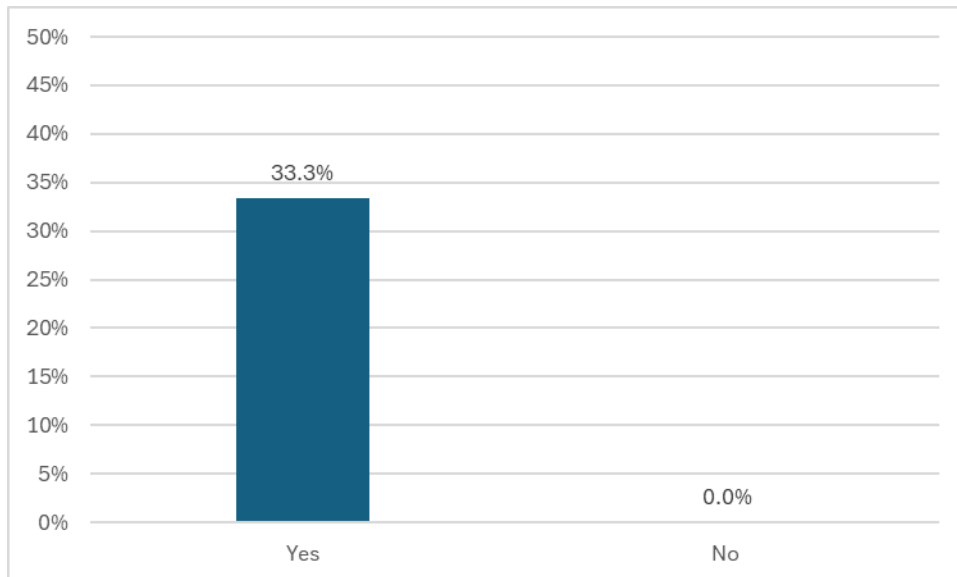


Missing n=18

Q 42. Past 12-month history of taking PrEP to reduce the risk of getting HIV (n=194).



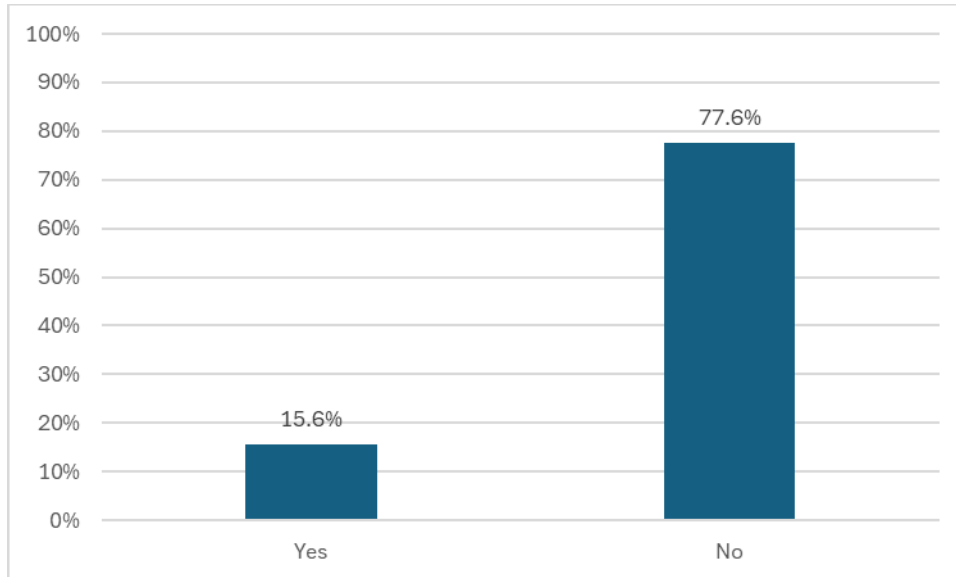
Q 46. Willingness to start or continue PrEP to reduce the risk of getting HIV in the future (n=27).



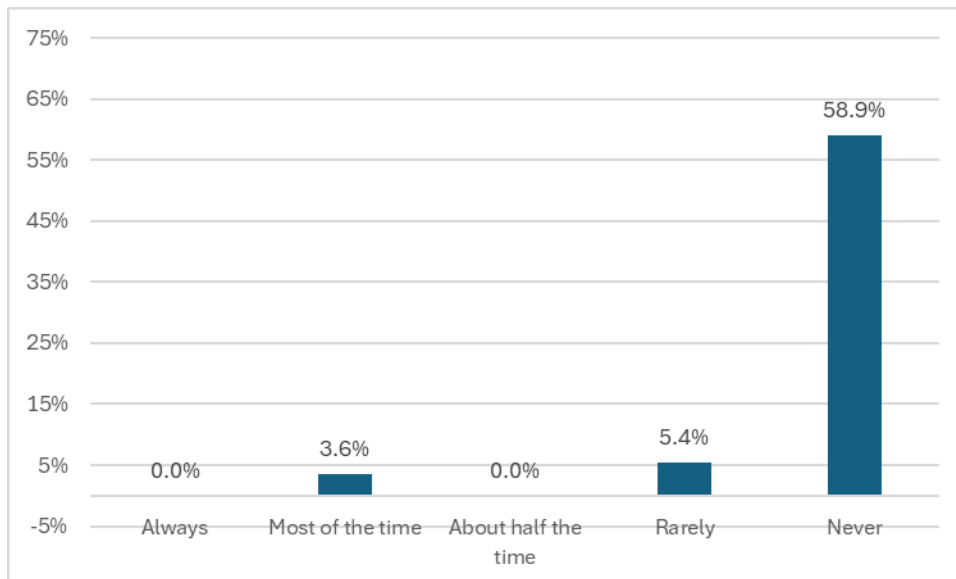
Missing n=18

Substance Use

Q 47. Lifetime history of injecting any substance, including drugs, substances, or medications (n=250).

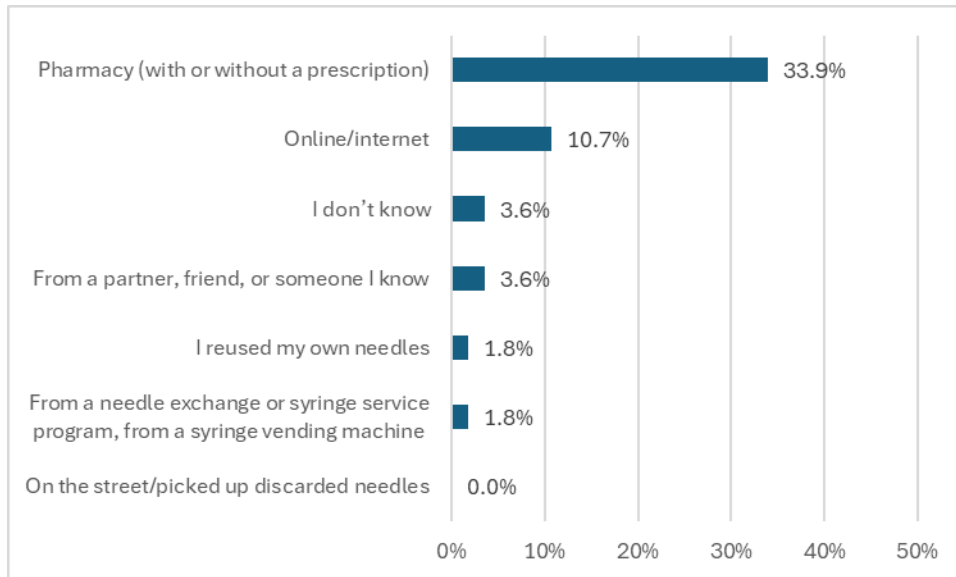


Q 48. Past 12-month history of reusing or sharing needles, among respondents who inject drugs, substances, or medications (n=56).



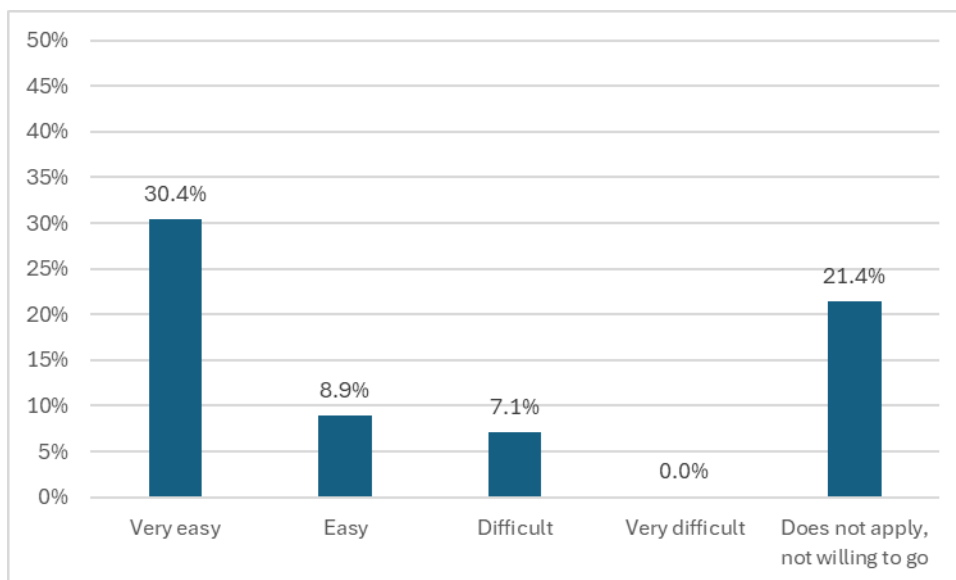
Missing n=18

Q 49. Locations where respondents got needles for injecting drugs, substances, or medications in the past 12 months (n=56).



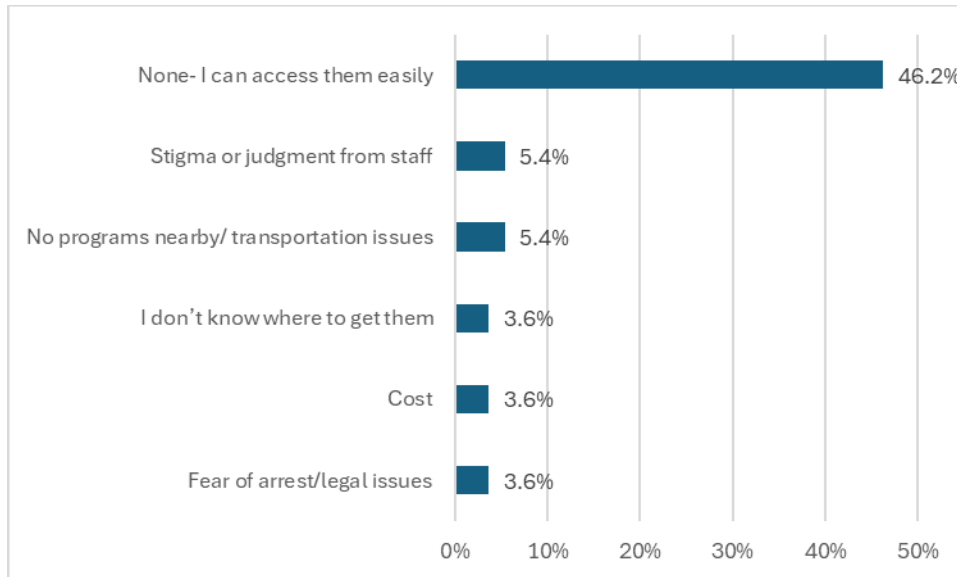
Missing n=29

Q 50. How easy or difficult it would be to access clean syringes from a needle exchange site or syringe vending machine, among people who inject drugs, substances, or medications (n=56).



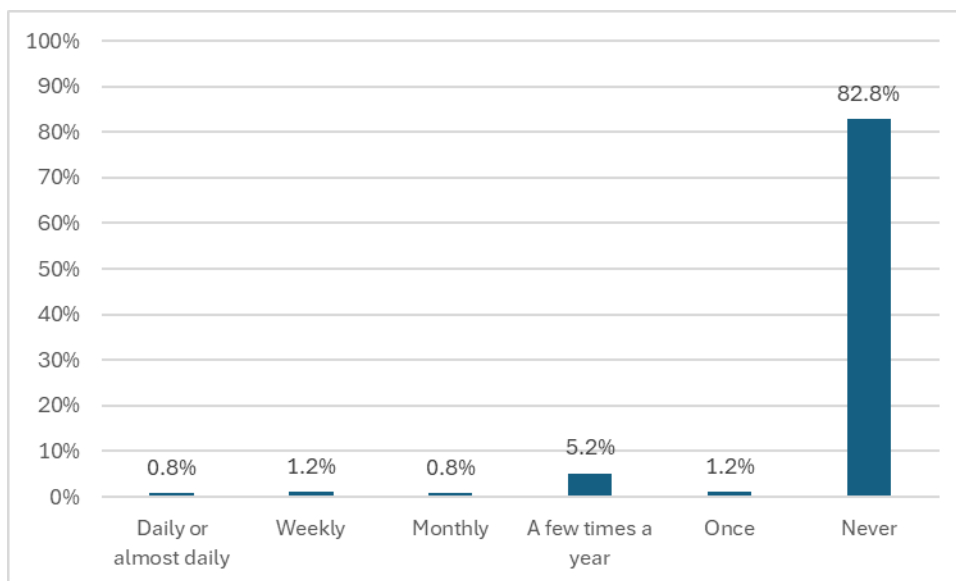
Missing n=18

Q 51. Barriers to accessing clean syringes among people who inject drugs, substances, or medications (n=56).



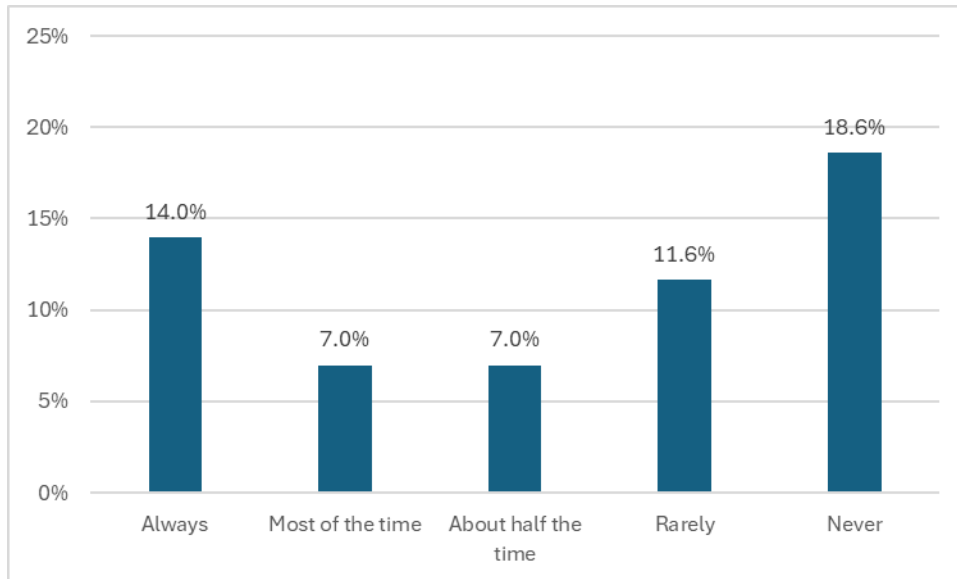
Missing n=24

Q 52. History of using street drugs/illicit drugs or misusing prescription medications in the last 12 months (n=250).



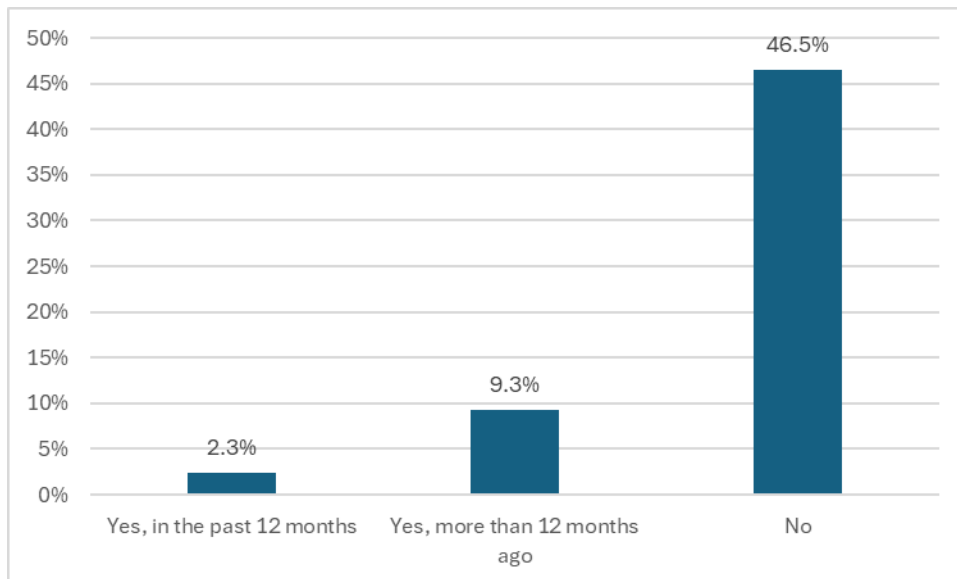
Missing n=20

Q 53. Past 12-month history of using drugs while alone (n=43).



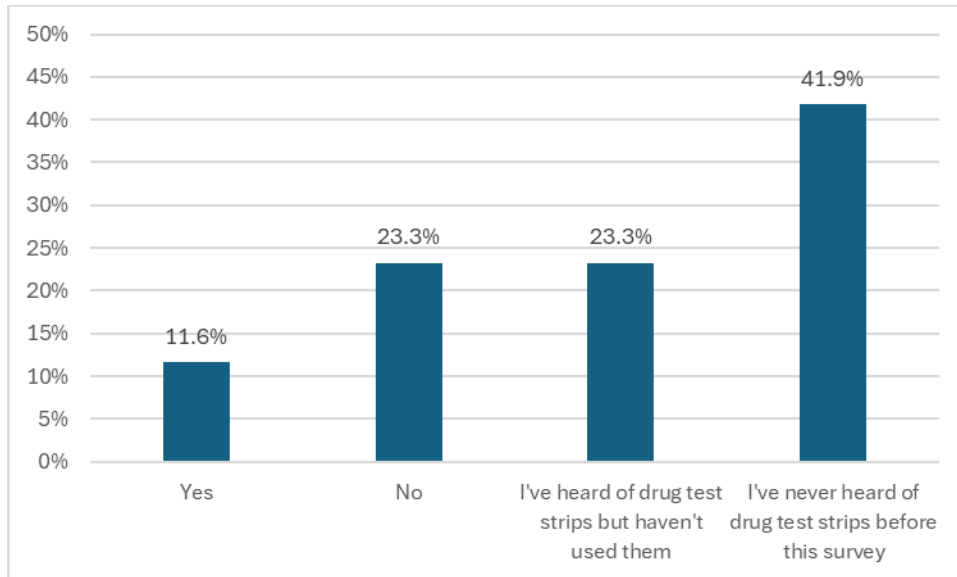
Missing n=18

Q 54. Lifetime history of drug overdose (n=43).



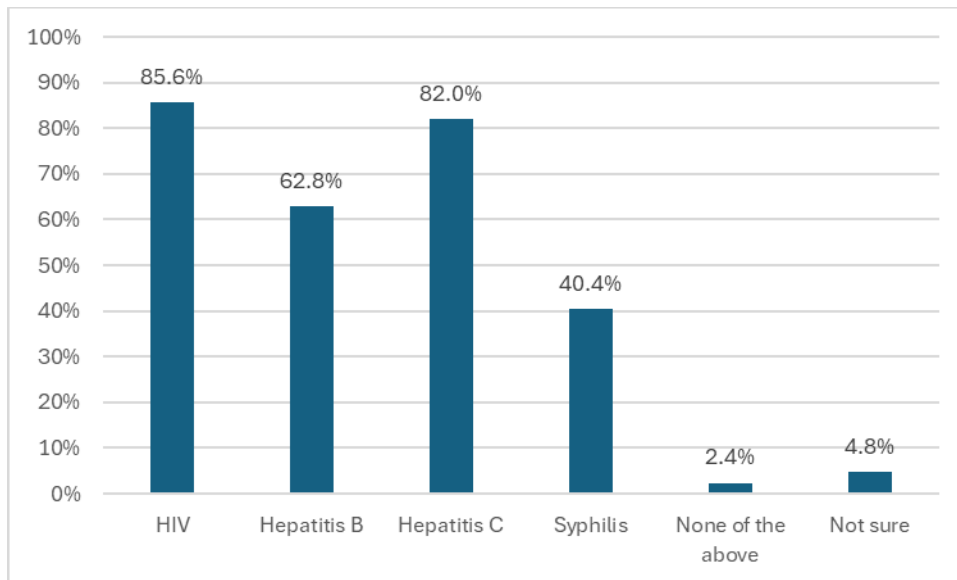
Missing n=18

Q 55. Past 12-month history of drug test strip use for checking for fentanyl, xylazine, or other substances (n=43).



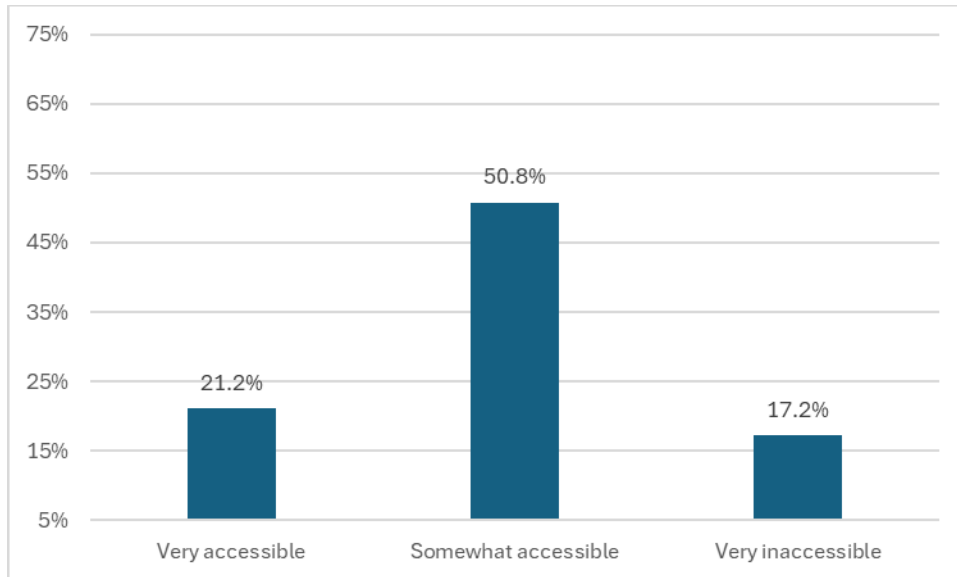
Missing n=0

Q 56. Respondent knowledge on which conditions can be spread by sharing needles or other injection equipment (n=250).



Missing n=22

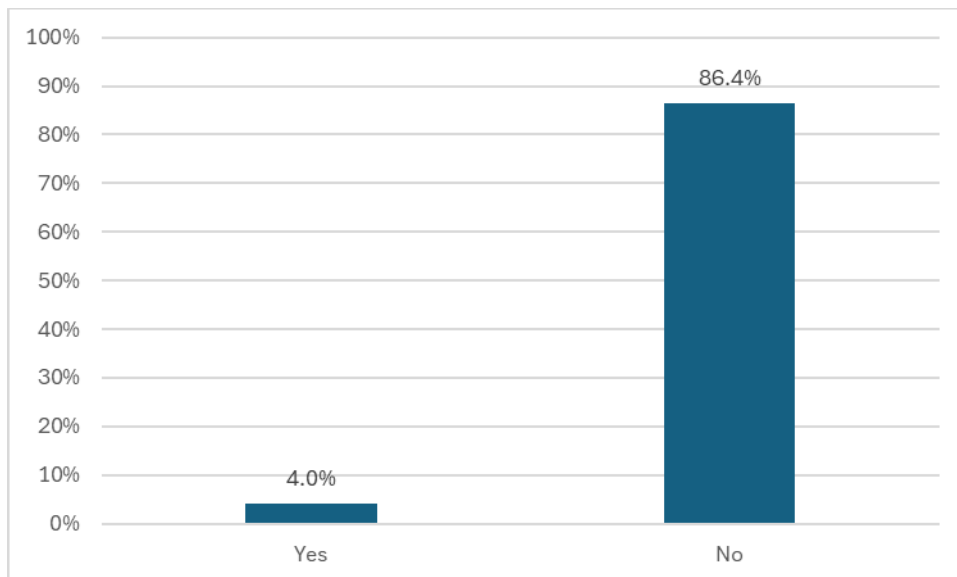
Q 57. Respondent opinions on how accessible services are for people who use drugs in their communities (n=250).



Missing n=27

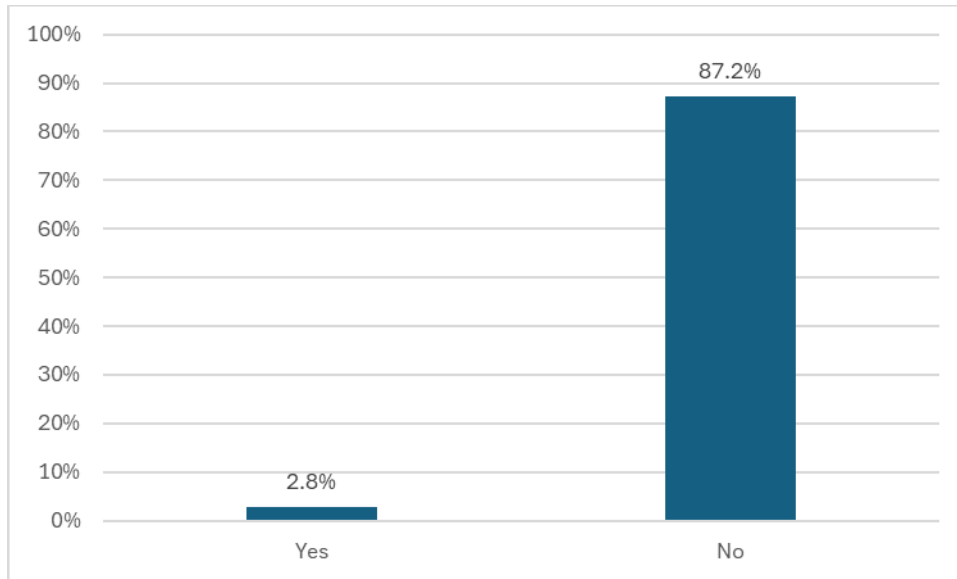
Exposure to Violence

Q 58. Past 12-month history of being slapped, punched, shoved, kicked, shaken, or otherwise physically hurt by another person (n=250).



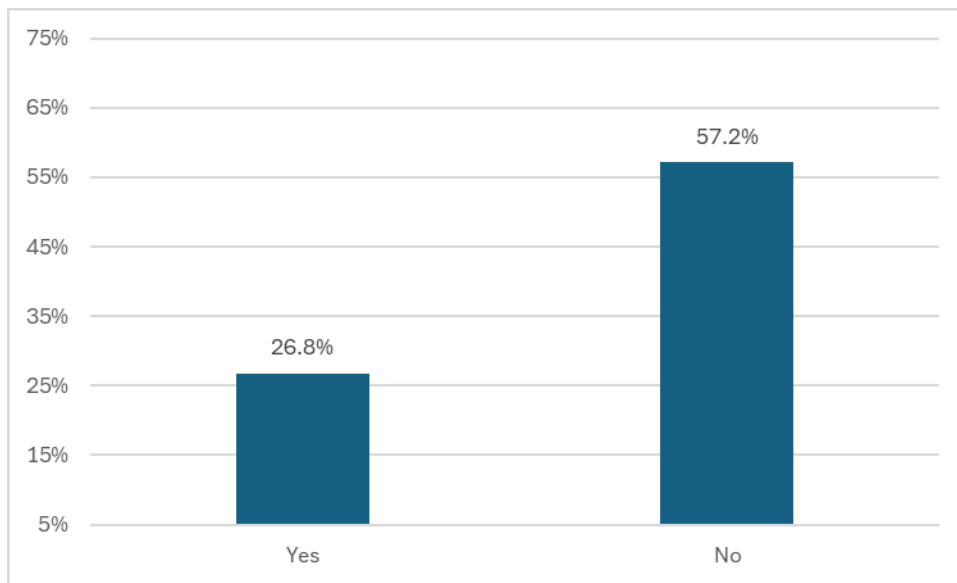
Missing n=24

Q 59. Past 12-month history of being forced or pressured to have vaginal, oral, or anal sex when you did not want to (n=250).



Missing n=25

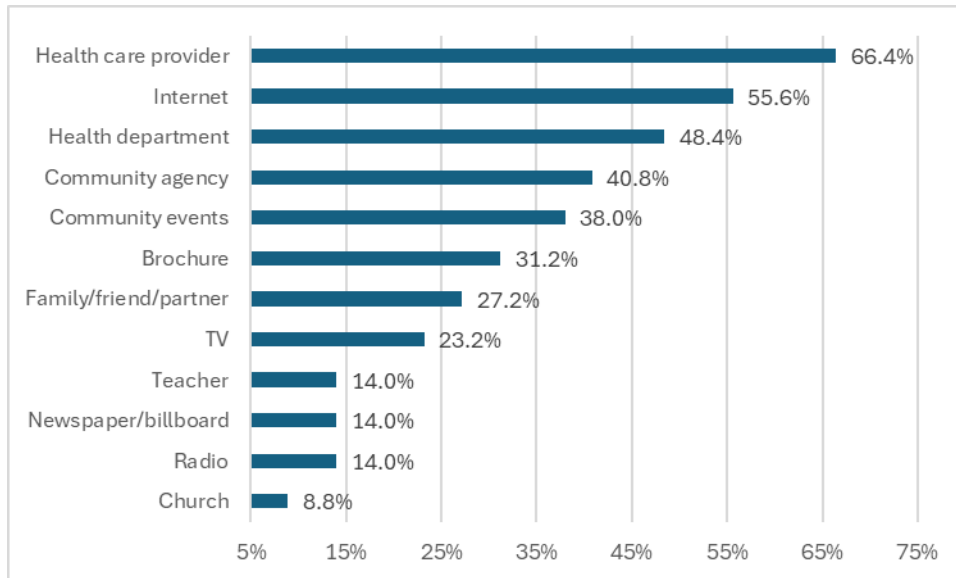
Q 60. Past 12-month history of experiencing discrimination (n=250).



Missing n=40

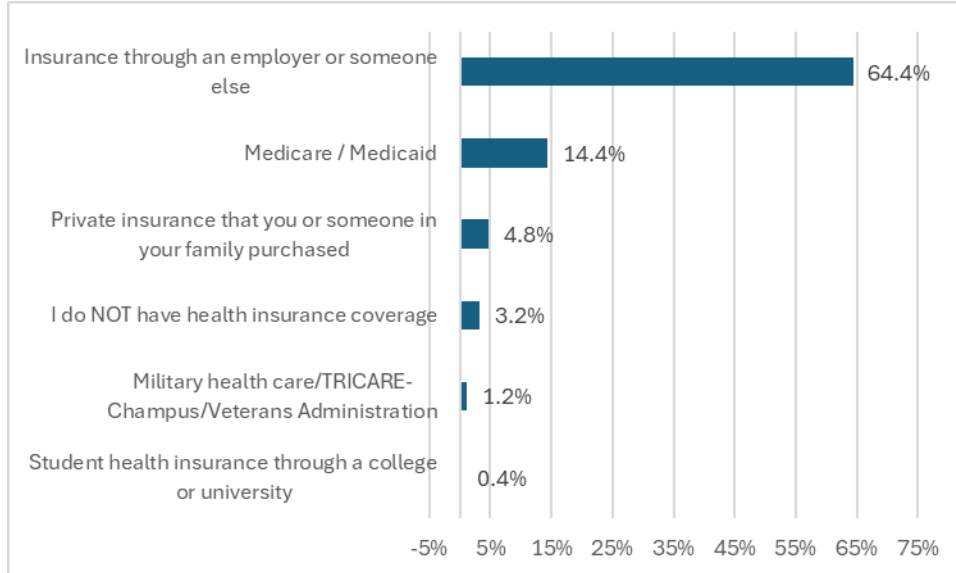
Information and Services

Q 63. Respondent preferences for accessing sexual health information (n=250).



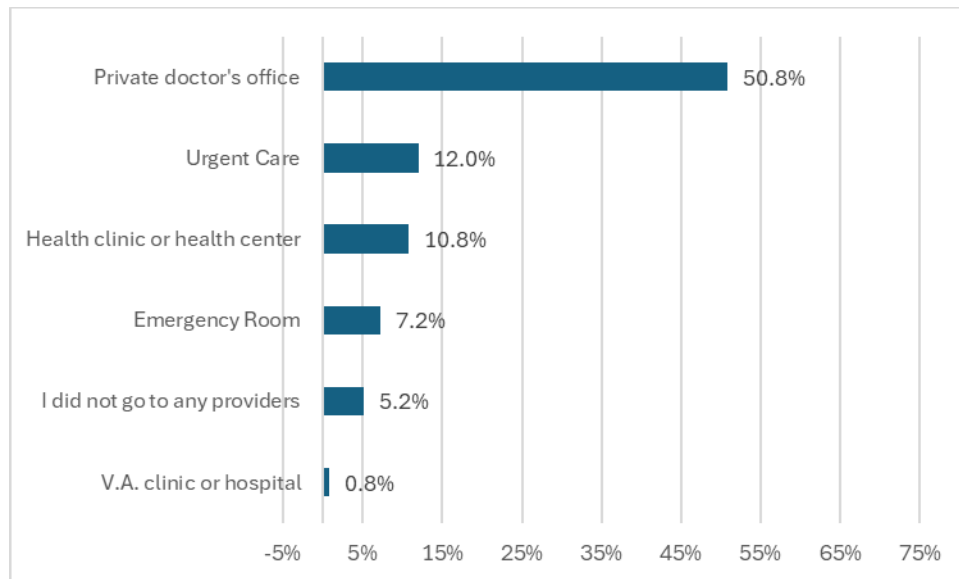
Missing n=43

Q 64. Current health insurance (n=250).



Missing n=29

Q 65. Where participants usually went for medical care or assistance while sick in the last 12 months (n=250).



Missing n=33

Appendix: Nevada Syndemic Community Survey Questions

Demographics

Q1 Are you 18 years of age or older?

- ☐ Yes
- ☐ No >> Skip to end of survey

Q2 Which County in Nevada do you live in?

- ☐ Carson City
- ☐ Churchill County
- ☐ Clark County
- ☐ Douglas County
- ☐ Elko County
- ☐ Esmeralda County
- ☐ Eureka County
- ☐ Humboldt County
- ☐ Lander County
- ☐ Lincoln County
- ☐ Lyon County
- ☐ Mineral County
- ☐ Pershing County
- ☐ Nye County
- ☐ Storey County
- ☐ Washoe County
- ☐ White Pine County
- ☐ I don't live in Nevada >>Skip to end of survey

Q3 What is your sex?

- ☐ Male
- ☐ Female

Q4 What is your primary gender identity?

- ☐ Male
- ☐ Female
- ☐ Transgender/ FTM (female to male)
- ☐ Transgender/ MTF (male to female)
- ☐ Genderqueer/ Non-binary/ Gender fluid

- ☐ Agender/ Gender- free
- ☐ Other, please specify: _____

Q5 What is your age (in years)? ____ years old

- ☐ _____
- ☐ Prefer not to disclose

Q6 What race/ethnicity do you identify as? (select all that apply)

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Hispanic or Latinx/o/a
- ☐ Native Hawaiian or Pacific Islander
- ☐ White
- ☐ Other, please specify: _____

Q7 What is the highest degree or level of school you have completed?

- ☐ Some high school (no diploma)
- ☐ High school graduate (or equivalent, such as GED)
- ☐ Technical school degree (such as cosmetology or computechnician)/ Associate degree (AA, AS, etc.)
- ☐ Bachelor's degree (BA, BS, etc.)
- ☐ Master's degree (MA, MS, MSW, etc.)/ Doctorate or professional degree (PhD, MD, JD, etc.)
- ☐ Don't know

Q8 What would you say is your primary sexual orientation?

- ☐ Straight/ Heterosexual/ Heteroromantic
- ☐ Gay
- ☐ Lesbian
- ☐ Bisexual
- ☐ Queer
- ☐ Asexual
- ☐ Pansexual/ Panromantic
- ☐ Questioning
- ☐ Other, please specify: _____

HIV (Human Immunodeficiency Virus) Testing

Q9 When were you last tested for HIV? (response required)

- ☐ Within the past year >>Skip to Q11
- ☐ 1-2 years ago >>Skip to Q11
- ☐ Longer than 2 years ago >>Skip to Q11
- ☐ Don't know >>Skip to Q11
- ☐ Never

Q10 What reasons best describe why you have never had an HIV test? (Select **all that apply**)

- ☐ I think I have low risk of contracting HIV >>Skip to Q14
- ☐ I am afraid to know if I have HIV >>Skip to Q14
- ☐ I do not have time for an HIV test >>Skip to Q14
- ☐ I do not want to pay for an HIV test >>Skip to Q14
- ☐ I do not know where to get an HIV test >>Skip to Q14
- ☐ I never really thought about it >>Skip to Q14
- ☐ I feel that HIV tests are too invasive >>Skip to Q14
- ☐ Other, please specify: _____ >>Skip to Q14

Q11 Where have you been tested for HIV? (Select **all that apply**)

- ☐ HIV counseling and testing site
- ☐ HIV outreach site/mobile testing unit
- ☐ Drug treatment program
- ☐ Needle or syringe exchange program
- ☐ Jail or Prison
- ☐ Family planning or obstetrics clinic
- ☐ Public health clinic or community health center
- ☐ Private doctor's office
- ☐ Emergency room/ Hospital (inpatient)
- ☐ At home
- ☐ Community events
- ☐ Other, please specify: _____
- ☐ LabCorp, Quest Diagnostics or Other Lab locations

Q12 Have you ever tested positive for HIV?

- ☐ Yes
- ☐ No >>Skip to Q14
- ☐ Don't know >>Skip to Q14

Q13 Are you currently taking antiretroviral medication to treat your HIV?

- ☐ Yes
- ☐ No
- ☐ Don't know

Q14 How much do you think you are at risk for contracting HIV at some point in your life?

- ☐ No risk
- ☐ Slight risk
- ☐ Moderate risk
- ☐ Great risk

Hepatitis C Virus (HCV) Testing

Q15 When were you last tested for hepatitis C virus (HCV)? (Response required)

- ☐ Within the past year >>Skip to Q17
- ☐ 1-2 years ago >>Skip to Q17
- ☐ Longer than 2 years ago >>Skip to Q17
- ☐ Don't know >>Skip to Q17
- ☐ Never

Q16 What reasons describe why you have not ever had a hepatitis C virus (HCV) test? (Select **all that apply**)

- ☐ I think I have low risk of contracting HCV >>Skip to Q104
- ☐ I am afraid to know if I have HCV >>Skip to Q104
- ☐ I do not have time for an HCV test >>Skip to Q104
- ☐ I do not want to pay for an HCV test >>Skip to Q104
- ☐ I do not know where to get an HCV test >>Skip to Q104
- ☐ I never really thought about it >>Skip to Q104
- ☐ I feel that HCV tests are too invasive >>Skip to Q104
- ☐ Other, please specify: _____ >>Skip to Q104

Q17 Where have you been tested for hepatitis C virus (HCV)? (Select **all that apply**)

- ☐ HCV counseling and testing site
- ☐ HCV outreach site/mobile testing unit
- ☐ Drug treatment program
- ☐ Needle or syringe exchange program

- ☐ Jail or Prison
- ☐ Family planning or obstetrics clinic
- ☐ Public health clinic or community health center
- ☐ Private doctor's office
- ☐ Emergency room/ Hospital (inpatient)
- ☐ At home
- ☐ Community events
- ☐ Other, please specify: _____

Q18 Have you ever tested positive for hepatitis C virus (HCV)?

- ☐ Yes
- ☐ No >>Skip to Q104
- ☐ Don't know >>Skip to Q104

Q19 Have you ever initiated treatment for hepatitis C virus (HCV)?

- ☐ Yes
- ☐ No
- ☐ Don't know

Q104 How much do you think you are at risk for contracting hepatitis C virus (HCV) at some point in your life?

- ☐ No risk
- ☐ Slight risk
- ☐ Moderate risk
- ☐ Great risk

Syphilis Testing

Q21 When were you last tested for syphilis? (Response required)

- ☐ Within the past year >>Skip to Q23
- ☐ 1-2 years ago >>Skip to Q23
- ☐ Longer than 2 years ago >>Skip to Q23
- ☐ Don't know >>Skip to Q23
- ☐ Never

Q22 What reasons describe why you have not ever had a syphilis test? (Select **all that apply**)

- ☐ I think I have low risk of contracting syphilis >>Skip to Q26
- ☐ I am afraid to know if I have syphilis >>Skip to Q26

- ☐ I do not have time for a syphilis test >>Skip to Q26
- ☐ I do not want to pay for a syphilis test >>Skip to Q26
- ☐ I do not know where to get a syphilis test >>Skip to Q26
- ☐ I never really thought about it >>Skip to Q26
- ☐ I feel that syphilis tests are too invasive >>Skip to Q26
- ☐ Other, please specify: _____>>Skip to Q26

Q23 Where have you been tested for syphilis? (Select **all that apply**)

- ☐ Syphilis counseling and testing site
- ☐ Syphilis outreach site/mobile testing unit
- ☐ Drug treatment program
- ☐ Needle or syringe exchange program
- ☐ Jail or prison
- ☐ Family planning or obstetrics clinic
- ☐ Public health clinic or community health center
- ☐ Private doctor's office
- ☐ Emergency room / Hospital (inpatient)
- ☐ At home
- ☐ Community events
- ☐ Other, please specify: _____

Q24 Have you ever tested positive for syphilis?

- ☐ Yes
- ☐ No >>Skip to Q26
- ☐ Don't know >>Skip to Q26

Q25 Were you treated for syphilis each time you tested positive?

- ☐ Yes, each time >>Skip to Q27
- ☐ Only some of the times >>Skip to Q27
- ☐ Never treated >>Skip to Q27

Q26 How much do you think you are at risk for contracting syphilis at some point in your life?

- ☐ No risk
- ☐ Slight risk
- ☐ Moderate risk
- ☐ Great risk

Sexual Health Behaviors

Q27 In the past 12 months, with how many people have you had oral sex, vaginal sex, and/or anal sex?

- ☐ Enter number _____
- ☐ None, I did not have any form of sexual intercourse in the past 12 months >>Skip to Q30

Q28 During the past 12 months, who were your sexual partners? (Select **all that apply**)

- ☐ Male
- ☐ Female
- ☐ Transgender men/ FTM (female to male)
- ☐ Transgender women/ MTF (male to female)
- ☐ Genderqueer/ non-binary/ gender fluid persons/ Agender persons
- ☐ Don't know

Q29 In the past 12 months, have you had any of the following types of sex **without** a condom? (Select **all that apply**)

- ☐ Oral sex without a condom
- ☐ Insertive vaginal sex without a condom
- ☐ Receptive vaginal sex without a condom
- ☐ Insertive anal sex without a condom
- ☐ Receptive anal sex without a condom
- ☐ None of the above

Doxycycline as Post-exposure Prophylaxis (PEP)

Q33 Doxycycline post-exposure prophylaxis or Doxy PEP refers to an antibiotic taken after condomless sex to prevent getting sexually transmitted infections (STIs) such as syphilis, gonorrhea or chlamydia. Before today, have you heard of Doxy PEP?

- ☐ Yes
- ☐ No >>Skip to Q39
- ☐ Don't know >>Skip to Q39

Q34 In the past 12 months, have you had a discussion with a health care provider about taking Doxy PEP?

- ☐ Yes
- ☐ No

Q35 In the past 12 months, have you taken Doxy PEP to reduce the risk of getting syphilis?

- ☐ Yes
- ☐ No >>Skip to Q40

Q39 Would you be willing to use Doxy PEP to reduce the risk of contracting chlamydia, gonorrhea, and/or syphilis in the future?

- ☐ Yes
- ☐ No
- ☐ Don't know

Pre-Exposure Prophylaxis (PrEP) for HIV

Q40 Pre-exposure prophylaxis, or PrEP, is an antiretroviral medicine, such as Truvada, taken for months or years by a person who is HIV-negative to reduce the risk of getting HIV. Before today, have you ever heard of PrEP?

- ☐ Yes
- ☐ No >>Skip to Q47

Q41 In the past 12 months, have you had a discussion with a health care provider about taking PrEP to reduce the risk of getting HIV?

- ☐ Yes
- ☐ No

Q42 In the past 12 months, have you taken PrEP to reduce the risk of getting HIV?

- ☐ Yes
- ☐ No

Q46 Would you be willing to start or continue using PrEP to reduce the risk of getting HIV in the future?

- ☐ Yes
- ☐ No
- ☐ Don't know

Drug Use

Q47 Have you ever injected any substance, including drugs, substances, or medications, at any point in your life? Medications include at-home injections such as infusions, steroids or hormones, vaccinations are not included for the purpose of this survey.

- ☐ Yes
- ☐ No >>Skip to Q52

Injection Drug Use

Q48 In the past 12 months, how often did you inject drugs, substances, or medications with a needle that someone else had already used? Medications include at-home injections such as infusions, steroids or hormones, vaccinations are not included for the purpose of this survey.

- ☐ Always
- ☐ Most of the time
- ☐ About half the time
- ☐ Rarely
- ☐ Never

Q49 In the past 12 months, where did you usually get your syringes for injecting drugs, substances, or medications? (Select **all that apply**)

- ☐ Pharmacy (with or without a prescription)
- ☐ Online/internet
- ☐ On the street/picked up discarded needles
- ☐ From a partner, friend, or someone I know
- ☐ From a needle exchange or syringe service program, from a syringe vending machine
- ☐ I reused my own needles
- ☐ I don't know
- ☐ Other, please specify: _____

Q50 How easy or difficult would it be for you to access clean syringes from a needle exchange site or syringe vending machine if you wanted to?

- ☐ Very easy
- ☐ Easy
- ☐ Difficult
- ☐ Very difficult
- ☐ Does not apply, not willing to go

Q51 What barriers prevent you from accessing clean syringes? (Select **all that apply**)

- ☐ No programs nearby/ transportation issues
- ☐ Fear of arrest/legal issues
- ☐ Stigma or judgment from staff
- ☐ Cost
- ☐ I don't know where to get them
- ☐ None- I can access them easily
- ☐ Other, please specify: _____

Substance Use Behavior

Q52 In the past 12 months, how often did you use street drugs/illicit drugs or misuse medications (used in a way not prescribed to you, used more than prescribed, or to get high)?

- ☐ Daily or almost daily
- ☐ Weekly
- ☐ Monthly
- ☐ A few times a year
- ☐ Once
- ☐ Never >>Skip to Q56
- ☐ Prefer not to say

Q53 When using drugs in the past 12 months, how often did you use drugs alone (without anyone else present)?

- ☐ Always
- ☐ Most of the time
- ☐ About half the time
- ☐ Rarely
- ☐ Never

Q54 Have you ever personally overdosed on drugs (accidental or intentional drug poisoning)?

- ☐ Yes, in the past 12 months
- ☐ Yes, more than 12 months ago
- ☐ No

Q55 In the past 12 months, have you used a drug test strip to check your drugs for fentanyl, xylazine, or other substances before using them?

- ☐ Yes
- ☐ No
- ☐ I've heard of drug test strips but haven't used them
- ☐ I've never heard of drug test strips before this survey

Q56 Which of the following can be spread by sharing needles or other injection equipment?
(Select **all that apply**)

- ☐ HIV
- ☐ Hepatitis B
- ☐ Hepatitis C
- ☐ Syphilis
- ☐ None of the above
- ☐ Not sure

Q57 Generally, how accessible do you think services are for people who use drugs in your community?

- ☐ Very accessible
- ☐ Somewhat accessible
- ☐ Very inaccessible

Exposure to Violence and Discrimination

This section asks questions about your personal experiences related to violence and discrimination. When we use the word discrimination we are referring to the treatment of a person or group unfairly, especially in a worse way than others, based on a protected characteristic such as race, gender, religion, age, disability, or national origin.

Q58 In the past 12 months, has anyone slapped, punched, shoved, kicked, shaken or otherwise physically hurt you?

- ☐ Yes
- ☐ No
- ☐ Don't know

Q59 In the past 12 months, has anyone forced or pressured you to have vaginal, oral, or anal sex when you did not want to?

- ☐ Yes
- ☐ No
- ☐ Don't know

Q60 In the past 12 months, have you experienced discrimination?

- ☐ Yes
- ☐ No
- ☐ Don't know

Information and Services

Q63 How would you like to get information about sexual health? (Select **all that apply**)

- ☐ Internet
- ☐ TV
- ☐ Radio
- ☐ Newspaper/billboard
- ☐ Brochure
- ☐ Community events
- ☐ Teacher
- ☐ Family/friend/partner
- ☐ Church
- ☐ Health care provider
- ☐ Health department
- ☐ Community agency
- ☐ Other, please specify: _____

Q64 What type of health insurance do you have? (If you have more than one type of coverage, check the **ONE** that you usually use to cover doctor and hospital bills)

- ☐ I do NOT have health insurance coverage
- ☐ Insurance through an employer or someone else (such as employer's health plan, parents, partner)
- ☐ Private insurance that you or someone in your family purchased
- ☐ Medicare / Medicaid
- ☐ Military health care/TRICARE-Champus/Veterans Administration
- ☐ Student health insurance through a college or university

- ☐ Don't know
- ☐ Other, please specify: _____

Q65 In the past 12 months, where did you usually go for medical care or assistance when you were sick? (Check the **ONE** place you usually went)

- ☐ Emergency Room
- ☐ Urgent Care
- ☐ Private doctor's office
- ☐ Health clinic or health center
- ☐ V.A. (Veterans Administration) clinic or hospital
- ☐ I did not go to any providers
- ☐ Don't know
- ☐ Other, please specify: _____