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Attachment T:

Parent Program Fidelity 7th Grade Session 5

Dating Matters: Strategies to Promote Healthy Teen Relationships™ Initiative

Division of Violence Prevention
National Center for Injury Prevention and Control
Centers for Disease Control and Prevention

| Activity | Yes | Yes w/ changes | No |
|--|--------------------------|--------------------------|--------------------------|
| 1. Introduced ice breaker | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Facilitated review of general ground rules | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Facilitated review of session 3 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Facilitated review of in-home assignment (session 4) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Introduced session 5 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Facilitated discussion of topics that are difficult to discuss with children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Facilitated discussion of dating myths | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Allowed parents an opportunity to react to TDV facts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Provided list of community resources for parents | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Facilitated a discussion of ways to prevent TDV in neighborhoods and communities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Reviewed concepts covered | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Discussed assignment for in-home session | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Closed session | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please indicate if you experienced any of these challenges that interfered with implementing today's session. *Check all that apply.*

| | |
|--|--------------------------|
| 1. Not enough time | <input type="checkbox"/> |
| 2. I did not have the needed materials | <input type="checkbox"/> |
| 3. Parents did not appear to understand the session | <input type="checkbox"/> |
| 4. I was uncomfortable discussing some of the topics | <input type="checkbox"/> |
| 5. Parents were uncomfortable discussing some of the topics | <input type="checkbox"/> |
| 6. Some part of the session was difficult for parents (i.e., role plays, discussing sexual issues and topics, completing homework) | <input type="checkbox"/> |
| 7. Other more pressing session demands | <input type="checkbox"/> |
| 8. Other – please specify _____ | <input type="checkbox"/> |

Describe any changes you made to the session activities.

Please think about today's session and tell us your answers to the following questions. Circle the number that shows your opinion about each question.

1. How engaged were the parents in the session?

- 1 *very bored*
- 2
- 3 *average*
- 4
- 5 *fully engaged*

2. Please think about how well you think the session went today.

- 1 *extremely poorly*

- 2
- 3 *average*
- 4
- 5 *exceptional*

3. How well do you think the parents understood the session material?

- 1 *Not at all*
- 2 *A little*
- 3 *A lot*
- 4 *Completely*

4. How well did the session material fit into the allotted time period?

- 1 *Session was too packed/not enough time to complete all activities*
- 2 *Session was somewhat packed/able to complete most but not all*
- 3 *Session was just right*
- 4 *Not enough material/session ended before class period completed*