

ATTACHMENT C

QUESTION BY QUESTION SOURCE TABLE FOR THE BASELINE SURVEY

QUESTION BY QUESTION SOURCE LIST FOR PREP BASELINE SURVEY

This document lists each question on the PREP baseline survey, along with its source(s). Most questions are taken from the ongoing Evaluation of Adolescent Pregnancy Prevention Approaches (PPA) study (OMB control number 0990-0382). New questions added for the PREP baseline survey are indicated in the table and justified under the "Additional Information" column.

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
Part A (Sections 1-4)				
1.1	In what month and year were you born?	X		Source: National Longitudinal Study of Adolescent Health
1.2	Are you male or female?	X		Source: National Longitudinal Study of Adolescent Health
1.3	Are you Hispanic /Latino?	X		Source: National Longitudinal Study of Adolescent Health
1.4	Are you...? <input type="checkbox"/> Mexican, Mexican American, Chicano/a <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Another Hispanic, Latino/a, or Spanish origin		X	Source: Based on the DHHS standard question about ethnicity
1.5	What is your race?	X		Source: National Longitudinal Study of Adolescent Health
1.6	What is the <u>main</u> language you speak at home?	X		Source: Evaluation of Title V Abstinence Education Programs
1.7	In the past 12 months, how often did you attend religious services or activities?	X		Source: Evaluation of Title V Abstinence Education Programs
1.8	Are you currently enrolled in school?		X	Source: National Longitudinal Survey of Youth; added to address the following adulthood preparation topics: (1) adolescent development and (2) educational and career success

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
1.9	What is the highest grade you have <u>completed</u> ?		X	Source: Evaluation of the School Dropout Demonstration Assistance Program (SDDAP); added to address the following adulthood preparation topics: (1) adolescent development and (2) educational and career success.
1.10	Do you have any of these? a. A high school diploma b. A GED certificate c. A certificate or license from a trade school or vocational training program d. A degree from a community college		X	Source: Evaluation of the School Dropout Demonstration Assistance Program (SDDAP); added to address the following adulthood preparation topics: (1) adolescent development and (2) educational and career success
1.11	What kind of grades do you or did you usually get in school?		X	Source: National Longitudinal Survey of Youth; added to address the following adulthood preparation topics: (1) adolescent development and (2) educational and career success
1.12	For the last school you attended or the school you are now attending, how often did you cut or skip classes?		X	Source: Evaluation of the School Dropout Demonstration Assistance Program (SDDAP); added to address the following adulthood preparation topics: (1) adolescent development and (2) educational and career success

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
1.13	How many times have you been suspended or expelled from school?		X	Source: National Longitudinal Survey of Youth; added to address the following adulthood preparation topics: (1) adolescent development and (2) educational and career success
1.14	How likely is it that you will do each of the following things? a. Graduate from high school? b. Graduate from a 4-year college?		X	Source: All About Youth Study
1.15	How much do you agree or disagree with the following statements? a. I have specific goals for my future career b. I have a plan for achieving my future career goals c. Planning for a career is not worth the effort d. I haven't thought much about my future career e. If I have a career, I won't be able to enjoy other things in life f. Going to college is important to getting a good job		X	Source: Adapted from the <i>Career Commitment Measure</i> (CCM) (Carson, K. and A.G. Bedeian, 1994; Diemer and Blustein 2007); added to address the following adulthood preparation topics: (1) adolescent development and (2) educational and career success
1.16	How important do you think it is to do each of the following? a. Keep track of your expenses b. Compare prices when you shop c. Set aside money for future purchases		X	Source: Adapted from the evaluation of <i>Real Money, Real World</i> program (Bateson 2009); added to address the following adulthood preparation topic: (1) financial literacy
2.1	Now we have some questions about your mother, or the person you think of as your mother. [Who] is this person...		X	Source: Evaluation of Title V Abstinence Education Programs

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2.2	Is she working now?	X		Source: Evaluation of Title V Abstinence Education Programs
2.3	How close do you feel to your mother or the person you think of as your mother?	X		Source: National Longitudinal Study of Adolescent Health
2.4	How would she feel if you got pregnant or got someone pregnant at this time in your life?	X		Source: National Longitudinal Study of Adolescent Health
2.5	Next we have some questions about your father, or the person you think of as your father. [Who] is this person...?	X		Source: Evaluation of Title V Abstinence Education Programs
2.6	Is he working now?	X		Source: Evaluation of Title V Abstinence Education Programs
2.7	How close do you feel to your father or the person you think of as your father?	X		Source: National Longitudinal Study of Adolescent Health
2.8	How would he feel if you got pregnant or got someone pregnant at this time in your life?	X		Source: National Longitudinal Study of Adolescent Health
2.9	In the past 3 months, how many TIMES have you talked with your mother or your father about each of the following things? a. How things are going with school work or with your grades b. A personal problem you were having c. Romantic relationships or dating d. How to resist pressures to have sex e. Avoiding drugs or alcohol f. Whether you should be having sex at this time in your life	X		Sources: National Longitudinal Study of Adolescent Health and All About Youth Study

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
2.10	Do you live with your biological mother? <input type="checkbox"/> None of the time <input type="checkbox"/> Some of the time <input type="checkbox"/> Most of the time <input type="checkbox"/> All of the time		X	Source: Adapted from the Building Strong Families Evaluation; added to replace a longer PPA question on family structure
2.11	Do you live with your biological father? <input type="checkbox"/> None of the time <input type="checkbox"/> Some of the time <input type="checkbox"/> Most of the time <input type="checkbox"/> All of the time		X	Source: Adapted from the Building Strong Families Evaluation; added to replace a longer PPA question on family structure
2.12	Which of the following best describes the relationship between your biological mother and biological father? <input type="checkbox"/> They are married to each other <input type="checkbox"/> They were married to each other, but are now separated or divorced <input type="checkbox"/> They were never married to each other <input type="checkbox"/> One of both of my biological parents have died <input type="checkbox"/> Don't know	X		Source: Evaluation of Title V Abstinence Education Programs
2.13	In the past 12 months, how many times have you moved?	X		Source: New question developed for PPA
2.14	How long have you lived where you live now?	X		Source: New question developed for PPA
2.15	All together, how many times have you run away from home for at least one night?		X	Source: Midwest Evaluation of the Adult Functioning of Former Foster Youth; added to address ACF interest in collecting information on experiences of high-risk youth and how these experiences related to sexual risk behaviors

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
3.1	<p>The next question is about how you deal with different situations.</p> <p>How well can you do each of the following?</p> <ul style="list-style-type: none"> a. Admit that you might be wrong during a disagreement b. Avoid saying things that could turn a disagreement into a big fight c. Accept another person's point of view even if you don't agree with it d. Listen to another person's opinion during a disagreement e. Work through problems without arguing 		X	<p>Source: <i>Interpersonal Competence Questionnaire (ICQ)</i> (Buhrmester et al. 1998); added to address the following adulthood preparation topics: (1) adolescent development, (2) healthy life skills, and (3) healthy relationships</p>
3.2	How would you define your current relationship status?	X		Source: New question developed for PPA

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
3.3	<p>How much do you agree or disagree with the following statements?</p> <ul style="list-style-type: none"> a. In a good dating relationship, you don't always get your own way. b. There are times when hitting or pushing between people who are dating is okay. c. A good dating relationship is based on mutual respect, not just sex. d. Someone who makes their dating partner jealous deserves to be hit or pushed. e. It would be easy to trust someone you are dating, even when you're apart. f. Avoiding a disagreement with someone you are dating is always better than talking about problems. 		X	Source: Adapted from the <i>Acceptance of Couple Violence Questionnaire</i> (Foshee et al. 1992); added to address the following adulthood preparation topic: (1) healthy relationships
3.4	Have you ever been fearful that someone you were dating or having sex with might physically hurt you?		X	
3.5	<p>Do you consider yourself to be one or more of the following?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Straight <input type="checkbox"/> Gay or Lesbian <input type="checkbox"/> Transgender <input type="checkbox"/> Bisexual <input type="checkbox"/> Something else/I have not decided 		X	Source: Adapted from the National Coalition for LGBT Health; also <i>Design, Development, and Testing of the NHIS Sexual Identity Question</i> (Kristen Miller and J. Michael Ryan, October 2011)

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
4.1	<p>In the past 12 months, did you attend any classes or sessions about the following?</p> <ul style="list-style-type: none"> a. Relationships, dating, or marriage b. Abstinence from sex c. Methods of birth control, such as condoms, pills, etc. d. Where to get birth control e. Sexually transmitted diseases, also known as STDs or STIs 	X		Source: New item developed for PPA
4.2	Where did you attend these classes or information sessions, for example, in health class at school, or through a program at a community center such as the Boys Club or Girls Club, or the YMCA?		X	Source: Adapted from the Building Strong Families Evaluation; added to obtain more detailed information on current participation in teen pregnancy prevention programming
4.3	<p>How strongly do you agree or disagree that with each of the following statements?</p> <ul style="list-style-type: none"> a. Having sexual intercourse is a good thing for you to do at your age b. At your age right now, having sexual intercourse would create problems c. At your age right now, not having sexual intercourse is important for you to be safe and healthy d. At your age right now, it is okay for you to have sexual intercourse if you use birth control, like a condom, the pill, etc. e. It is against your values to have sexual intercourse before marriage 	X		Source: ABT Adolescent Interview

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
4.4	<p>How likely is it you would be able to say "No" to having sexual intercourse in each of these situations?</p> <p>a. With someone you have known for a few days or less?</p> <p>b. With someone you have dated for a long time?</p> <p>c. With someone with whom you have already had sexual intercourse?</p> <p>d. With someone who is pushing you to have sexual intercourse?</p> <p>e. With someone who does not want to use a condom?</p>		X	Source: Self-efficacy instrument for protective sexual behaviors (Kasen et al. 1992; Cecil and Pinkerton 1998); added to address the following adulthood preparation topics: (1) adolescent development, (2) healthy life skills, and (3) healthy relationships
4.5	<p>The next series of statements is about condom use. How strongly do you agree or disagree with each of these statements?</p> <p>a. Condoms should always be used if a person your age has sexual intercourse</p> <p>b. Condoms are important to make sex safer</p> <p>c. Using condoms means you don't trust your partner</p> <p>d. Using condoms is morally wrong</p>		X	Sources: Adapted from the National Longitudinal Study of Adolescent Health, All About Youth Study, and National Survey of Adolescent Males
4.6	<p>If <u>condoms</u> are used correctly and consistently, how much can they decrease the risk of pregnancy?</p> <p><input type="checkbox"/> Not at all</p> <p><input type="checkbox"/> A little</p> <p><input type="checkbox"/> A lot</p> <p><input type="checkbox"/> Completely</p> <p><input type="checkbox"/> Don't know</p>		X	Source: Evaluation of Title V Abstinence Education Programs

Baseline # Question #	Question Text	Questio n from PPA Survey	Questio n Added for PREP	Additional Information
4.7	If <u>condoms</u> are used correctly and consistently, how much can they decrease the risk of getting HIV, the virus that causes AIDS?	X		Source: Evaluation of Title V Abstinence Education Programs
4.8	If <u>birth control pills</u> are used correctly and consistently, how much can they decrease the risk of pregnancy?	X		Source: Evaluation of Title V Abstinence Education Programs
4.9	If <u>birth control pills</u> are used correctly and consistently, how much can they decrease the risk of getting HIV, the virus that causes AIDS?	X		Source: Evaluation of Title V Abstinence Education Programs
4.10	If <u>birth control pills</u> are used correctly and consistently, how much can they decrease the risk of getting gonorrhea?	X		Source: Evaluation of Title V Abstinence Education Programs
4.11	Can you get a sexually transmitted disease, also known as an STD or STI, from having oral sex?	X		Source: All About Youth Study
4.12	Have you ever had sexual intercourse, oral sex, or anal sex?	X		Source: New question developed for PPA
Part B1 (Sections 5-6)				
5.1 B1	Just to confirm, have you ever had sexual intercourse, oral sex, or anal sex?	X		Source: New question developed for PPA
5.2 B1	The first questions are about sexual intercourse. By sexual intercourse, we mean a male putting his penis into a female's vagina. Have you <u>ever</u> had sexual intercourse?	X		Source: National Longitudinal Study of Adolescent Health
5.3 B1	The very <u>first</u> time you had sexual intercourse, how old were you?	X		Source: National Longitudinal Study of Adolescent Health

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
5.4 B1	<p>The <u>first</u> time you had sexual intercourse, did you or your partner use any of these methods of birth control?</p> <p>a. Condoms b. Birth control pills or the patch c. Depo-Provera or other injectable birth control d. NuvaRing or the ring e. Withdrawal or pulling out f. Another method <i>PRINT OTHER METHOD USED</i></p>	X		Source: National Longitudinal Study of Youth, 1997
5.5 B1	How many DIFFERENT PEOPLE have you <u>ever</u> had sexual intercourse with, even if only one time?	X		Source: National Longitudinal Study of Youth, 1997
5.6 B1	Now please think about the past 3 months. In the past 3 months, have you had sexual intercourse?	X		Source: All About Youth Study
5.7 B1	In the past 3 months, how many TIMES have you had sexual intercourse?	X		Sources: National Longitudinal Study of Youth, 1997 and All About Youth Study
5.8 B1	In the last 3 months, how many TIMES have you had sexual intercourse <u>without</u> using a condom?	X		Source: All About Youth Study

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
5.9 B1	<p>The next question is about your use of the following methods of birth control:</p> <ul style="list-style-type: none"> • Condoms • Birth control pills • The shot (Depo-Provera) • The patch • The ring (NuvaRing) • IUD (Mirena or Paragard) • Implant (Implanon) <p>In the past 3 months, how many TIMES have you had sexual intercourse <u>without</u> using any of these methods of birth control?</p>	X		Source: National Longitudinal Study of Youth, 1997
5.10 B1	Do you intend to have sexual intercourse in the next year, if you have the chance?	X		Source: All About Youth Study
5.11 B1	<p>Oral sex is when someone puts his or her mouth on another person's penis or vagina, OR lets someone else put his or her mouth on their penis or vagina.</p> <p>Have you ever had oral sex?</p>	X		Source: All About Youth Study
5.12 B1	The very <u>first</u> time you had oral sex, how old were you?		X	Source: All About Youth Study; added to be consistent with question series on sexual intercourse
5.13 B1	Now please think about the past 3 months. Have you had oral sex in the past 3 months?	X		Source: All About Youth Study
5.14 B1	In the past 3 months, how many TIMES have you had oral sex?	X		Source: All About Youth Study
5.15 B1	In the past 3 months, how many TIMES have you had oral sex <u>without</u> using a condom?	X		Source: All About Youth Study

Baseline # Question #	Question Text	Questio n from PPA Survey	Questio n Added for PREP	Additional Information
5.16 B1	Anal sex is when a male puts his penis in someone else's anus, or their butt, or someone lets a male put his penis in their anus or butt. Have you <u>ever</u> had anal sex?	X		Source: All About Youth Study
5.17 B1	The <u>very first time</u> you had anal sex, how old were you?		X	Source: All About Youth Study; added for consistency with question series on sexual intercourse
5.18 B1	Now please think about the past 3 months. Have you had anal sex in the past 3 months?	X		Source: All About Youth Study
5.19 B1	In the past 3 months, how many TIMES have you had anal sex?	X		Source: All About Youth Study
5.20 B1	In the past 3 months, how many TIMES have you had anal sex <u>without</u> using a condom?	X		Source: All About Youth Study
5.21 B1	Have you ever had oral sex or anal sex with a person the same sex as you?	X		Source: National Survey of Family Growth
6.1 B1	In the past 12 months, did you receive information from a doctor, nurse, or clinic about any of the following? a. Methods of birth control, such as condoms, pills, etc. b. Where to get birth control c. Sexually transmitted diseases, also known as STDs or STIs	X		Source: National Survey of Family Growth
6.2 B1	In the past 12 months, did you get any type of birth control from a doctor, nurse, or clinic, such as condoms, pills, the shot, an implant, the ring, etc.?		X	Source: National Survey of Family Growth; added to obtain more detailed information on receipt of existing teen pregnancy prevention services

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
6.3 B1	<p>In the past 12 months, have you been told by a doctor, nurse, or some other health professional that you had any of the following sexually transmitted diseases?</p> <p>a. Chlamydia b. Gonorrhea c. Genital herpes d. Syphilis e. HIV infection or AIDS f. Human Papilloma virus, also known as HPV or genital warts g. Another sexually transmitted disease (STD) <i>PRINT OTHER STD</i></p>	X		Source: All About Youth Study
6.4 B1	These next few questions are about pregnancy. To the best of your knowledge, have you ever been pregnant or gotten someone pregnant, even if no child was born?	X		Sources: National Longitudinal Survey of Youth, 1997 and National Survey of Family Growth
6.5 B1	To the best of your knowledge, how many TIMES have you been pregnant or gotten someone pregnant?	X		Source: Prevention Minimum Evaluation Data Set
6.6 B1	Have you ever had a baby or has anyone you got pregnant actually had the baby?	X		Source: Evaluation of Title V Abstinence Education Programs
6.7 B1	<p>If you got pregnant now or you got someone pregnant now, how would you feel?</p> <p><input type="checkbox"/> Very happy <input type="checkbox"/> A little happy <input type="checkbox"/> Neither happy nor upset <input type="checkbox"/> A little upset <input type="checkbox"/> Very upset</p>	X		Source: National Survey of Family Growth

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
Part B2 (Sections 5-6)				
5.1 B2	<p>This booklet is for youth who have not had sex. We want to be sure you are in the correct booklet. We know we asked this before but...</p> <p>Just to confirm, have you ever had sexual intercourse, oral sex, or anal sex?</p>	X		Source: New question developed for PPA
5.2 B2	Do you expect to get married in the future?		X	Source: Monitoring the Future Study; added to collect information on future relationship expectations among youth who are not sexually active
5.3 B2	If it were just up to you, what age would you like to get married?		X	Source: Monitoring the Future Study; added to collect information on future relationship expectations among youth who are not sexually active
5.4 B2	<p>If you met the right person, would you be willing to get married before these things happened?</p> <ul style="list-style-type: none"> a. You had been dating for at least a year b. You had lived together c. You had your family's approval d. You had graduated from high school e. You had graduated from a four-year college f. You had a full-time job 		X	Source: New question developed for PREP; added to collect information on future relationship expectations among youth who are not sexually active

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
5.5 B2	<p>In general, how much pressure, if any, do you feel from your friends to have sexual intercourse?</p> <p><input type="checkbox"/> A lot of pressure <input type="checkbox"/> Some pressure <input type="checkbox"/> A little pressure <input type="checkbox"/> No pressure</p>	X		Source: Evaluation of Title V Abstinence Education Programs
5.6 B2	<p>How many of your friends who are your age think the following things? Your best guess is fine.</p> <p>a. Having sexual intercourse is a good thing for them to do at their age b. It would be okay for them to have sexual intercourse as long as they used birth control, like a condom c. It would be okay for them to have sexual intercourse if they were dating the same person for a long time d. They should wait until they are older to have sexual intercourse e. They should wait until marriage to have sexual intercourse</p>	X		Source: ABT Adolescent Interview and All About Youth Study
5.7 B2	<p>How many of your friends who are your age have had sexual intercourse? Your best guess is fine.</p> <p><input type="checkbox"/> None <input type="checkbox"/> Some <input type="checkbox"/> Half <input type="checkbox"/> Most <input type="checkbox"/> All <input type="checkbox"/> Don't know</p>	X		Source: Evaluation of Title V Abstinence Education Programs

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
5.8 B2	<p>Here are some reasons people your age might choose NOT to have sexual intercourse. How important is each of these reasons to YOU?</p> <ul style="list-style-type: none"> a. I don't want to get a sexually transmitted disease, also known as an STD or an STI b. I don't want to disappoint my parents c. I am too young to have sex d. I want to wait until I'm married e. It is against my personal values f. I haven't met the right person yet g. I haven't had the chance h. I do not want to get pregnant/get a girl pregnant 	X		Sources: Evaluation of Title V Abstinence Education Programs and Kaiser Family Foundation: SexSmarts Survey
5.9 B2	<p>How strongly do you agree or disagree that each of the following statements are benefits of waiting to have sexual intercourse?</p> <ul style="list-style-type: none"> a. Respect for yourself b. Keeping true to religious values c. Respect from friends d. Better chance for a good marriage in the future 	X		Source: Kaiser Family Foundation: SexSmarts Survey
5.10 B2	Do you think it's embarrassing for people your age to admit they are virgins?	X		Source: National Campaign, Voices Heard 2000
5.11 B2	Do you think it's embarrassing for girls your age to get pregnant?	X		Source: New question developed for PPA

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
5.12 B2	In the group you hang out with, how important is it to have a girlfriend or boyfriend or to be going out with someone? <input type="checkbox"/> Very important <input type="checkbox"/> Not too important <input type="checkbox"/> Not important at all	X		Source: Kaiser Family Foundation's National Survey of Teens, 1998
5.13 B2	Do you intend to have sexual intercourse in the next year, if you have the chance? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, probably <input type="checkbox"/> No, probably not <input type="checkbox"/> No, definitely not	X		Source: All About Youth Study
6.1 B2	In the past 12 months, did you receive information from a doctor, nurse, or clinic about any of the following? a. Methods of birth control, such as condoms, pills, etc. b. Where to get birth control c. Sexually transmitted diseases, also known as STDs or STIs	X		Source: National Survey of Family Growth
6.2 B2	In the past 12 months, did you get any type of birth control, for example, condoms, birth control pills, the shot, an implant, the ring, etc. from a doctor, nurse, or clinic?		X	Source: National Survey of Family Growth; added to obtain more detailed information on receipt of existing teen pregnancy prevention services

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
6.3 B2	<p>In the past 12 months, did you receive information about any of the following sexually transmitted diseases, also known as STDs or STIs?</p> <ul style="list-style-type: none"> a. Chlamydia b. Gonorrhea c. Genital herpes d. Syphilis e. HIV infection or AIDS f. Human Papilloma virus, also known as HPV or genital warts g. Another sexually transmitted disease (STD) <p><i>PRINT OTHER STD</i></p>		X	Source: Adapted from National Survey of Family Growth; added to obtain more detailed information on receipt of existing teen pregnancy prevention services
6.4 B2	Do you want to have children in the future?		X	Source: Adapted from the Monitoring the Future Study; added to collect information on the future expectations of youth who are not sexually active
6.5 B2	If it were just up to you, what age would you like to have your first child?		X	Source: Adapted from the Monitoring the Future Study; added to collect information on the future expectations of youth who are not sexually active
6.6 B2	If it were just up to you, how many children would you like to have?		X	Source: Adapted from the Monitoring the Future Study; added to collect information on the future expectations of youth who are not sexually active

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6.7 B2	If you got pregnant now or you got someone pregnant now, how would you feel? <input type="checkbox"/> Very happy <input type="checkbox"/> A little happy <input type="checkbox"/> Neither happy nor upset <input type="checkbox"/> A little upset <input type="checkbox"/> Very upset	X		Source: National Survey of Family Growth
Section 7				
7.1	During the past 30 days, on how many days did you smoke one or more cigarettes? <input type="checkbox"/> 0 days <input type="checkbox"/> 1 or 2 days <input type="checkbox"/> 3 to 5 days <input type="checkbox"/> 6 to 9 days <input type="checkbox"/> 10 to 19 days <input type="checkbox"/> 20 to 29 days <input type="checkbox"/> All 30 days	X		Source: National Longitudinal Survey of Youth, 1997
7.2	During the past 30 days, on how many days did you have one or more alcoholic beverages? <input type="checkbox"/> 0 days <input type="checkbox"/> 1 or 2 days <input type="checkbox"/> 3 to 5 days <input type="checkbox"/> 6 to 9 days <input type="checkbox"/> 10 to 19 days <input type="checkbox"/> 20 to 29 days <input type="checkbox"/> All 30 days	X		Sources: National Longitudinal Survey of Youth, 1997 and National Survey on Drug Use and Health
7.3	During the past 30 days, on how many days did you have 5 or more drinks in a row, that is, within a few hours? <input type="checkbox"/> 0 days <input type="checkbox"/> 1 or 2 days <input type="checkbox"/> 3 to 5 days <input type="checkbox"/> 6 to 9 days <input type="checkbox"/> 10 to 19 days <input type="checkbox"/> 20 to 29 days <input type="checkbox"/> All 30 days	X		Sources: National Longitudinal Survey of Youth, 1997 and National Survey on Drug Use and Health

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7.4	<p>During the past 30 days, on how many days did you use marijuana, also called weed or pot?</p> <p> <input type="checkbox"/> 0 days <input type="checkbox"/> 1 or 2 days <input type="checkbox"/> 3 to 5 days <input type="checkbox"/> 6 to 9 days <input type="checkbox"/> 10 to 19 days <input type="checkbox"/> 20 to 29 days <input type="checkbox"/> All 30 days </p>	X		Sources: National Longitudinal Survey of Youth, 1997 and National Survey on Drug Use and Health
7.5	<p>During the past 30 days, on how many days did you use any other type of illegal drug, inhalant, or a prescription drug in a way that was not prescribed?</p> <p> <input type="checkbox"/> 0 days <input type="checkbox"/> 1 or 2 days <input type="checkbox"/> 3 to 5 days <input type="checkbox"/> 6 to 9 days <input type="checkbox"/> 10 to 19 days <input type="checkbox"/> 20 to 29 days <input type="checkbox"/> All 30 days </p>		X	Sources: National Longitudinal Survey of Youth, 1997 and National Longitudinal Study of Adolescent Health; added to address the following adulthood preparation topics: (1) adolescent development and (2) health life skills
7.6	<p>Now thinking about experiences throughout your life, how many times have you experienced the following things?</p> <p> a. Heard gunshots in your neighborhood b. Witnessed a shooting c. Been robbed or mugged d. Been threatened with a gun or knife e. Been beaten up badly enough that you needed to go to the doctor, even if you did not end up going f. Been touched by someone or forced to touch someone in a sexual way when you did not want to </p>		X	Source: National Survey of Children's Exposure to Violence (Finkelhor et al. 2009); added to address ACF's interest in the experiences of high-risk youth and how these experiences relate to sexual risk behaviors

Baseline Question #	Question Text	Question from PPA Survey	Question Added for PREP	Additional Information
7.7	<p>How strongly do you agree or disagree with the following statements?</p> <ul style="list-style-type: none"> a. Nothing you do as a teen will affect how healthy you are as an adult b. You can do things now that will help you to be healthy when you are an adult c. Taking risks as a teen, like drinking and doing drugs, does not really matter for your health in the long run d. The good and bad decisions you make as a teen will affect your health as an adult 	X		Source: New question developed for PPA