mDiary Study of Adolescent Romantic Relationships: Diary Questionnaires 1 - 26

prepared by

Rachel Goldberg, Marta Tienda, and Sara Villalta
with assistance from Cara Carpenito, Michelle Eilers, and the FFCWS Data Team

mDiary Study Team

Co-PIs: Marta Tienda and Rachel Goldberg
Co-I and Fragile Families and Child Wellbeing Study¹ (FFCWS) PI: Sara McLanahan
1 At the time of data collection, the study was named the Fragile Families and Child Wellbeing Study (FFCWS). The FFCWS changed its name to the Future of Families and Child Wellbeing Study (FFCWS) in January 2023.
mDiary Program Manager: Michelle Eilers
Statistical Programmer: Dawn Koffman
FFCWS Program Manager: Kate Jaeger
Recruitment Team (Princeton Survey Research Center): Naila Rahman, Edward Freeland
Qualtrics Programmer and Research Assistant: Jay Westreich

Funders
Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD),
Spitzer Family Fund for US Health Policy, Center for Health and Wellbeing, and Princeton University

October 2023

¹ At the time of data collection, the study was named the Fragile Families and Child Wellbeing Study (FFCWS). The FFCWS changed its name to the Future of Families and Child Wellbeing Study (FFCWS) in January 2023.
# Table of Contents

**Diary Survey 1:** .................................................................................................................. 5

- Section 1A: Family/Household ............................................................... 5
- Section 1B: Perceived Support ............................................................... 7
- Section 1C: School ................................................................................. 8
- Section 1D: Peer Group ........................................................................ 9
- Section 1E: Parental Attitudes about Dating/Sexual Behavior .............. 10
- Section 1F: Dating/Sexual Experience of Peer Group ............................. 10
- Section 1G: Past Experiences with Dating ............................................ 11
- Section 1H: Past Experience with Sexual Activity: ............................... 12
- Section 1I: Substance Use ................................................................... 14
- Section 1K: Psychosocial Wellbeing ................................................... 14
- Section 1L: HEALTH/STDs ................................................................. 15
- Section 1M. CLOSING REMARKS (last screen): ................................. 15

**Diary Survey 2:** ........................................................................................................ 16

- Section 2A: Work ................................................................................. 16
- Section 2B: Family/Household ............................................................. 16
- Section 2C: School .............................................................................. 17
- Section 2D: Psychosocial Wellbeing .................................................... 17
- Section 2E: Determination of Whether Currently in Relationship/Type .... 18
- Section 2F: Basic Partner Characteristics ........................................... 20
- Section 2G: Intimacy /Enmeshment in Relationship ............................. 23
- Section 2H: Supportiveness/Caring in Relationship ............................... 24
- Section 2J: Relationship Asymmetries ............................................... 24
- Section 2K: Conflict/Abuse .................................................................. 25
- Section 2L: Past Sexual Experience with Partner ................................. 26
- Section 2M: Current Experiences with Sexual Activity .......................... 26
- Section 2N: Fertility .......................................................................... 29
- Section 2P: Other .............................................................................. 30
- Section 2Q. CLOSING REMARKS (last screen): ................................. 30

**Diary Survey 3:** ..................................................................................................... 31

- Section 3A: Work .............................................................................. 31
- Section 3B: Family/Household ............................................................. 31
Section 5C: Determination of Whether Currently in Relationship/Type ................................. 69
Section 5D: Basic Partner Characteristics [If newly reported partner] ...................................... 73
Section 5E: Intimacy/Enmeshment in Relationship .................................................................. 76
Section 5F: Supportiveness/Caring in Relationship .................................................................... 77
Section 5G: Relationship Asymmetries .................................................................................... 78
Section 5H: Conflict/Abuse ........................................................................................................ 78
Section 5J: Psychosocial Wellbeing .......................................................................................... 79
Section 5K: Past Sexual Experience with New Partner ............................................................... 80
Section 5L: Current Experiences with Sexual Activity ............................................................... 80
Section 5M: Fertility ................................................................................................................... 84
Section 5N: Substance Use ......................................................................................................... 85
Section 5P: School ...................................................................................................................... 86
Section 5Q: Other ....................................................................................................................... 86
Section 5R. CLOSING REMARKS (last screen): ................................................................. 86
Diary Survey 8, 14, 20: .............................................................................................................. 87
Section 8Q: Retrospective ......................................................................................................... 87
Diary Survey 26: ....................................................................................................................... 88
  Section 26A: Work ................................................................................................................. 88
  Section 26B: Family/Household ............................................................................................. 88
  Section 26C: School ............................................................................................................... 89
  Section 26D: Psychosocial Wellbeing .................................................................................... 91
  Section 26E: Determination of Whether Currently in Relationship/Type ......................... 92
  Section 26F: Basic Partner Characteristics [If newly reported partner] ............................... 96
  Section 26G: Intimacy/Affection/Enmeshment in Relationship .............................................. 99
  Section 26H: Supportiveness/Caring in Relationship ............................................................ 100
  Section 26J: Relationship Asymmetries .............................................................................. 100
  Section 26K: Conflict/Abuse ............................................................................................... 101
  Section 26L: Past Sexual Experience with New Partner ....................................................... 101
  Section 26M: Current Experiences with Sexual Activity ..................................................... 102
  Section 26N: Fertility ............................................................................................................ 106
  Section 26P: Other ................................................................................................................ 107
  Section 26R. CLOSING REMARKS (last screen): ............................................................. 108
**Diary Survey 1:**

**Section 1A: Family/Household**

1A01 – What adults do you live with? If you have two households, think of the one where you spend the most time. **Select all that apply.**

1 – Biological or adoptive mother  
2 – Biological or adoptive father  
3 – Stepmother  
4 - Stepfather  
5 – Grandmother  
6 - Grandfather  
7 – Parent’s girlfriend  
8 – Parent’s boyfriend  
101 – Sibling (new category)  
102 – Aunt or uncle (new category)  
9 – Someone else (specify) TEXT BOX__________________________  
-1 – Refuse

1A02 – Have the following happened in your family since you were born? **Select all that apply.**

1 – Parent/guardian died  
2 – Parent/guardian went to jail or prison  
3 – Parent/guardian separated or got divorced  
4 – Parent/guardian was deported  
5 – None of these  
-2 – Don’t know  
-1 – Refuse

1A03 – How close do you feel to your parents or guardians?

1 – Extremely close  
2 – Quite close  
3 – Fairly close  
4 – Not very close  
-1 – Refuse
1A04 – How often do you argue with your parents or guardians?

1 – Often
2 – Sometimes
3 – Rarely
4 – Never
-1 – Refuse

1A05 – How often do you spend time alone in your home with no adult present?

1 – Often
2 – Sometimes
3 – Rarely
4 – Never (adult always present)
-1 – Refuse

1A06 – How often do your parents or guardians keep track of what you do during your free time?

1 – Often
2 – Sometimes
3 – Rarely
4 – Never
-2 – Don’t know
-1 – Refuse

1A07 – Do your parents/guardians do any of the following to monitor your Internet use on home computers? Select all that apply.

1 – Limit my time online
2 – Check what websites I visit
3 – Track my posts on social media
4 – Use filters to keep me from visiting certain sites
5 – Use software to record my keystrokes
6 – Use software to take screenshots of sites I visit
7 – None of the above as far as I know
8 – We don’t have any home computers
-1 – Refuse
1A08 – Do your parents/guardians do any of the following to monitor your mobile devices? Select all that apply.

1 – Check what apps/websites I visit
2 – Track my posts on social media
3 – Use filters to keep me from visiting certain sites/apps
4 – Use software to record my keystrokes
5 – Use software to take screenshots of sites/apps I visit
6 – Read my text messages
7 – View my photos
8 – None of the above as far as I know
9 – I don’t have a mobile device
-1 – Refuse

Section 1B: Perceived Support

1B01 – Other than your parents or guardians, is there an adult in your life who you talk with about things that really matter?

1 – Yes
2 – No → GO TO 1C01
-1 – Refuse → GO TO 1C01

1B02 – How is this adult related to you? If there is more than one, think about the one who has made the most important positive difference in your life.

1 – Brother or sister
2 – Grandparent
3 – Other relative
4 – Teacher or guidance counselor
5 – Coach
6 – Religious leader
7 – Neighbor
8 – Other adult (specify) TEXT BOX
101 – Family friend (new category)
-1 – Refuse
Section 1C: School

1C01 – Are you enrolled in high school? If it is summer, were you enrolled in high school the whole last school year?

1 – Yes  ➔ GO TO 1C03
2 – No
-1 – Refuse  ➔ GO TO 1C03

1C02 – In what month and year did you stop attending high school?

1C02A.
1 – __|___|___| ENTER YEAR OF DROP-OUT
-2 – Don’t know
-1 – Refuse

VALID RANGE: 2012-2016

1C02B.
1 – __|__ | ENTER MONTH OF DROP-OUT
-2 – Don’t know
-1 – Refuse

VALID RANGE: January-December

1C03 – How important is graduating from high school to you?

1 – Very important
2 – Somewhat important
3 – Not very important
-2 – Don’t know
-1 – Refuse

1C04 – How important is graduating from college to you?

1 – Very important
2 – Somewhat important
3 – Not very important
-2 – Don’t know
-1 – Refuse
1C05 – How likely are you to graduate from high school?

1 – Very likely
2 – Somewhat likely
3 – Not very likely
4 – Very unlikely
-1 – Refuse

1C06 – How likely are you to graduate from college?

1 – Very likely
2 – Somewhat likely
3 – Not very likely
4 – Very unlikely
-1 – Refuse

Section 1C07

If 1C01=2, GO TO 1D01.

1C07 – At the most recent grading period, what grades did you get? If it is summer, think of the last grading period in the spring.

1 - Mostly A's
2 - Mixed A's and B's
3 - Mostly B's
4 - Mixed B's and C's
5 - Mostly C's
6 - Mixed C's and D's
7 - Mostly D's
8 - Mixed D's and F's
9 - Mostly F's
10 – I wasn’t enrolled in school
-1 – Refuse

Section 1D: Peer Group

1D01 – How would you describe the age of the friends you spend the most time with?

1 – Mostly older
2 – Mostly my age
3 – Mostly younger
-1 – Refuse
1D02 – Of the friends you spend the most time with, how many will likely graduate from high school?

1 – All or most
2 – Some
3 – A few
4 – None
-2 – Don’t know
-1 – Refuse

**Section 1E: Parental Attitudes about Dating/Sexual Behavior**

1E01 – Whether or not you have ever dated, would your parents or guardians approve of you dating at this time in your life?

1 – Approve
2 – Wouldn’t care
3 – Disapprove
-2 – Don’t know
-1 – Refuse

1E02 – Whether or not you have ever had sex, would your parents or guardians approve of you having sex at this time in your life?

1 – Approve
2 – Wouldn’t care
3 – Disapprove
-2 – Don’t know
-1 – Refuse

**Section 1F: Dating/Sexual Experience of Peer Group**

1F01 – Of the friends you spend the most time with, how many have dated?

1 – All or almost all
2 – Some
3 – A few
4 – None
-2 – Don’t know
-1 – Refuse
1F02 – Of the friends you spend the most time with, how many have had sex?

1 – All or almost all
2 – Some
3 – A few
4 – None
-2 – Don’t know
-1 – Refuse

1F03 – Of the friends you spend the most time with, has anyone been pregnant or gotten someone pregnant?

1 – Yes
2 – No
-2 – Don’t know
-1 – Refuse

Section 1G: Past Experiences with Dating

1G01 – Have you ever had a crush on a girl (liked a girl as more than just a friend)?

1 – Yes
2 – No
-1 – Refuse

1G02 – Have you ever had a crush on a boy (liked a boy as more than just a friend)?

1 – Yes
2 – No
-1 – Refuse

1G03 – Have you ever dated or been in a relationship with someone?

1 – Yes
2 – No ➔ GO TO 1H01
-1 – Refuse ➔ GO TO 1H01
1G04 – How old were you when you first dated someone?

1 - |_|__ ENTER AGE IN YEARS [NUMERIC KEYPAD IF POSSIBLE]
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 5-19

1G05 – How many different people have you ever dated?

1 - |_|__ ENTER NUMBER OF PEOPLE (NUMERIC KEYPAD IF POSSIBLE)
-2 – Don’t know
-1 – Refuse

VALID RANGE: 1-99

Section 1H: Past Experience with Sexual Activity:

BOX 1H01
IF FEMALE, PROCEED WITH 1H01.
IF MALE, GO TO 1H02.

1H01 – How old were you when you first menstruated or got your period?

1 - |_|__ ENTER AGE IN YEARS [NUMERIC KEYPAD IF POSSIBLE]
2 – Haven’t gotten my period yet
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 5-19

1H02 - Have you ever done any of the following with someone? Select all that apply:

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse
1H03 - Have you ever had sexual intercourse?

1 – Yes
2 – No ➔ GO TO 1J01
-1 – Refuse ➔ GO TO 1J01

1H04 – In what month and year did you have sexual intercourse for the first time?

1H04A.
1 – [_____] ENTER YEAR OF FIRST SEXUAL INTERCOURSE [NUMERIC KEYPAD IF POSSIBLE]
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 2012-2016

1H04B.
1 – [____] ENTER MONTH OF FIRST SEXUAL INTERCOURSE [NUMERIC KEYPAD IF POSSIBLE]
-2 – Don’t remember
-1 – Refuse

VALID RANGE: January-December

1H05 - How old were you when you had sexual intercourse for the first time?

1 – [____] ENTER AGE IN YEARS [NUMERIC KEYPAD IF POSSIBLE]
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 5-19
1H06 – How many different people have you had sexual intercourse with?

1 - |__|__| ENTER NUMBER OF PEOPLE [NUMERIC KEYPAD IF POSSIBLE]
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 1-99

Section 1J: Substance Use

1J01 – In the past month, how often did you drink beer, wine, or liquor—more than just a sip or taste of someone else’s drink—when you were not with your parents?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse

1J02 – In the past month, how often did you use drugs to get high? This includes marijuana, hallucinogens, cocaine, cough or cold medicine, inhalants, or something else.

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse

Section 1K: Psychosocial Wellbeing

1K01 – In the past two weeks, how often did you feel happy?

1 – Never or rarely
2 – Sometimes
3 – A lot of the time
4 – Most or all of the time
-1 – Refuse
1K02 – In the **past two weeks**, how often did you feel sad?

1 – Never or rarely  
2 – Sometimes  
3 – A lot of the time  
4 – Most or all of the time  
-1 – Refuse

1K03 – In the **past two weeks**, how often did you feel life was not worth living?

1 – Never or rarely  
2 – Sometimes  
3 – A lot of the time  
4 – Most or all of the time  
-1 – Refuse

**Section 1L: HEALTH/STDs**

1L01 – In general, would you say your health is...

1 – Excellent  
2 – Very good  
3 – Good  
4 – Fair  
5 – Poor  
-1 – Refuse

**Section 1M. CLOSING REMARKS (last screen):**

1M01 – Thank you for completing this survey!

We are giving all participants a phone number to a free national hotline, just in case it would ever be helpful to talk with someone. The number for the ChildHelp hotline is 1-800-4-A-Child or 1-800-422-4453.

**To make sure this interview counts toward your next Amazon gift card, please click on the double arrow button** and wait until you are redirected to mdiary.org.
Diary Survey 2:

**Section 2A: Work**

2A01 – In the **past two weeks**, did you work for pay for anyone? This includes both regular jobs and things like babysitting or yard work.

1 – Yes
2 – No \( \rightarrow \) GO TO 2B01
-1 – Refuse \( \rightarrow \) GO TO 2B01

2A02 – In the **past two weeks**, approximately how many hours did you work for pay in total?

1 – [__] [__] ENTER HOURS
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 1-150

**Section 2B: Family/Household**

2B01 – In the **past two weeks**, has there been any change in the adults you live with?

1 – Yes
2 – No \( \rightarrow \) GO TO 2B03
-1 – Refuse \( \rightarrow \) GO TO 2B03

2B02 – What adults do you live with now? If you have two households, think of the one where you spend the most time. **Select all that apply.**

1 – Biological or adoptive mother
2 – Biological or adoptive father
3 – Stepmother
4 = Stepfather
5 – Grandmother
6 - Grandfather
7 – Parent’s girlfriend
8 - Parent’s boyfriend
9 – Someone else (specify) TEXT BOX ________________________________
-1 – Refuse
2B03 – In the **past two weeks**, have any of the following happened in your family or household? **Select all that apply.**

1 – You moved  
2 – Parent/guardian lost job  
3 – Parents/guardian died  
4 – Parent/guardian went to jail or prison  
5 – Parent/guardian was released from jail or prison  
6 – Parent/guardian separated or got divorced  
7 – Parent/guardian got married  
8 – Parent/guardian was deported  
9 – Other major event (specify) **TEXT BOX** ________________________________  
10 – **No** major event  
-1 – Refuse  

**Section 2C: School**

2C01 – In the **past two weeks**, did you skip school for a full day without an excuse?  

1 – Yes  
2 – No  
3 – No because it’s summer  
4 – No because I dropped out  
-1 – Refuse  

**Section 2D: Psychosocial Wellbeing**

2D01 – In the **past two weeks**, how often did you feel happy?  

1 – Never or rarely  
2 – Sometimes  
3 – A lot of the time  
4 – Most of the time  
-1 – Refuse  

2D02 – In the **past two weeks**, how often did you feel sad?  

1 – Never or rarely  
2 – Sometimes  
3 – A lot of the time  
4 – Most of the time  
-1 – Refuse
2D03 – In the past two weeks, how often did you feel life was not worth living?

1 – Never or rarely
2 – Sometimes
3 – A lot of the time
4 – Most of the time
-1 – Refuse

Section 2E: Determination of Whether Currently in Relationship/Type

2E01 – Is there someone you are currently talking to, flirting with, dating, or hooking up with?

1 – Yes
2 – No \(\rightarrow\) GO TO 2E06
-1 – Refuse \(\rightarrow\) GO TO 2E06

2E02 – The next several questions will be about the person you are currently talking to, flirting with, dating, or hooking up with. If there are multiple people, please think about the most serious.

2E03 – Please give the initials or first name, or a nickname, of the person you are currently talking to, flirting with, dating, or hooking up with? We will use this response to ask about him or her in this and future surveys.

1 – [Text box]
-1 – Refuse \(\rightarrow\) GO TO 2M09

2E04 – How would you describe your relationship with \{2E03_r\} now? Please select one.

1 - Talking/flirting
2 - Dating
3 - Friends with benefits
4 - Other (specify): TEXT BOX ______________________________
-1 - Refuse
2E05 – How long have you and {2E03_r} been talking, flirting, dating, or hooking up?

1 – Less than a week
2 – 1 week or more but less than a month
3 – 1 month or more but less than 6 months
4 – 6 months or more but less than a year
5 – A year or more
-2 – Don’t remember
-1 – Refuse

BOX 2E05
GO TO 2F01.

2E06 – Is there someone in your life that you would really like to have a relationship with?

1 – Yes
2 – No ➔ GO TO 2M09
-1 – Refuse ➔ GO TO 2M09

2E07 – The next several questions are about the person you would like to have a relationship with. If there are multiple people, please think about the one you like most.

2E08 – Please give the initials or first name, or a nickname, of this person? We will use this response to ask about him or her in this and future surveys.

1 – [Text box]
-1 – Refuse ➔ GO TO 2M09

BOX 2E08
set CURRENTNAME = 2E03_r if 2E03=1
set CURRENTCRUSHNAME = 2E08_r if 2E08=1
Section 2F: Basic Partner Characteristics

2F01 – How old is {CURRENTNAME or CURRENTCRUSHNAME}?  
1 - [___|___] ENTER AGE IN YEARS [NUMERIC KEYPAD IF POSSIBLE]  ➔ GO TO 2F03  
-2 – Not sure  
-1 – Refuse  

VALID RANGE: 8-99

2F02 – Is {CURRENTNAME or CURRENTCRUSHNAME} older than you, younger than you, or around the same age?  
1 – Older then you  
2 – Younger than you  
3 – Around the same age  
-1 – Refuse

2F03 – Which of the following best describes {CURRENTNAME or CURRENTCRUSHNAME}’s race/ethnic background?  
1 – White  
2 – Black or African American  
3 – Asian or Pacific Islander  
4 – Hispanic/Latino/a  
5 – Other  
-1 – Refuse  

2F04 – Is {CURRENTNAME or CURRENTCRUSHNAME} male or female?  
1 – Male  
2 – Female  
-1 – Refuse
2F05 – Where did you and {CURRENTNAME} or {CURRENTCRUSHNAME} first meet?

1 – School
2 – Neighborhood
3 – Summer camp/summer program
4 – Party
5 – Church
6 – Internet/social media
7 – Friend or relative’s house
8 – Other (specify) TEXT BOX

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>School</td>
<td>1</td>
</tr>
<tr>
<td>Neighborhood</td>
<td>2</td>
</tr>
<tr>
<td>Summer camp/summer program</td>
<td>3</td>
</tr>
<tr>
<td>Party</td>
<td>4</td>
</tr>
<tr>
<td>Church</td>
<td>5</td>
</tr>
<tr>
<td>Internet/social media</td>
<td>6</td>
</tr>
<tr>
<td>Friend or relative’s house</td>
<td>7</td>
</tr>
<tr>
<td>Other (specify)</td>
<td>8</td>
</tr>
</tbody>
</table>

101 – Extracurricular activity (new category)
-2 – Don’t remember
-1 – Refuse

BOX 2F05

IF CURRENTCRUSHNAME != undefined, GO TO 2F11.

2F06 – Have your parents/guardians met {CURRENTNAME}?

1 – Yes
2 – No
-1 – Refuse

2F07 – What is the highest grade {CURRENTNAME} completed in school?

1 – 8th
2 – 9th
3 – 10th
4 – 11th
5 – 12th
6 – Beyond 12th grade
-2 – Don’t know
-1 – Refuse

2F08 – Does {CURRENTNAME} have a job?

1 – Yes
2 – No
-2 – Don’t know
-1 – Refuse
2F09 – About how often does {CURRENTNAME} usually drink alcohol?

1 – Never  
2 – Less than once a week  
3 – 1 or 2 days a week  
4 – 3 or 4 days a week  
5 – Every day or almost every day  
-2 – Don’t know  
-1 – Refuse

2F10 – About how often does {CURRENTNAME} use drugs to get high?

1 – Never  
2 – Less than once a week  
3 – 1 or 2 days a week  
4 – 3 or 4 days a week  
5 – Every day or almost every day  
-2 – Don’t know  
-1 – Refuse

BOX 2F10

GO TO 2G01.

2F11 – How likely is it that you and {CURRENTCRUSHNAME} will date in the future?

1 – Unlikely  
2 – Somewhat likely  
3 – Very likely  
-1 – Refuse

2F12 – Is {CURRENTCRUSHNAME} currently dating someone else?

1 – Yes  
2 – No  
-2 – Don’t know  
-1 – Refuse
Section 2G: Intimacy /Enmeshment in Relationship

2G01 – In the past two weeks, how often did you and {CURRENTNAME or CURRENTCRUSHNAME} spend time together in person?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-2 Don’t know
-1 – Refuse

2G02 – In the past two weeks, how often did you and {CURRENTNAME or CURRENTCRUSHNAME} communicate via phone, text, e-mail, or social media?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-2 Don’t know
-1 – Refuse

BOX 2G02

IF CURRENTCRUSHNAME != undefined, GO TO 2M09.

2G03 – Describe your relationship with {CURRENTNAME} overall. Is it ....?

1 – Excellent
2 – Very good
3 – Good
4 – Fair
5 – Poor
-1 – Refuse

2G04 – Have you and {CURRENTNAME} agreed to have a relationship with each other, and no one else?

1 – Yes
2 – No
-1 – Refuse
Section 2H: Supportiveness/Caring in Relationship

2H01 – How much do you agree or disagree with the following statement? {CURRENTNAME} makes me feel good about myself.

1 – Strongly agree
2 – Somewhat agree
3 – Somewhat disagree
4 – Strongly disagree
-1 – Refuse

2H02 – How much do you agree or disagree with the following statement? I would feel comfortable talking with {CURRENTNAME} if I had a problem.

1 – Strongly agree
2 – Somewhat agree
3 – Somewhat disagree
4 – Strongly disagree
-1 – Refuse

Section 2J: Relationship Asymmetries

2J01 – In many relationships, one partner is more “into” the relationship than the other. Would you say you are more into it, {CURRENTNAME} is more into it, or you are about the same?

1 – You are more into it
2 – {CURRENTNAME} is more into it
3 – About the same
-1 – Refuse

2J02 – In the past two weeks, if the two of you disagreed, who usually got their way?

1 – {CURRENTNAME} more than you
2 – {CURRENTNAME} and you about the same
3 – You more than {CURRENTNAME}
4 – Did not disagree
-1 – Refuse
Section 2K: Conflict/Abuse

2K01 – In the past two weeks, how often did you and {CURRENTNAME} fight or argue?

1 – Often
2 – Sometimes
3 – Rarely
4 – Never → GO TO 2L01
-1 – Refuse

2K02 – In the past two weeks, has {CURRENTNAME} done any of the following to you? Select all that apply.

1 - Put you down in front of other people
2 – Tried to keep you from seeing your friends
3 – Threatened you with violence
4 – Thrown something at you
5 – Pushed or shoved you
6 – Slapped, hit, or kicked you
7 – Hasn’t done any of the above to me
-1 – Refuse

2K03 – In the past two weeks, have you done any of the following to {CURRENTNAME}? Select all that apply:

1 - Put {CURRENTNAME} down in front of other people
2 – Tried to keep {CURRENTNAME} from seeing his/her friends
3 – Threatened {CURRENTNAME} with violence
4 – Thrown something at {CURRENTNAME}
5 – Pushed or shoved {CURRENTNAME}
6 – Slapped, hit, or kicked {CURRENTNAME}
7 – Haven’t done any of the above to {CURRENTNAME}
-1 – Refuse
Section 2L: Past Sexual Experience with Partner

2L01 – Have you and {CURRENTNAME} ever done any of the following? Select all that apply:

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

**BOX 2L02**

IF 2L01=2, PROCEED WITH 2L02.
ELSE, GO TO 2M06.

2L02 – Have you and {CURRENTNAME} ever had sexual intercourse?

1 – Yes
2 – No
-1 – Refuse

Section 2M: Current Experiences with Sexual Activity

2M01 – In the past two weeks, how many times did you and {CURRENTNAME} have sexual intercourse?

1 – Never → GO TO 2M06
2 - Once
2 – 2-3 times
3 – 4-5 times
4 – More than 5 times
-1 – Refuse

2M02 – In the past two weeks, did you and {CURRENTNAME} use a condom?

1 – Yes
2 – No → GO TO 2M04
-1 – Refuse → GO TO 2M04
2M03 – In the **past two weeks**, how often did you and {CURRENTNAME} use a condom?

1 – Every time
2 – Some of the time
3 – Rarely
-1 – Refuse

2M04– In the **past two weeks**, did you and {CURRENTNAME} use any **other** method to prevent pregnancy or sexually transmitted diseases (STDs)?

1 – Yes
2 – No → GO TO 2M06
-2 – Not sure → GO TO 2M06
-1 – Refuse → GO TO 2M06

2M05 – What **other** method(s) did you use? **Select all that apply.**

1 – Birth control pills
2 – Injectables or shots
3 – Patch or ring
4 – Implant
5 – IUD
6 – Emergency contraception/”morning after” pill
7 – Rhythm (safe time)
8 – Withdrawal
9 – Other (specify) TEXT BOX____________________________
-2 – Not sure
-1 – Refuse

2M06 – In the **past two weeks**, have you talked to, flirted with, dated, or hooked up with someone **other than** {CURRENTNAME}? 

1 – Yes
2 – No → GO TO 2N01
-1 – Refuse → GO TO 2N01

2M07 – In the **past two weeks**, have you done any of the following with someone **other than** {CURRENTNAME}? **Select all that apply:**

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse
2M08– In the **past two weeks**, have you and someone **other than** CURRENTNAME} had sexual intercourse?

1 – Yes  ➔ **GO TO 2M11**
2 – No  ➔ **GO TO 2N01**
-1 – Refuse  ➔ **GO TO 2N01**

2M09– In the **past two weeks**, have you done any of the following with someone? **Select all that apply:**

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

2M10 – In the **past two weeks**, have you had sexual intercourse?

1 – Yes
2 – No  ➔ **GO TO 2N01**
-1 – Refuse  ➔ **GO TO 2N01**

2M11 – How many people did you have sexual intercourse with in the **past two weeks**?

1 – |__|__| ENTER NUMBER OF PEOPLE [NUMERIC KEYPAD IF POSSIBLE]
-1 – Refuse

**VALID RANGE: 1-25**

**BOX 2M10**

IF 2M09=2, PROCEED WITH 2M10.
ELSE, GO TO 2N01.

**BOX 2M12**

IF 2M11=2, PROCEED WITH 2M12.
ELSE, GO TO 2N01.

**BOX 2M13**

set EVERSEX =1 if EVERSEX=undefined AND 2L02=1 or 2M08=1 or 2M10=1
Section 2N: Fertility

2N01 – {Have you ever been pregnant? Include if you are currently pregnant and any past pregnancy, even if it ended in abortion, stillbirth, or miscarriage}/ {Have you ever gotten someone pregnant before. Include current and past pregnancies, even those that ended in abortion or miscarriage.} {FEMALE/MALE}

1 – Yes
2 - No  → GO TO 2P01
-2 – Don’t know  → GO TO 2P01
-1 – Refuse  → GO TO 2P01

2N02 – Do you think there might be a chance that {you are/a partner of yours is} pregnant now?

1 – Yes
2 – No  → GO TO 2P01
-2 – Not sure  → GO TO 2P01
-1 – Refuse  → GO TO 2P01

2N03 – Has a pregnancy test indicated that {you are/a partner of yours is} pregnant now?

1 – Yes
2 – No
-2 – Don’t know
-1 – Refuse

**BOX 2N02**

set MAYBEPREGNANT=1 if 2N02=1 and 2N03!=1
set PREGNANT =1 if 2N03=1
Section 2P: Other

2P01 – Is there anything else that happened in your life in the past two weeks that you would like to tell us about? If so, please write in the box below.

1 - Yes [Text box]  
2 - Nothing to report

Note: Not included in public data.

Section 2Q. CLOSING REMARKS (last screen):

2Q01 – Thank you for completing this survey!

We are giving all participants a phone number to a free national hotline, just in case it would ever be helpful to talk with someone. The number for the ChildHelp hotline is 1-800-4-A-Child or 1-800-422-4453.

To make sure this interview counts toward your next Amazon gift card, please click on the double arrow button and wait until you are redirected to mdiary.org
**Diary Survey 3:**

**Section 3A: Work**

3A01 – In the **past two weeks**, did you work for pay for anyone? This includes both regular jobs and things like babysitting or yard work.

1 – Yes
2 – No → GO TO 3B01
-1 – Refuse → GO TO 3B01

3A02 – In the **past two weeks**, approximately how many hours did you work for pay in total?

1 – | | ENTER HOURS [NUMERIC KEYPAD IF POSSIBLE]
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 1-150

**Section 3B: Family/Household**

3B01 – In the **past two weeks**, has there been any change in the adults you live with?

1 – Yes
2 – No → GO TO 3B03
-1 – Refuse → GO TO 3B03

3B02 – What adults do you live with now? If you have two households, think of the one where you spend the most time. **Select all that apply.**

1 – Biological or adoptive mother
2 – Biological or adoptive father
3 – Stepmother
4 - Stepfather
5 – Grandmother
6 - Grandfather
7 – Parent’s girlfriend
8 – Parent’s boyfriend
9 – Someone else (specify) TEXT BOX _____________________________
-1 – Refuse
3B03 – In the past two weeks, have the following ever happened in your family? Select all that apply.

1 – You moved
2 – Parent/guardian lost job
3 – Parents/guardian died
4 – Parent/guardian went to jail or prison
5 – Parent/guardian was released from jail or prison
6 – Parent/guardian separated or got divorced
7 – Parent/guardian got married
8 – Parent/guardian was deported
9 – Other major event (specify) TEXT BOX ____________________________
10 – No major event
-1 – Refuse

Section 3C: Determination of Whether Currently in Relationship/Type

**BOX 3C01**

IF CURRENTNAME=undefined, GO TO 3C03.

3C01 – In the last survey, you mentioned {CURRENTNAME}. Are you still are talking to, flirting with, dating, or hooking up with {CURRENTNAME}?

1 – Yes  ➔ GO TO 3C06
2 – No
-2 – Not sure  ➔ GO TO 3C06
-1 – Refuse  ➔ GO TO 3C06

3C02 – Who broke off the relationship?

1 – You
2 – {CURRENTNAME OR CURRENTCRUSHNAME}
3 – Mutual
4 – Other
-1 – Refuse
3C03 – Is there someone you are currently talking to, flirting with, dating, or hooking up with?

1 – Yes
2 – No → GO TO 3C08
-1 – Refuse → GO TO 3C08

3C04 – The next several questions will be about the person you are currently talking to, flirting with, dating, or hooking up with. If there are multiple people, please think about the most serious.

3C05 – Please give the initials or first name, or a nickname, of the person you are currently talking to, flirting with, dating, or hooking up with. We will use this response to ask about him or her in this and future surveys.

1 – [Text box]
-1 – Refuse → GO TO 3J01

<table>
<thead>
<tr>
<th>BOX 3C05</th>
</tr>
</thead>
<tbody>
<tr>
<td>set PREVNUMS = CURRENTNAME if CURRENTNAME! = undefined and 3C01=2</td>
</tr>
<tr>
<td>set CURRENTNAME = undefined if 3C01=2</td>
</tr>
<tr>
<td>set CURRENTNAME = 3C05_r if CURRENTNAME = undefined and 3C05 =1</td>
</tr>
<tr>
<td>set NEWNAME = 3C05_r if 3C05=1</td>
</tr>
</tbody>
</table>

3C06 – Overall, how would you describe your relationship with {CURRENTNAME} now? Please select one.

1 - Talking/flirting
2 - Dating
3 - Friends with benefits
4 - Other (specify): TEXT BOX ________________________________
-1 - Refuse
3C06
IF NEWNAME=undefined, GO TO 3E01.

3C07 – How long have you and {NEWNAME} been talking, flirting, dating, or hooking up?

1 – Less than a week
2 – 1 week or more but less than a month
3 – 1 month or more but less than 6 months
4 – 6 months or more but less than a year
5 – A year or more
-2 – Don’t remember
-1 – Refuse

3C08 – In the last survey, you mentioned wanting to have a relationship with {CURRENTCRUSHNAME}. Would you still like to have a relationship with {CURRENTCRUSHNAME}?

1 – Yes → GO TO 3D12
2 – No
-2 – Not sure → GO TO 3D12
-1 – Refuse → GO TO 3D12

3C09 – Is there someone in your life that you would really like to have a relationship with?

1 – Yes
2 – No → GO TO 3J01
-1 – Refuse → GO TO 3J01
3C10 – The next several questions are about the person you would like to have a relationship with. If there are multiple people, please think about the one you like most.

3C11 – Please give the initials or first name, or a nickname, of this person. We will use this response to ask about him or her in this and future surveys.

1 – [Text box]
-1 – Refuse → GO TO 3J01

BOX 3C11

set PREVnames = PREVnames + “%” + CURRENTCRushNAME if CURRENTCRushNAME != undefined and 3C08=2

set CURRENTCRushNAME = undefined if CURRENTCRushNAME != undefined and 3C08=2
set CURRENTCRushNAME = 3C11_r if CURRENTCRushNAME = undefined and 3C11=1

set NEWCRushNAME = 3C11_r if 3C11=1

Section 3D: Basic Partner Characteristics [If newly reported partner]

3D01 – How old is {NEWNAME OR NEWCRUSHNAME}?

1 – |__|__| ENTER AGE IN YEARS [NUMERIC KEYPAD IF POSSIBLE] → GO TO 3D03
-2 – Not sure
-1 – Refuse

VALID RANGE: 8-99

3D02 – Is {NEWNAME OR NEWCRUSHNAME} older than you, younger than you, or around the same age?

1 – Older than you
2 – Younger than you
3 – Around the same age
-1 – Refuse
3D03 – Which of the following best describes {NEWNAME OR NEWCRUSHNAME}’s race/ethnic background?

1 – White
2 – Black or African American
3 – Asian or Pacific Islander
4 – Hispanic/Latino/a
5 – Other
-1 – Refuse

3D04 – Is {NEWNAME OR NEWCRUSHNAME} male or female?

1 – Male
2 – Female
-1 – Refuse

3D05 – Where did you and {NEWNAME OR NEWCRUSHNAME} first meet?

1 – School
2 – Neighborhood
3 – Summer camp/summer program
4 – Party
5 – Church
6 – Internet/social media
7 – Friend or relative’s house
8 – Other (specify) TEXT BOX ___________________________
-2 – Don’t remember
-1 – Refuse

BOX 3D05

IF NEWCRUSHNAME!==undefined, GO TO 3D11.

3D06 – Have your parents/guardians met {NEWNAME}?

1 – Yes
2 – No
-1 – Refuse
3D07 – What is the highest grade {NEWNAME} completed in school?

<table>
<thead>
<tr>
<th>Option</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>8th</td>
</tr>
<tr>
<td>2</td>
<td>9th</td>
</tr>
<tr>
<td>3</td>
<td>10th</td>
</tr>
<tr>
<td>4</td>
<td>11th</td>
</tr>
<tr>
<td>5</td>
<td>12th</td>
</tr>
<tr>
<td>6</td>
<td>Beyond 12th grade</td>
</tr>
<tr>
<td>-2</td>
<td>Don’t know</td>
</tr>
<tr>
<td>-1</td>
<td>Refuse</td>
</tr>
</tbody>
</table>

3D08 – Does {NEWNAME} have a job?

<table>
<thead>
<tr>
<th>Option</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>-2</td>
<td>Don’t know</td>
</tr>
<tr>
<td>-1</td>
<td>Refuse</td>
</tr>
</tbody>
</table>

3D09 – About how often does {NEWNAME} usually drink alcohol?

<table>
<thead>
<tr>
<th>Option</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Never</td>
</tr>
<tr>
<td>2</td>
<td>Less than once a week</td>
</tr>
<tr>
<td>3</td>
<td>1 or 2 days a week</td>
</tr>
<tr>
<td>4</td>
<td>3 or 4 days a week</td>
</tr>
<tr>
<td>5</td>
<td>Every day or almost every day</td>
</tr>
<tr>
<td>-2</td>
<td>Don’t know</td>
</tr>
<tr>
<td>-1</td>
<td>Refuse</td>
</tr>
</tbody>
</table>

3D10 – About how often does {NEWNAME} use drugs to get high?

<table>
<thead>
<tr>
<th>Option</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Never</td>
</tr>
<tr>
<td>2</td>
<td>Less than once a week</td>
</tr>
<tr>
<td>3</td>
<td>1 or 2 days a week</td>
</tr>
<tr>
<td>4</td>
<td>3 or 4 days a week</td>
</tr>
<tr>
<td>5</td>
<td>Every day or almost every day</td>
</tr>
<tr>
<td>-2</td>
<td>Don’t know</td>
</tr>
<tr>
<td>-1</td>
<td>Refuse</td>
</tr>
</tbody>
</table>

**BOX 3D10**

GO TO 3E01.
3D11 – How likely do you think it is that you and {NEWCRUSHNAME} will date in the future?

1 – Unlikely
2 – Somewhat likely
3 – Very likely
-1 – Refuse

3D12 – Is {CURRENTCRUSHNAME} currently dating someone else?

1 – Yes
2 – No
3 – Don’t know
-1 – Refuse

Section 3E: Intimacy/ Enmeshment in Relationship

3E01 – In the past two weeks, how often did you and {CURRENTNAME OR CURRENTCRUSHNAME} spend time together in person?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-2 Don’t know
-1 – Refuse

3E02 – In the past two weeks, how often did you and {CURRENTNAME OR CURRENTCRUSHNAME} communicate via phone, text, e-mail, or social media?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-2 Don’t know
-1 – Refuse

BOX 3E02

IF CURRENTCRUSHNAME!=undefined, GO TO 3J01.
3E03 – Describe your relationship with {CURRENTNAME} overall. Is it ....?

1 – Excellent
2 – Very good
3 – Good
4 – Fair
5 – Poor
-1 – Refuse

3E04 – Have you and {CURRENTNAME} agreed to have a relationship with each other, and no one else?

1 – Yes
2 – No
-1 – Refuse

**Section 3F: Supportiveness/Caring in Relationship**

3F01 – How much do you agree or disagree with the following statement? {CURRENTNAME} makes me feel good about myself.

1 – Strongly agree
2 – Somewhat agree
3 – Somewhat disagree
4 – Strongly disagree
-1 – Refuse

3F02 – How much do you agree or disagree with the following statement? I would feel comfortable talking with {CURRENTNAME} if I had a problem.

1 – Strongly agree
2 – Somewhat agree
3 – Somewhat disagree
4 – Strongly disagree
-1 – Refuse
Section 3G: Relationship Asymmetries

3G01 – In many relationships, one partner is more “into” the relationship than the other. Would you say you are more into it, {CURRENTNAME} is more into it, or you are about the same?

1 – You are more into it  
2 – {CURRENTNAME} is more into it  
3 – About the same  
-1 – Refuse

3G02 – In the past two weeks, if the two of you disagreed, who usually got their way?

1 – {CURRENTNAME} more than you  
2 – {CURRENTNAME} and you about the same  
3 – You more than {CURRENTNAME}  
4 – Did not disagree  
-1 – Refuse

Section 3H: Conflict/Abuse

3H01 – In the past two weeks, how often did you and {CURRENTNAME} fight or argue?

1 – Often  
2 – Sometimes  
3 – Rarely  
4 – Never → GO TO 3J01  
-1 – Refuse

3H02 – In the past two weeks, has {CURRENTNAME} done any of the following to you? Select all that apply.

1 - Put you down in front of other people  
2 – Tried to keep you from seeing your friends  
3 – Threatened you with violence  
4 – Thrown something at you  
5 – Pushed or shoved you  
6 – Slapped, hit, or kicked you  
7 – Hasn’t done any of the above to me  
-1 – Refuse
3H03 – In the **past two weeks**, have you done any of the following to {CURRENTNAME}? **Select all that apply:**

1 – Put {CURRENTNAME} down in front of other people  
2 – Tried to keep {CURRENTNAME} from seeing his/her friends  
3 – Threatened {CURRENTNAME} with violence  
4 – Thrown something at {CURRENTNAME}  
5 – Pushed or shoved {CURRENTNAME}  
6 – Slapped, hit, or kicked {CURRENTNAME}  
7 – Haven't done any of the above to {CURRENTNAME}  
-1 – Refuse

**Section 3J: Psychosocial Wellbeing**

3J01 – In the **past two weeks**, how often did you feel happy?  

1 – Never or rarely  
2 – Sometimes  
3 – A lot of the time  
4 – Most of the time  
-1 – Refuse

3J02 – In the **past two weeks**, how often did you feel sad?  

1 – Never or rarely  
2 – Sometimes  
3 – A lot of the time  
4 – Most of the time  
-1 – Refuse

3J03 – In the **past two weeks**, how often did you feel life was not worth living?  

1 – Never or rarely  
2 – Sometimes  
3 – A lot of the time  
4 – Most of the time  
-1 – Refuse
Section 3K: Past Sexual Experience with New Partner

BOX 3K01

IF CURRENTNAME=undefined, GO TO 3L11
IF CURRENTNAME!=undefined AND NEWNAME=undefined, GO TO 3L01.
IF NEWNAME!=undefined, PROCEED WITH 3K01.

3K01 – Have you and {NEWNAME} ever done any of the following? Select all that apply:

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

BOX 3K02

IF 3K01=2, PROCEED WITH 3K02.
ELSE, GO TO 3L08.

3K02 – Have you ever had sexual intercourse with {NEWNAME}?

1 – Yes
2 – No
-1 – Refuse

Box 3L01

IF 3K02=1, GO TO 3L03
ELSE, GO TO 3L08

Section 3L: Current Experiences with Sexual Activity

3L01 – In the past two weeks, have you and {CURRENTNAME} done any of the following? Select all that apply:

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

BOX 3L02

IF 3L01=2, PROCEED WITH 3L02.
3L02 - In the **past two weeks**, have you had sexual intercourse with {CURRENTNAME}?

1 – Yes  
2 – No → GO TO 3L08  
-1 – Refuse → GO TO 3L08

3L03 – In the **past two weeks**, approximately how many times did you and {CURRENTNAME} have sexual intercourse?

1 – Never → GO TO 3L08  
2 – Once  
3 – 2-3 times  
4 – 4-5 times  
5 – More than 5 times  
-1 – Refuse

3L04 – In the **past two weeks**, did you and {CURRENTNAME} use a condom?

1 – Yes  
2 – No → GO TO 3L06  
-1 – Refuse → GO TO 3L006

3L05 – In the **past two weeks**, how often did you and {CURRENTNAME} use a condom?

1 – Every time  
2 – Some of the time  
3 – Rarely  
-1 – Refuse

3L06 – In the **past two weeks**, did you and {CURRENTNAME} use any other method to prevent pregnancy or sexually transmitted diseases (STDs)?

1 – Yes  
2 – No → GO TO 3L08  
-2 – Not sure → GO TO 3L08  
-1 – Refuse → GO TO 3L08
3L07 – What other method(s) did you use? Select all that apply.

1 – Birth control pills
2 – Injectables or shots
3 – Patch or ring
4 – Implant
5 – IUD
6 – Emergency contraception/”morning after” pill
7 – Rhythm (safe time)
8 – Withdrawal
9 – Other (specify) TEXT BOX ____________________________
-2 – Not sure
-1 – Refuse

3L08 – In the past two weeks, have you talked to, flirted with, dated, or hooked up with someone other than {CURRENTNAME}?

1 – Yes
2 – No → GO TO 3M01
-1 – Refuse → GO TO 3M01

3L09 – In the past two weeks, have you done any of the following with someone other than {CURRENTNAME}? Select all that apply:

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

BOX 3L10
IF 3L09=2, PROCEED WITH 3L10.
ELSE, GO TO 3M01.

3L10 – In the past two weeks, have you and someone other than {CURRENTNAME} had sexual intercourse?

1 – Yes → GO TO 3L13
2 – No → GO TO 3M01
-1 – Refuse → GO TO 3M01
3L11 – In the **past two weeks**, have you done any of the following with someone? **Select all that apply:**

1 – Kissed  
2 – More than kissing  
3 – None of the above  
-1 – Refuse

**BOX 3L12**

IF 3L11=2, PROCEED WITH 3L12. 
ELSE, GO TO 3M01.

3L12 – In the **past two weeks**, have you had sexual intercourse with someone?  

1 – Yes  
2 – No → GO TO 3M01  
-1 – Refuse → GO TO 3M01

3L13 – How many people did you have sexual intercourse with in the **past two weeks**?  

1 – |___| ENTER NUMBER OF PEOPLE [NUMERIC KEYPAD IF POSSIBLE]  
-1 – Refuse

VALID RANGE: 1-25

**BOX 3L13**

set EVERYSEX =1 if EVERYSEX=undefined and (3K02=1 or 3L02=1 or 3L10=1 or 3L12=1)
Section 3M: Fertility

BOX 3M01

IF PREGNANT=1, PROCEED WITH 3M01.
IF MAYBEPREGNANT=1, GO TO 3M03.
IF EVERSEX=1 AND MAYBEPREGNANT=undefined AND
  PREGNANT=undefined, GO TO 3M04.
IF EVERSEX=undefined, GO TO 3N01.

3M01 – Last interview you reported that {you/a partner of yours} was pregnant. {Are you/is your partner} still pregnant? {FEMALE/MALE}

1 – Yes → GO TO 3N01
2 – No
-2 – Not sure → GO TO 3N01
-1 – Refuse → GO TO 3N01

3M02 - How did the pregnancy end?

1 – Miscarriage
2 – Stillbirth
3 – Abortion
4 - Live birth
5 - Was not really pregnant
-2 – Don’t know
-1 – Refuse

BOX 3M02

GO TO 3N01.

3M03 - Last interview you reported that {you were probably pregnant/a partner of yours was probably pregnant}. Do you still think there is a chance that {you are/your partner is} pregnant now? {FEMALE/MALE}

1 – Yes → GO TO 3M05
2 – No → GO TO 3N01
-2 – Not sure → GO TO 3N01
-1 – Refuse → GO TO 3N01
3M04 - Do you think there might be a chance that {you are/a partner of yours is} pregnant now? {FEMALE/MALE}

1 – Yes
2 – No → GO TO 3N01
-2 – Not sure → GO TO 3N01
-1 – Refuse → GO TO 3N01

3M05 - Has a pregnancy test indicated that {you are/a partner of yours is} pregnant now? {FEMALE/MALE}

1 – Yes
2 – No
-2 – Don’t know
-1 – Refuse

```
BOX 3M05

set MAYBE PREGNANT=undefined if MAYBE PREGNANT!=undefined and 3M03=2 or 3M03=-2 or 3M03=-1.
set MAYBE PREGNANT=1 if MAYBE PREGNANT=undefined and (3M03=1 or 3M04=1) and 3M05!=1
set PREGNANT=undefined if PREGNANT!=undefined and 3M01=2 or 3M01=-2 or 3M01=-1.
set PREGNANT=1 if PREGNANT=undefined and (3M01=1 or 3M05=1)
```

Section 3N: Substance Use

3N01 - In the past month, how often did you drink beer, wine, or liquor—more than just a sip or taste of someone else’s drink—when you were not with your parents?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse
3N02 - In the **past month**, how often did you use drugs to get high? This includes marijuana, heroin, hallucinogens, cocaine, cough or cold medicine, inhalants, or something else.

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse

**Section 3P: School**

3P01 – In the **past two weeks**, did you skip school for a full day without an excuse?

1 – Yes
2 – No
3 – No school because it’s summer
4 – No school because dropped out
-1 – Refuse

**Section 3Q: Other**

3Q01 – Is there anything else that happened in your life in the **past two weeks** that you would like to tell us about? If so, please write in the box below.

1 – Yes [Text box]  
2 – Nothing to report  

*Note: Not included in public data.*

**Section 3R. CLOSING REMARKS (last screen):**

3R01 – Thank you for completing this survey!

We are giving all participants a phone number to a free national hotline, just in case it would ever be helpful to talk with someone. The number for the ChildHelp hotline is 1-800-4-A-Child or 1-800-422-4453.

To make sure this interview counts toward your next Amazon gift card, please **click on the double arrow button** and wait until you are redirected to midiary.org.
Diary Survey 4, 6, 8, 10, 12, 14, 16, 18, 20, 22, 24:
[NOTE: NUMBERING BELOW IS FOR SURVEY 4. SUBSEQUENT EVEN SURVEYS WILL BE THE SAME IN CONTENT, BUT THE QUESTION NUMBERS WILL BEGIN WITH THE SURVEY NUMBER (E.G., 6A01, 8A01, ETC.)]

Section 4A: Work

4A01 – In the past two weeks, did you work for pay for anyone? This includes both regular jobs and things like babysitting or yard work.

1 – Yes
2 – No → GO TO 4B01
-1 – Refuse → GO TO 4B01

4A02 – In the past two weeks, approximately how many hours did you work for pay in total?

1 – |__|__| ENTER HOURS [NUMERIC KEYPAD IF POSSIBLE]
-2 – Don’t remember
-1 – Refuse
VALID RANGE: 1-150

Section 4B: Family/Household

4B01 – In the past two weeks, has there been any change in the adults you live with?

1 – Yes
2 – No → GO TO 4B03
-1 – Refuse → GO TO 4B03

4B02 – What adults do you live with now? If you have two households, think of the one where you spend the most time. Select all that apply.

1 – Biological or adoptive mother
2 – Biological or adoptive father
3 – Stepmother
4 – Stepfather
5 – Grandmother
6 – Grandfather
7 – Parent’s girlfriend
8 – Parent’s boyfriend
9 – Someone else (specify) TEXT BOX ________________________________
-1 – Refuse
4B03 – In the past two weeks, have any of the following happened in your family or household? Select all that apply.

1 – You moved
2 – Parent/guardian lost job
3 – Parents/guardian died
4 – Parent/guardian went to jail or prison
5 – Parent/guardian was released from jail or prison
6 – Parent/guardian separated or got divorced
7 – Parent/guardian got married
8 – Parent/guardian was deported
9 – Other major event (specify) TEXT BOX ________________________________
10 – No major event
-1 – Refuse

Section 4C: School

4C01 – In the past two weeks, did you skip school for a full day without an excuse?

1 – Yes
2 – No
3 – No school because it’s summer
4 – No school because dropped out
-1 – Refuse

Section 4D: Psychosocial Wellbeing

4D01 – In the past two weeks, how often did you feel happy?

1 – Never or rarely
2 – Sometimes
3 – A lot of the time
4 – Most of the time
-1 – Refuse
4D02 – In the past two weeks, how often did you feel sad?

1 – Never or rarely
2 – Sometimes
3 – A lot of the time
4 – Most of the time
-1 – Refuse

4D03 – In the past two weeks, how often did you feel life was not worth living?

1 – Never or rarely
2 – Sometimes
3 – A lot of the time
4 – Most of the time
-1 – Refuse

Section 4E: Determination of Whether Currently in Relationship/Type

4E01 – In the last survey, you mentioned {CURRENTNAME}. Are you still talking to, flirting with, dating, or hooking up with {CURRENTNAME}?

1 – Yes → GO TO 4E08
2 – No
-2 – Not sure → GO TO 4E08
-1 – Refuse → GO TO 4E08

4E02 – Who broke off the relationship?

1 – You
2 – {CURRENTNAME}
3 – Mutual
4 – Other
-1 – Refuse
4E03 – Is there someone you are currently talking to, flirting with, dating, or hooking up with?

1 – Yes
2 – No → GO TO 4E10
-1 – Refuse → GO TO 4E10

4E04 – The next several questions will be about the person you are currently talking to, flirting with, dating, or hooking up with. If there are multiple people, please think about the most serious.

4E05 – Is this someone you mentioned in a previous survey?

1 – Yes
2 – No → GO TO 4E07
-2 – Not sure
-1 – Refuse → GO TO 4E07

4E06 – Which of these people are you currently talking to, flirting with, dating, or hooking up with? Select one. [SCROLL DOWN LIST?]

1 – {PREVNAMES\%NAME1} → GO TO 4E08
2 – {PREVNAMES\%NAME2} → GO TO 4E08
3 – {PREVNAMES\%NAME3} → GO TO 4E08
Etc...
26 – {PREVNAMES\%NAME26} → GO TO 4E08
27 – Not actually any of these people
-1 – Refuse

4E07 – Please give the initials or first name, or a nickname, of the person you are currently talking to, flirting with, dating, or hooking up with. We will use this response to ask about him or her in this and future surveys.

1 – [Text box]
-1 – Refuse → GO TO 4M11

---

**BOX 4E07**

set PREVNAMES = CURRENTNAME if CURRENTNAME!=undefined and 4E01=2

set CURRENTNAME = undefined if 4E01=2
4E08 – Overall, how would you describe your relationship with {CURRENTNAME} now? **Please select one.**

1 - Talking/flirting
2 - Dating
3 - Friends with benefits
4 - Other (specify): TEXT BOX ____________________________
-1 - Refuse

**BOX 4E08**

IF NEWNAME=undefined, GO TO 4G01.

4E09 – How long have you and {NEWNAME} been talking, flirting, dating, or hooking up?

1 – Less than a week
2 – 1 week or more but less than a month
3 – 1 month or more but less than 6 months
4 – 6 months or more but less than a year
5 – A year or more
-2 – Don’t remember
-1 – Refuse

**BOX 4E09**

GO TO 4F01.

**BOX 4E10**

IF CURRENTCRUSHNAME=undefined, GO TO 4E11
4E10 – In the last survey, you mentioned wanting to have a relationship with {CURRENTCRUSHNAME}. Would you still like to have a relationship with {CURRENTCRUSHNAME}?

1 – Yes ➔ GO TO 4F12
2 – No
-2 – Not sure ➔ GO TO 4F12
-1 – Refuse ➔ GO TO 4F12

4E11 – Is there someone in your life that you would really like to have a relationship with?

1 – Yes
2 – No ➔ GO TO 4M11
-1 – Refuse ➔ GO TO 4M11

4E12 – The next several questions are about the person you would like to have a relationship with. If there are multiple people, please think about the one you like most.

4E13 – Is this someone you mentioned in a previous survey?

1 – Yes
2 – No ➔ GO TO 4E15
-2 – Not sure
-1 – Refuse ➔ GO TO 4E15

4E14 – Which of these people would you like to have a relationship with? Select one. [SCROLL DOWN LIST?]

1 – {PREVnames%NAME1} ➔ GO TO 4F12
2 – {PREVnames%NAME2} ➔ GO TO 4F12
3 – {PREVnames%NAME3} ➔ GO TO 4F12
Etc...
26 – {PREVnames%NAME26} ➔ GO TO 4F12
27 – Not actually any of these people
-1 – Refuse

Note: Not included in public data.
4E15 – Please give the initials or first name, or a nickname, of this person. We will use this response to ask about him or her in this and future surveys.

1 – [Text box]
-1 – Refuse ➔ GO TO 4M11

**BOX 4E15**

set PREV_NAMES = PREV_NAMES + "%" + CURRENT_CRUSH_NAME if CURRENT_CRUSH_NAME != undefined and 4E10 = 2

set CURRENT_CRUSH_NAME = undefined if CURRENT_CRUSH_NAME != undefined and 4E10 = 2

set CURRENT_NAME = 4E14 if CURRENT_NAME = undefined and 4E13 = 1 and 4E14 <= 26 and 4E14 > 0

set CURRENT_CRUSH_NAME = 4E15_r if CURRENT_CRUSH_NAME = undefined and 4E15 = 1

set NEW_CRUSH_NAME = 4E15_r if 4E15 = 1

**Section 4F: Basic Partner Characteristics [If newly reported partner]**

4F01 – How old is {NEW_NAME OR NEW_CRUSH_NAME}?

1 – | | | ENTER AGE IN YEARS [NUMERIC KEYPAD IF POSSIBLE] ➔ GO TO 4F03
-2 – Not sure
-1 – Refuse

VALID RANGE: 8-99

4F02 – Is {NEW_NAME OR NEW_CRUSH_NAME} older than you, younger than you, or around the same age?

1 – Older than you
2 – Younger than you
3 – Around the same age
-1 – Refuse
4F03 – Which of the following best describes {NEWNAME OR NEWCRUSHNAME}’s race/ethnic background?

1 – White
2 – Black or African American
3 – Asian or Pacific Islander
4 – Hispanic/Latino/a
5 – Other
-1 – Refuse

4F04 – Is {NEWNAME OR NEWCRUSHNAME} male or female?

1 – Male
2 – Female
-1 – Refuse

4F05 – Where did you and {NEWNAME OR NEWCRUSHNAME} first meet?

1 – School
2 – Neighborhood
3 – Summer camp/summer program
4 – Party
5 – Church
6 – Internet/social media
7 – Friend or relative’s house
8 – Other (specify) TEXT BOX _____________________________
9 – Don’t remember
-1 – Refuse

BOX 4F05

IF NEWCRUSHNAME!=undefined, GO TO 4F11.

4F06 – Have your parents/guardians met {NEWNAME}? 

1 – Yes
2 – No
-1 – Refuse
4F07 – What is the highest grade {NEWNAME} completed in school?

1 - 8th
2 - 9th
3 - 10th
4 - 11th
5 - 12th
6 - Beyond 12th grade
-2 – Don’t know
-1 – Refuse

4F08 – Does {NEWNAME} have a job?

1 – Yes
2 – No
-2 – Don’t know
-1 – Refuse

4F09 – About how often does {NEWNAME} usually drink alcohol?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-2 – Don’t know
-1 – Refuse

4F10 – About how often does {NEWNAME} use drugs to get high?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-2 – Don’t know
-1 – Refuse
4F11 – How likely do you think it is that you and {NEWCRUSHNAME} will date in the future?

1 – Unlikely
2 – Somewhat likely
3 – Very likely
-1 – Refuse

4F12 – Is {CURRENTCRUSHNAME} currently dating someone else?

1 – Yes
2 – No
3 – Don’t know
-1 – Refuse

Section 4G: Intimacy/Affection/Enmeshment in Relationship

4G01 – In the past two weeks, how often did you and {CURRENTNAME OR CURRENTCRUSHNAME} spend time together in person?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse

4G02 – In the past two weeks, how often did you and {CURRENTNAME OR CURRENTCRUSHNAME} communicate via phone, text, e-mail, or social media?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse

**BOX 4G02**

IF CURRENTCRUSHNAME!=undefined, GO TO 4M11.
4G03 – Describe your relationship with {CURRENTNAME} overall. Is it ....?

1 – Excellent
2 – Very good
3 – Good
4 – Fair
5 – Poor
-1 – Refuse

4G04 – Have you and {CURRENTNAME} agreed to have a relationship with each other, and no one else?

1 – Yes
2 – No
-1 – Refuse

Section 4H: Supportiveness/Caring in Relationship

4H01 – How much do you agree or disagree with the following statement? {CURRENTNAME} makes me feel good about myself.

1 – Strongly agree
2 – Somewhat agree
3 – Somewhat disagree
4 – Strongly disagree
-1 – Refuse

4H02 – How much do you agree or disagree with the following statement? I would feel comfortable talking with {CURRENTNAME} if I had a problem.

1 – Strongly agree
2 – Somewhat agree
3 – Somewhat disagree
4 – Strongly disagree
-1 – Refuse
Section 4J: Relationship Asymmetries

4J01 – In many relationships, one partner is more “into” the relationship than the other. Would you say you are more into it, {CURRENTNAME} is more into it, or you are about the same?

1 – You are more into it
2 – {CURRENTNAME} is more into it
3 – About the same
-1 – Refuse

4J02 – In the past two weeks, if the two of you disagreed, who usually got their way?

1 – {CURRENTNAME} more than you
2 – {CURRENTNAME} and you about the same
3 – You more than {CURRENTNAME}
4 – Did not disagree
-1 – Refuse

Section 4K: Conflict/Abuse

4K01 – In the past two weeks, how often did you and {CURRENTNAME} fight or argue?

1 – Often
2 – Sometimes
3 – Rarely
4 – Never \rightarrow GO TO 4L01
-1 – Refuse

4K02 – In the past two weeks, has {CURRENTNAME} done any of the following to you? Select all that apply.

1 - Put you down in front of other people
2 – Tried to keep you from seeing your friends
3 – Threatened you with violence
4 – Thrown something at you
5 – Pushed or shoved you
6 – Slapped, hit, or kicked you
7 - Hasn’t done any of the above to me
-1 – Refuse
4K03 – In the **past two weeks**, have you done any of the following to {CURRENTNAME}? **Select all that apply:**

1 - Put {CURRENTNAME} down in front of other people  
2 – Tried to keep {CURRENTNAME} from seeing his/her friends  
3 – Threatened {CURRENTNAME} with violence  
4 – Thrown something at {CURRENTNAME}  
5 – Pushed or shoved {CURRENTNAME}  
6 – Slapped, hit, or kicked {CURRENTNAME}  
7 - Haven’t done any of the above to {CURRENTNAME}  
-1 – Refuse

---

**Section 4L: Past Sexual Experience with New Partner**

**BOX 4L01**

IF CURRENTNAME=undefined, GO TO 4M11.  
IF CURRENTNAME!=undefined AND NEWNAME=undefined, GO TO 4M01.  
IF NEWNAME!=undefined, PROCEED WITH 4L01.

4L01 – Have you and {NEWNAME} **ever** done any of the following? **Select all that apply:**

1 – Kissed  
2 – More than kissing  
3 – None of the above  
-1 – Refuse

**BOX 4L02**

IF 4L01=2, PROCEED WITH 4L02.  
ELSE, GO TO 4M08.

4L02 – Have you **ever** had sexual intercourse with {NEWNAME}?

1 – Yes  
2 – No  
-1 – Refuse
Section 4M: Current Experiences with Sexual Activity

4M01 - In the past two weeks, have you and {CURRENTNAME} done any of the following? Select all that apply:

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

4M02 - In the past two weeks, have you had sexual intercourse with {CURRENTNAME}?

1 – Yes
2 – No → GO TO 4M08
-1 – Refuse → GO TO 4M08

4M03 – In the past two weeks, approximately how many times did you and {CURRENTNAME} have sexual intercourse?

1 – Never → GO TO 4M08
2- Once
3 – 2-3 times
4 – 4-5 times5– More than 5 times
-1 – Refuse
4M04 – In the past two weeks, did you and {CURRENTNAME} use a condom?

1 – Yes
2 – No ➔ GO TO 4M06
-1 – Refuse ➔ GO TO 4M06

4M05 – In the past two weeks, how often did you and {CURRENTNAME} use a condom?

1 – Every time
2 – Some of the time
3 – Rarely
-1 – Refuse

4M06 – In the past two weeks, did you and {CURRENTNAME} use any other method to prevent pregnancy or sexually transmitted diseases (STDs)?

1 – Yes
2 – No ➔ GO TO 4M08
-2 – Not sure ➔ GO TO 4M08
-1 – Refuse ➔ GO TO 4M08

4M07 – What other method(s) did you use? Select all that apply.

1 – Birth control pills
2 – Injectables or shots
3 – Patch or ring
4 – Implant
5 – IUD
6 – Emergency contraception/”morning after” pill
7 – Rhythm (safe time)
8 – Withdrawal
9 – Other (specify) TEXT BOX ____________________________
-2 – Not sure
-1 – Refuse

4M08 – In the past two weeks, have you talked to, flirted with, dated, or hooked up with someone other than {CURRENTNAME}?

1 – Yes
2 – No ➔ GO TO 4N01
-1 – Refuse ➔ GO TO 4N01
4M09 – In the past two weeks, have you done any of the following with someone other than {CURRENTNAME}? **Select all that apply:**

1 – Kissed
2 – More than kissing
3 – None of the above
4 – Refuse

**BOX 4M10**

IF 4M09=2, PROCEED WITH 4M10.
ELSE, GO TO 4N01.

4M10 – In the past two weeks, have you and someone other than {CURRENTNAME} had sexual intercourse?

1 – Yes → GO TO 4M13
2 – No → GO TO 4N01
4 – Refuse → GO TO 4N01

4M11 – In the past two weeks, have you done any of the following with someone? **Select all that apply:**

1 – Kissed
2 – More than kissing
3 – None of the above
4 – Refuse

**BOX 4M12**

IF 4M11=2, PROCEED WITH 4M12.
ELSE, GO TO 4N01.

4M12 – In the past two weeks, have you had sexual intercourse with someone?

1 – Yes
2 – No → GO TO 4N01
4 – Refuse → GO TO 4N01
4M13 – How many people did you have sexual intercourse with in the past two weeks?
1 – | | | ENTER NUMBER OF PEOPLE [NUMERIC KEYPAD IF POSSIBLE]
-1 – Refuse
VALID RANGE: 1-25

BOX 4M13
set EVERSEX =1 if EVERSEX=undefined and (4L02=1 or 4M02=1 or 4M10=1 or 4M12=1)

Section 4N: Fertility

BOX 4N01
IF PREGNANT=1, PROCEED WITH 4N01.
IF MAYBEPREGNANT=1, GO TO 4N03.
IF EVERSEX=1 AND MAYBEPREGNANT=undefined AND PREGNANT=undefined, GO TO 4N04.
IF EVERSEX=undefined, GO TO 4P01.

4N01 – Last interview you reported that {you/a partner of yours} was pregnant. {Are you/is your partner} still pregnant? {FEMALE/MALE}
1 – Yes → GO TO 4P01
2 – No
-2 – Not sure → GO TO 4P01
-1 – Refuse → GO TO 4P01

4N02 - How did the pregnancy end?
1 – Miscarriage
2 – Stillbirth
3 – Abortion
4 – Live birth
5 – Was not really pregnant
-2 – Don’t know
-1 – Refuse
4N03 - Last interview you reported that {you were probably pregnant/a partner of yours was probably pregnant}. Do you still think there is a chance that {you are/your partner is} pregnant now? {FEMALE/MALE}

1 – Yes ➔ GO TO 4N05
2 – No ➔ GO TO 4P01
-2 – Not sure ➔ GO TO 4P01
-1 – Refuse ➔ GO TO 4P01

4N04 - Do you think there might be a chance that {you are/a partner of yours is} pregnant now? {FEMALE/MALE}

1 – Yes
2 – No ➔ GO TO 4P01
-2 – Not sure ➔ GO TO 4P01
-1 – Refuse ➔ GO TO 4P01

4N05 - Has a pregnancy test indicated that {you are/a partner of yours is} pregnant now? {FEMALE/MALE}

1 – Yes
2 – No
-2 – Don’t know
-1 – Refuse

```plaintext
BOX 4N05

set MAYBEPREGNANT=undefined if MAYBEPREGNANT!=undefined and 4N03=2 or 4N03=-2 or 4N03=-1.
set MAYBEPREGNANT=1 if MAYBEPREGNANT=undefined and (4N03=1 or 4N04=1) and 4N05!=1
set PREGNANT=undefined if PREGNANT!=undefined and 4N01=2 or 4N01=-2 or 4N01=-1.
set PREGNANT=1 if PREGNANT=undefined and (4N01=1 or 4N05=1)
```
Section 4P: Other

4P01 – Is there anything else that happened in your life in the past two weeks that you would like to tell us about? If so, please write in the box below.

1 – Yes [Text box]  
2 – Nothing to report  

Note: Not included in public data.

Section 4R. CLOSING REMARKS (last screen):

4R01 – Thank you for completing this survey!

We are giving all participants a phone number to a free national hotline, just in case it would ever be helpful to talk with someone. The number for the ChildHelp hotline is 1-800-4-A-Child or 1-800-422-4453.

To make sure this interview counts toward your next Amazon gift card, please click on the double arrow button and wait until you are redirected to mdiary.org.
Diary Survey 5, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25:

[NOTE: NUMBERING BELOW IS FOR SURVEY 5. SUBSEQUENT ODD SURVEYS WILL BE THE SAME IN CONTENT, BUT THE QUESTION NUMBERS WILL BEGIN WITH THE SURVEY NUMBER (E.G., 7A01, 9A01, ETC.).]

Section 5A: Work

5A01 – In the past two weeks, did you work for pay for anyone? This includes both regular jobs and things like babysitting or yard work.

1 – Yes
2 – No ➔ GO TO 5B01
-1 – Refuse ➔ GO TO 5B01

5A02 – In the past two weeks, approximately how many hours did you work for pay in total?

1 – | | ENTER HOURS [NUMERIC KEYPAD IF POSSIBLE]
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 1-150

Section 5B: Family/Household

5B01 – In the past two weeks, has there been any change in the adults you live with?

1 – Yes
2 – No ➔ GO TO 5B03
-1 – Refuse ➔ GO TO 5B03

5B02 – What adults do you live with now? If you have two households, think of the one where you spend the most time. Select all that apply.

1 – Biological or adoptive mother
2 – Biological or adoptive father
3 – Stepmother
4 - Stepfather
5 – Grandmother
6 - Grandfather
7 – Parent's girlfriend
8 – Parent’s boyfriend
9 – Someone else (specify) TEXT BOX
-1 – Refuse

5B03 – In the **past two weeks**, have the following ever happened in your family? Select all that apply.

1 – You moved
2 – Parent/guardian lost job
3 – Parents/guardian died
4 – Parent/guardian went to jail or prison
5 – Parent/guardian was released from jail or prison
6 – Parent/guardian separated or got divorced
7 – Parent/guardian got married
8 – Parent/guardian was deported
9 – Other major event (specify) TEXT BOX
10 – No major event
-1 – Refuse

**Section 5C: Determination of Whether Currently in Relationship/Type**

**BOX 5C01**

IF CURRENTNAME=undefined, GO TO 5C03.

5C01 – In the last survey, you mentioned {CURRENTNAME}. Are you still talking to, flirting with, dating, or hooking up with {CURRENTNAME}?

1 – Yes → **GO TO 5C08**
2 – No
-2 – Not sure → **GO TO 5C08**
-1 – Refuse → **GO TO 5C08**

5C02 – Who broke off the relationship?

1 – You
2 – {CURRENTNAME}
3 – Mutual
4 – Other
-1 – Refuse
5C03 – Is there someone you are currently talking to, flirting with, dating, or hooking up with?

1 – Yes
2 – No → GO TO 5C10
-1 – Refuse → GO TO 5C10

5C04 – The next several questions will be about the person you are currently talking to, flirting with, dating, or hooking up with. If there are multiple people, please think about the most serious.

5C05 – Is this someone you mentioned in a previous survey? Below are the people you mentioned in a past survey: {FILL IN PREVNAMEs}

1 – Yes
2 – No → GO TO 5C07
-2 – Not sure
-1 – Refuse → GO TO 5C07

5C06 – Which of these people are you currently talking to, flirting with, dating, or hooking up with?

1 – {PREVNAMEs%NAME1} → GO TO 5C08
2 – {PREVNAMEs%NAME2} → GO TO 5C08
3 – {PREVNAMEs%NAME3} → GO TO 5C08
Etc...
26 – {PREVNAMEs%NAME26} → GO TO 5C08
27 – Not actually any of these people
-1 – Refuse

Note: Not included in public data.

5C07 – Please give the initials or first name, or a nickname, of the person you are currently talking to, flirting with, dating, or hooking up with. We will use this response to ask about him or her in this and future surveys.

1 – [Text box]
-1 – Refuse → GO TO 5J01
Overall, how would you describe your relationship with {CURRENTNAME} now? **Please select one.**

1 - Talking/flirting
2 - Dating
3 - Friends with benefits
4 - Other (specify): TEXT BOX ________________________________
-1 - Refuse

**BOX 5C08**

IF NEWNAME=undefined, GO TO 5E01.

How long have you and {NEWNAME} been talking, flirting, dating, or hooking up?

1 – Less than a week
2 – 1 week or more but less than a month
3 – 1 month or more but less than 6 months
4 – 6 months or more but less than a year
5 – A year or more
-2 – Don’t remember
-1 – Refuse

**BOX 5C09**

GO TO 5D01.
5C10 – In the last survey, you mentioned wanting to have a relationship with {CURRENTCRUSHNAME}. Would you still like to have a relationship with {CURRENTCRUSHNAME}?

1 – Yes ➔ GO TO 5D12
2 – No
   -2 – Not sure ➔ GO TO 5D12
   -1 – Refuse ➔ GO TO 5D12

5C11 – Is there someone in your life that you would really like to have a relationship with?

1 – Yes
2 – No ➔ GO TO 5J01
   -1 – Refuse ➔ GO TO 5J01

5C12 – The next several questions are about the person you would like to have a relationship with. If there are multiple people, please think about the one you like most.

5C13 – Is this someone you mentioned in a previous survey? Below are the people you mentioned in past surveys. {FILL IN PREV NAMES}

1 – Yes
2 – No ➔ GO TO 5C15
   -2 – Not sure
   -1 – Refuse ➔ GO TO 5C15

5C14 – Which of these people would you like to have a relationship with?

1 – {PREVNames%NAME1} ➔ GO TO 5D12
2 – {PREVNames%NAME2} ➔ GO TO 5D12
3 – {PREVNames%NAME3} ➔ GO TO 5D12
   Etc...
26 – {PREVNames%NAME26} ➔ GO TO 5D12
27 – Not actually any of these people
   -1 – Refuse

Note: Not included in public data.
5C15 – Please give the initials or first name, or a nickname, of this person. We will use this response to ask about him or her in this and future surveys.

1 – [Text box]
-1 – Refuse → GO TO 5J01

---

**BOX 5C15**

set PREVNAMES = PREVNAMES + “%” + CURRENTCRUSHNAME if CURRENTCRUSHNAME!=undefined and 5C10=2

set CURRENTCRUSHNAME = undefined if CURRENTCRUSHNAME != undefined and 5C10=2

set CURRENTNAME = 5C14 if CURRENTNAME = undefined and 5C13=1 and 5C14<=26 and 5C14>0

set CURRENTCRUSHNAME = 5C15_r if CURRENTCRUSHNAME = undefined and 5C15=1

set NEWCRUSHNAME = 5C15_r if 5C15=1

---

**Section 5D: Basic Partner Characteristics [If newly reported partner]**

5D01 – How old is {NEWNAME OR NEWCRUSHNAME}?  

1 – |__|__| ENTER AGE IN YEARS [NUMERIC KEYPAD IF POSSIBLE] → GO TO 5D03
-2 – Not sure
-1 – Refuse

VALID RANGE: 8-99

5D02 – Is {NEWNAME OR NEWCRUSHNAME} older than you, younger than you, or around the same age?

1 – Older then you
2 – Younger than you
3 – Around the same age
-1 – Refuse
5D03 – Which of the following best describes {NEWNAME OR NEWCRUSHNAME}’s race/ethnic background?

1 – White
2 – Black or African American
3 – Asian or Pacific Islander
4 – Hispanic/Latino/a
5 – Other
-1 – Refuse

5D04 – Is {NEWNAME OR NEWCRUSHNAME} male or female?

1 – Male
2 – Female
-1 – Refuse

5D05 – Where did you and {NEWNAME OR NEWCRUSHNAME} first meet?

1 – School
2 – Neighborhood
3 – Summer camp/summer program
4 – Party
5 – Church
6 – Internet/social media
7 – Friend or relative’s house
8 – Other (specify) TEXT BOX _______________________________
9 – Don’t remember
-1 – Refuse

BOX 5D05

IF NEWCRUSHNAME!=undefined, GO TO 5D11.

5D06 – Have your parents/guardians met {NEWNAME}? 

1 – Yes
2 – No
-1 – Refuse
5D07 – What is the highest grade {NEWNAME} completed in school?

1 – 8th
2 – 9th
3 – 10th
4 – 11th
5 – 12th
6 – Beyond 12th grade
-2 – Don’t know
-1 – Refuse

5D08 – Does {NEWNAME} have a job?

1 – Yes
2 – No
-2 – Don’t know
-1 – Refuse

5D09 – About how often does {NEWNAME} usually drink alcohol?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-2 – Don’t know
-1 – Refuse

5D10 – About how often does {NEWNAME} use drugs to get high?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-2 – Don’t know
-1 – Refuse

BOX 5D10

GO TO 5E01.
5D11 – How likely do you think it is that you and {NEWCRUSHNAME} will date in the future?

1 – Unlikely
2 – Somewhat likely
3 – Very likely
-1 – Refuse

5D12 – Is {CURRENTCRUSHNAME} currently dating someone else?

1 – Yes
2 – No
3 – Don’t know
-1 – Refuse

**Section 5E: Intimacy/Enmeshment in Relationship**

5E01 – In the **past two weeks**, how often did you and {CURRENTNAME OR CURRENTCRUSHNAME} spend time together **in person**?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse

5E02 – In the **past two weeks**, how often did you and {CURRENTNAME OR CURRENTCRUSHNAME} communicate via phone, text, e-mail, or social media?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse

**BOX 5E02**

IF CURRENTCRUSHNAME!=undefined, GO TO 5J01.
5E03 – Describe your relationship with {CURRENTNAME} overall. Is it ....?

1 – Excellent
2 – Very good
3 – Good
4 – Fair
5 – Poor
-1 – Refuse

5E04 – Have you and {CURRENTNAME} agreed to have a relationship with each other, and no one else?

1 – Yes
2 – No
-1 – Refuse

Section 5F: Supportiveness/Caring in Relationship

5F01 – How much do you agree or disagree with the following statement?
{CURRENTNAME} makes me feel good about myself.

1 – Strongly agree
2 – Somewhat agree
3 – Somewhat disagree
4 – Strongly disagree
-1 – Refuse

5F02 – How much do you agree or disagree with the following statement? I would feel comfortable talking with {CURRENTNAME} if I had a problem.

1 – Strongly agree
2 – Somewhat agree
3 – Somewhat disagree
4 – Strongly disagree
-1 – Refuse
Section 5G: Relationship Asymmetries

5G01 – In many relationships, one partner is more “into” the relationship than the other. Would you say you are more into it, {CURRENTNAME} is more into it, or you are about the same?

1 – You are more into it
2 – {CURRENTNAME} is more into it
3 – About the same
-1 – Refuse

5G02 – In the past two weeks, if the two of you disagreed, who usually got their way?

1 – {CURRENTNAME} more than you
2 – {CURRENTNAME} and you about the same
3 – You more than {CURRENTNAME}
4 – Did not disagree
-1 – Refuse

Section 5H: Conflict/Abuse

5H01 – In the past two weeks, how often did you and {CURRENTNAME} fight or argue?

1 – Often
2 – Sometimes
3 – Rarely
4 – Never  → GO TO 5J01
-1 – Refuse

5H02 – In the past two weeks, has {CURRENTNAME} done any of the following to you? Select all that apply.

1 - Put you down in front of other people
2 – Tried to keep you from seeing your friends
3 – Threatened you with violence
4 – Thrown something at you
5 – Pushed or shoved you
6 – Slapped, hit, or kicked you
7 - Hasn’t done any of the above to me
-1 – Refuse
5H03 – In the past two weeks, have you done any of the following to {CURRENTNAME}? Select all that apply:

1 - Put {CURRENTNAME} down in front of other people
2 – Tried to keep {CURRENTNAME} from seeing his/her friends
3 – Threatened {CURRENTNAME} with violence
4 – Thrown something at {CURRENTNAME}
5 – Pushed or shoved {CURRENTNAME}
6 – Slapped, hit, or kicked {CURRENTNAME}
7 – Haven’t done any of the above to {CURRENTNAME}
-1 – Refuse

Section 5J: Psychosocial Wellbeing

5J01 – In the past two weeks, how often did you feel happy?

1 – Never or rarely
2 – Sometimes
3 – A lot of the time
4 – Most of the time
-1 – Refuse

5J02 – In the past two weeks, how often did you feel sad?

1 – Never or rarely
2 – Sometimes
3 – A lot of the time
4 – Most of the time
-1 – Refuse

5J03 – In the past two weeks, how often did you feel life was not worth living?

1 – Never or rarely
2 – Sometimes
3 – A lot of the time
4 – Most of the time
-1 – Refuse
**Section 5K: Past Sexual Experience with New Partner**

**BOX 5K01**

IF CURRENTNAME=undefined, GO TO 5L11
IF CURRENTNAME!=undefined AND NEWNAME=undefined, GO TO 5L01.
IF NEWNAME!=undefined, PROCEED WITH 5K01.

5K01 – Have you and {NEWNAME} **ever** done any of the following? **Select all that apply:**

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

**BOX 5K02**

IF 5K01=2, PROCEED WITH 5K02.
IF 5K01=1 AND 5K01!=2, GO TO 5L01.
ELSE, GO TO 5L08.

5K02 – Have you **ever** had sexual intercourse with {NEWNAME}?

1 – Yes
2 – No
-1 – Refuse

**BOX 4L01**

IF 5K02=1, GO TO 5L03
ELSE, GO TO 5L08

**Section 5L: Current Experiences with Sexual Activity**

5L01 – In the **past two weeks**, have you and {CURRENTNAME} done any of the following? **Select all that apply:**

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse
5L02 - In the **past two weeks**, have you had sexual intercourse with {CURRENTNAME}?

1 – Yes  
2 – No \(\rightarrow\) GO TO 5L08  
-1 – Refuse \(\rightarrow\) GO TO 5L08

5L03 – In the **past two weeks**, approximately how many times did you and {CURRENTNAME} have sexual intercourse?

1 – Never \(\rightarrow\) GO TO 5L08  
2 – Once  
3 – 2-3 times  
4 – 4-5 times  
5 – More than 5 times  
-1 – Refuse

5L04 – In the **past two weeks**, did you and {CURRENTNAME} use a condom?

1 – Yes  
2 – No \(\rightarrow\) GO TO 5L06  
-1 – Refuse \(\rightarrow\) GO TO 5L06

5L05 – In the **past two weeks**, how often did you and {CURRENTNAME} use a condom?

1 – Every time  
2 – Some of the time  
3 – Rarely  
-1 – Refuse
5L06 – In the **past two weeks**, did you and {CURRENTNAME} use any other method to prevent pregnancy or sexually transmitted diseases (STDs)?

1 – Yes
2 – No → GO TO 5L08
-2 – Not sure → GO TO 5L08
-1 – Refuse → GO TO 5L08

5L07 – What other method(s) did you use? **Select all that apply.**

1 – Birth control pills
2 – Injectables or shots
3 – Patch or ring
4 – Implant
5 – IUD
6 – Emergency contraception/"morning after" pill
7 – Rhythm (safe time)
8 – Withdrawal
9 – Other (specify) TEXT BOX _________________________________
-2 – Not sure
-1 – Refuse

5L08 – In the **past two weeks**, have you talked to, flirted with, dated, or hooked up with someone **other than** {CURRENTNAME}?

1 – Yes
2 – No → GO TO 5M01
-1 – Refuse → GO TO 5M01

5L09 – In the **past two weeks**, have you done any of the following with someone **other than** {CURRENTNAME}? Select all that apply:

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

---

**BOX 5L10**

IF 5L09=2, PROCEED WITH 5L10.
ELSE, GO TO 5M01.
5L10 – In the past two weeks, have you and someone other than {CURRENTNAME} had sexual intercourse?

1 – Yes → GO TO 5L13
2 – No → GO TO 5M01
-1 – Refuse → GO TO 5M01

5L11 – In the past two weeks, have you done any of the following with someone? Select all that apply:

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

5L12 – In the past two weeks, have you had sexual intercourse with someone?

1 – Yes
2 – No → GO TO 5M01
-1 – Refuse → GO TO 5M01

5L13 – How many people did you have sexual intercourse with in the past two weeks?

1 – |__|__| ENTER NUMBER OF PEOPLE [NUMERIC KEYPAD IF POSSIBLE]
-1 – Refuse

VALID RANGE: 1-25

set EVERSEX =1 if EVERSEX=undefined and (5K02=1 or 5L02=1 or 5L10=1 or 5L12=1)
Section 5M: Fertility

BOX 5M01

IF PREGNANT=1, PROCEED WITH 5M01.
IF MAYBEPREGNANT=1, GO TO 5M03.
IF EVERSEX=1 AND MAYBEPREGNANT=undefined AND
  PREGNANT=undefined, GO TO 5M04.
IF EVERSEX=undefined, GO TO 5N01.

5M01 – Last interview you reported that {you/a partner of yours} was pregnant. {Are you/is your partner} still pregnant? {FEMALE/MALE}

1 – Yes  \textbf{GO TO 5N01} \\
2 – No \\
-2 – Not sure  \textbf{GO TO 5N01} \\
-1 – Refuse  \textbf{GO TO 5N01}

5M02 - How did the pregnancy end?

1 – Miscarriage \\
2 – Stillbirth \\
3 – Abortion \\
4 - Live birth \\
5 - Was not really pregnant \\
-2 – Don’t know \\
-1 – Refuse

BOX 5M02

GO TO 5N01.

5M03 - Last interview you reported that {you were probably pregnant/a partner of yours was probably pregnant}. Do you still think there is a chance that {you are/your partner is} pregnant now? {FEMALE/MALE}

1 – Yes  \textbf{GO TO 5M05} \\
2 – No  \textbf{GO TO 5N01} \\
-2 – Not sure  \textbf{GO TO 5N01} \\
-1 – Refuse  \textbf{GO TO 5N01}
5M04 - Do you think there might be a chance that {you are/a partner of yours is} pregnant now? {FEMALE/MALE}

1 – Yes
2 – No → GO TO 5N01
-2 – Not sure → GO TO 5N01
-1 – Refuse → GO TO 5N01

5M05 - Has a pregnancy test indicated that {you are/a partner of yours is} pregnant now? {FEMALE/MALE}

1 – Yes
2 – No
-2 – Don’t know
-1 – Refuse

BOX 5M05

set MAYBEPREGNANT=undefined if MAYBEPREGNANT!=undefined and 5M03=2 or 5M03=-2 or 5M03=-1.
set MAYBEPREGNANT=1 if MAYBEPREGNANT=undefined and (5M03=1 or 5M04=1) and 5M05!=1
set PREGNANT=undefined if PREGNANT!=undefined and 5M01=2 or 5M01=-2 or 5M01=-1.
set PREGNANT=1 if PREGNANT=undefined and (5M01=1 or 5M05=1)

Section 5N: Substance Use

5N01 - In the past month, how often did you drink beer, wine, or liquor—more than just a sip or taste of someone else’s drink—when you were not with your parents?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse
5N02 - In the past month, how often did you use drugs to get high? This includes marijuana, heroin, hallucinogens, cocaine, cough or cold medicine, inhalants, or something else.

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse

Section 5P: School

5P01 – In the past two weeks, did you skip school for a full day without an excuse?

1 – Yes
2 – No
3 – No school because it’s summer
4 – No school because dropped out
-1 – Refuse

Section 5Q: Other

5Q01 – Is there anything else that happened in your life in the past two weeks that you would like to tell us about? If so, please write in the box below.

1 – Yes [Text box]  Note: Not included in public data.
2 – Nothing to report

Section 5R. CLOSING REMARKS (last screen):

5R01 – Thank you for completing this survey!

We are giving all participants a phone number to a free national hotline, just in case it would ever be helpful to talk with someone. The number for the ChildHelp hotline is 1-800-4-A-Child or 1-800-422-4453.

To make sure this interview counts toward your next Amazon gift card, please click on the double arrow button and wait until you are redirected to mdiary.org.
Diary Survey 8, 14, 20:
Retrospective Questions
(To be placed toward end of survey, after Section P “Other” and before
Section R)

Section 8Q: Retrospective

8Q01 – Now we will ask you a few questions that will require you to think back over
the past {three/six/nine} months. [INSERT “THREE” IF SURVEY 8, “SIX” IF SURVEY
14, “NINE” IF SURVEY 20]

8Q02 – In the past {3/6/9} months, how many girls or boys have you dated, or
hooked up with? [INSERT “3” IF SURVEY 8, “6” IF SURVEY 14, “9” IF SURVEY 20]

1 – |___| ENTER NUMBER OF PEOPLE (NUMERIC KEYPAD IF POSSIBLE)
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 0-50

8Q03 – Thinking about the past {3/6/9} months, have you had sexual intercourse
with anyone? [INSERT “3” IF SURVEY 8, “6” IF SURVEY 14, “9” IF SURVEY 20]

1 – Yes
2 – No → GO TO 8R01
-1 – Refuse → GO TO 8R01

8Q04 – In the past {3/6/9} months, how many different people have you had sexual
intercourse with? [INSERT “3” IF SURVEY 8, “6” IF SURVEY 14, “9” IF SURVEY 20]

1 – |___| ENTER NUMBER OF PEOPLE [NUMERIC KEYPAD IF POSSIBLE]
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 1-50
Diary Survey 26:

Section 26A: Work

26A01 – In the past two weeks, did you work for pay for anyone? This includes both regular jobs and things like babysitting or yard work.

1 – Yes
2 – No \(\Rightarrow\) GO TO 26B01
-1 – Refuse \(\Rightarrow\) GO TO 26B01

26A02 – In the past two weeks, approximately how many hours did you work for pay in total?

1 – |_|_| ENTER HOURS
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 1-99

Section 26B: Family/Household

26B01 – In the past two weeks, has there been any change in the adults you live with?

1 – Yes
2 – No \(\Rightarrow\) GO TO 26B03
-1 – Refuse \(\Rightarrow\) GO TO 26B03

26B02 – What adults do you live with? If you have two households, think of the one where you spend the most time. Select all that apply.

1 – Biological or adoptive mother
2 – Biological or adoptive father
3 – Stepmother
4 = Stepfather
5 – Grandmother
6 - Grandfather
7 – Parent’s girlfriend
8 - Parent’s boyfriend
9 – Someone else (specify) TEXT BOX _________________________________
-1 – Refuse
26B03 – In the **past two weeks**, have any of the following happened in your family or household? **Select all that apply.**

1 – You moved
2 – Parent/guardian lost job
3 – Parents/guardian died
4 – Parent/guardian went to jail or prison
5 – Parent/guardian was released from jail or prison
6 – Parent/guardian separated or got divorced
7 – Parent/guardian got married
8 – Parent/guardian was deported
9 – Other major event (specify) TEXT BOX ________________________________
10 – No major event
   -1 – Refuse

**Section 26C: School**

26C01 - Are you enrolled in high school? If it is summer, were you enrolled in high school the whole last school year?

1 – Yes → **GO TO 26C03**
2 – No
   -1 – Refuse → **GO TO 26C03**

26C02 - In what month and year did you stop attending high school?

26C02A.
1 – __|___|___|___| ENTER YEAR OF DROP-OUT
   -2 – Don't know
   -1 – Refuse

VALID RANGE: 2012-2017

26C02B. In what month did you stop attending high school?

1 – __|___| ENTER MONTH OF DROP-OUT
   -2 – Don't know
   -1 – Refuse

VALID RANGE: 1-12
26C03 – How important is graduating from high school to you?
1 – Very important
2 – Somewhat important
3 – Not very important
-2 – Don’t know
-1 – Refuse

26C04 – How important is graduating from college to you?
1 – Very important
2 – Somewhat important
3 – Not very important
-2 – Don’t know
-1 – Refuse

26C05 – How likely are you to graduate from high school?
1 – Very likely
2 – Somewhat likely
3 – Not very likely
4 – Very unlikely
-1 – Refuse

26C06 – How likely are you to graduate from college?
1 – Very likely
2 – Somewhat likely
3 – Not very likely
4 – Very unlikely
-1 – Refuse

BOX 26C07
IF 26C01=2, GO TO 26D01.
26C07 – At the most recent grading period, what grades did you get? If it is summer, think of the last grading period in the spring.

1 - Mostly A's  
2 - Mixed A's and B's  
3 - Mostly B's  
4 - Mixed B's and C's  
5 - Mostly C's  
6 - Mixed C's and D's  
7 - Mostly D's  
8 - Mixed D's and F's  
9 - Mostly F's  
10 – I wasn’t enrolled in school  
   -1 – Refuse

26C08 – In the past two weeks, did you skip school for a full day without an excuse?

1 – Yes  
2 – No  
3 – No school because it’s summer  
4 – No school because dropped out  
   -1 – Refuse

Section 26D: Psychosocial Wellbeing

26D01 – In the past two weeks, how often did you feel happy?

1 – Never or rarely  
2 – Sometimes  
3 – A lot of the time  
4 – Most of the time  
   -1 – Refuse

26D02 – In the past two weeks, how often did you feel sad?

1 – Never or rarely  
2 – Sometimes  
3 – A lot of the time  
4 – Most of the time  
   -1 – Refuse
26D03 – In the **past two weeks**, how often did you feel life was not worth living?

1 – Never or rarely  
2 – Sometimes  
3 – A lot of the time  
4 – Most of the time  
-1 – Refuse

**Section 26E: Determination of Whether Currently in Relationship/Type**

**BOX 26E01**

IF CURRENTNAME=undefined, GO TO 26E03.

26E01 – In the last survey, you mentioned {CURRENTNAME}. Are you still talking to, flirting with, dating, or hooking up with {CURRENTNAME}?

1 – Yes → GO TO 26E08  
2 – No  
-2 – Don’t know → GO TO 26E08  
-1 – Refuse → GO TO 26E08

26E02 – Who broke off the relationship?

1 – You  
2 – {CURRENTNAME}  
3 – Mutual  
4 – Other  
-1 – Refuse

26E03 – Is there someone you are currently talking to, flirting with, dating, or hooking up with?

1 – Yes  
2 – No → GO TO 26E10  
-1 – Refuse → GO TO 26E10

26E04 – The next several questions will be about the person you are currently talking to, flirting with, dating, or hooking up with. If there are multiple people, please think about the most serious.
26E05 – Is this someone you mentioned in a previous survey?

1 – Yes  
2 – No  →  GO TO 26E07  
-2 – Don't know  →  GO TO 26E07  
-1 – Refuse  →  GO TO 26E07

26E06 – Which of these people are you currently talking to, flirting with, dating, or hooking up with?

1 – {PREVNAMES%NAME1}  →  GO TO 26E08  
2 – {PREVNAMES%NAME2}  →  GO TO 26E08  
3 – {PREVNAMES%NAME3}  →  GO TO 26E08  
Etc...

26 – {PREVNAMES%NAME26}  →  GO TO 26E08  
27 – Not actually any of these people  
-1 – Refuse

26E07 – Please give the initials or first name, or a nickname, of the person you are currently talking to, flirting with, dating, or hooking up with. We will use this response to ask about him or her in this and future surveys.

1 – [Text box]  
-1 – Refuse  →  GO TO 26L01

**BOX 26E07**

```plaintext
set PREVNAMES = CURRENTNAME if CURRENTNAME!=undefined and 26E01=2

set CURRENTNAME = undefined if 26E01=2  
set CURRENTNAME = 26E06 if CURRENTNAME = undefined and 26E05=1 and 26E06<=26 and 26E06>0  
set CURRENTNAME = 26E07_r if CURRENTNAME = undefined and 26E07=1

set NEWNAME = 26E07_r if 26E07=1
```

Note: Not included in public data.
Overall, how would you describe your relationship with {CURRENTNAME} now? Please select one.

1 - Talking/flirting
2 - Dating
3 - Friends with benefits
4 - Other (specify): TEXT BOX
1 - Refuse

IF NEWNAME=undefined, GO TO 26G01.

How long have you and {NEWWNAME} been talking, flirting, dating, or hooking up?

1 - Less than a week
2 - 1 week or more but less than a month
3 - 1 month or more but less than 6 months
4 - 6 months or more but less than a year
5 - A year or more
-2 - Don't remember
1 - Refuse

IF CURRENTCRUSHNAME=undefined, GO TO 26E11.

In the last survey, you mentioned wanting to have a relationship with {CURRENTCRUSHNAME}. Would you still like to have a relationship with {CURRENTCRUSHNAME}?

1 - Yes → GO TO 26F12
2 - No
-2 - Don't know → GO TO 26F12
26E11 – Is there someone in your life that you would really like to have a relationship with?

1 – Yes
2 – No → GO TO 26L01
-1 – Refuse → GO TO 26L01

26E12 – The next several questions are about the person you would like to have a relationship with. If there are multiple people, please think about the one you like most.

26E13 – Is this someone you mentioned in a previous survey?

1 – Yes
2 – No → GO TO 26E15
-2 – Don’t know → GO TO 26E15

26E14 – Which of these people would you like to have a relationship with?

1 – {PREVNAMES%NAME1} → GO TO 26F12
2 – {PREVNAMES%NAME2} → GO TO 26F12
3 – {PREVNAMES%NAME3} → GO TO 26F12
Etc...
26 – {PREVNAMES%NAME26} → GO TO 26F12
27 – Not actually any of these people
-1 – Refuse

26E15 – Please give the initials or first name, or a nickname, of this person. We will use this response to ask about him or her in this and future surveys.

1 – [Text box]
-1 – Refuse → GO TO 26L01

---

**BOX 26E15**

set PREVnames = PREVnames + "%" + CURRENTCRUSHNAME if CURRENTCRUSHNAME!=undefined and 26E10=2

set CURRENTCRUSHNAME = undefined if CURRENTCRUSHNAME != undefined and 26E10=2
Section 26F: Basic Partner Characteristics [If newly reported partner]

26F01 – How old is {NEWNAME OR NEWCRUSHNAME}?

1 - | | ENTER AGE IN YEARS [NUMERIC KEYPAD IF POSSIBLE]  → GO TO 26F03
-2 – Not sure
-1 – Refuse

VALID RANGE: 10-50

26F02 – Is {NEWNAME OR NEWCRUSHNAME} older than you, younger than you, or around the same age?

1 – Older then you
2 – Younger than you
3 – Around the same age
-1 – Refuse

26F03 – Which of the following best describes {NEWNAME OR NEWCRUSHNAME}'s race/ethnic background?

1 – White
2 – Black or African American
3 – Asian or Pacific Islander
4 – Hispanic/Latino/a
5 – Other
-1 – Refuse

26F04 – Is {NEWNAME OR NEWCRUSHNAME} male or female?

1 – Male
2 – Female
-1 – Refuse
26F05 – Where did you and {NEWNAME OR NEWCRUSHNAME} first meet?

1 – School
2 – Neighborhood
3 – Summer camp/summer program
4 – Party
5 – Place of Worship
6 – Internet/social media
7 – Friend or relative’s house
8 – Other (specify) TEXT BOX ________________________
9 – Don’t remember
-1 – Refuse

BOX 26F05

IF NEWCRUSHNAME! = undefined, GO TO 26F11.

26F06 – Have your parents/guardians met {NEWNAME}?

1 – Yes
2 – No
-1 – Refuse

26F07 – What is the highest grade {NEWNAME} completed in school?

1 – 8th
2 – 9th
3 – 10th
4 – 11th
5 – 12th
6 – Beyond 12th grade
-2 – Don’t know
-1 – Refuse

26F08 – Does {NEWNAME} have a job?

1 – Yes
2 – No
-2 – Don’t know
-1 – Refuse
26F09–About how often does {NEWNAME} usually drink alcohol?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-2 – Don’t know
-1 – Refuse

26F10 – About how often does {NEWNAME} use drugs to get high?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-2 – Don’t know
-1 – Refuse

26F11 – How likely do you think it is that you and {NEWCRUSHNAME} will date in the future?

1 – Unlikely
2 – Somewhat likely
3 – Very likely
-1 – Refuse

26F12 – Is {CURRENTCRUSHNAME} currently dating someone else?

1 – Yes
2 – No
3 – Don’t know
-1 – Refuse
Section 26G: Intimacy/Affection/Enmeshment in Relationship

26G01 – In the past two weeks, how often did you and {CURRENTNAME OR CURRENTCRUSHNAME} spend time together in person?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse

26G02 – In the past two weeks, how often did you and {CURRENTNAME OR CURRENTCRUSHNAME} communicate via phone, text, e-mail, or social media?

1 – Never
2 – Less than once a week
3 – 1 or 2 days a week
4 – 3 or 4 days a week
5 – Every day or almost every day
-1 – Refuse

BOX 26G02

IF CURRENTCRUSHNAME!=undefined, GO TO 26L01.

26G03 – Describe your relationship with {CURRENTNAME} overall. Is it ....?

1 – Excellent
2 – Very good
3 – Good
4 – Fair
5 – Poor
-1 – Refuse

26G04 – Have you and {CURRENTNAME} agreed to have a relationship with only each other, and no one else?

1 – Yes
2 – No
-1 – Refuse
**Section 26H: Supportiveness/Caring in Relationship**

26H01 – How much do you agree or disagree with the following statement? {CURRENTNAME} makes me feel good about myself.

1 – Strongly agree  
2 – Somewhat agree  
3 – Somewhat disagree  
4 – Strongly disagree  
-1 – Refuse

26H02 – How much do you agree or disagree with the following statement? I would feel comfortable talking with {CURRENTNAME} if I had a problem.

1 – Strongly agree  
2 – Somewhat agree  
3 – Somewhat disagree  
4 – Strongly disagree  
-1 – Refuse

**Section 26J: Relationship Asymmetries**

26J01 – In many relationships, one person is more “into” the relationship than the other. Would you say you are more into it, {CURRENTNAME} is more into it, or you are about the same?

1 – You are more into it  
2 – {CURRENTNAME} is more into it  
3 – About the same  
-1 – Refuse

26J02 – In the **past two weeks**, if the two of you disagreed, who usually got their way?

1 – {CURRENTNAME} more than you  
2 – {CURRENTNAME} and you about the same  
3 – You more than {CURRENTNAME}  
4 – Did not disagree  
-1 – Refuse
Section 26K: Conflict/Abuse

26K01 – In the past two weeks, how often did you and {CURRENTNAME} fight or argue?

1 – Often
2 – Sometimes
3 – Rarely
4 – Never
-1 – Refuse

26K02 – In the past two weeks, has {CURRENTNAME} done any of the following to you? Select all that apply.

1 - Put you down in front of other people
2 – Tried to keep you from seeing your friends
3 – Threatened you with violence
4 – Thrown something at you
5 – Pushed or shoved you
6 – Slapped, hit, or kicked you
7 – Hasn’t done any of the above to me
-1 – Refuse

26K03 – In the past two weeks, have you done any of the following to {CURRENTNAME}? Select all that apply:

1 - Put {CURRENTNAME} down in front of other people
2 – Tried to keep {CURRENTNAME} from seeing his/her friends
3 – Threatened {CURRENTNAME} with violence
4 – Thrown something at {CURRENTNAME}
5 – Pushed or shoved {CURRENTNAME}
6 – Slapped, hit, or kicked {CURRENTNAME}
7 – Haven't done any of the above to {CURRENTNAME}
-1 – Refuse

Section 26L: Past Sexual Experience with New Partner

BOX 26L01
IF FEMALE and MENSTRUATION=undefined, PROCEED WITH 26L01.
IF MALE, GO TO 26L02.
26L01 – How old were you when you first menstruated or got your period?

1 – [___] ENTER AGE IN YEARS [NUMERIC KEYPAD IF POSSIBLE]
2 – Haven’t gotten my period yet
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 5-18

BOX 26L02
IF CURRENTNAME=undefined, GO TO 26M11
IF CURRENTNAME!=undefined AND NEWNAME=undefined, GO TO 26M01.
IF NEWNAME!=undefined, PROCEED WITH 26L02.

26L02 – Have you ever done with {NEWNAME}? **Select all that apply:**

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

BOX 26L03
IF 26L02=2, PROCEED WITH 26L03.
IF 26L02=1 AND 26L02!=2, GO TO 26M01.
ELSE, GO TO 26M08.

26L03 – Have you ever had sexual intercourse with {NEWNAME}?

1 – Yes
2 – No
-1 – Refuse

**Section 26M: Current Experiences with Sexual Activity**

26M01 – In the past two weeks, have you and {CURRENTNAME} done any of the following? **Select all that apply:**

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse
26M02 - In the **past two weeks**, have you had sexual intercourse with {CURRENTNAME}?

1 – Yes
2 – No → **GO TO 26M08**

26M03 – In the **past two weeks**, approximately how many times did you and {CURRENTNAME} have sexual intercourse?

1 – Never
2 – Once
3 – 2-3 times
4 – 4-5 times
5 – More than 5 times
-1 – Refuse

26M04 – In the **past two weeks**, did you and {CURRENTNAME} use a condom?

1 – Yes
2 – No → **GO TO 26M06**
-1 – Refuse → **GO TO 26M06**

26M05 – In the **past two weeks**, how often did you and {CURRENTNAME} use a condom?

1 – Every time
2 – Some of the time
3 – Rarely
-1 – Refuse
26M06 – In the **past two weeks**, did you and {CURRENTNAME} use any **other** method to prevent pregnancy or sexually transmitted diseases (STDs)?

1 – Yes
2 – No → GO TO 26M08
-2 – Don’t know → GO TO 26M08
-1 – Refuse → GO TO 26M08

26M07 – What **other** method(s) did you use? **Select all that apply.**

1 – Birth control pills
2 – Injectables or shots
3 – Patch or ring
4 – Implant
5 – IUD
6 – Emergency contraception/"morning after" pill
7 – Rhythm (safe time)
8 – Withdrawal
9 – Other (specify) TEXT BOX ____________________________
-2 – Not sure
-1 – Refuse

26M08 – In the **past two weeks**, have you talked to, flirted with, dated, or hooked up with someone **other than** {CURRENTNAME}?  

1 – Yes
2 – No → GO TO 26N01
-1 – Refuse → GO TO 26N01

26M09 – In the **past two weeks**, have you done any of the following with **someone other than** {CURRENTNAME}? **Select all that apply:**

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

**BOX 26M10**

IF 26M09=2, PROCEED WITH 26M10.
ELSE, GO TO 26N01.
26M10 – In the **past two weeks**, have you and **someone other than** {CURRENTNAME} had sexual intercourse with?

1 – Yes  → GO TO 26M13
2 – No  → GO TO 26N01
-1 – Refuse  → GO TO 26N01

26M11 – In the **past two weeks**, have you done any of the following with someone? **Select all that apply:**

1 – Kissed
2 – More than kissing
3 – None of the above
-1 – Refuse

26M12 – In the **past two weeks**, have you had sexual intercourse with anyone?

1 – Yes
2 – No  → GO TO 26N01
-1 – Refuse  → GO TO 26N01

26M13 – How many people did you have sexual intercourse with in the **past two weeks**?

1 – |__|__| ENTER NUMBER OF PEOPLE [NUMERIC KEYPAD IF POSSIBLE]
-1 – Refuse

VALID RANGE: 1-20

**BOX 26M13**

set EVERSEX =1 if EVERSEX=undefined and (26L03=1 or 26M02=1 or 26M10=1 or 26M12=1)
**Section 26N: Fertility**

**BOX 26N01**

IF PREGNANT=1, PROCEED WITH 26N01.
IF MAYBEPREGNANT=1, GO TO 26N03.
IF EVERSEX=1 AND MAYBEPREGNANT=undefined AND PREGNANT=undefined, GO TO 26N04.
IF EVERSEX=undefined, GO TO 26P01.

26N01 – Last interview you reported that {you/a partner of yours} was pregnant. {Are you/is your partner} still pregnant?

1 – Yes **GO TO 26P01**
2 – No
-2 – Not sure **GO TO 26P01**
-1 – Refuse **GO TO 26P01**

**BOX 26N02**

GO TO 26P01.

26N02 - How did the pregnancy end?

1 – Miscarriage
2 – Stillbirth
3 – Abortion
4 - Live birth
5 - Was not really pregnant
-2 – Don’t know
-1 – Refuse

26N03 - Last interview you reported that {you were probably pregnant/a partner of yours was probably pregnant}. Do you still think there is a chance that {you are/your partner is} pregnant right now?

1 – Yes **GO TO 26N05**
2 – No **GO TO 26P01**
-2 – Not sure **GO TO 26P01**
-1 – Refuse **GO TO 26P01**
26N04 - Do you think there might be a chance that {you are/a partner of yours is} pregnant right now?

1 – Yes
2 – No  → GO TO 26P01
-2 – Don’t know  → GO TO 26P01
-1 – Refuse  → GO TO 26P01

26N05 - Has a pregnancy test indicated that {you are/a partner of yours is} currently pregnant?

1 – Yes
2 – No
-2 – Don’t know
-1 – Refuse

BOX 26N05

set MAYBEPREGNANT=undefined if MAYBEPREGNANT!=undefined and 26N03=2 or 26N03=-2 or 26N03=-1.
set MAYBEPREGNANT=1 if MAYBEPREGNANT=undefined and (26N03=1 or 26N04=1) and 26N05=1
set PREGNANT=undefined if PREGNANT!=undefined and 26N01=2 or 26N01=-2 or 26N01=-1.
set PREGNANT=1 if PREGNANT=undefined and (26N01=1 or 26N05=1)

Section 26P: Other

26P01 – In general, would you say your health is...

1 – Excellent
2 – Very good
3 – Good
4 – Fair
5 – Poor
-1 – Refuse

26P02 – Is there anything else that happened in your life that you would like to tell us about? If so, please write in the box below.  

Note: Not included in public data.
Section 26Q: Retrospective

26Q01 – Now we will ask you a few questions that will require you to think back over the past 12 months.

26Q02 – In the past 12 months, how many girls or boys have you dated, or hooked up with?

1 – |__|__| ENTER NUMBER OF PEOPLE (NUMERIC KEYPAD IF POSSIBLE)
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 0-50

26Q03 – Thinking about the past 12 months, have you had sexual intercourse with anyone?

1 – Yes
2 – No  ➔ GO TO 26R01
-1 – Refuse  ➔ GO TO 26R01

26Q04 – In the past 12 months, how many different people have you had sexual intercourse with?

1 – |__|__| ENTER NUMBER OF PEOPLE [NUMERIC KEYPAD IF POSSIBLE]
-2 – Don’t remember
-1 – Refuse

VALID RANGE: 1-50

Section 26R. CLOSING REMARKS (last screen):

26R01 – Thank you for completing this interview!
We are giving all teens a phone number to a free national hotline, just in case it would ever be helpful to talk with someone. The number for the ChildHelp hotline is 1-800-4-A-Child or 1-800-422-4453.

Note: Not included in public data.
To make sure this interview counts toward your next Amazon gift card, please click on the “Submit” button and wait until you are redirected to mdiary.org.