

## INSTRUMENT 1. YOUTH SURVEY

### THE PAPERWORK REDUCTION ACT OF 1995

This collection of information is voluntary and will be used to provide the Administration for Children and Families with information to help refine and guide SRAE program development. Public reporting burden for the collection of information is estimated to average **XX** 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 OMB number and expiration date for this collection are OMB #: **XXXX-XXXX**, Exp: **XX/XX/20XX**. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Melissa Thomas at [mthomas@mathematica-mpr.com](mailto:mthomas@mathematica-mpr.com).

## How to complete the survey

- You may complete the survey all at once or save your responses and return at a later time.
- Please use the buttons and links on each page to move through the survey. Using “Enter” or your browser’s “Back” function may cause errors.
- If you have trouble accessing the survey, or if you have questions, please contact us at [STUDYADDRESS]@mathematica-mpr.com or [study toll-free telephone number].

## INTRODUCTION

Thank you for your help with this important study. The purpose of this study is to [FILL STUDY PURPOSE]. The study is being conducted by the Administration for Children and Families in the U.S. Department of Health and Human Services. This survey includes questions about your background, your attitudes towards relationships, your social and emotional wellbeing, and your behaviors. Your name will not be on the questionnaire. We want you to know that:

1. Your participation in this survey is voluntary.
2. The survey will take about XX minutes to complete.
3. We hope that you will answer all the questions, but you may skip any questions you do not wish to answer.
4. Your responses will be combined with other people your age

## A. Healthy individual functioning and well-being

1. Below are questions about ways people may feel or act. There are no right or wrong answers. Please do your best to answer honestly. *[SRAENE Co-Reg Pilot Measure]*

How easy or hard is it to...	SELECT ONE ONLY PER ROW				
	Very hard	Hard	A little hard, a little easy	Easy	Very easy
a. Set goals for myself.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. Find a way to stick with my goals, even when it's tough.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. Keep track of everything going on around me, even when I'm feeling stressed.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. Resist getting involved in other people's drama.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Focus when I'm excited about something else.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. Stop myself from acting on my feelings without thinking first.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. Consider all the positives and negatives before making a decision.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. Resist doing something when I know I shouldn't.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
i. Wait for what I want.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
j. Remain calm when things go wrong for me.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
k. Resist saying something that I know I will later regret.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
l. Think carefully before making a decision.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
m. Stay away from situations that could bring trouble.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
n. Calm myself down when I'm stressed.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
o. Know what I'm feeling.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
p. Find ways to make myself study even when I want to do other things.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
q. Talk calmly with someone I disagree with.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
r. Know when I start to feel frustrated.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
s. Keep my reactions in check when I'm upset.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
t. To be a good friend, even when I'm in a bad mood.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

2. The following question asks about things people may do to manage their feelings. It is okay if you have not used any of these strategies in the past. *[SRAENE Co-Reg Pilot Measure]*

Please rate how often you do the following:

SELECT ONE ONLY PER ROW

	Never	Rarely	Sometimes	Often	Almost always
a. When I'm having a hard time paying attention, I take a few deep breaths to refocus.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. I notice what my body is telling me when I am feeling stressed.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. When I'm in the middle of an argument with someone I care about, I take a break to calm myself down.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. When I'm feeling overwhelmed, I can calm myself down.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. I can name the emotions I'm feeling.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. Naming my emotions helps me figure out what matters to me.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**3. The next questions ask how you feel about your life today. For each statement, please indicate how often you feel this way:**

**SELECT ONE ONLY PER ROW**

	Never	Rarely	Sometimes	Often	Almost always
a. I focus on the good things in life, not just the problems.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. I make changes in my life so I can live successfully with my emotional or mental health challenges.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. I worry that difficulties related to my mental health or emotions will keep me from having a good life.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. I know how to take care of my mental or emotional health.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. I feel my life is under control.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**4. The following questions are about your attitudes and feelings. For each statement, please indicate how much or how little each statement feels like you.**

**SELECT ONE ONLY PER ROW**

	Not at all like me	A little like me	Sort of like me	A lot like me	Very much like me
a. I learn from my mistakes.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. I believe I will be okay even when bad things happen.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. I do a good job of handling problems in my life..	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. I try new things even if they are hard.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. When I have a problem, I come up with ways to solve it.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. I give up when things get hard.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. I deal with my problems in a positive way (like asking for help).....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. I keep trying to solve problems even when things don't go my way.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
i. Failure just makes me try harder.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
j. No matter how bad things get, I know the future will be better.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**5. How strongly do you agree or disagree with the following statements?**

**SELECT ONE ONLY PER ROW**

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. I can pretty much determine what will happen in my life.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. People have more power if they join together as a group.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. Getting angry about something never helps.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. I have a positive attitude toward myself.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. I am usually confident about the decisions I make...	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. People have no right to get angry just because they don't like something.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. Most of the misfortunes in my life were due to bad luck.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. I see myself as a capable person.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
i. Speaking up for myself or others never gets me anywhere.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
j. People working together can have an effect on their community.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
k. I am often able to overcome barriers.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
l. I am generally optimistic about the future.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
m. When I make plans, I am almost certain to make them work.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
n. I feel alone most of the time.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
o. Experts are in the best position to decide what people should do or learn.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
p. I am able to do things as well as most other people.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
q. I generally accomplish what I set out to do.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
r. People should try to live their lives the way they want to.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
s. I feel powerless most of the time.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
t. When I am unsure about something, I usually go along with the rest of the group.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
u. I feel I am a person of worth, at least on an equal basis with others.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
v. People have the right to make their own decisions, even if they are bad ones.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
w. I feel I have many good qualities.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**SELECT ONE ONLY PER ROW**

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
x. Very often, a problem can be solved by taking action.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
y. Working with others in my community can help to change things for the better.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**6. How strongly do you agree or disagree with each of the following statements?**

**SELECT ONE ONLY PER ROW**

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. You feel like you are doing everything just about right.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. You have a lot of good qualities.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. You have a lot to be proud of.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. You like yourself just the way you are.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. You feel loved and wanted.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. You feel socially accepted.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

The next questions ask your opinions about sexual activity. This survey is private and there are no right or wrong answers. Please do your best to answer honestly.

7. Many people find it difficult to make decisions about sex. Whether you have or have not had sex, how confident are you that you could...?[SRAENE Co-Reg Pilot Measure]

SELECT ONE ONLY PER ROW

	Not at all confident	A little confident	Somewhat confident	Confident	Very confident
a. consider all the positives and negatives before making a decision about whether to have sex.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. think carefully before making a decision about sex.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. stop yourself from acting on your feelings when it comes to decisions about sex.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. tell your partner what you do and do not want to do sexually.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. know what you are feeling when faced with a decision about sex.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

8. How confident are you that you could say "no" to having sex in the following situations?

SELECT ONE ONLY PER ROW

	Not at all confident	A little confident	Somewhat confident	Confident	Very confident
a. With someone you have known for a few days or less.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. With someone you have dated for a long time.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. With someone with whom you have already had sex.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. With someone who is pushing you to have sex.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. With someone who does not want to use a condom.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. If your dating partner wanted to have sex but you didn't. [SRAENE Co-Reg Pilot Measure]	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>



**9. Overall, how satisfied are you with life as a whole these days? Please rate how satisfied you are with your life on a scale from 0 (not satisfied at all) to 10 (completely satisfied).**

Not satisfied at all											Completely satisfied
0 ○	1 ○	2 ○	3 ○	4 ○	5 ○	6 ○	7 ○	8 ○	9 ○	10 ○	

**10. In general, how happy or unhappy do you usually feel? Please rate how happy you are with your life on a scale from 0 (extremely unhappy) to 10 (extremely happy).**

Extremely unhappy											Extremely happy
0 ○	1 ○	2 ○	3 ○	4 ○	5 ○	6 ○	7 ○	8 ○	9 ○	10 ○	

**11. In the last [x months] have you participated in any of the following extracurricular activities?**

	SELECT ONE ONLY PER ROW	
	Yes	No
a. School sports (ex. Volleyball, football, soccer, cross country, basketball, wrestling, softball, baseball, golf, track and field, FILL RELEVANT EXAMPLES).....	1 ○	2 ○
b. Out of school sports (ex. Martial arts, baseball, basketball, disc golf, golf, running, walking groups, hiking, pickleball, swimming, Zumba, spin class, FILL RELEVANT EXAMPLES).....	1 ○	2 ○
c. Arts (ex. band, theatre, dance, choir, FILL RELEVANT EXAMPLES)	1 ○	2 ○
d. Leadership (ex. National Honor Society, Student Council, Future Farmers of America, Robotics, Debate, United National Indian Tribal Youth, JROTC, Gifted and Talented, FILL RELEVANT EXAMPLES).	1 ○	2 ○
e. Volunteer (ex. Big Brothers Big Sisters, Awareness Walks, Earth Day Trash Pick-Up, High School Concession Volunteer, Community Service Learning Projects, FILL RELEVANT EXAMPLES).	1 ○	2 ○
f. Faith-based (ex. religious/church groups, FILL RELEVANT EXAMPLES).	1 ○	2 ○

## B. Future aspirations and intentions

### 12. How likely do you think it is that you will do the following before you turn 25?

SELECT ONE ONLY PER ROW

	Not at all likely	Somewhat likely	Very likely	Not sure
a. Obtain a GED or high school diploma.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. Obtain a vocational certificate or vocational license (this could be related to a professional trade/business such as construction, carpentry, welding, plumbing).....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. Some college.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. Obtain an Associate's degree.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
e. Obtain a Bachelor's degree.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
f. Obtain a graduate degree.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

### 13. How strongly do you agree or disagree with the following statements?

SELECT ONE ONLY PER ROW

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. I have specific goals for my future career.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. I have a plan for reaching my future career goals.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. Planning a career is not worth the effort..	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. I haven't thought much about my future career.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. If I have a career, I won't be able to enjoy other things in life.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**14. At this time in your life, how strongly do you agree or disagree with each of the following statements about you?**

**SELECT ONE ONLY PER ROW**

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. I plan on delaying future sexual activity until I graduate high school or receive my GED.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. I plan on delaying future sexual activity until I graduate college or complete another education or training program.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. I plan on delaying future sexual activity until I am married.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. I plan to be married before I have a child.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. I plan to have a steady full-time job before I get married.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. I plan to have a steady full-time job before I have a child.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**15. How strongly do you agree or disagree with each of the following statements? [SRAENE Co-Reg Pilot Measure]**

**SELECT ONE ONLY PER ROW**

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. At your age right now, having sex could create problems.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. A person should only have sex if they are married.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. At your age right now, it is okay to have sex if you are dating the same person for a long time. ....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. Sex before marriage can sidetrack me from reaching my goals.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Sex before marriage can lead to emotional strain.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

### C. Healthy relationships and communication

16. This question is related to your relationships with your peers and friends. Please mark how strongly you agree or disagree about each sentence.

SELECT ONE ONLY PER ROW

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. My friends support and care about me.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. My friends think I am a positive person.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. My friends are people who I can trust.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. My friends do nice things for other people.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

17. Now we want you to think about the past 3 months. In the past 3 months, how often would you say you talked about things that really matter with a peer or a friend?

- ☐ None of the time.....1
- ☐ Some of the time.....2
- ☐ Most of the time.....3
- ☐ All of the time.....4

18. Do most of your friends follow the rules their parents make for them?

- ☐ Almost never.....1
- ☐ Some of the time.....2
- ☐ Usually.....3
- ☐ Almost always.....4

19. Do most of your friends stay out of trouble?

- ☐ Almost never.....1
- ☐ Some of the time.....2
- ☐ Usually.....3
- ☐ Almost always.....4

**20. Do most of your friends choose healthy behaviors or activities?**

- ☐ Almost never.....1
- ☐ Some of the time.....2
- ☐ Usually.....3
- ☐ Almost always.....4

**21. Are most of your friends responsible?**

- ☐ Almost never.....1
- ☐ Some of the time.....2
- ☐ Usually.....3
- ☐ Almost always.....4

The next series of questions asks about your parent(s)/caregiver(s).

**22. For each of the following statements, please answer how often this happens.**

**SELECT ONE ONLY PER ROW**

	Never	Rarely	Sometimes	Often	Almost always
a. My parent/caregiver shows me they are proud of me.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. My parent/caregiver takes an interest in my activities.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. My parent/caregiver listens to me when I talk to them.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. I can count on my parent/caregiver to be there when I need them.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. My parent/caregiver and I talk about the things that really matter.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**23. Please read the following statements and tell us how often this happens.**

	SELECT ONE ONLY PER ROW				
	Never	Rarely	Sometimes	Often	Almost always
a. My parent(s)/caregiver(s) know where I am after school.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. If I am going to be home late, I am expected to call my parent(s)/caregiver(s) to let them know.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. I tell my parent(s)/caregiver(s) whom I'm going to be with before I go out.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. When I go out at night, my parent(s)/caregiver(s) know where I am.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. My parent(s)/caregiver(s) know the parents/caregivers of my friends.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. My parent(s)/caregiver(s) know what I watch on television.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. My parent(s)/caregiver(s) know what I am posting on social media such as Instagram, Facebook, Twitter, or Snapchat.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. My parent(s)/caregiver(s) know who I am messaging on social media such as Instagram, Facebook, Twitter, or Snapchat.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**24. In general, how close do you feel to your parent(s)/caregiver(s)?**

- ☐ Not at all close.....1
- ☐ A little close.....2
- ☐ Close.....3
- ☐ Very close.....4

**25. Now we want you to think about the past month. In the past month, how often did you feel like you could share your thoughts and feelings with your parent(s) or caregiver(s)? Please answer about the parent/caregiver you feel most comfortable talking to. [SRAENE Co-Reg Pilot Measure]**

- ☐ None of the time.....1
- ☐ Some of the time.....2
- ☐ Most of the time.....3
- ☐ All of the time.....4

OMB Control No: XXXX-XXXX  
Expiration Date: XX/XX/20XX

26. In the past month, how often did you feel like you could talk with parent(s) or caregiver(s) about things that really matter? Please answer about the parent/caregiver you feel most comfortable talking to.

- ☐ None of the time.....1
- ☐ Some of the time.....2
- ☐ Most of the time.....3
- ☐ All of the time.....4

27. In the past month, how often did you feel like you could count on at least one of your parent(s) or caregiver(s) to be there when you needed them? Please answer about the parent/caregiver you feel most comfortable talking to.

- ☐ None of the time.....1
- ☐ Some of the time.....2
- ☐ Most of the time.....3
- ☐ All of the time.....4

28. Have you ever discussed the following with your parent(s) or caregiver(s)?

SELECT ONE ONLY

	Yes	No
a. School work or grades	1 <input type="radio"/>	0 <input type="radio"/>
b. Shows or videos you watch on TV or online	1 <input type="radio"/>	0 <input type="radio"/>
c. Video games or games you play on your phone	1 <input type="radio"/>	0 <input type="radio"/>
d. Your social media or internet use	1 <input type="radio"/>	0 <input type="radio"/>
e. What you do with friends	1 <input type="radio"/>	0 <input type="radio"/>
f. Who you are dating	1 <input type="radio"/>	0 <input type="radio"/>
g. Your education and career goals	1 <input type="radio"/>	0 <input type="radio"/>
h. Risks of alcohol, tobacco, vaping, or other drug use	1 <input type="radio"/>	0 <input type="radio"/>
i. How to resist pressure to use alcohol, tobacco, vaping products, or other drugs	1 <input type="radio"/>	0 <input type="radio"/>
j. What makes a healthy relationship or marriage	1 <input type="radio"/>	0 <input type="radio"/>
k. How to resist pressure to have sex as a teen	1 <input type="radio"/>	0 <input type="radio"/>
l. Understanding reproduction, pregnancy, and birth	1 <input type="radio"/>	0 <input type="radio"/>
m. Sexually transmitted diseases (STDs) or infections (STIs)	1 <input type="radio"/>	0 <input type="radio"/>
n. Ways to have a healthy relationship without having sex	1 <input type="radio"/>	0 <input type="radio"/>
o. Reasons for waiting to have sex	1 <input type="radio"/>	0 <input type="radio"/>
p. How to talk to your partner about whether to have sex	1 <input type="radio"/>	0 <input type="radio"/>
q. Sexual violence, assault, stalking, or harassment	1 <input type="radio"/>	0 <input type="radio"/>



29. How comfortable are you talking to your parents/caregivers about your decisions related to having sex? Please answer about the parent/caregiver you feel most comfortable talking to. *[SRAENE Co-Reg Pilot Measure]*

- ☐ Not at all comfortable.....1
- ☐ Not too comfortable.....2
- ☐ Somewhat comfortable.....3
- ☐ Comfortable.....4
- ☐ Very comfortable.....5

30. How important is it to you to talk to your parents/caregivers about your decisions related to having sex? Please answer about the parent/caregiver you feel most comfortable talking to. *[SRAENE Co-Reg Pilot Measure]*

- ☐ Not at all important.....1
- ☐ Not too important.....2
- ☐ Somewhat important.....3
- ☐ Important.....4
- ☐ Very important.....5

31. How likely is it that you would start a conversation with your parents/caregivers about your decisions related to having sex? Please answer about the parent/caregiver you feel most comfortable talking to. *[SRAENE Co-Reg Pilot Measure]*

- ☐ Not at all likely.....1
- ☐ Not too likely.....2
- ☐ Somewhat likely.....3
- ☐ Likely.....4
- ☐ Very likely.....5

## D. Reduced risk factors

The next questions are about romantic relationships. Please answer the questions below even if you are not currently in a romantic relationship.

### 32. How would you define your current romantic relationship status?

- m Seriously dating.....1  
m Casually dating.....2  
m Not currently in a relationship or dating.....3

### 33. In healthy romantic relationships, how important is it that...?

SELECT ONE ONLY PER ROW

	Not at all important	Not too important	Somewhat important	Important	Very important
a. you have a partner who listens when you share your thoughts.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. you can trust a partner.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. you can talk about your future dreams and goals with a partner.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. you and a partner have shared values.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. you and a partner have similar interests or like to do the same activities.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. your friends like your partner.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. your family likes your partner.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. you give each other gifts.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
i. you encourage each other when life is hard.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
j. you do not cheat on each other.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
k. you do not call each other names.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
l. you do not push, shove, hit, slap, or grab each other.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**34. How strongly do you agree or disagree with the following statements?**

**SELECT ONE ONLY**

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. Violence between dating partners can improve the relationship.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. There are times when violence between dating partners is ok.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. It's okay to stay in a relationship even if you're afraid of your dating partner.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. Sometimes violence is the only way to express your feelings.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Some couples must use violence to solve their problems.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. Violence between dating partners is a personal matter and people should not interfere.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**35. Whether or not you've dated, how confident are you that you could...?**

**SELECT ONE ONLY PER ROW**

	Not at all confident	Not too confident	Somewhat confident	Confident	Very confident
a. say no to a date.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. break up with someone you no longer like.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. tell your partner how you want to be treated....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. talk out a disagreement with your partner.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**36. How strongly do you agree or disagree with the following statements?**

**SELECT ONE ONLY PER ROW**

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. I believe I can deal with conflicts that arise in my romantic relationships.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. I feel good about my ability to make a romantic relationship last.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. I am very confident when I think of having a stable, long-term relationship.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. I have the skills needed for a lasting, stable romantic relationship.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

37. If you were to go on a date, how confident are you that you could...?

SELECT ONE ONLY PER ROW

	Not at all confident	Not too confident	Somewhat confident	Confident	Very confident
a. set physical intimacy boundaries for yourself <b>before</b> the date.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. resist or say no to your partner if they want to move beyond your physical intimacy boundaries.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. avoid drinking alcohol or using drugs.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. come up with creative and healthy date ideas.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

38. How strongly do you agree or disagree with the following statements?

SELECT ONE ONLY PER ROW

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. I am able to recognize the warning signs in a bad relationship early on.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. I know what to do when I recognize the warning signs in a bad relationship.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

39. In general, how much pressure, if any, do you feel from your friends to have sex? [**SRAENE Co-Reg Pilot Measure**]

- m No pressure.....1
- m A little pressure.....2
- m Some pressure.....3
- m A lot of pressure.....4

40. How many of your friends who are your age think the following things?

SELECT ONE ONLY PER ROW

	None	Some	Half	Most	All
a. Having sex is a good thing for them to do at their age.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. It would be okay for them to have sex if they were dating the same person for a long time.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. They should wait until they are older to have sex.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. They should wait until marriage to have sex.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

The next questions are about sexual consent. Sexual consent means that a person agrees to a sexual activity.

41. How strongly do you agree or disagree with each of the following statements?

SELECT ONE ONLY PER ROW

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. It is important to ask for sexual consent in all relationships whether or not each person has had sex before. ....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. When initiating sexual activity, one should always assume they do not have sexual consent. ....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. Sexual consent should be asked before any kind of sexual behavior, including kissing or touching. ....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. Not asking for sexual consent some of the time is okay. ....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**Only asked of high school students:** The next items ask about things you may have done in the past. Please be as honest as possible. Your answers will be kept private.

42. **Only asked of high school students:** [Have you ever/In the past 3 months have you] hung out alone with someone you were attracted to?

- ☐ Yes.....1  
☐ No.....0

43. **Only asked of high school students:** [Have you ever/In the past 3 months have you] laid down alone with someone you were attracted to?

- ☐ Yes.....1  
☐ No.....0

44. **Only asked of high school students:** [Have you ever/In the past 3 months have you] kissed someone you were attracted to on the mouth?

- ☐ Yes.....1  
☐ No.....0

45. **Only asked of high school students:** [Have you ever/In the past 3 months have you] tongue kissed or French kissed someone?

- ☐ Yes.....1  
☐ No.....0

46. **Only asked of high school students:** [Have you ever/In the past 3 months have you] touched someone's private parts?

*Private parts are the parts of the body covered by underwear or a bra.*

- ☐ Yes.....1  
☐ No.....0

47. **Only asked of high school students:** Other than a doctor or a nurse, [have you ever/in the past 3 months have you] let someone touch your private parts?

- ☐ Yes.....1  
☐ No.....0

48. **Only asked of high school students:** Do you intend to have sex (this includes vaginal, oral, or anal sex) in the next 3 months, if you have the chance?

- ☐ Yes, definitely.....1  
☐ Yes, probably.....2  
☐ No, probably not.....3  
☐ No, definitely not.....4

49. **Only asked of high school students:** If you were to have sex in the next 3 months, do you intend to use or have your partner use a condom?

- ☐ Yes, definitely.....1  
☐ Yes, probably.....2  
☐ No, probably not.....3  
☐ No, definitely not.....4

The next items are about drug and alcohol use.

50. How confident are you that you could say "no" to drinking or using drugs when you don't want to? **[SRAENE Co-Reg Pilot Measure]**

- m Not at all confident.....1  
m A little confident.....2  
m Confident.....3  
m Very confident.....4  
m Completely confident.....5

**51. When making decisions about using drugs or alcohol, how important are the following?**

**SELECT ONE ONLY**

	Not at all important	Not too important	Somewhat important	Important	Very important
a. How it might affect your schoolwork.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. How it might affect your future.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. How it might affect your ability to make decisions in the moment.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. How it might affect your physical health.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. How it might affect your ability to make decisions around sexual activity.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. How it might affect relationships with family and friends.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

**52. During the past 30 days, on how many days did you smoke cigarettes?**

- m 0 days.....1
- m 1-2 days.....2
- m 3-5 days.....3
- m 6-9 days.....4
- m 10-19 days.....5
- m 20-29 days.....6
- m All 30 days.....7

**53. Electronic vapor products include e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods.**

**During the past 30 days, on how many days did you use electronic vapor product?**

- m 0 days.....1
- m 1-2 days.....2
- m 3-5 days.....3
- m 6-9 days.....4
- m 10-19 days.....5
- m 20-29 days.....6
- m All 30 days.....7

**54. During the past 30 days, on how many days did you have at least one drink of alcohol?**

- m 0 days.....1
- m 1-2 days.....2
- m 3-5 days.....3
- m 6-9 days.....4
- m 10-19 days.....5
- m 20-29 days.....6
- m All 30 days.....7

**55. During the past 30 days, on how many days did you have 4 or more drinks of alcohol in a row, that is, within a couple of hours?**

- m 0 days.....1
- m 1-2 days.....2
- m 3-5 days.....3
- m 6-9 days.....4
- m 10-19 days.....5
- m 20-29 days.....6
- m All 30 days.....7

**56. During the past 30 days, on how many times did you use marijuana?**

- m 0 days.....1
- m 1-2 days.....2
- m 3-5 days.....3
- m 6-9 days.....4
- m 10-19 days.....5
- m 20-29 days.....6
- m All 30 days.....7

**57. The next question asks about the use of prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it. For this question, count drugs such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet.**

**During your life, how many times have you taken prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it?**

- m 0 times.....1
- m 1-2 times.....2
- m 3-9 times.....3
- m 10-19 times.....4
- m 20-39 times.....5
- m 40 or more times.....6



The next questions are about online activities and sending messages.

58. How strongly do you agree or disagree with each of the following statements?

	SELECT ONE ONLY PER ROW				
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. Anything you text, send or post online will never truly go away.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. No one can see my social media activity unless I give them permission.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. I sometimes decide not to post something online because I am concerned that it might reflect badly on me in the future.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. It is safe to share your location on social media posts.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Even if someone only knows you by screen name, online profile, phone number or email address, they can probably find you if they try hard enough.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

59. Now think about the past 3 months.

In the past 3 months, have you done any of the following?

	SELECT ONE ONLY PER ROW	
	Yes	No
a. Sent a text message that you later regretted sending.....	1 <input type="radio"/>	0 <input type="radio"/>
b. Posted something on social media that you later regretted.....	1 <input type="radio"/>	0 <input type="radio"/>
c. Shared personal information with someone you only know online or virtually.....	1 <input type="radio"/>	0 <input type="radio"/>
d. Sent or shared sexually suggestive content with friends or romantic partners.....	1 <input type="radio"/>	0 <input type="radio"/>
e. Sent or shared sexually suggestive content with someone you only know online.....	1 <input type="radio"/>	0 <input type="radio"/>

The next questions ask about your mental health.

60. Please indicate how often, in general, each is true:

	SELECT ONE ONLY PER ROW			
	Not at all	A little	Moderately	Very much so
a. I feel agonized over my problems.....	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
b. I feel like I'm missing out on things because I can't make up my mind soon enough.....	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
c. I picture some future misfortune.....	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
d. I keep busy to avoid uncomfortable thoughts.....	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>

61. Now we want you to think about the past 30 days. During the past 30 days, how often have you felt...?

	SELECT ONE ONLY PER ROW				
	Never	Rarely	Sometimes	Often	Almost always
a. you were unable to control the important things in your life.....	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. confident about your ability to handle your personal problems.....	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. that things were going your way.....	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. difficulties were piling up so high that you could not overcome them.....	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

62. During the past 30 days, how often was your mental health not good? (Poor mental health includes stress, anxiety, and depression.)

- m Never.....0
- m Rarely.....1
- m Sometimes.....2
- m Often .....3
- m Almost always.....4

63. Now we want you to think about the past 12 months. During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?

- ☐ Yes.....1
- ☐ No.....0

## E. Improved outcomes related to sexual risk avoidance

64. The following statements are about sexually transmitted diseases or infections (STDs or STIs) and HIV, the virus that can lead to AIDS. Please select whether you think each statement is true, false, or you don't know.

SELECT ONE ONLY PER ROW

	True	False	Don't know
a. If you have an STD your sexual partner probably has it too.....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
b. You can have an STD and feel healthy.....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
c. A person with HIV can give it to other people only if they look or feel sick.	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
d. There is a good chance you will get HIV if you share a sink, shower, or toilet seat with someone who has HIV.....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
e. The HIV virus is present in blood, semen, and vaginal fluid.....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
f. You can get an STD from having oral sex.....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>

65. The following statements are about condoms. Please select whether you think each statement is true, false, or you don't know.

SELECT ONE ONLY PER ROW

	True	False	Don't know
a. It is okay to use the same condom more than once.....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
b. Condoms have an expiration date.....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
c. When putting on a condom, it is important to leave a space at the tip.....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
d. When using a condom, it is important for the man to pull out right after ejaculation.....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
e. Wearing two latex condoms will provide extra protection.....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>

66. The following statements are about pregnancy. Please select whether you think each statement is true, false, or you don't know.

SELECT ONE ONLY PER ROW

	True	False	Don't know
a. The very first time a woman has sex, she cannot get pregnant. ....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
b. During a woman's monthly cycle, there are certain days when she is more likely to become pregnant if she has sex. ....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
c. Pregnancy is much less likely to occur if a couple has sex standing up. ...	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>
d. The only way to completely prevent pregnancy is by not having sex. ....	1 <input type="radio"/>	2 <input type="radio"/>	d <input type="radio"/>

67. **Only asked of high school students:** The next questions are about your sexual behaviors. Please be as honest as possible. Your answers will be kept private.

[In the past FILL RECALL PERIOD,] (H/h)ave you [ever] had sex?

- ☐ Yes.....1  
☐ No.....0  
GO TO 72

68. **Only asked of high school students, with Q61 =Yes:** In the past [FILL RECALL PERIOD] months, how many times have you had sex? Please answer "0" if you have not had sex in the past [FILL RECALL PERIOD] months.

# of times you have had sex

(RANGE 0-100)

69. **Only asked of high school students with Q61 =Yes:** In the past [FILL RECALL PERIOD] months, how many times have you had sex without using a condom? Please answer "0" if you wore a condom every time.

# of times you have had sex without a condom

(RANGE 0-100)

70. **Only asked of high school students with Q61 =Yes:** Have you ever been told by a doctor, nurse, or some other health professional that you had a sexually transmitted diseases (STDs or STIs) like gonorrhea, Chlamydia, syphilis, genital herpes, human papilloma virus (HPV) or HIV?

- ☐ Yes.....1  
☐ No.....0

71. **Only asked of high school students with Q61 =Yes:** To the best of your knowledge, are you currently or have you ever been pregnant, or have you ever gotten someone pregnant?

- ☐ Yes.....1  
☐ No.....0  
☐ Don't know.....D

## F. Program experience (follow up surveys only)

72. **POST SURVEY ONLY.** The next questions are about your experiences with the [FILL NAME] program. Even if you didn't attend all of the sessions or classes in this program, how often during [FILL PROGRAM NAME]...?

	SELECT ONE ONLY PER ROW				
	None of the time	Some of the time	Half of the time	Most of the time	All of the time
a. did you feel interested in program sessions and classes.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. did you feel the material presented was clear....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. did discussions or activities help you to learn program lessons.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. did you have a chance to ask questions about topics or issues that came up in the program.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. did you feel respected as a person.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

73. **POST SURVEY ONLY:** The next questions are about your experiences with the person teaching you the [FILL PROGRAM] class. We refer to this person as the facilitator. How strongly do you agree with the following statements about the facilitator? [SRAENE Co-Reg Pilot Measure]

	SELECT ONE ONLY PER ROW				
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. The facilitator knows my name.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. The facilitator and I connected.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. The facilitator and I formed a good relationship..	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. The facilitator genuinely cares about me.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. The facilitator was enthusiastic about teaching the class.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. The facilitator knows a lot about what they are teaching.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. The facilitator welcomed all student input and feedback.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. The facilitator treated students fairly.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
i. The facilitator responded to questions without judgement.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
j. I wanted to learn about the topics that the facilitator discussed for this course.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

## G. School involvement

74. The following item is about experiences you may have at school. How strongly do you agree or disagree with these statements? *[SRAENE Co-Reg Pilot Measure]*

SELECT ONE ONLY PER ROW

	Strongly disagree	Disagree	Agree	Strongly agree
a. There are adults at this school I could talk with if I had a personal problem.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. If I tell a teacher that someone is bullying me, the teacher will do something to help.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. I am comfortable asking my teachers for help with my schoolwork.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. There is at least one teacher or other adult at this school who really wants me to do well.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

75. How strongly do you agree or disagree with the following statements about your school?

SELECT ONE ONLY PER ROW

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. I feel proud of belonging to my school.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. I am treated with as much respect as other students.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. I feel very different from most other students.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. The teachers respect me.....	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. There's at least one teacher or other adult in my school I can talk to if I have a problem..	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

76. How often would you say you skip school?

- ☐ Never or almost never.....1
- ☐ Sometimes, but less than once a week.....2
- ☐ Not every day, but at least once a week.....3
- ☐ Daily or almost every day.....4

77. How many times have you been suspended or expelled from school?

Select one only

- ☐ Never.....1
- ☐ Once.....2
- ☐ More than once.....3

The next questions are about all of your classes in school.

**78. How much effort do you put into getting involved in discussions during class?**

- ☐ Almost no effort.....1
- ☐ A little bit of effort.....2
- ☐ Some effort.....3
- ☐ Quite a bit of effort.....4
- ☐ A great deal of effort.....5

**79. When your teacher is speaking, how much effort do you put into trying to pay attention?**

- ☐ Almost no effort.....1
- ☐ A little bit of effort.....2
- ☐ Some effort.....3
- ☐ Quite a bit of effort.....4
- ☐ A great deal of effort.....5

**80. How much effort do you put into your homework for your classes?**

- ☐ Almost no effort.....1
- ☐ A little bit of effort.....2
- ☐ Some effort.....3
- ☐ Quite a bit of effort.....4
- ☐ A great deal of effort.....5

**81. Overall, how much effort do you put forth during your classes?**

- ☐ Almost no effort.....1
- ☐ A little bit of effort.....2
- ☐ Some effort.....3
- ☐ Quite a bit of effort.....4
- ☐ A great deal of effort.....5

**82. How much effort do you put into learning all the material for your classes?**

- ☐ Almost no effort.....1
- ☐ A little bit of effort.....2
- ☐ Some effort.....3
- ☐ Quite a bit of effort.....4
- ☐ A great deal of effort.....5

## H. Information and opinions

The next few questions are about things you may have learned in school.

83. In the past 12 months, did you have any classes or sessions on romantic relationships, dating, or marriage?

m Yes.....1

m No.....0

84. In the past 12 months, did you have any classes or sessions on the benefits of waiting to have sex until marriage?

m Yes.....1

m No.....0

85. In the past 12 months, did you have any classes or sessions on the use of condoms.?

m Yes.....1

m No.....0

86. In the past 12 months, did you have any classes or sessions on where to get condoms?

m Yes.....1

m No.....0

87. In the past 12 months, did you have any classes or sessions on sexually transmitted diseases, also known as STDs or STIs?

m Yes.....1

m No.....0

88. In the past 12 months, did you have any classes or sessions on career planning or job readiness?

m Yes.....1

m No.....0

89. In the past 12 months, did you have any classes or sessions on dating violence?

m Yes.....1

m No.....0



## I. Demographics

The next questions are going to ask some questions about you.

90. How old are you?

91. What is your race and/or ethnicity?

Select all that apply

- ☐ American Indian or Alaska Native.....1  
*For example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.*
- ☐ Asian.....2  
*For example, Chinese, Asian Indian, Filipino, Vietnamese, Korean, Japanese, etc.*
- ☐ Black or African American.....3  
*For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.*
- ☐ Hispanic or Latino.....4  
*For example, Mexican, Puerto Rican, Salvadoran, Cuban, Dominican, Guatemalan, etc.*
- ☐ Middle Eastern or North African.....5  
*For example, Lebanese, Iranian, Egyptian, Syrian, Iraqi, Israeli, etc.*
- ☐ Native Hawaiian or other Pacific Islander.....6  
*For example, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese, etc.*
- ☐ White.....7  
*For example, English, German, Irish, Italian, Polish, Scottish, etc.*

92. What is your sex?

Select only one

- ☐ Female.....1
- ☐ Male.....2
- ☐ I prefer not to answer.....n

**93. What grade are you in?**

- m 5th.....1
- m 6th.....2
- m 7th.....3
- m 8th.....4
- m 9th.....5
- m 10th.....6
- m 11th.....7
- m 12th.....8
- m Not enrolled in any school/home-schooled .....9

**94. Who lives with you in your home?**

**Select one or more**

- ☐ Your biological mother.....1
- ☐ Your biological father.....2
- ☐ An adoptive mother.....3
- ☐ A stepmother.....4
- ☐ A foster mother.....5
- ☐ A second mother.....6
- ☐ An adoptive father.....7
- ☐ A stepfather.....8
- ☐ A foster father.....9
- ☐ A second father.....10
- ☐ Your parent's romantic partner, boyfriend, or girlfriend.....11
- ☐ Any grandmothers.....12
- ☐ Any grandfathers.....13
- ☐ Any brothers or sisters.....14
- ☐ Any aunts, uncles, or other relatives.....15
- ☐ Your spouse.....16
- ☐ Your romantic partner, boyfriend, or girlfriend.....17
- ☐ Your children or your partner's children.....18
- ☐ Any other people you are not related to.....19
- ☐ No one else lives with me.....20

95. Which of the following best describes the relationship between your biological mother and biological father?

Select one only

- ☐ They are married to each other.....1
- ☐ They were married to each other but are now separated or divorced.....2
- ☐ They were never married to each other.....3
- ☐ They were married to each other but one or both of my biological parents has died .....4
- ☐ I don't know.....5

**THANK YOU FOR TAKING TIME TO COMPLETE THIS SURVEY!**