ATTACHMENT B
SOURCES REFERENCED FOR THE BASELINE QUESTIONNAIRE

**Federal Evaluation of *Making Proud Choices!* Baseline Survey Construction:**

**Sources Referenced**

The list below contains brief descriptions of the sources referenced in the Federal Evaluation of *Making Proud Choices!* baseline survey, as well as locations to the sources referenced. Descriptions were compiled from websites about the sources. Wherever applicable, the sources noted below are from the most recently cleared OMB information collections instead of the original source.

**1) The Pregnancy Assistance Fund: Feasability and Design Study (PAF FADS) and Federal Evaluation for Programs for Expectant and Parenting Youth (PEPY)**

The Office of Adolescent Health (OAH) within the U.S. Department of Health and Human Services (DHHS) administers the Pregnancy Assistance Fund (PAF) grant program and is sponsoring its evaluation. PAF grants support programs for expectant and parenting youth. In 2013, OAH awarded 17 grants to states and tribal entities, including the California Department of Public Health. PAF-funded programs aim to: help youth complete their education, delay a subsequent pregnancy, improve maternal and child health outcomes, increase parenting and co-parenting skills, and raise awareness of available resources. In 2013, OAH contracted with Mathematica Policy Research for the PAF Feasibility and Design Study (PAF FADS), and then in 2014 awarded Mathematica a contract to continue the evaluation in three sites with the Federal Evaluation for Programs for Expectant and Parenting Youth (PEPY). The evaluation has two core components: a rigorous assessment of program impacts and implementation of two grantees, and a descriptive examination of program design of all 17 grantees. The evaluation will help the federal government, grantees, and local service providers learn more about program design, implementation, and impacts.

Copies of the instruments are available from Mathematica upon request.

**2) Evaluation of the School Dropout Demonstration Assistance Program**

From 1991 through 1995, the U.S. Department of Education awarded grants to 85 drop-out prevention programs, most of which were “targeted” programs that identified at-risk students and directed services to them. Eight were restructuring projects that are attempting to institute broad changes to address the drop-out problem in clusters of schools or entire districts. Mathematica Policy Research and its subcontractors, PSA and RMC, were selected to document the implementation of all 85 projects, and to conduct an in-depth evaluation of the effectiveness of 20 targeted projects and 5 restructuring projects.

The evaluation consisted of (1) an implementation analysis, (2) an impact analysis, and (3) a series of reports on policy issues related to dropout-prevention programs. The evaluation of targeted projects included an analysis of impacts for a sample of about 5,300 students (half assigned randomly to the targeted projects and half to a control group) during the course of two school years. The analysis of restructuring projects included about 5,000 students selected randomly from two grade cohorts in the restructuring schools and carefully selected comparison schools.

Copies of the instruments are available from Mathematica upon request.

**3) The Personal Responsibility Education Program Evaluation (PREP)**

The Personal Responsibility Education Program (PREP), funded under the Affordable Care Act of 2010, is a key element of a multipronged federal strategy to reduce teenage pregnancies and sexually transmitted infections (STIs). PREP provides grants to states to replicate, or substantially incorporate elements of, programs that have been shown to be effective at delaying sexual initiation, reducing pregnancy, and increasing contraceptive use among sexually active youth. Upon authorizing the PREP program, Congress required that it be evaluated. The evaluation will help the federal government, states, and local service providers learn more about program design, implementation, and outcomes. The Administration for Children and Families (ACF) within DHHS contracted with Mathematica Policy Research to document and assess this large-scale replication effort. The evaluation is studying PREP programs nationwide, collecting data on programs operating in all states, and also conducting an in-depth examination of a few selected PREP sites.

Copies of instruments are available from Mathematica upon request.

**4) Evaluation of Adolescent Pregnancy Prevention Approaches (PPA)**

The Evaluation of Adolescent Pregnancy Prevention Approaches (PPA) is being undertaken to expand available evidence on effective ways to reduce teen pregnancy. The evaluation is being conducted under contract for the DHHS OAH. The evaluation is documenting and testing a range of pregnancy prevention approaches, including comprehensive sex education, abstinence education, and STI/HIV prevention programs, in up to eight program sites. Program impacts will be estimated using a random assignment design, involving random assignment of either schools or individuals depending on the program setting. Overall, the evaluation will be based on a sample of as many as 10,800 youth. The evaluation team will collect baseline information when youth are enrolled and two waves of follow-up data on outcomes. Comparison of outcomes for the program and control groups will indicate the effectiveness of the programs in reducing teen pregnancy and associated risk behaviors.

Copies of the instruments are available from Mathematica upon request.

**5) Girls Shape the Future Study (Girls Inc.)**

The Girls Shape the Future study, was designed to evaluate the implementation and effectiveness of the Girls Incorporated® Will Power/Won’t Power® curriculum developed to reduce sexual intercourse, pregnancy, and sexually transmitted infections among teenage girls. The study also aimed to assess if Will Power/Won’t Power® developed views and attitudes about postponing sexual activity, improved self-perception, lowered risky behaviors, and decreased interactions with peers who engage in risky behaviors.

Copies of the instruments are available from Mathematica upon request.

**6) The Fog Zone (2009)**

This national survey of fertility and contraceptive knowledge—the first of its kind to focus in-depth on the attitudes and behavior of unmarried young adults regarding pregnancy planning, contraception, and related issues—was commissioned by The National Campaign to Prevent Teen and Unplanned Pregnancy and conducted by the Guttmacher Institute. It gathered detailed results from a nationally representative probability sample of 1,800 unmarried men and women age 18 to 29.

The instruments and additional information are available at <http://thenationalcampaign.org/resource/fog-zone>.

**7) ETR (Education, Training and Research) Associates**

ETR Associates offer science-based health and education products and programs throughout the US. They are a non-profit organization a multidisciplinary staff of health educators, program developers, trainers, curriculum specialists, writers, editors, graphic artists, librarians, publication and distribution experts, technologists and social scientists. Their evaluation experts design tools to measure youth behaviors, and to examine longitudinal linkages between youth attitudes, beliefs, knowledge, and behaviors.

ETR owns the *Making Proud Choices!* Curriculum.

**8) The University of California at San Francisco Center for AIDS Prevention Studies (CAPS) and ETR Associates, Student Health Questionnaire**

The questionnaire included a large number of questions about sexuality, including questions on the following topics: existence of a boyfriend/girlfriend and age difference of that boy/girlfriend, knowledge about sexual topics, self-efficacy to avoid various sexual behaviors, norms about various sexual behaviors, perceptions of peer behaviors, opportunity to have sex, pressures to have sex, pre-coital sexual behaviors, various measures of sexual behavior, attempts to pressure someone else to have sex, and reasons to have and not to have sex.

For psychometric properties, see the article:

Marín, B.V., Coyle, K., Gomez, C., Carvajal, S., Kirby, D. (2000) Older Boyfriends and Girlfriends Increase Risk of Sexual Initiation in Young Adolescents. Journal of Adolescent Health, 27: 409-418.

The instrument is available at <http://caps.ucsf.edu/uploads/tools/surveys/pdf/marinschoolquest.pdf>.

**9) 2017 Youth Risk Behavior Surveillance System (YRBSS)**

The Youth Risk Behavior Surveillance System (YRBSS) monitors priority health risk behaviors among youth and adults in the US since it was developed in 1990. It was designed to determine the prevalence o fhealth beahviors, assess whether health behaviors increase, decrease or stay the same over time, provide comparable national, state, territorial, tribal and local data and monitor progress toward achieving the Healthy People objectives and other program indicators. The YRBSS includes national, state, territorial, tribal government, and local school-based surveys of representative samples of 9th through 12th grade students. These surveys are conducted every two years, usually during the spring semester. The national survey, conducted by CDC, provides data representative of 9th through 12th grade students in public and private schools in the United States. The state, territorial, tribal government, and local surveys, conducted by departments of health and education, provide data representative of mostly public high school students in each jurisdiction.

The instruments and additional information are available at <http://www.cdc.gov/healthyyouth/data/yrbs/questionnaires.htm>.

**10) National Longitudinal Study of Adolescent Health (AddHealth)**

AddHealth is a nationally representative study originally designed to examine how social contexts (such as families, friends, peers, schools, neighborhoods, and communities) influence teens' health and risk behaviors. The study is now examining how health changes over the course of early adulthood. The study began in 1994 under a grant from the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD), with co-funding from 17 other federal agencies. The AddHealth study is the largest, most comprehensive survey of adolescents ever undertaken.

Beginning in 1994, researchers selected a nationally representative random sample of 7th to 12th grade students from schools across the country. About 90,000 young people participated by filling out a brief questionnaire at school. Then, researchers conducted in-depth interviews with students and their parents in a series of four in-home interviews, the most recent in 2008. Wave V of follow up will take place from 2016-2018.

The instruments and additional information are available at <http://www.cpc.unc.edu/projects/addhealth/about>