## Appendix A. Survey 1) (eligible to participate)\* 2) What is your age?\* 3) What is your sex?\* () Male () Female () Transgender 4) Have you had sex in the past 2 weeks?\* () Yes () No 5) What type(s) of sex have you had in the past 2 weeks?\* [] Oral sex [] Vaginal sex [] Anal sex with a man [] Anal sex with a woman 6) Have you used a condom in the past 2 weeks?\* () Yes () No () Don't know

8) In general, how do you feel about <u>using condoms</u>?\*

7) How old were you when you first started using condoms?\*

( ) Strongly dislike

() Dislike

() Neutral

() Like
() Strongly like
9) Thinking about the past 6 months, how often have you had sex?*
() Once a month
() 2-3 times a month
() Once a week
() 2-3 times a week
() More than 3 times a week
10) Think again about the <u>past 6 months</u> , how often did you <u>use a condom</u> while having sex?*
() Rarely
() Some of the time
() Most of the time
() All of the time
11) Have you ever had issues maintaining an erection while using a condom?*
() Yes
() No
Think about the last time you used a condom and $\underline{who}$ you used this condom with.
12) Was this partner:*
() Male
() Female
() Transgender
13) Please give this partner a nickname. We will use this nickname to refer to your partner for the rest of the survey. The nickname could be the place you met, or a color they like, or their first name. Do NOT provide the last name of your partner. *

Still thinking about the las	t time you used a condom with []	Partner Nickname]:						
14) What type of sex did you have when you used this condom? Check all that apply.*								
[ ] I used the condom for vaginal sex [ ] I used the condom for anal sex								
[] I used the condom for oral se	ex							
In the next questions, we a <u>this condom</u> .	re going to ask you about your so	exual experience <u>with</u>						
15) Did you ejaculate (cum)?*	•							
() Yes () No								
For the next several questions, use the slider to show <u>how much</u> you disagree or agree with the statement. Remember that we are asking you to <u>think about the most recent time you had sex and used a condom with [Partner Nickname]</u> .								
16) The orgasm was outstandi	ing.*							
0	[]	100						
17) The timing of my ejaculati	ion (cum) was just right.*							
0	[]	100						
18) The physical sensation on	my penis was outstanding.*							
0	[_]	100						
19) This sex was very pleasura	able.*							
0	[_]	100						
20) I was able to maintain my	erection throught the sex act.*							
0	[_]	100						

21) The firmness of my erecti	on was ideal during sex.*	
0	[_]	100
22) My penis was comfortable	e during sex (for example, not pinched)	.*
0	[_]	100
23) I was highly physically ar	oused during sex.*	
0	[_]	100
24) My penis felt sore or was	chafed during sex.*	
0	[_]	100
25) This condom felt like wea	ring nothing.*	
0	[_]	100
26) This condom helped me e	njoy sex.*	
0	[_]	100
27) This condom helped me h	ave better sex.*	
0	[_]	100
Just a few more questions	about [Partner Nickname]:	
28) In the time you have know once?*	vn [Partner Nickname], have you had s	sex <u>once or more than</u>
() Once		
() More than once		
29) Are you in a committed ro	elationship with [Partner Nickname]?*	
() Yes		
() No		
<b>30)</b> What is the quality of sex	in your relationship with [Partner Nic	kname]?*

() Excellent									
() Good									
( ) Ok									
() Fair									
() Poor									
31) What is the quali	ty of f	orepla	ay in y	your r	elatio	nship	with	[Partner Nickname]?	*
() Excellent									
() Good									
( ) Ok									
() Fair									
() Poor									
32) What was the qua	ality o	f sex i	in you	r rela	tionsł	nip wi	th [Pa	rtner Nickname]?*	
() Excellent									
() Good									
( ) Ok									
() Fair									
() Poor									
33) What was the qua	ality o	f fore	play v	vith []	Partne	er Nic	knam	e]?*	
() Excellent									
() Good									
( ) Ok									
() Fair									
() Poor									
								ship with [Partner Nic describes your relation	
Very bad	1	2	3	4	5	6	7	Very good	
Very unpleasant								Very pleasant	

Very positive

Very negative

Very unsatisfying				Very satisfying
Worthless				Very valuable

35) In general, how would you describe your *sexual* relationship with [Partner Nickname]? For *each* pair of words below, select the number which best describes your relationship,  $\underline{as}$  a whole.\*

Very bad	1	2	3	4	5	6	7	Very good
Very unpleasant								Very pleasant
Very negative								Very positive
Very unsatisfying								Very satisfying
Worthless								Very valuable

## Just a few more questions about yourself!

36) Do you consider yourself to be Hispanic or Latino?*
() Yes
( ) No
( ) Don't know
() Prefer not to answer
37) What racial group do you consider yourself to be in?*
( ) Asian/Pacific Islander
( ) Black/African American
( ) White/Caucasian
( ) Native American/Alaska Native
( ) Multi-Racial
( ) Prefer not to answer
( ) Other:

38) You indicated that you are multi-racial. Please check all of the racial groups you consider yourself to be in:

[ ] Asian/Pacific Islander
[ ] Black/African American
[] White/Caucasian
[] Native American/Alaska Native
[] Other
39) What is the highest level in school that you completed?*
() College, post graduate, or professional school
() Some college, Associate's degree and/or Technical School
() High school or GED
() Did not finish high school
( ) Don't know
() Prefer not to answer
40) Which of the following best describes your current marital status?*
() Legally married
() Registered domestic partnership or civil union
() Widowed
() Divorced
() Separated
() Never married
() Prefer not to answer
41) What was your household income last year from all sources before taxes (monthly/yearly)?*
() 0 to \$1667 (monthly) / 0 to \$19,999 (yearly)
() \$1668 to \$4167 (monthly) / \$20,000 to \$49,999 (yearly)
( ) \$4168 to \$6250 (monthly) / \$50,000 to \$74,999 (yearly)
() \$6251 or more (monthly) / \$75,000 or more (yearly)
( ) Don't know
() Prefer not to answer