

Proud Choices! School Edition

FOURTH EDITION

GRANTEE GUIDE

An Evidence-Based, Safer-Sex Approach to Teen Pregnancy, STDs & HIV Prevention



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Module Goals and Objectives

Module 1: Getting to Know You and Steps to Making Your Dreams Come True

Goals

The goals of this module are to:

- Provide participants with an overview of the program.
- Increase participants' personal investment and comfort in participating in the program.
- Increase participants' ability to identify realistic goals for their future.
- Increase participants' confidence about making proud and responsible choices to protect themselves and their community from pregnancy, STDs and HIV/AIDS.

Learning Objectives

- Identify several rules for group participation that will facilitate discussion and learning.
- Identify what it means to be proud and responsible.
- Describe the benefits of proud and responsible behavior.
- Describe at least one goal they wish to achieve in the future.
- Identify barriers to achieving their personal goals and strategies for overcoming them.

Module 2: The Consequences of Sex: Pregnancy: Part 1

Goals

The goals of this module are to:

- Increase participants' understanding of pregnancy as a consequence of sex.
- Increase participants' perception that they are vulnerable to getting pregnant or getting someone pregnant.
- Increase participants' understanding of the consequences of teen pregnancy.

Learning Objectives

After completing this module, participants will be able to:

- Identify at least two reasons why teens have sex, the consequences of sex, and strategies for reducing those consequences.
- Distinguish myths from facts about pregnancy.

Module 3: The Consequences of Sex: Pregnancy: Part 2

Goals

The goals of this module are to:

- Increase participants' understanding of pregnancy as a consequence of sex.
- Increase participants' understanding of the consequences of teen pregnancy.
- Increase participants' knowledge of various types of contraceptive methods.

Learning Objectives

- Identify specific birth control methods that may be used to prevent pregnancy.
- Discuss their attitudes about contraception.

Module 4: The Consequences of Sex: STDs: Part 1

Goals

The goals of this module are to:

- Increase participants' knowledge of sexually transmitted diseases.
- Help participants identify strategies for preventing STDs.
- Increase participants' perceived vulnerability to STDs.

Learning Objectives

After completing this module, participants will be able to:

- Identify the signs and symptoms of the most common STDs.
- Identify how STDs, including HIV/AIDS, are transmitted, and how they can be prevented.
- Acknowledge their perceived risk for sexually transmitted diseases.

Module 5: The Consequences of Sex: STDs: Part 2

Goals

The goals of this module are to:

- Increase participants' knowledge of HIV/AIDS.
- Help participants identify strategies for preventing STDs and HIV.
- Clarify participants' attitudes and beliefs about STDs and condom use.
- Teach participants the steps for correct use of a condom.

Learning Objectives

- Identify how HIV/AIDS is transmitted, and how it can be prevented.
- Demonstrate steps for correct use of a condom.
- Identify how condoms can prevent STDs, including HIV, and pregnancy.

Module 6: The Consequences of Sex: HIV Infection: Part 1

Goals

The goal of this module is to:

• Increase participants' knowledge about HIV/AIDS and HIV risk-associated behavior.

Learning Objectives

After completing this module, participants will be able to:

- Identify the basic facts about HIV and AIDS.
- Distinguish myths from facts about HIV and AIDS.
- Identify how HIV infection can be prevented.

Module 7: The Consequences of Sex: HIV Infection: Part 2

Goals

The goals of this module are to:

- Increase participants' knowledge about HIV/AIDS and HIV risk-associated behavior.
- Help participants identify behaviors that place people at risk for contracting sexually transmitted diseases, including HIV infection.

Learning Objectives

- Identify the basic facts about HIV and AIDS.
- Identify a person's risk of HIV infection as a result of engaging in various sexual and non-sexual behaviors.
- Identify which behaviors are low risk, and no risk for contracting HIV infection.
- Identify how HIV infection can be prevented.

Module 8: Attitudes about Sex, HIV and Condom Use

Goals

The goals of this module are to:

- Increase participants' perceived vulnerability to HIV.
- Confront stereotypes about who becomes infected with HIV and learn more about how people can and cannot become infected.
- Reinforce knowledge about HIV and AIDS.
- Weaken negative beliefs and attitudes that foster risky sexual behaviors.

Learning Objectives

After completing this module, participants will be able to:

- Identify their attitudes toward risky sexual behavior.
- Problem-solve for risky sexual behavior situations.
- Recall correct information about HIV/AIDS.
- Advocate and give advice regarding safer sex strategies.

Module 9: Strategies to Prevent HIV Infection: Stop, Think and Act: Part 1

Goals

The goals of this module are to:

- Introduce participants to a problem-solving method to help think through and cope with sexual choices.
- Reinforce knowledge about HIV and AIDS.
- Weaken negative beliefs and attitudes that foster risky sexual behaviors.

Learning Objectives

After completing this module, participants will be able to:

- Advocate and give advice regarding safer-sex strategies.
- State and explain the three steps of the problem-solving model.
- State how using problem-solving steps can help avoid risky situations.
- Explain how making their own decisions makes it more likely that they will achieve their goals and dreams.

Module 10: Strategies to Prevent HIV Infection: Stop, Think and Act: Part 2

Goals

The goals of this module are to:

- Help participants understand the importance of protecting themselves.
- Review and reinforce the information learned throughout today's activities.

Learning Objectives

After completing this module, participants will be able to:

- Explain how making their own decisions makes it more likely that they will achieve their goals and dreams.
- Provide correct answers to review questions on HIV and AIDS.

Module 11: Developing Condom Use and Negotiation Skills: Part 1

Goals

The goal of this module is to:

 Increase participants' understanding of barriers to condom use and increase their strategies for reducing those barriers, including how to make condom use fun and pleasurable.

Learning Objectives

After completing this module, participants will be able to:

- List the correct steps to using a condom.
- Identify barriers to using condoms and other safer sex behaviors.
- Identify strategies for implementing condom use.
- Identify ways to make condoms a more pleasurable part of the sexual experience.

Module 12: Developing Condom Use and Negotiation Skills: Part 2

Goals

The goals of this module are to:

- Increase participants' understanding of barriers to condom use and increase their strategies for reducing those barriers, including how to make condom use fun and pleasurable.
- Increase the participants' communication and negotiation skills so that they can negotiate condom use with a sexual partner.
- Enhance participants ability to resist situations that place them at risk for HIV/STD infection and pregnancy.

Learning Objectives

- Identify barriers to using condoms and other safer sex behaviors.
- Identify strategies for implementing condom use.
- Demonstrate the ability to respond to excuses a partner may give with statements in support of condom use.
- Identify strategies for negotiating condom use with their partners.

Module 13: Enhancing Refusal and Negotiation Skills: Part 1

Goals

The goals of this module are to:

- Increase participants' communication and negotiation skills regarding condom use.
- Enhance participants' ability to resist situations that increase their risk for unplanned pregnancy, and STDs or HIV infection.

Learning Objectives

After completing this module, participants will be able to:

- Demonstrate body language and strategies for saying no effectively to unprotected sex.
- Identify strategies for negotiating condom use with a sexual partner.
- Demonstrate the ability to negotiate condom use with a partner.

Module 14: Enhancing Refusal and Negotiation Skills: Part 2

Goals

The goals of this module are to:

- Increase participants' communication and negotiation skills regarding condom use.
- Enhance participants' ability to resist situations that increase their risk for unplanned pregnancy, and STDs or HIV infection.

Learning Objectives

- Demonstrate body language and strategies for saying no effectively to unprotected sex.
- Identify strategies for negotiating condom use with a sexual partner.
- Demonstrate the ability to negotiate condom use with a partner.
- Express pride about sticking to decisions that can help them to achieve their goals.

Core Elements, Key Characteristics & Logic Model

Core Elements:

Core Elements are the components of a curriculum that represent its theory and logic. They must be maintained with fidelity and without alteration in order to ensure the program's effectiveness. Fidelity means conducting a program by following the Core Elements, protocols, procedures, and content set by the research study that determined the program's effectiveness.

The developers have reasoned that when teaching adolescents strategies to practice abstinence and reduce their risk for HIV, STDs and pregnancy, one must go beyond simply giving students correct information. Instructors must also build students' perception of vulnerability and bolster positive attitudes and outcome expectancies while building self-efficacy and skills to negotiate and practice abstinence. As such, the Core Elements have been organized into two sections: Content Core Elements and Implementation Core Elements. Content Core Elements are the essential ingredients in what is being taught in the intervention that is believed to change risk behaviors. Implementation Core Elements are the essential ingredients in how the intervention can be implemented with a fidelity that would result in a positive learning experience with good outcomes. Here is a comprehensive list of this elements:

Content Core Elements

Content Core Element 1: Teach correct information about HIV, STDs and pregnancy and prevention strategies, including:

- HIV, etiology, transmission and prevention.
- STDs, etiology, types, transmission and prevention.
- Pregnancy and prevention.
- Prevention strategies negotiation, condom use, problem solving.

Content Core Element 2: Address behavioral attitudes/outcome expectancies:

- Prevention Belief: Abstinence can eliminate the risk of HIV, STDs and pregnancy.
- Goals and Dreams Beliefs: Sexual involvement might interfere with one's goals

- and dreams for education and a career.
- Partner Reaction Belief: One's partner would not approve of using condoms and react negatively to it.
- Hedonistic Belief: Condoms interfere with sexual pleasure, aren't natural, ruin the mood, don't fit, etc.
- Personal Vulnerability to HIV, STD and Pregnancy Belief: HIV, STD and pregnancy could happen to them if they have sex.

Content Core Element 3: Build negotiation skills and problem-solving skills:

- Teach negotiation, refusal and reframing skills using the 4-step S.T.O.P.
 Technique to respond to a partner's negative reaction towards abstinence or condom use.
- Use role-playing activities to practice negotiation, refusal and reframing skills.
- Build participants' skills in problem solving and getting out of risky situations.
- Demonstrate have the participants practice correct condom usage skills using anatomically correct penis models (or a similar type model).

Content Core Element 4: Build self-efficacy in adolescents and a desire to practice abstinence:

- Incorporate the theme "Making Proud Choices! Be Proud! Be Responsible!" throughout the intervention.
- Build participants' confidence in their skills by incorporating positive reinforcement, support and constructive feedback in all intervention activities, especially in the role-plays and in practicing condom use.

Implementation Core Elements

Implementation Core Elements are integral to the intervention. They describe how the intervention should be implemented.

Implementation Core Element 1: To demonstrate a caring and supportive attitude, the facilitator:

- Must create a supportive and caring environment.
- Demonstrate empathy throughout the intervention. Students must understand that instructors truly care about them and their success. Active listening, eye

contact, supportive feedback, refusing to pass judgmental, etc. are all essential ingredients for this process.

Implementation Core Element 2: Integrate and use the core intervention materials only:

- The Facilitator Curriculum Manual, posters and activity materials.
- The DVDs specifically selected for intervention.

Implementation Core Element 3: Type of facilitator must:

- Be specially trained health educator, family life educator, teen pregnancy prevention and HIV/STD educator or staff working with youth in community-based programs.
- Use highly participatory and interactive skills.
- Be able to work with youth, relate to them and their life circumstances and believe in the youth and in their resilience.

Implementation Core Element 4: Implementation delivery style:

- Delivery of intervention must be highly participatory and very interactive.
- Facilitator cannot add any other educational materials, social gatherings, community events, etc to this program during the span of the intervention and evaluation.

Key Characteristics:

Key Characteristics are activities and delivery methods for conducting a program that, while considered of great value and assistance, can be altered without changing the effectiveness of the program. These activities and delivery methods can be modified for different agencies and populations.

Changes to the Key Characteristics allow your agency to make accommodations to meet the needs of your participants. Adaptations to this program should only occur when steps can be taken to enhance the delivery of the program to the participants.

There are 8 Key Characteristics of the *Making Proud Choices!* School Edition Intervention:

- 1. Type of facilitator/educator: In the original study, the facilitators were community leaders, counselors and teachers. You may vary your facilitator type to include others such as health educators, nurses, etc. as long as they have experience working with teens. Peer facilitators, if desired, should be paired with an adult facilitator.
- **2. Setting:** The school version has been adapted to allow more time for each activity and increases participation by altering activity structure for large groups.
- **3. Number of days to deliver modules:** The intervention can be implemented in 14 sessions of forty minutes each or 7 sessions of 80 minutes each. All 14 modules must be completed in order.
- **4. Gender composition of the group:** In the original study, the groups were mixed with boys and girls. You can vary this and deliver it with boys only, girls only or with mixed gender groups.
- **5. Race of facilitator:** In the study, the facilitators were African American adults. You can use facilitators from different ethnic backgrounds as long as they demonstrate that they have the skills and characteristics of a good facilitator, including good listening skills, a caring attitude, are non-judgmental, etc.
- **6. Race of the participants:** In the original study, the participants were African American teens. You can vary this and use this curriculum with teens from different races. You might want to change the names of the teens in the role-plays and the settings of the situations to be culturally and ethnically appropriate/relevant.
- **7. Age of the participants:** The students in the study were ages 11-14. This intervention can also be used with older teens. However, if you add older teens you should not have an 11 year old with a 15 year old. Divide the groups using similar age ranges.

IMPLEMENTATION FIDELITY CONCERNS:

If you still have concerns about implementing with fidelity for this grant or wish to discuss your application in detail please contact Select Media (www.selectmedia.org) at 1-800-707-6334, or contact the Director of Training and Technical Assistance, Mika Keegstra, MPH at mika@selectmedia.org.

LOGIC MODEL

Issue/Problem

Having unprotected sex due to:

- Limited information
- Negative attitudes and beliefs regarding abstinence
- Minimal negotiation and refusal skills
- Low self-efficacy or lack of confidence to negotiate abstinence
- Minimal problem solving skills

<u>Inputs</u>

- Making Proud Choices! curriculum and materials
- Facilitator training and materials
- Participant recruitment
- Agency space

Activities

- Provide activities that will increase knowledge about HIV and STD transmission and pregnancy prevention strategies
- View videos
- · Provide opportunity to negotiate condoms
- Provide activities demonstrating condom use
- Facilitate activities that build confidence and self-efficacy to negotiate condoms
- Provide activities that encourage proud and responsible behaviors
- Facilitate activities that build skills in problem solving and how to get out of risky situations
- Create a caring and trusting atmosphere within group setting
- Facilitate referrals

<u>Outputs</u>

- Making Proud Choices! curriculum implemented with fidelity
- Videos viewed
- Abstinence, negotiation and refusal skills discussed
- Negotiation and refusal skills practiced, using role-plays
- Problem-solving skills and how to get out of risky situations
- Referrals made

Immediate Outcomes

- Increased knowledge about HIV and STD infection, transmission, unplanned pregnancy and condom use
- Increased perception of risk for HIV, STD and unplanned pregnancy
- Bolstered positive attitudes and beliefs regarding condom use and condom negotiation
- Increased intentions to use condoms, consistently and correctly

Intermediate Outcomes

- Improved negotiation skills
- Reduction in the incidence of unprotected sex
- Increased consistent and correct condom use
- Increased confidence to use condoms

Long Term Outcomes

- Consistent condom use
- Reduction in risky behavior
- Reduction of unprotected sex

Impact

- Reduction in HIV and STDs among adolescents
- Reduction of unplanned pregnancy among adolescents

Assumptions

Adolescents may not practice safer-sex because they:

- Don't perceive themselves to be at-risk
- Don't have knowledge about HIV/STD transmission, unplanned pregnancy, risk behaviors and condom use
- Have negative attitudes towards using condoms
- Fear their partner's reaction to condom use
- Don't know how to make condoms fun and pleasurable
- Don't have the skills to negotiate condom use
- Don't have the confidence or power to introduce condoms into the relationship
- Don't feel valued

Adolescents will change their behavior if:

- Program and messages targeted for them are specific
- Program is implemented in a caring and supportive manner
- They can learn the skills needed, i.e., condom use and negotiation skills
- They have positive attitudes and beliefs towards condom use, i.e., condoms can be fun and pleasurable
- They feel that their partner will react positively to condom use
- They feel that condom use will prevent HIV/STD transmission and unplanned pregnancy
- They feel valued and believe in themselves and their skills
- They have opportunity to practice these skills with supportive feedback

Sample of Program Monitoring and Evaluation with Smart Objectives

Monitoring and evaluation often begins with the identification of program objectives. It is a good idea to write SMART process and outcome objectives for your evaluation program. To be SMART, these objectives must be Specific, Measurable, Appropriate, Realistic, and Time-Based.

• **Specific:** Identifies concrete events or actions that will take place;

answers the question, "Does the objective clearly specify

what will be accomplished?"

• Measurable: Quantifies resources, activities, or changes; answers the

question, "Does the objective state how much is to be

delivered or how much change is expected?"

• **Appropriate:** Logically relates the overall problem statement and desired

effects of the program; answers the question, "Does

the objective make sense in terms of what the program is

attempting to accomplish?"

Realistic: Provides an attainable action that can be achieved with

available resources and plans for implementation; answers the question, "Is the objective achievable given available

resources and experience?"

• **Time-Based:** Specifies the time within which the objective will be

achieved; answers the question, "Does the objective specify

when desired results will be achieved?"

You can refer to the following table to develop SMART objectives for your fundamental questions.

SMART Process Objectives:

These objectives address what processes or activities need to take place before HIV prevention outcome objectives can be met. The activities identified in the logic model in the previous section can be used to identify variables for SMART process objectives. SMART process objectives identify specific activities to be completed by specific dates, such as the number of teens to recruit with the characteristics of the adolescents in the target population or the use of skilled facilitators to implement group sessions.

Question	Monitoring and evaluation activity	Sources of information about the question	How answers can be used to improve the program				
	Recruitment						
How many participants did we plan to recruit?1	n/a	Pre-Implementation planning data SMART Objectives					
How many participants did we actually recruit?2	Process monitoring	Recruitment plan Number of participants recruited documented by session sign-in sheets	Data can be used to strengthen recruitment efforts and inform more accurate planning.				
Was there a difference?	Process evaluation	Comparison between planned and actual numbers of recruits					
	Та	rget Population					
What are the characteristics of our target population (e.g., race, ethnicity, age, behaviors, and risk factors)?	n/a	Pre-Implementation planning data Logic model's problem statement Participants' demographics and risk factors collected	Data can be used to target recruitment activities and				
What were the characteristics of the participants? Process monitoring		with a youth intake form Comparison between	provide evidence of prevention needs for additional at-risk				
Was there a difference?	Process evaluation	the characteristics of participants you planned to recruit and the characteristics of the actual participants.	populations.				

Question	Monitoring and evaluation activity Part	Sources of information about the question icipant Retention	How answers can be used to improve the program		
How many participants did we think would complete all sessions?	n/a	Pre-Implementation planning data SMART objectives Sign-in sheets from each	Data can be used to strengthen recruitment efforts, inform agency policies on use of		
What actually happened? Was there a difference?	Process monitoring Process evaluation	session Comparison between planned and actual participation	incentives, and foster discussion of strategies for teen engagement.		
	Fidelity	of Implementation			
Was the program carried out in accordance with the Implementation Manual and with fidelity to core elements?	Process monitoring and process evaluation (also referred to as quality assurance)	Fidelity checklists on required activities and core elements Quality assurance plan Notes from facilitators Notes from persons who observed the program	Completed fidelity checklists and other sources of information can indicate whether the evidence-based program was implemented properly and can be used to understand subsequent outcome monitoring data.		

Question	Monitoring and evaluation activity	Sources of information about the question	How answers can be used to improve the program
What outcomes		• Pre-Implementation	
did we expect participants to achieve?	n/a	planning dataLogic model's outcomes in terms of mediating	
What outcomes did participants actually experience?	Outcome monitoring	variables and behavior change variables • Monitoring and evaluation plan	Positive outcomes can be used to
Was there a difference?	Assessment of pre- and post- test data	 SMART objectives Data that measure mediating variables and variables for behavior change collected with a pre-and post-test instrument Comparison between planned outcomes and actual outcomes measured with outcome monitoring instruments/ tools 	show intervention success Post-test data that reveal unwanted outcomes can indicate that changes are needed in either program design or delivery or both.

Pre-Questionnaire

Date: _____

The questions in this booklet are about things related to your health, as well as general questions about your background. Some questions ask about what you know; others ask your opinion on things; and others ask about things you may or may not have done. The is always an answer that lets you tell us when you have not done things, as well as when you have done them. Knowing what you have not done is just as important as knowing what you have done.							
people do. The probably have however. If a contract that question are personal and all of the question your school that the personal are personal and all of the question.	uestions are very pese particular questions are on a question bothers yeand continue with and blunt so that you tions honestly. You so while you are an	stions are ver uestionnaire ou so much t the question ou will not be ur answers wi ver see your a	y blunt and before. Mosthat you do remaire. We we surprised will be kept conswers. Plea	to the poin at of the qu not want to arn you ab hen you se ompletely c	t—questions estions are no answer it, yo out the quest e them. Plea onfidential; n	s you ot like this, ou can skip tions that se answer oo one	
IMPORTANT!	WRITE YOUR COD	E NUMBER H	HERE:		-	(1-4)	
						LINE (5)	
Time Started:							
Time Finished:							
	Asst. Reqd.?	Circle:	(1) none	(2) low	(3) high	(6)	
	PLEASE PRINT THE "The quicl	FOLLOWING k brown fox ju				-	

(7-14)

A. BACKGROUND INFORMATION

We would like some general information about you, like your age, so we can describe the kinds of people who answered these questions.

1. How old are you? years						(16-17)
2. What is your gender?				Male \square	l Female	(18)
3. Are you now in school?				□ No	☐ Yes	(19)
If NO, what was the last grade	e you com	oleted? _				(20-21)
If YES, what grade are you in	now ?		_			(22-23)
4. Are you Black/African American?				□ No	☐ Yes	(24)
5. Are you Hispanic/Latino?				□ No	☐ Yes	(25)
6. If you are Hispanic/Latino, are you	:					(26)
☐ I am not Hispanic/Latino	☐ Mexic	an				
☐ Puerto Rican	☐ South	Americar	า			
☐ Dominican	☐ Centra	al America	an			
☐ Cuban	□ Other	(Specify o	ountry:_)
7. Are you White?				□ No	☐ Yes	(27)
8. Are you Caribbean/West Indian?				□ No	☐ Yes	(28)
9. Are you American Indian or Alaska	an Native?			□ No	☐ Yes	(29)
10. Are your parents married to each	other nov	v?		□ No	☐ Yes	(30)
11. Were your parents ever married t	to each oth	ner?		□ No	☐ Yes	(31)
12. Are your parents married, but cu	rrently sep	arated?		□ No	☐ Yes	(32)
13. Does your mother work?				□ No	☐ Yes	(33)
14. Does your father work?				□ No	☐ Yes	(34)
15. Did your mother finish high scho	ol?	□ No	☐ Yes	□ Do r	not know	(35)
16. Did your father finish high school	l?	□ No	☐ Yes	□ Dor	not know	(36)

17. Do y	you live with your mother?	(37)
	\square Yes, all or most of the time.	
	\square Yes, some of the time.	
	\square No, I do not live with my mother.	
18. Do y	ou live with your father?	(38)
	\square Yes, all or most of the time.	
	\square Yes, some of the time.	
	\square No, I do not live with my father.	

B. SEXUAL ATTITUDES

The following questions ask how you feel about different behaviors. Please indicate how good or bad an idea it is to do the following, whether others would approve or disapprove of the behavior, and whether you plan to do these behaviors in the next 3 months (90 days). Circle the NUMBER that best describes your feelings. Sexual intercourse refers to a male putting his penis in a female's vagina. (Try to answer the questions even if you have not had sexual intercourse or have never used condoms.)

How would the following people feel about you having sex in the next 3 months? (Circle one)

1	1 2		4		5			
Strongly Disapprove	Strongly Disapprove Disapprove		1	Approve	Stroi	ngly App	rove	
1. Yourself		1	2	3	4	5	(39)	
2. Most people who are im	portant to you	1	2	3	4	5	(40)	
3. Your sexual partner		1	2	3	4	5	(41)	
4. Your mother		1	2	3	4	5	(42)	
5. Your father		1	2	3	4	5	(43)	
6. Your friends		1	2	3	4	5	(44)	

7. How likely is it that you will decide to have sexual intercourse in the next 3 months? (45)								is? (45)	
1	2		3	4		5			
Very Unlikely	Unlikely	In the Middle		lle Likely		Very Likely			
,					,	,			
Try to answer the following questions even if you have not had sex or have never used condoms. How would the following people feel about you using a condom if you have sex in the next 3 months? (Circle one)									
1 2 3 4 5									
Strongly Disapprov	e Disappro	ove	In the Mi	ddle	Appro	ove	Strongly Aր	oprove	
8. Yourself			1	2	3	4	5	(46)	
9. Most people who are	important to	you	1	2	3	4	5	(47)	
10. Your sexual partner			1	2	3	4	5	(48)	
11. Your mother			1	2	3	4	5	(49)	
12. Your father			1	2	3	4	5	(50)	
13. Your friends			1	2	3	4	5	(51)	
14. How likely is it that y months?	ou will decio	de to ι	use a cond	om if y	you hav	e sex i	n the next 3	(52)	
1	2		3	4		5			
Very Unlikely	Unlikely	In th	ne Middle	Like	ely	Very	Likely		
How much do you agre			th each of ex? (Circle			g stat	ements abo	out you	
1	2		3		4		5		
Strongly Disagree	Disagree	Ir	n the Mido	lle	Agree	<u> </u>	Strongly Ag	gree	
							CODENO	# 2 (1-4)	
							LINE #2	(5)	
15. If I have sex, then I w			1	2	3	4	5	(6)	
16. If I have sex, then I w	vill be								
more popular with	girls.		1	2	3	4	5	(7)	

17. If I have sex, I will get a bad reputation.	1	2	3	4	5	(8)
18. If I have sex, I will get HIV.	1	2	3	4	5	(9)
19. If I have sex, I will get a sexually transmitted disease (STD).	1	2	3	4	5	(10)
20. If I have sex during my teen years, pregnancy could occur.	1	2	3	4	5	(11)
21. If I have sex during my teen years, then my parents will find out.	1	2	3	4	5	(12)
22. If I have sex, and my parents find out, then they will be angry at me.	1	2	3	4	5	(13)
23. If I have sex before I am married, then God is likely to be angry at me.	1	2	3	4	5	(14)
24. If I have sex during my teen years, then I am less likely to graduate from high school.	1	2	3	4	5	(15)
25. If I have sex during my teen years, then I am less likely to have the career that I am hoping for.	1	2	3	4	5	(16)
26. I plan to have sex in the next 3 months.	1	2	3	4	5	(17)

The following questions concern <u>not</u> having sex, also known as practicing abstinence.

How much do you agree or disagree with each of the following statements about you

<u>not</u> having sex? (Circle One)

	1	2	3		4		5	
Strongly Disagree		Disagree	In the Middle		gree	Strongly Agree		
	o <u>not</u> have sex, ple will call me r	names.	1	2	3	4	5	(18)
	o <u>not</u> have sex, one will want to	go out with me.	. 1	2	3	4	5	(19)
	o <u>not</u> have sex w n they will break		1	2	3	4	5	(20)

30. If I do <u>not</u> have sex, my parents will be proud of me.	1	2	3	4	5	(21)
31. If I do <u>not</u> have sex during my teenage years, I will be proud of myself.	1	2	3	4	5	(22)
32. <u>Not</u> having sex will help me further my education.	1	2	3	4	5	(23)
33. Not having sex will help me focus on getting a good job.	1	2	3	4	5	(24)
34. I will <u>not</u> have sex in the next 3 months.	1	2	3	4	5	(25)

Now, we would like to ask you some questions about you using condoms. How much do you agree or disagree with each of the following statements about condoms? Try to answer the questions even if you have not had sex or have never used condoms.

(Circle One)

1	2	3		4		5	
Strongly Disagree	Disagree	In the Middle	Ag	jree	Strongly Agre		ree
35. Condoms help preve	ent pregnancy.	1	2	3	4	5	(26)
36. Condoms help preve	ent STDs.	1	2	3	4	5	(27)
37. Condoms help preve	ent HIV.	1	2	3	4	5	(28)
38. A lot of times condo you are using them.	ms break when	1	2	3	4	5	(29)
39. When a condom is u feels good.	sed, sex still	1	2	3	4	5	(30)
40. When a condom is u	sed, sex is more	e fun. 1	2	3	4	5	(31)
41. If I used a condom, s not feel as good.	ex would	1	2	3	4	5	(32)
42. Sex feels unnatural v	vhen a	1	2	3	4	5	(33)
43. Condoms are embar	rassing to use.	1	2	3	4	5	(34)

44. Condoms make you not want to have sex because you have to stop to put one on. 1 2 3 4 5 (35)

Now we would like you to answer questions about how your sexual partner might react to you wanting to use condoms. Try to answer the following questions even if you do not have a sexual partner.

1	2	3			4		5	
Strongly Disagree	Disagree	In the N	/liddle	Ag	ree	Stron	gly Agr	ee
45. Saying we have to us make my sexual part								
sex with other peopl	e.		1	2	3	4	5	(36)
46. Saying we have to us		like						
"I don't trust you."	partifer,		1	2	3	4	5	(37)
47. My sexual partner is	•	-	1	2	2	4	-	(20)
me if I said we had to	o use a condor	n.	1	2	3	4	5	(38)
48. If I had a condom wi	•	ual	1	2	3	4	5	(39)
49. My sexual partner w	ould be happi	er if						
we used a condom.			1	2	3	4	5	(40)
50. Condoms cost too m	uch.		1	2	3	4	5	(41)
51. It is hard for me to go	et condoms.		1	2	3	4	5	(42)
52. It is too much troubl	e to carry arou	ınd						
condoms.			1	2	3	4	5	(43)
53. I can get condoms.			1	2	3	4	5	(44)
54. It is easy for me to ha			1	2	2	4	_	(45)
with me all of the tin			1	2	3	4	5	(45)
55. I can get my sexual puse a condom, even	•		1	2	3	4	5	(46)

56. I can say to my sexual partner that we should use a condom.	1	2	3	4	5	(47)
57. Before we are ready to have sex, I can talk to my sexual partner about using a condom.	1	2	3	4	5	(48)
58. I can put a condom on without turning my sexual partner off.	1	2	3	4	5	(49)
59. I cannot talk to my sexual partner about using condoms.	1	2	3	4	5	(50)
60. If I am sexually aroused, I can stop before sex to use a condom.	1	2	3	4	5	(51)
61. I can say no to sex if my sexual partner and I do not have a condom.	1	2	3	4	5	(52)
62. I can stop sex to get a condom, if I do not have one.	1	2	3	4	5	(53)
63. I can use a condom, even if the room is dark.	1	2	3	4	5	(54)
64. I can get my sexual partner to agree to use a condom without turning them off.	1	2	3	4	5	(55)
65. I am sure that I can use a condom if I have sex.	1	2	3	4	5	(56)
66. I will try to get my sexual partner to agree to use condoms if we have sex in the next 3 months.	1	2	3	4	5	(57)
67. I plan to use condoms if I have sex in the next 3 months.	1	2	3	4	5	(58)

C. HARD OR EASY?

Sometimes we want to do something, but it's hard to do it. For the statements below, circle the number that best expresses how easy or hard it would be for you to do each of the things listed. Use any number from 1 to 5. The higher the number, the easier you think it is to do the behavior. The lower the number, the harder you think it is to do the behavior. (Circle One)

1	2	3			4		5	
Very Hard	Hard	In the N	1iddle	Easy		Very Easy		
						CC	DENO #3	(1-4)
							LINE #3	(5)
1. How easy or hard not have sex in t		•	1	2	3	4	5	(6)
2. How easy or hard get your partner sex, even if they	to use condor	ns during	1	2	3	4	5	(7)
3. How easy or hard condoms when		use	1	2	3	4	5	(8)

D. SEXUAL BEHAVIOR

The following questions ask you about different sexual behaviors you may or may not ever have done. There is always an answer that lets you tell us when you have not done things, as well as when you have done them. Sexual intercourse refers to a male putting his penis in a female's vagina. Please be honest.

1. Have you ever had sexual intercourse (a boy's penis in a girl's vagina)?							
	□ No □ Yes						
2.	The first time you had sexual intercours intercourse against your will?	e, did	your parti	ner force you to have sexual	(10)		
	☐ I have never had sexual intercourse.	. [□ No	☐ Yes			
3. The first time you had sexual intercourse, did you use a condom?							
	☐ I have never had sexual intercourse	. C] No	☐ Yes			

The following questions ask you abou	ıt the <u>last t</u>	ime you had sexual interco	urse:
4. The last time you had sexual intercourse,	did you use	e a condom?	(12)
☐ I have never had sexual intercourse.	□ No	☐ Yes	
5. The last time you had sexual intercourse,	were you h	gh on alcohol or drugs?	(13)
☐ I have never had sexual intercourse	□ No	☐ Yes	
6. The last time you had sexual intercourse, any drugs before having sexual intercou	•	e a couple of drinks and/or	(14)
$\ \square$ I have never had sexual intercourse.	□ No	☐ Yes	
7. The last time you had sexual intercourse,	how old wa	as your partner?	(15-16)
$\ \square$ I have never had sexual intercourse.		☐(Write in)	ears old.
The following questions ask about you Please use the calendar provided to appropriate, if your answer is "z	help you a	nswer these questions. Wh	•
8. <u>In the past 3 months</u> , did you have sexua	lintercours	e?	(17)
□ No □ Yes			
9. When you had sexual intercourse <u>in the particular in the parti</u>	oast 3 mont	<u>hs</u> , how often were condom	s (18)
☐ I have never had sexual intercourse.			
\square I did not have sexual intercourse in th	ne past 3 mo	onths.	
☐ Never ☐ Sometimes	☐ Often		
☐ Almost every time ☐ Ev	ery time		
10. <u>In the past 3 months</u> , how many times he sexual intercourse? times	nave you ha	d	(19-21)

11. <u>In the past 3 months</u> , how many times did you use a condom when you had se	xual
intercourse?	(22-24)
☐ I have never had sexual intercourse	
\square I did not have sexual intercourse in the past 3 months.	
□times	
12. <u>In the past 3 months</u> , how many partners have you had sexual intercourse with partners	? (25-26)
13. <u>In the past 3 months</u> , on how many days did you have sexual intercourse? days	(27-28)
14. <u>In the past 3 months</u> , on how many days did you have sexual intercourse without using a condom?	(29-30)
☐ I have never had sexual intercourse	
$\ \square$ I did not have sexual intercourse in the past 3 months	
□ days	
15. <u>In the past 3 months</u> , on how many days did you get high on alcohol or another drug and then have sexual intercourse?	(31-32)
☐ I have never had sexual intercourse	
$\ \square$ I did not have sexual intercourse in the past 3 months.	
□ days	
16. <u>In the past 3 months</u> , on how many of those days when you got high on an alcoholic drink or another drug and then had sex, did you have sexual intercount without using a condom?	urse (33-34)
$\ \square$ I have never got high and had sexual intercourse	
$\hfill \square$ I did not get high and have sexual intercourse in the past 3 months.	
□days	
17. With whom do you have sex? (Circle one)	(35)
☐ Guys only ☐ Girls only	
☐ Both girls and guys ☐ I have never had sex	

E. AIDS/STD TRUE-FALSE ITEMS

TRUE or FALSE. Some of the statements below are true; some are false. Please check T for each statement that you think is TRUE; check F for each one you think is FALSE; and check "?" if you DO NOT KNOW whether the statement is true or false. The term STD means Sexually Transmitted Disease.

1.	A common syr	nptom of STDs	in a man is discharge (drip) from his penis.	(36)
	□Т	□ F	□ ?	
2.	A common syr	nptom of STDs	is burning with urination (peeing).	(37)
	□Т	□F	□ ?	
3.	A common syr	nptom of STDs	is a sore on the penis or vagina.	(38)
	□Т	□F	□ ?	
4.	•	nptom of STDs hing or burning	in a woman is discharge from her vagina g.	(39)
	□Т	□F	□ ?	
5.	If you feel heal	thy you don't h	ave an STD.	(40)
	□Т	□F	□ ?	
6.	A woman who	has an STD can	get an infection in her uterus and tubes.	(41)
	□Т	□F	□ ?	
7.	A pregnant wo	man who has a	n STD can give it to her baby.	(42)
	□Т	□F	□ ?	
8.	If a person has	an STD, the per	rson's sexual partner probably has it too.	(43)
	□Т	□F	□ ?	
9.	Having HIV/AII	OS makes you n	nore likely to get other diseases.	(44)
	□Т	□ F	□ ?	
10	-	have HIV/AIDS not look sick.	and give it to other people even if the	(45)
	□т	□F	□ ?	

	11. Having sex w	ith a man who s	shoots drugs is a way many women get HIV/AIDS.	(46)
	□Т	□ F	□ ?	
,	•	sex (i.e., male pe etting HIV/AIDS.	nis in butt/anus) increases your	(47)
	□Т	□ F	□ ?	
,	13. Using Vaselin STDs and HI		when having sex lowers the chance of getting	(48)
	□Т	□ F	□ ?	
,	•	•	vill get HIV/AIDS if you share a sink, shower, or no has HIV/AIDS.	(49)
	□Т	□ F	□ ?	
,	15. HIV is presen	t in blood, seme	en, and vaginal fluid.	(50)
	□Т	□ F	□ ?	
	16. The penis sho	ould be hard wh	en the condom is put on it.	(51)
	□Т	□ F	□ ?	
,	17. When a cond condom.	om is placed on	the penis, space should be left at the tip of the	(52)
	□Т	□ F	□ ?	
,	18. The condom	should be comp	pletely unrolled before it is placed on the penis.	(53)
	□Т	□ F	□ ?	
,	19. Storing or ca	rrying condoms	in a hot or warm place can destroy their effectiveness.	(54)
	□Т	□ F	□ ?	
:	20. A girl can <u>not</u>	get pregnant tl	ne first time she has sex.	(55)
	□Т	□ F	□ ?	
;	•	es herself out wi ecome pregnant	th a douche after she has sex,	(56)
	ПТ	□F	\sqcap ?	

	5 ,	(removes his penis) from the woman's vagina before lates, comes) the woman can still become pregnant.	(57)
□Т	□F	□ ?	
•	•	control pills and does not take them one or two days se her chances of becoming pregnant.	(58)
□Т	□F	□ ?	
	n and jelly forms es a condom.	of birth control that a girl uses work better if the	(59)
□Т	□F	□ ?	
	F. PE	RSONAL ATTITUDES QUESTIONNAIRE	
		ts concerning personal attitudes and traits. Please	
for each	statement that	you think is true; check F for each one you think is f	
		CODENC	#4 (1-4) #4 (5)
1. It is some	times hard for m	e to go on with my work if I am not encouraged.	(6)
□Т	□F	□ ?	
2. I sometim	nes feel mad whe	en I do not get my way.	(7)
□Т	□F	□ ?	
	es, I have given uo little of my abil	up doing something because ity.	(8)
□Т	□F	□ ?	
	ve been times wh ey were right.	nen I felt like going against people in authority even tho	ough I (9)
□Т	□F	□ ?	
5. No matte	r who I am talkin	g to, I am always a good listener.	(10)
□Т	□F	□ ?	
6. There hav	ve been times wh	nen I took advantage of someone.	(11)
□т	ПЕ	□ ?	

7. I am always willing to admit it when I make a mistake. (12)								
□Т	□F	□ ?						
8. I sometim	es try to get eve	n, rather than forgive and forget.	(13)					
□Т	□F	□ ?						
9. I am alway	ys courteous, eve	en to people who are disagreeable.	(14)					
□Т	□F	□ ?						
10. I have ne	ever been mad w	hen people have had ideas different from my own.	(15)					
□Т	□F	□ ?						
11. There ha	ve been times w	hen I was very jealous of good things happening to oth	ners.(16)					
□Т	□F	□ ?						
12. I sometir	mes get mad at p	people who ask favors of me.	(17)					
□Т	□F	□ ?						
13. I have ne	ever said someth	ing in order to hurt someone's feelings.	(18)					
□Т	□F	□ ?						
Any commer	nts you wish to n	nake about the questions are welcome:						
•		r the booklet for any questions you forgot to answer. The	ien sit					
quietly and c	do not disturb th	ie otners.						

THANK YOU!

Post-Questionnaire

Date: _____

The questio	ns in this booklet are	about things	s related to y	our health	, as well as ge	neral			
questions al	bout your backgroun	d. Some que	estions ask a	bout what	you know; otl	ners ask			
your opinion on things; and others ask about things you may or may not have done. There									
s always an answer that lets you tell us when you have not done things, as well as when									
you have do	one them. Knowing w	vhat you hav	e not done i	s just as im	portant as kn	owing			
what you ha	ave done.								
Some of the	e questions are very p	ersonal and	ask about di	fferent sexi	ual activities t	hat some			
people do.	These particular ques	tions are ver	y blunt and	to the poin	t—questions	you			
orobably ha	ave never seen on a qu	uestionnaire	before. Mo:	st of the qu	estions are no	ot like this,			
nowever. If	a question bothers yo	ou so much t	hat you do r	not want to	answer it, yo	u can skip			
that questic	on and continue with	the question	naire. We w	arn you ab	out the quest	ions that			
are persona	l and blunt so that yo	u will not be	surprised w	hen you se	e them. Pleas	se answer			
•	estions honestly. You		•						
•	chool or home will ev	•		ase work by	yyourself, and	d do not			
talk with oth	hers while you are ans	swering the o	questions.						
MPORTAN	T! WRITE YOUR COD	E NUMBER I	HERE:		_	(1-4)			
						LINE (5)			
						(0)			
Time Starte	d:	·							
Time Finishe	ed:								
	Asst. Reqd.?	Circle:	(1) none	(2) low	(3) high	(6)			
	DI EACE DDINITTHE	EOLLOWING	CENTENCE	ON THE LIN	E DEL OW.				
PLEASE PRINT THE FOLLOWING SENTENCE ON THE LINE BELOW:									
"The quick brown fox jumps over the lazy dog."									

(7-14)

A. SEXUAL ATTITUDES

The following questions ask how you feel about different behaviors. Please indicate how good or bad an idea it is to do the following, whether others would approve or disapprove of the behavior, and whether you plan to do these behaviors in the next 3 months (90 days). Circle the NUMBER that best describes your feelings. Sexual intercourse refers to a male putting his penis in a female's vagina. (Try to answer the questions even if you have not had sexual intercourse or have never used condoms.)

How would the following people feel about you having sex in the next 3 months? (Circle one)

1	2	3		4		5	
Strongly Disapprove	Disapprove	In the Mi	ddle	Approv	e Str	ongly App	rove
1. Yourself		1	2	3	4	5	(16)
2. Most people who are in	nportant to you	u 1	2	3	4	5	(17)
3. Your sexual partner		1	2	3	4	5	(18)
4. Your mother		1	2	3	4	5	(19)
5. Your father		1	2	3	4	5	(20)
6. Your friends		1	2	3	4	5	(21)
7. How likely is it that you	will decide to h	nave sexual i	interco	urse in t	he next	3 months?	(22)
1	2	3	4		5		
Very Unlikely U	Inlikely In t	the Middle	Likel	y \	ery Like	ely	

Try to answer the following questions even if you have not had sex or have never used condoms. How would the following people feel about you using a condom if you have sex in the next 3 months? (Circle one)

1	2	3		4		5	
Strongly Disapprove	Disapprove	In the N	/liddle	Appro	ove	Strongly	Approve
8. Yourself		1	2	3	4	5	(23)
9. Most people who are in	1	2	3	4	5	(24)	
10. Your sexual partner		1	2	3	4	5	(25)

11. Yo	our mother			1	2	3	4	5	(26)
12. Yo	our father			1	2	3	4	5	(27)
13. Yo	our friends			1	2	3	4	5	(28)
14. How likely is it that you will decide to use a condom if you have sex in the next 3 months?									(29)
	1 Very Unlikely	2 Unlikely	3 In the M	1iddle	4 Likely	/	5 Very Lik	kely	

How much do you agree or disagree with each of the following statements about you having sex? (Circle One)

	1	2	3		4		5	
	Strongly Disagree	Disagree	In the Mic	ldle	Agree	Str	ongly A	gree
15.	If I have sex, then I w more popular with k		1	2	2 3	4	5	(30)
16.	If I have sex, then I w	ill be	,		. 3		3	(30)
	more popular with g	girls.	1	2	2 3	4	5	(31)
17.	If I have sex, I will get	a bad reputat	ion. 1	2	2 3	4	5	(32)
18.	If I have sex, I will get	HIV.	1	2	2 3	4	5	(33)
19.	If I have sex, I will get transmitted disease	•	1	2	2 3	4	5	(34)
20.	If I have sex during m pregnancy could oc		1	2	2 3	4	5	(35)
21.	If I have sex during methen my parents wil	•	1	2	2 3	4	5	(36)
22.	If I have sex, and my then they will be an	•	u t,	2	2 3	4	5	(37)
23.	If I have sex before I a then God is likely to	•	e. 1	2	2 3	4	5	(38)

24. If I have sex during my teen years,						
then I am less likely to graduate						
from high school.	1	2	3	4	5	(39)
25. If I have sex during my teen years, then I am less likely to have the						
career that I am hoping for.	1	2	3	4	5	(40)
26. I plan to have sex in the next 3 months.	1	2	3	4	5	(41)

The following questions concern <u>not</u> having sex, also known as practicing abstinence. How much do you agree or disagree with each of the following statements about you <u>not</u> having sex? (Circle One)

1	2	3		4		5	
Strongly Disagree	Disagree	In the Middle	Ag	gree	Stron	gly Agı	ree
27. If I do <u>not</u> have sex, people will call me r	names.	1	2	3	4	5	(42)
28. If I do <u>not</u> have sex, no one will want to	go out with m	e. 1	2	3	4	5	(43)
29. If I do <u>not</u> have sex w then they will break		; 1	2	3	4	5	(44)
30. If I do <u>not</u> have sex, my parents will be p	oroud of me.	1	2	3	4	5	(45)
31. If I do <u>not</u> have sex d years, I will be proud		age 1	2	3	4	5	(46)
32. <u>Not</u> having sex will h further my education	-	1	2	3	4	5	(47)
33. <u>Not</u> having sex will h focus on getting a g	-	1	2	3	4	5	(48)
34. I will <u>not</u> have sex in	the next 3 mo	nths. 1	2	3	4	5	(49)

Now, we would like to ask you some questions about you using condoms. How much do you agree or disagree with each of the following statements about condoms? Try to answer the questions even if you have not had sex or have never used condoms.

(Circle One)

1	2	3		4		5	
Strongly Disagree	Disagree	In the Middle	Ag	jree	Strongly Agree		ree
35. Condoms help preven	ent pregnancy.	1	2	3	4	5	(50)
36. Condoms help preve	ent STDs.	1	2	3	4	5	(51)
37. Condoms help preve	ent HIV.	1	2	3	4	5	(52)
38. A lot of times condo		1	2	3	4	5	(53)
39. When a condom is u feels good.	sed, sex still	1	2	3	4	5	(54)
40. When a condom is u	sed, sex is more	e fun. 1	2	3	4	5	(55)
41. If I used a condom, s not feel as good.	ex would	1	2	3	4	5	(56)
42. Sex feels unnatural v condom is used.	vhen a	1	2	3	4	5	(57)
43. Condoms are embar	rassing to use.	1	2	3	4	5	(58)
44. Condoms make you because you have to			2	3	4	5	(59)

Now we would like you to answer questions about how your sexual partner might react to you wanting to use condoms. Try to answer the following questions even if you do not have a sexual partner.

1	2	3		4		5	
Strongly Disagree	Disagree	In the Mic	ldle	Agree	Str	ongly A	gree
						CODENC) #2 (1-4) #2 (5)
45. Saying we have to u make my sexual par sex with other peop	rtner think I an	n having	1 2	2 3	4	5	(6)
46. Saying we have to u saying to my sexual "I don't trust you."			1 2	2 3	4	5	(7)
47. My sexual partner is me if I said we had t	•	•	1 2	2 3	4	5	(8)
48. If I had a condom wi	•		1 2	2 3	4	5	(9)
49. My sexual partner w we used a condom.			1 2	2 3	4	5	(10)
50. Condoms cost too m	nuch.		1 2	2 3	4	5	(11)
51. It is hard for me to g	et condoms.		1 2	2 3	4	5	(12)
52. It is too much troubl condoms.	le to carry arou		1 2	2 3	4	5	(13)
53. I can get condoms.			1 2	2 3	4	5	(14)
54. It is easy for me to ha			1 2	2 3	4	5	(15)
55. I can get my sexual ր use a condom, ever	_		1 2	2 3	4	5	(16)

56. I can say to my sexual partner that we should use a condom.	1	2	3	4	5	(17)
57. Before we are ready to have sex, I can talk to my sexual partner about using a condom.	1	2	3	4	5	(18)
58. I can put a condom on without turning my sexual partner off.	1	2	3	4	5	(19)
59. I cannot talk to my sexual partner about using condoms.	1	2	3	4	5	(20)
60. If I am sexually aroused, I can stop before sex to use a condom.	1	2	3	4	5	(21)
61. I can say no to sex if my sexual partner and I do not have a condom.	1	2	3	4	5	(22)
62. I can stop sex to get a condom, if I do not have one.	1	2	3	4	5	(23)
63. I can use a condom, even if the room is dark.	1	2	3	4	5	(24)
64. I can get my sexual partner to agree to use a condom without turning them off.	1	2	3	4	5	(25)
65. I am sure that I can use a condom if I have sex.	1	2	3	4	5	(26)
66. I will try to get my sexual partner to agree to use condoms if we have sex in the next 3 months.	1	2	3	4	5	(27)
67. I plan to use condoms if I have sex in the next 3 months.	1	2	3	4	5	(28)

B. HARD OR EASY?

Sometimes we want to do something, but it's hard to do it. For the statements below, circle the number that best expresses how easy or hard it would be for you to do each of the things listed. Use any number from 1 to 5. The higher the number, the easier you think it is to do the behavior. The lower the number, the harder you think it is to do the behavior. (Circle One)

1	2	3		4		5	;	
Very Hard	Hard	In the Mid	dle	Easy	,	Very	Easy	
1. How easy or ha		•	1	2	3	4	5	(29)
2. How easy or had get your partnessex, even if the	er to use con	doms during	1	2	3	4	5	(30)
3. How easy or ha			1	2	3	4	5	(31)

C. AIDS/STD TRUE-FALSE ITEMS

TRUE or FALSE. Some of the statements below are true; some are false. Please check T for each statement that you think is TRUE; check F for each one you think is FALSE; and check "?" if you DO NOT KNOW whether the statement is true or false. The term STD means Sexually Transmitted Disease.

1.	A common syr	mptom of STDs	in a man is discharge (drip) from his penis.	(32)
	□Т	□ F	□ ?	
2.	A common syr	mptom of STDs	is burning with urination (peeing).	(33)
	□Т	□F	□ ?	
3.	A common syr	mptom of STDs	is a sore on the penis or vagina.	(34)
	□Т	□F	□ ?	
4.	•	mptom of STDs thing or burning	in a woman is discharge from her vagina g.	(35)
	□Т	□F	□ ?	

5.	If you feel heal	thy you don't h	ave an STD.	(36)
	□Т	□F	□ ?	
6.	A woman who	has an STD car	get an infection in her uterus and tubes.	(37)
	□Т	□ F	□ ?	
7.	A pregnant wo	oman who has a	nn STD can give it to her baby.	(38)
	□Т	□ F	□ ?	
8.	If a person has	an STD, the per	rson's sexual partner probably has it too.	(39)
	□Т	□ F	□ ?	
9.	Having HIV/All	DS makes you n	nore likely to get other diseases.	(40)
	□Т	□ F	□ ?	
10	•	have HIV/AIDS not look sick.	and give it to other people even if the	(41)
	□Т	□F	□ ?	
11	. Having sex w	ith a man who	shoots drugs is a way many women get HIV/AIDS.	(42)
	□Т	□F	□ ?	
12	_	ex (i.e., male pe etting HIV/AIDS.	nis in butt/anus) increases your	(43)
	□Т	□ F	□ ?	
13	B. Using Vaselin STDs and HI		when having sex lowers the chance of getting	(44)
	□Т	□F	□ ?	
14	_	•	vill get HIV/AIDS if you share a sink, shower, or no has HIV/AIDS.	(45)
	□Т	□F	□ ?	
15	. HIV is present	in blood, seme	n, and vaginal fluid.	(46)
	□Т	□F	□ ?	

16. The penis s	hould be hard w	hen the condom is put on it.	(47)
□Т	□F	□ ?	
17. When a cor condom.	ndom is placed o	on the penis, space should be left at the tip of the	(48)
□Т	□F	□ ?	
18. The condor	n should be con	pletely unrolled before it is placed on the penis.	(49)
□Т	□F	□ ?	
19. Storing or o	, -	ns in a hot or warm place can destroy their	(50)
□Т	□F	□ ?	
20. A girl can <u>n</u>	<u>ot</u> get pregnant	the first time she has sex.	(51)
□Т	□F	□ ?	
_	hes herself out v pecome pregnar	vith a douche after she has sex, nt	(52)
□Т	□F	□ ?	
•		moves his penis) from the woman's vagina before ees, comes) the woman can still become pregnant.	(53)
□Т	□F	□ ?	
_	_	ntrol pills and does not take them one or two days her chances of becoming pregnant.	(54)
□Т	□F	□ ?	
24. The foam and boy uses a		birth control that a girl uses work better if the	(55)
Пт	□ Б	□ ?	

D. Debrief Questions

The questions in this section concern your feelings about the program. Tell us how you felt about the program by circling how you best feel about the statement. Please answer all of the questions honestly. Your opinions are valuable to us.

CODENO# 3 (1-4)

LINE #3 (5)

- 1. What did you like about the overall program? (6)
- 2. What didn't you like about the overall program? (7)

For questions 1 - 7 please use the scale below.

1	2	3		4			5
Disliked	Disliked	Neither Liked		Liked		Lik	ked
Very Much		Nor Disliked				Very	Much
How much did program activi	•	1	2	3	4	5	(8)
4. How much did y part of the acti		1	2	3	4	5	(9)
5. How much did y that you were i	•	1	2	3	4	5	(10)
6. How much did y	ou like your facilitate	or? 1	2	3	4	5	(11)
7. How much did y	ou like the activities group?	1	2	3	4	5	(12)

For questions 8 and 9 please use the scale below.

1 2 3		3		4			
Not at all	Very Little	Mode	erately		Very Much		
8. How much could you the group activities?		1	2	3	4	(13)	
9. How much did you talk and share your thoughts in the group?		1	2	3	4	(14)	
10. How comfortable d and sharing your tl	id you feel talking noughts in the group?	1	2	3	4	(15)	
11. How comfortable d the exercises, game	id you feel during es, or role -playing?	1	2	3	4	(16)	
12. In general, how mu	•	1	2	3	4	(17)	
13. How much did you videos you saw?	learn from the	1	2	3	4	(18)	
14. How much did you small group activit		1	2	3	4	(19)	
15. Would you recomm		1	2	3	4	(20)	

For the following questions please use the scale below.

1	2	3		4		5	
Disagree	Disagree	Neither Agree	A	gree		Agre	ee
Strongly		Nor Disagree				Stron	gly
16. My facilitator ro he or she is tea	•	1	2	3	4	5	(21)
17. My facilitator is model for me.	•	1	2	3	4	5	(22)

18.	. My facilitator youth my age	really understands e.	1	2	3	4	5	(23)
19.	. My facilitator the group's fe	shows respect for eelings.	1	2	3	4	5	(24)
20.	. My facilitator	is very friendly.	1	2	3	4	5	(25)
21.	. My facilitator	was well-prepared.	1	2	3	4	5	(26)
22.	. My facilitator	knows a lot about life.	1	2	3	4	5	(27)
23.	•	cussed the program with a teena different group than you?	ger					(28)
	□ No	☐ Yes						
24.	•	scussed the program with a teen up than you, what did you tell th	_					(29)
25.		scussed the program with a teen up than you, what did they tell yo		ho was i	in a			(30)
26.	. Has any other	rteenager who lives with you pa	rticipate	ed in the	e progra	am?		(31)
	□ No	☐ Yes						
27.	. Do you have a	a relative who has participated ir	the pr	ogram?				(32)
	□ No	☐ Yes						

Any comments you wish to make about the questions are welcome:
If you are finished, check over the booklet for any questions you forgot to answer. Then sit quietly and do not disturb the others.
THANK YOU!

