

## Attachment A

### 2019 Adolescent Pregnancy Prevention Grantee Conference Overall Evaluation Survey

**To assist us in planning for future conferences, please complete this evaluation form. We appreciate your attendance at this year's conference!**

Please note that your participation in this survey is voluntary. Survey responses are anonymous and will be kept private. THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The control number for this project is 0970-0401. The control number expires on 05/31/2021.

**1. Please select the role(s) that best describe you. Select all that apply.\***

- Grantee or sub-awardee staff
- Federal staff
- Workshop or panel presenter
- Poster presenter
- Federal contractor
- Exhibitor
- Program developer/trainer
- Other - Write In:

**2. If you are a grantee or sub-awardee, what is your primary role on your grant? Select only one.\***

- Project administrator (e.g., director, manager, coordinator, etc.)
- Field staff (e.g. educator, facilitator, etc.)
- Evaluator
- Partner/sub-awardee (who is not an evaluator)
- Other - Write In:

- I am not an HHS grantee or sub-awardee.

**3. If you are a grantee or sub-awardee, please identify your grantee type. Select all that apply.\***

- APP Program - State PREP (State Personal Responsibility Education Program)
- APP Program - Competitive PREP (Competitive Personal Responsibility Education Program)
- APP Program - Tribal PREP (Personal Responsibility Education Program - Tribes and Tribal Organizations)
- APP Program - PREIS (Personal Responsibility Education Program - Innovative Strategies)
- APP Program – Title V SRAE (Title V State Sexual Risk Avoidance Education Grant Program)
- APP Program – CSRAE (Competitive Sexual Risk Avoidance Education Grant Program)
- APP Program - SRAE (Sexual Risk Avoidance Education Program)
- I am not an HHS grantee or sub-awardee

**Conference Objectives**

**Please indicate the extent to which you agree or disagree with the following statement**

**4. By the end of the conference, I was able to..\***

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree nor Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
1. Describe at least two strategies to partner and promote positive outcomes for youth.						
2. Obtain resources to effectively meet the needs of special populations of youth.						
3. Connect with PREP and SRAE grantees to network and share						

resources, lessons learned, and innovative practices.						
4. Identify new tools, resources, and connections to improve organizational capacity, evaluation, partnerships, social media marketing, and/or sustainability.						
5. Demonstrate an understanding of emerging trends in adolescent health and pregnancy prevention.						

**5. What did you think of the conference OVERALL?\***

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree nor Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
1. The conference met my expectations.						
2. I expect to use the information gained from the conference in my job.						
3. The opportunities for networking were beneficial.						
4. The amount and timing of breaks was sufficient.						

**Conference Logistics**

**Please indicate the extent to which you agree or disagree with the following statements.**

**6) What did you think of the *preliminary materials* for the conference?\***

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree nor Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
1. The call for proposals was clear.						
2. The online registration process was user-friendly.						
3. The conference website was easy to navigate.						
4. The conference website contained useful information.						

**7) What did you think of the *hotel accommodations* at the conference?\***

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree nor Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
1. The meeting rooms were appropriate.						
2. The hotel sleeping accommodations were satisfactory.						
3. The hotel location was convenient.						

**8) What did you think of the *on-site logistics and materials* for the conference?\***

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree nor Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
1. The on-site registration process was easy to navigate.						
2. Conference support staff were helpful.						
3. The conference program book was informative.						
4. The conference signs were helpful.						
5. The conference app						

was user friendly.						
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## Keynotes and Youth Plenary Sessions

Please indicate the extent to which you agree or disagree with the following statements.

9) What did you think of the *Opening Session with [Opening Session Speaker Name]*?\*

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
1. The presenter conveyed the information clearly.						
2. The presenter was knowledgeable about the subject matter.						
3. The information presented was useful and applicable to my work.						
4. The session generated thoughtful discussion.						
5. The session made me want to receive additional training or						

information on the topic presented.						
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**10) What did you think of the *Youth Plenary Panel*?\***

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree nor Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
1. The panelists were engaging.						
2. The moderator asked thoughtful questions.						
3. The information presented was useful and applicable to my work.						
4. The session generated thoughtful discussion.						
5. As a result of attending this session, I have ideas on how to improve youth engagement.						

**11) What did you think of the *Closing Session with [Closing Session Speaker Name]*? \***

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree nor Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
1. The presenter conveyed the information clearly.						
2. The presenter was knowledgeable about the subject matter.						
3. The information presented was useful and applicable to my work.						
4. The session generated thoughtful discussion.						
5. The session generated excitement for continuing work in my community.						

## Other Sessions

Please indicate the extent to which you agree or disagree with the following statements.

12) What did you think of the *Exhibitor and Developer Halls*?\*

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
1. The information and resources shared were useful and applicable to my work.						
2. It was helpful to have an opportunity to meet individually with exhibitors and curriculum developers.						
3. The exchange generated thoughtful discussion.						

13) What did you think of the *Topical Roundtable Discussions (Wednesday 1:45 pm – 3:00 pm)*?

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
1. The information shared was useful and applicable to my work.						
2. The session generated thoughtful discussion.						
3. This session helped me connect with other grantees.						
4. The session generated an opportunity for sharing information.						
5. This session was organized well.						

**14) What did you think of the *Poster Session and Project Officer Meet and Greet (Thursday, 3:45 pm -4:45 pm)*?**

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree nor Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
1. The information presented was useful and applicable to my work.						
2. The session generated thoughtful discussion.						
3. It was helpful to have an opportunity to meet briefly with my Project Officer.						
4. The time allotted for this session was appropriate.						

**15) What did you think of the *Regional Networking Session (Thursday 10:30 am – 12:00 pm)*?**

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree nor Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
1. The information shared was useful and applicable to my work.						
2. The session generated thoughtful discussion.						
3. This session helped me connect with other grantees.						
4. This session was organized well.						

### **Final Thoughts**

**16) How would you like to see the networking sessions organized in future conferences (e.g., by region, by topic)?**



**17) What was the best part of the conference?**

**18) What could be improved upon?**

**19) Do you have any additional comments or questions about the conference?**

**Thank you for completing this form. Your response is very important to us.**