



**Evaluation Guide for Administering  
ADHS Pre-Teen and Teen  
Pre/Post Evaluation Tools  
November 2015**

**Using This Manual:**

This manual is a guide for implementing the updated ADHS evaluation tools as required by ADHS of all its teen pregnancy prevention program contractors beginning August 1, 2014. This manual provides instructions on why the evaluation is being administered and how it should be administered by programs.

Any questions about the ADHS evaluation should be addressed to the teen pregnancy prevention program managers.

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## Definitions of Terms

**Active Parental Consent.** Active consent requires parents/legal guardians to sign and return a form if they consent for their child to participate in the program and in the evaluation study.

**Core Curriculum.** An evidence-based curriculum or a population specific curriculum delivered to youth when providing program services.

**IRB.** Institutional Review Board, also known as the ADHS Human Subject Review Board.

**Program Content.** Delivery of the evidence-based curricula or a population specific curriculum.

**Program Participation Year.** A program year that runs from August 1 thru July 30 and is used for administering and collecting data from pre and post surveys. The program participation year has been designed to maximize the number of sessions from which pre and post data will be available, especially for programs that operate in schools.

**Program Session.** A session is the time during which a group of youth meets for a specific lesson (or set of lessons).

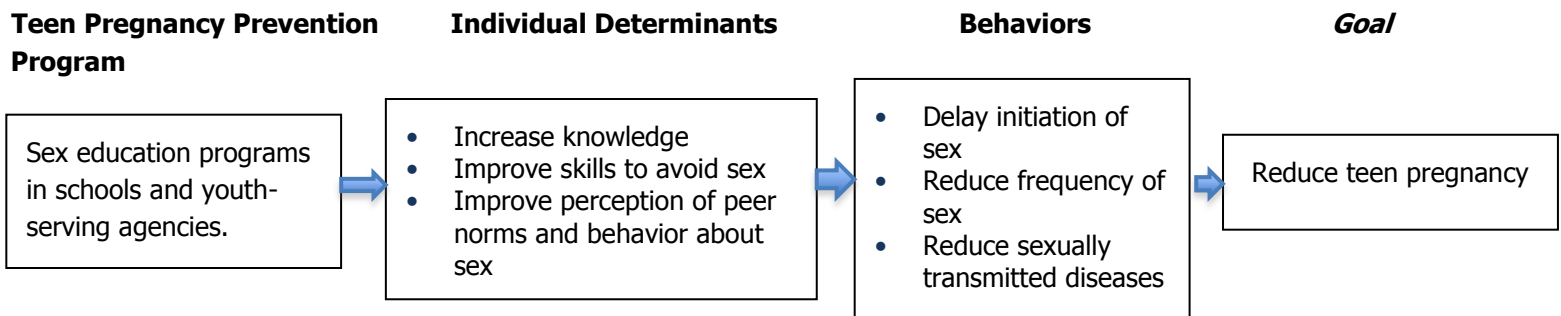
**TPP SharePoint Site.** A centralized, password-protected web-based information portal for the teen pregnancy prevention program that houses program documents, calendars, and announcements.

**Youth Assent.** Willingness to accept and participate in evaluation study even though parental consent has been given.

## Purpose of the Teen Pregnancy Evaluation Tool

When a community is faced with a particular health problem, such as teenage pregnancy, sexually transmitted disease, substance abuse, poor nutrition, insufficient exercise or violence, that community can implement promising programs or initiatives to address that health problem. Despite a decrease since 1998, Arizona continues to have a teen birth rate that is higher than the national trend. The incidence rate of sexually transmitted infections among females age 10-19 years has also shown a dramatic increase in recent years. As a result, the Arizona Department of Health Services has implemented a statewide teen pregnancy prevention initiative. The initiative provides funding to contract with local communities to implement culturally diverse evidence-based programs and strategies designed to reduce the incidence of teenage sexual activity and sexually transmitted disease.

Various theories are used to try to understand and predict how and why people change their unhealthy behaviors to healthier ones. For example, to understand behavioral intent (a plan or likelihood that someone will behave in a particular way in specific situations), a person's attitudes toward that behavior as well as external factors (such as influence from peers or parents) are examined. All of the teen pregnancy prevention programs link key intervention components and activities to key determinants of important behaviors. The purpose of the Teen Pregnancy Prevention evaluation is to assess whether critical program components or activities were implemented and whether they had an impact upon determinants, important behaviors and overall health goals. This concept is demonstrated in the following example of the major components of a sex education program to reduce unintended teen pregnancy.



Pre/post-survey tools were designed to be used to collect data on the Teen Pregnancy Prevention programs that are being conducted throughout Arizona in order to provide an assessment of the impact of the programs on the youth in the programs. Two versions of the survey were developed: Pre-teen and teen. The survey also increases our understanding of how or why the intervention either did or did not work and that assessment can typically guide subsequent program improvement. The survey can also increase our understanding of the relationships among the determinants, behaviors, and health goals. By identifying and targeting those factors that both affect adolescents' decisions about sex and can be changed by interventions, the chances of reducing sexual risk-taking among teens are greatly improved. This information can then lead to the development of more effective program models.

The chart below provides an overview of the evaluation tool items, what's being evaluated and why "it" is being evaluated (i.e., what research studies say about "it" and its impact on teen pregnancy prevention behaviors).

<p align="center"><b>Teen Pregnancy Prevention Evaluation Tool Pre/Post</b></p> <p align="center"><b>Question #/Question</b></p>	<p align="center"><b>What's Being Evaluated</b></p>	<p align="center"><b>Why is it being Evaluated</b></p>
<p><u>Pre-Teen</u></p> <p># 7: Having sex is something only married people should do.</p> <p># 10: It is OK for young people to have sex if they use birth control.</p> <p># 11: Having sex would be a way to show that you love them.</p> <p># 13: A sexual relationship is one of the best things a young person can have.</p> <p><u>Teen</u></p> <p># 7: Having sex is something only married people should do.</p> <p># 8: Having sex is a way to keep one's boyfriend or girlfriend.</p> <p># 12: It is OK for teens to have sex if they use birth control.</p> <p># 13: Having sex would be a way to show that you love them.</p> <p># 15: It would be OK for teens who have been dating for a long time to have sex.</p> <p># 17: A sexual relationship is one of the best things a young person can have.</p>	<p>Views toward abstinence</p>	<p>Youths who resist engaging in sexual activity tend to have friends who are abstinent as well. They also tend to have strong personal beliefs in abstinence and the perception of negative parental reactions. Youths who are sexually active tend to believe that most of their friends are sexually active as well, that rewards outweigh the costs of sexual involvement, that sex overall is rewarding, and that it is all right for unmarried adolescents over age 16 to engage in intercourse.</p>
<p><u>Pre-Teen</u></p> <p># 8: It is OK to say "NO" when someone wants to touch me or wants me to touch them.</p> <p><u>Teen</u></p> <p># 9: It is OK to say "NO" when someone wants to touch me or wants me to touch them.</p>	<p>Refusal skills/Limit Setting</p>	<ul style="list-style-type: none"> <li>• Research studies have shown that sex education based on life skills (critical thinking/ decision making skills, interpersonal communication skills, and coping / self-management skills including refusal skills) was more effective in bringing about changes in adolescent contraceptive use; delay in sexual debut; delay in the onset of alcohol and marijuana use and in developing attitudes and behavior necessary for preventing the spread of HIV/AIDS.</li> </ul>

<p><u>Pre-Teen</u></p> <p># 9: Having sex would be a way to be popular</p> <p><u>Teen</u></p> <p># 10: Having sex would just be doing what everybody else is doing.</p> <p># 11: Having sex would be a way to be popular.</p>	<p>Peer influence/ views towards abstinence</p>	<p>Youths who resist engaging in sexual activity tend to have friends who are abstinent as well. They also tend to have strong personal beliefs in abstinence and the perception of negative parental reactions. Youths who are sexually active tend to believe that most of their friends are sexually active as well, that rewards outweigh the costs of sexual involvement, that sex overall is rewarding, and that it is all right for unmarried adolescents over age 16 to engage in intercourse</p>
<p><u>Pre-Teen</u></p> <p># 12: The best way for young people to avoid an unwanted pregnancy or a sexually transmitted disease (STD) is abstinence.</p> <p># 14: It is likely that young people will get HIV or sexually transmitted diseases if they have sex.</p> <p># 15: It is likely that young people who have sex will get pregnant.</p> <p><u>Teen</u></p> <p>#14: Sexual relationships create more problems than they are worth for teens.</p> <p># 16: The best way for young people to avoid an unwanted pregnancy or a sexually transmitted disease (STD) is abstinence.</p> <p># 18: It is likely that teens will get HIV or sexually transmitted diseases if they have sex.</p> <p># 19: It is likely that teens who have sex will get pregnant.</p>	<p>Potential consequences of teen sexual activity</p>	<ul style="list-style-type: none"> <li>• One review shows that teenagers are not very familiar with consequences of teenage pregnancies. For example, teenagers would have delayed the index pregnancy if they had known about its consequences.</li> <li>• Research shows that early sexual activity is associated with involuntary first intercourse, sexually transmitted diseases (including HIV infection), and unwanted pregnancy.</li> <li>• Early sexual activity is associated with involuntary first intercourse, sexually transmitted diseases (including HIV infection), and unwanted pregnancy. One review shows that teenagers are not very familiar with consequences of teenage pregnancies. For example, teenagers would have delayed the index pregnancy if they had known about its consequences.</li> </ul>

<p><u>Pre-Teen</u></p> <p># 1: I can work out my problems if I try hard enough.</p> <p># 2: It's easy for me to stick to my plans and accomplish my goals.</p> <p># 5: I can usually handle whatever comes my way.</p> <p><u>Teen</u></p> <p># 1: I can work out my problems if I try hard enough.</p> <p># 2: It's easy for me to stick to my plans and accomplish my goals.</p> <p># 5: I can usually handle whatever comes my way.</p>	<p>Problem solving &amp; goal setting skills</p>	<p>The importance of understanding how adolescents make decisions lies in the challenging and difficult problems they face today. For example, unlike their predecessors, some of their decisions may result in being infected with AIDS. If we as adults are to guide adolescents in making decisions, we need to know what information they possess, what information they choose to use, and their cognitive ability.</p>
<p><u>Pre-Teen</u></p> <p># 3: I have a lot to be proud of.</p> <p># 4: I like myself just the way I am.</p> <p># 6: I feel like I am doing everything just about right.</p> <p><u>Teen</u></p> <p># 3: I have a lot to be proud of.</p> <p># 4: I like myself just the way I am.</p> <p># 6: I feel like I am doing everything just about right.</p>	<p>Self-efficacy / Self-esteem</p>	<p>There is as much research supporting the close relationship between self-esteem and teenage pregnancy as any other problem behavior. One study reports that lower self-esteem is often an antecedent to the engagement in premarital sexual relationships and is more likely to be responsible for teen pregnancies than any other single factor. The study found that as self-esteem decreases, sexual attitudes and behavior become more permissive.</p>

<p><u>Pre-Teen</u></p> <p># 16: Using alcohol and/or other drugs makes teens more likely to have sex.</p> <p><u>Teen</u></p> <p># 20: Using alcohol and/or other drugs makes teens more likely to have sex.</p>	<p>Risks of alcohol and drug use</p>	<p>According to The National Center on Addiction and Substance Abuse at Columbia University, Fact Sheets, February 2002. Teens 15 and older who drink are seven times (drug use – five times) more likely to have sexual intercourse and twice as likely to have it with four or more partners than non-drinking teens. At-risk clusters occur when drugs and alcohol are used, meaning that at-risk behaviors tend to cluster together – smoking, drug and alcohol abuse and sexual activity.</p>
<p><u>Pre-Teen</u></p> <p># 17: Young people can have STDs without even knowing it.</p> <p><u>Teen</u></p> <p># 21: Teens can have STDs without even knowing it.</p>	<p>Knowledge of health consequences</p>	<ul style="list-style-type: none"> <li>• One review shows that teenagers are not very familiar with consequences of teenage pregnancies. For example, teenagers would have delayed the index pregnancy if they had known about its consequences.</li> <li>• Research shows that early sexual activity is associated with involuntary first intercourse, sexually transmitted diseases (including HIV infection), and unwanted pregnancy.</li> <li>• Early sexual activity is associated with involuntary first intercourse, sexually transmitted diseases (including HIV infection), and unwanted pregnancy. One review shows that teenagers are not very familiar with consequences of teenage pregnancies. For example, teenagers would have delayed the index pregnancy if they had known about its consequences.</li> </ul>



Pre-Teen

# 18: When boys get really sexually excited, they cannot stop themselves from having sex.

# 19: When girls get really sexually excited, they cannot stop themselves from having sex.

# 20: To prove her love, it is important for a girl to have sex with her partner.

# 21: To prove his love, it is important for a boy to have sex with her partner.

# 22: It is no big deal to pressure a person into having sex.

Teen

# 22: When boys get really sexually excited, they cannot stop themselves from having sex.

# 23: When girls get really sexually excited, they cannot stop themselves from having sex.

# 24: To prove her love, it is important for a girl to have sex with her partner.

# 25: To prove his love, it is important for a boy to have sex with her partner.

#26: Boys should never get their partners drunk to get them to have sex.

#27: Girls should never get their partners drunk to get them to have sex.

# 28: It is no big deal to pressure a person into having sex.

# 29: It is okay to pressure someone to have sex if he/she has had sex in the past.

Healthy relationships

Research indicates that communicating full information to youth empowers them to make healthy choices, and studies in the field of adolescent sexuality conclusively find that teaching adolescents about sex and sexuality does not increase the likelihood that they will have sex. Accurate information about reproduction and sexuality relates to adolescent health, emotional development, pregnancy prevention, and prevention of sexually transmitted diseases (STDs).

<p><u>Pre-Teen</u></p> <p># 23: If you were going out with someone you really liked and did not want to have sex, could you do each of the following:</p> <ol style="list-style-type: none"> <li>Stick with your decision not to have sex?</li> <li>Talk to your girl/boyfriend about your decision not to have sex?</li> <li>Say "NO" to having sex and explain your reasons</li> <li>Stop seeing your girlfriend or boyfriend if he or she keeps pushing you to have sex?</li> </ol> <p><u>Teen</u></p> <p># 30: If you were going out with someone you really liked and did not want to have sex, could you do each of the following:</p> <ol style="list-style-type: none"> <li>Stick with your decision not to have sex?</li> <li>Talk to your girl/boyfriend about your decision not to have sex?</li> <li>Avoid getting into a situation that might lead to sex (like going to a bedroom, drinking, doing drugs)?</li> <li>Say "NO" to having sex and explain your reasons</li> <li>Stop seeing your girlfriend or boyfriend if he or she keeps pushing you to have sex?</li> </ol>	<p>Refusal / Negotiation Skills</p>	<p>Research provides evidence of environmental and personal factors that protect some adolescents from engagement in a variety of risk behaviors and foster positive developmental outcomes. There is also some evidence that these protective factors are significant predictors of change in adolescents' risk behavior over time. There continues to be research investigating the precise nature of the relationships and the conditions under which protective factors moderate risk and foster resilience. Personal resilience strengths consist of cooperation and communication, empathy, problem-solving, self-efficacy, self-awareness, and goals and aspirations.</p>
<p><u>Pre-Teen</u></p> <p># 24: Do you think you will <u>not</u> from sex from now until you <b>complete high school</b>?</p> <p># 25: Do you think you will <u>not</u> from sex from now until you are <b>at least 20 years old</b>?</p> <p># 26: Do you think you will <u>not</u> from sex from now until you <b>are married</b>?</p> <p># 27: How likely do you think it is that you will choose to have sex one or more times in the next year?</p>	<p>Intent to be abstinent</p>	<p>Intention to have sex was a predictor of sexual intercourse or intercourse initiation, participation in sexual behaviors, and greater heterosocial risk (Being involved in a great number of sexual possibility situations such as kissing a peer of the opposite sex and progressively riskier situations).</p> <p>Pro abstinence self-standards were a predictor of delayed initiation of sexual intercourse and sexual abstinence.</p>

<p><u>Teen</u></p> <p># 31: Do you think you will <u>not</u> from sex from now until you <b>complete high school?</b></p> <p># 32: Do you think you will <u>not</u> from sex from now until you are <b>at least 20 years old?</b></p> <p># 33: Do you think you will <u>not</u> from sex from now until you <b>are married?</b></p> <p># 34: How likely do you think it is that you will choose to have sex one or more times in the next year?</p>		
<p><u>Pre-Teen</u></p> <p>#28: Did you feel interested in the program sessions and classes?</p> <p>#29: Did you feel the material presented was clear?</p> <p>#30: Did discussions or activities help you to learn program lessons?</p> <p>#31: Did you feel respected as a person?</p> <p>#32: Did you have a chance to ask questions about topics or issues that came up in the program?</p> <p>#33: Have you ever taken a class that talked about the same information as this class?</p> <p><u>Teen</u></p> <p>#35: Did you feel interested in the program sessions and classes?</p> <p>#36: Did you feel the material presented was clear?</p> <p>#37: Did discussions or activities help you to learn program lessons?</p> <p>#38: Did you feel respected as a person?</p>	<p>Program satisfaction</p>	<p>Assess whether youth are receptive to programs being delivered, and that facilitators are offering a physical and emotionally safe environment for learning.</p>

<p>#39: Did you have a chance to ask questions about topics or issues that came up in the program?</p> <p>#40: Have you ever taken a class that talked about the same information as this class?</p>		
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Research citations found in: Buhi, E.R. & Goodson, P. Predictors of adolescent sexual behavior and intention: A theory-guided systematic review. *Journal of Adolescent Health*. 2007;40:4-21.

# Evaluation Requirements

## I. Evaluation Tools

The evaluation system described in this manual is required for Abstinence Plus, Abstinence Education, and Title V contracted Arizona Department of Health Services (ADHS) teen pregnancy prevention sub-awardees. Sub-awardees may **not** conduct pre or post evaluation activities in addition to these requirements.

The evaluation tools collect information on a youth's age, gender, race, ethnicity, and the Arizona County in which they are participating the program, or if in a program offered by a contracted Tribal Nation. Pre and post results are not linked so no identifiers are needed and only aggregate data will be reported.

The analysis of the data will be used for program management and performance improvement; the abstinence and abstinence plus programs will not be compared to each other. The program will look at a correlation between the results of the pre/post and how it relates to the fidelity of implementation of program lessons. BWCH will be looking for youth to report satisfaction with programs, and increased knowledge, attitudes and intentions to be abstinent or delay in sexual activity, engage in healthy relationships, and remain free of pregnancy and/or sexually transmitted diseases/infections.

The evaluation tools are printed on Scantron format and will **require that they be completed using a #2 pencil**. The following tools will need to be administered by contract type:

### Abstinence Education (lottery funded)

- Administer the ADHS pre and post evaluation tools: Pre-teen and Teen
- Administer the Wyman Teen Outreach Program® pre and post surveys, if delivering TOP®

### Abstinence Plus Education (lottery funded)

- Administer the ADHS pre and post evaluation tools: Pre-teen and
- Administer the Wyman Teen Outreach Program® pre and post surveys, if delivering TOP®

### Title V Abstinence Education (federally funded)

- Administer the ADHS pre and post evaluation tools: Pre-teen and Teen
- Administer the Wyman Teen Outreach Program pre and post surveys, if delivering TOP®.

*Note: The Wyman Teen Outreach Program® (TOP®) pre and post surveys are not on Scantron format. For information on the TOP® pre and post surveys and how to administer them, please refer to Wyman's Teen Outreach Program Evaluation® Guide on [wymconnect.org](http://wymconnect.org).*

## II. Identifying Pre and Post Evaluation Tools

The evaluation tools are colored coded to easily differentiate between the pre evaluation tools and the post evaluation tools. The pre evaluation tools are printed in a **burnt orange color** and **post evaluation tools** are printed in **pink**. Furthermore, each type of tool has its own form number at the top to identify the program type and evaluation tool. Tools are identified as follows:

<b>Program Type</b>	<b>Form ID</b>	<b>Evaluation Tool</b>
Abstinence Education <i>(lottery funded)</i>	PT Pre-A	Pre-teen pre evaluation for Abstinence programs
	PT Post-A	Pre-teen post evaluation for Abstinence programs
	T Pre-A	Teen pre evaluation for Abstinence programs
	T Post-A	Teen post evaluation for Abstinence programs
Abstinence Plus <i>(lottery funded)</i>	PT Pre-AP	Pre-teen pre evaluation for Abstinence Plus programs
	PT Post-AP	Pre-teen post evaluation for Abstinence Plus programs
	T Pre-AP	Teen pre evaluation for Abstinence Plus programs
	T Post-AP	Teen post evaluation for Abstinence Plus programs
Title V <i>(federally funded)</i>	PT Pre-TV	Pre-teen pre evaluation for Title V programs
	PT Post-TV	Pre-teen post evaluation for Title V programs
	T Pre-TV	Teen pre evaluation for Title V programs
	T Post-TV	Teen post evaluation for Title V programs

### **III. Parental Consent Forms**

Active parental consent must be obtained for any and all youth participants, at any venue, **prior** to participating in the program and/or completing the evaluation. An “active consent” requires a parent or legal guardian to sign and return a form if they consent for their child to participate in the program and in the evaluation. Parents may consent to allowing their child to participate in the program and not the evaluation without consequence.

Parental consent forms must be kept by the individual sub-awardee for a period of five years and then will be destroyed according to the individual organization’s records retention policy. The contractor will be required to keep the consent forms in a locked cabinet in a secured area. BWCH Program Mangers will monitor the collection/completion and storage of consent forms at each contractor site visit and will document whether the contractor is in compliance with the outlined requirements.

Programs must use the ADHS provided consent form (*Appendix A*) but may add any additional topics to the forms such as, emergency contact information, allergies, t-shirt sizes, etc.

Programs administering the Wyman Teen Outreach Program® *must use* the consent form (*Appendix B*) which combines the required Wyman evaluation verbiage but may add any additional topics to the forms such as, emergency contact information, allergies, t-shirt sizes, etc.

### **IV. Youth Assent Forms**

In addition to the parental consent forms, youth will have the opportunity to verbally assent to filling out the evaluation. At the time the pre and post evaluation tool is handed out to the youth, the health educators must read to the youth the pre evaluation script or the post evaluation script depending on which tool is being completed (*Appendix C-Pre Evaluation Script / Appendix D-Post Evaluation Script*). This document provides the youth with the assent information letting them know they can opt out of answering certain questions on the evaluation or opt out entirely from taking the evaluation even though their parents have given consent for their participation. The script also provides information on how to complete the Scantron form.

*Note: if a youth opts out of taking the pre or post evaluation, please indicate it on the attendance record.*

## **V. Attendance Records**

ADHS requires that attendance records be kept on every youth participating in a curricula session. With the new evaluation process, attendance sheets must include a checklist indicating if each participating youth has received active parental consent to participate in the program and another column indicating if the youth has received parental consent to participate in the evaluation. A standard attendance sheet has been developed for sub-awardee use (*Appendix E*). Programs are required to use the ADHS attendance sheet as this is the documentation that will be reviewed during site visits for verification that evaluation tools were administered.

Programs administering the Wyman Teen Outreach Program® must use the TOP® Club Sequencing and Participation Tracking tool provided by Wyman (*see TPP SharePoint – Wyman TOP Folder – Forms and Templates*).

## **VI. Timeframe for Data Collection**

The Pre-teen and Teen pre and post evaluation tools will be administered beginning August 1, 2014. Data from pre/post evaluation tools will be organized by “program participation year.” The program participation year has been designed to maximize the number of sessions from which pre and post data will be available, especially for programs that operate in schools. Each program participation year runs from August 1 thru July 31.

## **VII. Administering the Pre/Post Evaluations**

Beginning August 1, 2014, programs will begin administering two (2) separate pre and post tools as follows:

- The **Pre-teen** tools will be administered to youth who are:
  - in 6<sup>th</sup>-8<sup>th</sup> grade in a middle school setting regardless of age **OR**
  - 12-14 years of age in a community-based settings
- The **Teen** tools will be administered to youth who are:
  - In 9<sup>th</sup>-12<sup>th</sup> grade regardless of age in a high school setting **OR**
  - 15-19 in community-based settings

Administering ADHS Pre-teen and Teen Pre/Post Evaluation Tools					
		Pre-Teen Pre Evaluation	Pre-Teen Post Evaluation	Teen Pre Evaluation	Teen Post Evaluation
<b>School-based Settings</b>	Middle School	Yes	Yes	No	No
	High School	No	No	Yes	Yes
<b>Community-based Settings</b>	Participant <14 years of age	Yes	Yes	No	No
	Participants Age 14+	No	No	Yes	Yes

*Note: Program services can still be provided in a school that has declined the administering of the pre/post tools. Programs need to email their assigned program manager providing information on the school that declined the tools and the reason for declining.*

When data collection begins, it is important that the pre-evaluation be administered **before** program content begins for a group of youth. The post evaluation should be administered on the last day **after** the program content is delivered.

The pre evaluation should **not** be administered to any youth starting a program after the third lesson of any session has been delivered. If a youth is leaving the program with more than two lessons left in a session, they would **not** be given the post evaluation.

On the day that evaluations are administered, youth need to be informed that their answers will be kept confidential and will not be shared with facilitators, teachers, administrators, classmates or parents; and that they have the option to not answer questions that may make them feel uncomfortable or may opt out of the survey entirely. A script has been provided that facilitators must read to the youth introducing the evaluations, providing their options, and outlining the instructions that need to be followed when completing the evaluation (*Appendix C-Pre Evaluation Script / Appendix D-Post Evaluation Script*).

Evaluations may only be completed using a **#2 pencil**. The Scantron scanning machine will not register pens or mechanical pencils of any type or color and will not be able to read the responses if anything other than a #2 pencil is used. Youth should also be reminded not to write their names on the evaluation.

Once youth complete the evaluation, at the beginning and end of each curriculum, each student needs to be able to put their completed evaluation into a large envelope that is passed around the class. The facilitator will seal the envelope in front of the class so the youth see that their completed surveys are kept private. The facilitators need to put the sealed envelope in a locked box (portable file) until they deliver/mail the surveys to ADHS.



## VIII. Mailing the Evaluation Tools to ADHS

Pre and post evaluation tools need to be mailed/delivered to ADHS within 5 days of completion by youth to:

Arizona Department of Health Services  
Teen Pregnancy Prevention Program  
150 N. 18<sup>th</sup> Ave., #320  
Phoenix, AZ 85007

Sub-awardees may **not** make copies of the completed evaluations prior to sending to ADHS.

### **Evaluations need to be separated by Pre-teen and Teen evaluations, then by curriculum and setting.**

Sub-awardees need to complete a cover page with every submittal of pre and post evaluations that are delivered to the ADHS Teen Pregnancy Prevention Program (*Appendix M-ADHS Pre and Post Evaluation Cover Page*).

## IX. Evaluation Checklist for Facilitators

ADHS has developed a checklist to assist facilitators when administering the evaluation with youth. Utilizing the checklist will ensure facilitators are following the required steps outlined by the IRB Process (*Appendix F*).

## X. Talking Points for Programs

When reviewing the evaluation tool with the schools and/or parents, the following points may be helpful for program staff:

- The purpose of the Teen Pregnancy Prevention evaluation is to assess whether critical program components or activities were implemented and whether they had an impact upon determinants, important behaviors and overall health goals.
- Only aggregate data is being reported so there is nothing to identify a youth who completes the survey. No names are collected, no identification numbers are assigned, no birthdates, etc.
- Data collected will be reported as aggregate data in three ways: 1) total of all state funded programs; 2) total of all programs within a County; and 2) totals of all programs within a contractor funding source. No data will be reported by individual classes or schools.
- The pre and post evaluation asks for youth to provide their opinions based on the information they learned during their attendance in the program.
- Answers provided by youth on the evaluations will be kept confidential and will not be shared with facilitators, teachers, administrators, classmates or parents.

- Parents or legal guardians are required to give active parental consent for their youth to participate in the evaluation. Although parental consent is given, the youth still have the option to opt out of answer any questions which may make them feel uncomfortable or may opt out of participating in the evaluation at all.
- Parents or legal guardians may request a copy of the evaluation tools at any time.

To assist with explaining why the questions on the tools are being asked, refer to the chart provided under the section “Purpose of the Teen Pregnancy Evaluation Tool.”

## **XII. Spanish-language Documents**

Several documents designed for the evaluation have been translated for use when administering the pre and post evaluation tools:

- Pre and post evaluation tools are not printed in Spanish on Scantron forms. To facilitate answering the questions for youth who are Spanish dominant, ADHS has provided a translation of the evaluation questions (*Pre evaluation - Appendix G and Post evaluation – Appendix H*) that youth can follow while providing their answers on the Scantron form.

*Note: Programs are encouraged to contact their assigned program manager if there is a continuous need for Spanish-language evaluation forms so that ADHS can make arrangements for printing evaluations in Spanish in Scantron format.*

- The facilitator scripts for introducing the pre and post evaluations have been translated (*Appendix I – Pre Evaluation Script and Appendix J – Post Evaluation Script*) and can be given to, or read to those youth who are Spanish dominant and may not understand it read in English.
- The parental Consent form has been translated, both the ADHS (*Appendix K*) and the ADHS/TOP (*Appendix L*) versions.

## Evaluation Project Assurances & Confidentiality Checklist

The Teen Pregnancy Prevention Pre-teen and Teen Pre and Post Evaluation tools and evaluation process has undergone an intensive review by the Human Subjects Review Board. The components outlined in the *Arizona Department of Health Services Evaluation Guide for Administering ADHS Pre-Teen and Teen Pre/Post Evaluation Tools* must be adhered to in order to comply with ADHS IRB requirements.

Teen Pregnancy Prevention Programs must complete this form and submit it to their program manager prior to administering the evaluation.

The \_\_\_\_\_ (organization name) Teen Pregnancy Prevention Program will ensure that all program staff comply with the following requirements while administering the ADHS Pre-teen and Teen pre and post evaluation:

*(Please initial each time and sign below.)*

\_\_\_\_\_ Program staff has read the *Arizona Department of Health Services Evaluation Guide for Administering ADHS Pre-Teen and Teen Pre/Post Evaluation Tools, July 22, 2014.*

\_\_\_\_\_ Program managers will ensure that program facilitators are adhering to the requirements outlined in the ADHS evaluation guide.

\_\_\_\_\_ Program staff will ensure confidentiality at all levels. Program staff will not read or share any information on evaluation tools completed by youth.

\_\_\_\_\_ Program staff will **not** make copies of the pre and post evaluation tools completed by youth.

\_\_\_\_\_ Program staff will mail completed evaluation tools to ADHS within 5 days of completion by youth.

\_\_\_\_\_ Program facilitators will read the script provided in the ADHS evaluation guide prior to administering the pre and post evaluation tools to youth.

\_\_\_\_\_ Program staff will contact their ADHS program manager with any issues that arise in the administering of the pre and post evaluation.

This agreement applies to the programs funded under:

\_\_\_\_\_ Abstinence    \_\_\_\_\_ Abstinence Plus    \_\_\_\_\_ Title V

\_\_\_\_\_  
(Program Manager Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Program Manager Printed Name)

## Frequently Asked Questions

### **What if a parent/legal guardian does not give consent for their child to participate in the evaluation?**

Programs are required to obtain active parental consent in order for youth to participate in the program and evaluation. If no parental consent is given for the evaluation, youth can still receive programming (as long as they have parental consent to participate in the program), but they cannot participate in the evaluation. Facilitators should file the permission slip and write a "N" in the evaluation column of the attendance sheet.

### **What if a youth does not assent to participating in the evaluation?**

Youth have the right to choose not to participate in the evaluation even though their parents have signed the active consent form. In this instance, facilitators should make note on the attendance sheet that the youth did not assent to the evaluation.

### **What if a program participant is 18 and/or emancipated?**

Youth who are legal adults can sign their own active parental consent form.

### **Do programs administer the evaluations to youth that begin the program late or leave the program early?**

The pre evaluation should not be administered to any youth starting a program after the third lesson of any session has been delivered. If a youth is leaving the program with more than two lessons left in a session, they would not be given the post evaluation.

### **What if a youth is absent on the day the evaluation is given?**

The evaluation can be given when the youth returns ensuring that the pre evaluation is administered prior to the youth getting any lessons and the post evaluation is administered after lessons for the session have concluded.

### **Can the facilitator read the questions on the evaluation to the youth?**

Yes, it is acceptable for the facilitators to read the questions as long as they are read in a values neutral manner so that facilitator attitudes do not sway youth responses.

### **What do I do if a youth has limited English proficiency?**

ADHS has provided a Spanish translation of the evaluation questions. Facilitators can either read the questions to the youth or give a copy of the questions to the youth to follow. Youth should provide their answers on the English Scantron form. Additionally, introduction scripts have also been translated into Spanish and facilitators can either read the script to the youth or provide them with a copy.

### **Can the pre/post evaluations be dropped off with school/organization staff to administer before beginning lessons or after lessons have concluded?**

To ensure accuracy of data and meet the requirements outlined by the IRB, the pre and post evaluations must be administered only by the teen pregnancy prevention program facilitator.

**Why are responses to some questions strongly disagree, disagree, etc. and other responses are yes/no?**

The Teen Pregnancy Prevention Evaluation questions were derived from evidenced-based tools with validity and reliability. To maintain as much validity and reliability as possible, the scales on the items were not changed.

**What is the reading level of the tool and how was that determined?**

The reading level of the tool according to the Flesch-Kincaid Grade Level test is at a 5.4 grade reading level.

**Why does the tool ask if a youth is Hispanic or Latino instead of including the option in the Race section?**

Hispanic or Latino is considered “ethnicity” and not “race.” We follow the practice of the U.S. Census Bureau regarding self-reports to determine ethnicity. After a number of years of lobbying by Mexican-American and Hispanic organizations, in 1976 the U.S. Congress passed Public Law 94-311. Called the “Joint resolution relating to the publication of economic and social statistics for Americans of Spanish origin or descent” and sponsored by Rep. Edward Roybal of California, the law mandated the collection of information about U.S. residents of Mexican, Cuban, Puerto Rican, Central American, South American and other Spanish-speaking country origins (Pub. L. No. 94-311, 1976). Subsequent directives from the Office of Management and Budget (OMB) in 1977 outlined the details of data collection for the federal government. A second OMB directive in 1997 added the term “Latino” to “Hispanic” (Rumbaut, 2006). The use of the terms “Hispanic” and “Latino” to describe Americans of Spanish origin or descent is unique to the U.S. and their meaning continue to change and evolve. Outside of the U.S., these terms are not widely used (National Research Council, 2006) and may also have different meanings. Even though OMB has developed a formal definition of Hispanicity, in practice the U.S. Census Bureau and others rely on self-reports to determine ethnicity—someone is Hispanic or Latino if they self-identify as Hispanic or Latino ([Passel and Taylor, 2009](#)). Using this method, the U.S. Census counted 50.5 million Hispanics in 2010.

**How do sub-awardees get copies of the pre and post evaluation tools?**

Sub-awardees will receive an initial one year supply of pre and post tools shipped to them directly from the ADHS printer. ADHS will continue to provide sub-awardees with annual shipments of the tools at the beginning of each program participation year. If programs run out of evaluations during the year, they can request additional supplies from their ADHS program managers. It is important to plan accordingly as it may take up to 4-6 weeks to receive the shipment.

**Where will the documents identified in the appendices of the guide be located?**

All documents found in the appendices except for the pre and post evaluation tools will be posted on the TPP SharePoint site – TPP Info Library – Evaluation folder – ADHS Evaluation folder.

**If my program is delivering the Wyman Teen Outreach Program® which pre and post get administered first?**

It does not matter which pre or post tool sub-awardees administer first as long the ADHS pre evaluation is administered **before** any program content is delivered and the post evaluation is administered **after** all program content is delivered. Wyman offers more flexibility in administer their

pre and post surveys, allowing for their pre survey to be given up to 4 weeks after the start date of Clubs and up to 4 weeks before Clubs end. So if time is an issue and both pre or post cannot be administered at the same time, sub-awardees may want to administer the ADHS pre evaluation first and the Wyman post evaluation first.

**Your required attendance sheet only has enough spaces to record 10 lessons. What if a program has more than 10 lessons?**

The attendance sheet was designed to fit on one 8.5 x 11 sheet of paper. If more lesson slots are needed, programs can add enough lesson columns as needed for delivery of their program, and print the sheet on a larger piece of paper or use multiple attendance sheets.

**How are pre and post evaluations administered in a setting such as juvenile detention where youth repeatedly come and go throughout the program?**

The pre evaluation tool is administered to incoming youth who start the program within the first 3 sessions of the curriculum prior to receiving any program content. The post evaluation tool is administered to outgoing youth ending the program within the last two lessons in the session after receiving all program content.

**Who signs the parental consent forms in situations where youth do not live at home but instead are in juvenile detention or live in a dormitory?**

Parental consent forms must be signed by either the youth's parent or a legally designated guardian.

**If youth are either wards of the court or state do programs need to obtain active parental consent for youth?**

If the legal system states that youth do not require active parental consent the program needs to obtain a letter from an authorized official prior to delivering program content. Otherwise, the legally designated guardian must sign the active parental consent form in order for the youth to participate.

**If incarcerated youth are in the system long enough to participate in the program twice, do they retake the pre and post evaluation?**

Yes, youth will need to take the pre and post evaluation in every session in which they participate.

**If a school/site does not want to have the evaluations administered as written, does that mean our program cannot be delivered in that site?**

If a site will not allow the evaluation tools to be administered, programs need to notify their ADHS program manager immediately by providing the following information: 1) site location (name of school/organization, city, county); 2) reason given for not allowing the evaluation; and 3) contact information for the site. Program services can still be delivered in the site even though the evaluation is not allowed to be administered.

**Some sites have a "blanket" parental consent form that they want used for any program that is being delivered in their location. How does the ADHS parental/consent form fit into this situation?**

Programs with sites requiring use of their own "blanket" parental consent forms must ensure that active parental consent is being required and that the verbiage for the evaluation, as provided by ADHS and/or Wyman be included in the "blanket" parental consent form.

**Can the Scantron forms be folded?**

Scantron forms may **NOT** be folded because the crease(s) can interfere with correct scanning of the form jeopardizing the accuracy in the data.

**Will programs be able to get specific outcome data for their programs only?**

The evaluation outcome data will be reported by county, contractor and tribal nations. Data will only be reported by contractor and tribal nation if the number of participants is 10 or greater. In cases of small samples (but still 10 or more) where there is substantial skewing of data by demographics, where participants may be identifiable, results will not be reported separately.

**Can facilitators take role and complete the attendance section of the attendance sheet?**

Yes, facilitators (or classroom teacher) can take role and sign-in the youth for each session. Youth do not need to check themselves in.

**Do programs have to use new attendance sheet for youth programs?**

Yes, programs must use the ADHS attendance sheets to track youth attendance.

**What happens if the program runs during summer months?**

Youth will still be administered a pre evaluation prior to program delivery and a post evaluation at conclusion of program. Since the program is not linking pre to post evaluations the data collected will be based on the program participant year in which the evaluation was received.

**What is the timing for administering the pre and post evaluations to participants?**

The pre evaluation is administered **before** any program content is delivered and the post evaluation is administered **after** all program content is delivered. The pre evaluation can be administered up to the third session. If a participant enters the program after the third session, they can participate in the program and will only complete a post evaluation. In the event that a participant needs to leave program early, the post evaluation may be administered as early as two sessions prior to conclusion of program.

**How does a program deliver the pre evaluations for participants entering the program late?**

Any pre evaluations that are completed within the first 3 sessions that did not get mailed with the rest of the groups evaluations need to be mailed within 5 days of the youth completing their pre evaluation.

**Can completed Teen and Pre-teen evaluation tools be combined when mailing to ADHS?**

Yes, as long as evaluation tools are mailed within 5 days after completion.

**If a participant will be having a birthday during the duration of the program what age should be entered on evaluation tools?**

Participants should enter their age at the time of completing the evaluations.

**Can the evaluation materials be read aloud to program participants?**

Yes, pre and/or post evaluation questions may be read aloud to participant/s. The facilitator may NOT instruct the participant on what they should respond to the question.

**Can we hand deliver completed pre and post evaluations to ADHS?**

Yes, completed pre and post evaluations may be hand delivered to TPP program staff in an envelope marked with agency name and date. Please note that pre and post evaluations must be delivered within 5 days after program content is delivered.

**How should ITCA Teen Pregnancy Prevention Programs order and deliver evaluation tools?**

All tribal TPP programs will follow guidelines as stated in the ADHS Evaluation Guide. Tribes will order evaluation tools and mail completed pre and post evaluations directly to ADHS program manager.



**Appendix A – ADHS Active Parental Consent Form**

{INSERT AGENCY NAME –PROGRAM NAME}

Active Parental Consent Form

Participant Name:			Date of Birth:
Child's Age:	Grade:	Circle One: MALE    FEMALE	Program Location:
Home Address:			
Parent/Legal Guardian Name:		Work Phone:	Cell Phone:

{INSERT AGENCY NAME} has received a grant from the Arizona Department of Health Services (ADHS) to deliver the {INSERT NAME OF PROGRAM and/or CURRICULUM}. During the time your child will spend in the program, they will explore their own growth and development. This unique program will involve your child in discussions regarding {INSERT KEY PROGRAM/CURRICULUM TOPICS} The program promotes progress in school and avoidance of behaviors which may hinder your child's opportunities for successful growth and achievement; overall the program aims to address and prevent teen pregnancy. All program information has been shared with and approved for delivery by the school/agency administrators. The ADHS funding provided for this program also includes a pre and post evaluation which requires parental consent.

The ADHS evaluation has been reviewed and accepted by the ADHS Human Subjects Review Board. In compliance with the Human Subjects Review Board, no names or birthdates are collected on the evaluation and no identification numbers are assigned. No data will be reported by individuals, classroom or schools. Only aggregate (group) data will be reported so there is nothing to identify a youth who completes the evaluation. All evaluation information will be kept confidential. ADHS and approved contractors operate a secure environment to collect and store information from student participants enlisted in the {INSERT PROGRAM NAME and/or CURRICULUM}. ADHS will collect the following types of information directly from participant evaluations:

- Demographics – Age, race, ethnicity, gender, and county of residence
- Health information - Pregnancy, views toward abstinence, and consequences of teen sexual activity
- Skills – decision-making, refusal, and negotiation skills
- Other – knowledge about healthy relationships, peer influence, self-esteem and self-efficacy
- Opinions about their experience during their participation in the program and program satisfaction

I understand that 1) ADHS will use the participants' responses for the purpose of program improvement, assessing whether critical program components or activities were implemented and whether they had an impact upon determinants, important behaviors and overall health goals; 2) that participating in the evaluation is voluntary and that I may elect for my child to participate or discontinue participation in the program and evaluation at any point without any risk; 3) that if consent is not provided, arrangements will be made in conjunction with school/site personnel to ensure an alternative placement is identified during program facilitation; 4) that ADHS will not require my child to disclose more information than is reasonably necessary as a condition of participation; 5) that I can request to view of the curriculum and/or evaluation tool at any time; 6) that ADHS will not share individual responses with third parties, schools personnel, parents or staff ; and 7) that the associated risks for my child to participate in this survey are minimal and will not exceed any discomfort that may be found in any daily life situations when answering routine survey questions.

I give my consent to allow my child to participate in {INSERT PROGRAM NAME}:       YES       NO

I give my consent to allow my child to participate in the ADHS Evaluation:       YES       NO

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Legal Guardian Name (Please Print): \_\_\_\_\_

**\*\*For questions concerning program and/or ADHS Evaluation: {INSERT CONTACT NAME & PHONE NUMBER} \*\***

**Appendix B – ADHS/Wyman Combined Active Parental Consent Form**



{INSERT AGENCY NAME –PROGRAM NAME}

Active Parental Consent Form

Participant Name:			Date of Birth:
Child's Age:	Grade:	Circle One: MALE    FEMALE	Program Location:
Home Address:			
Parent/Legal Guardian Name:		Work Phone:	Cell Phone:

{INSERT AGENCY NAME} has received a grant from the Arizona Department of Health Services (ADHS) to deliver the {INSERT NAME OF PROGRAM and/or CURRICULUM}. During the time your child will spend in the program, they will explore their own growth and development. This unique program will involve your child in discussions regarding communication, healthy relationships, goals & peer pressure and allow him/her to make a difference in the community through service learning projects. The program promotes progress in school and avoidance of behaviors which may hinder your child's opportunities for successful growth and achievement; overall the program aims to address and prevent teen pregnancy. All program information has been shared with and approved for delivery by the school/agency administrators.

The ADHS funding provided for this program also includes a pre and post evaluation which requires parental consent. There are two separate evaluation administered; one for ADHS and the other Wyman. We require consent for each of these evaluations.

**Consent to Participate in Surveys & Data Collection for ADHS**

The ADHS evaluation has been reviewed and accepted by the ADHS Human Subjects Review Board. In compliance with the Human Subjects Review Board, no names or birthdates are collected on the evaluation and no identification numbers are assigned. No data will be reported by individuals, classroom or schools. Only aggregate (group) data will be reported so there is nothing to identify a youth who completes the evaluation. All evaluation information will be kept confidential. ADHS and approved contractors operate a secure environment to collect and store information from student participants enlisted in the {INSERT PROGRAM NAME and/or CURRICULUM}. ADHS will collect the following types of information directly from participant evaluations:

- Demographics – Age, race, ethnicity, gender, and county of residence
- Health information - Pregnancy, views toward abstinence, and consequences of teen sexual activity
- Skills – decision-making, refusal, and negotiation skills
- Other – knowledge about healthy relationships, peer influence, self-esteem and self-efficacy
- Opinions about their experience during their participation in the program and program satisfaction

I understand that 1) ADHS will use the participants' responses for the purpose of program improvement, assessing whether critical program components or activities were implemented and whether they had an impact upon determinants, important behaviors and overall health goals; 2) that participating in the evaluation is voluntary and that I may elect for my child to participate or discontinue participation in the program and evaluation at any point without any risk; 3) that if consent is not provided, arrangements will be made in conjunction with school/site personnel to ensure an alternative placement is identified during program facilitation; 4) that ADHS will not require my child to disclose more information than is reasonably necessary as a condition of participation; 5) that I can request to view of the curriculum and/or evaluation tool at any time; 6) that ADHS will not share individual responses with third parties, schools personnel, parents or staff ; and 7) that the associated risks for my child to participate in this survey are minimal and will not exceed any discomfort that may be found in any daily life situations when answering routine survey questions.

**Consent to Participate in Survey & Data Collection for Wyman**

Consent to Participate in Surveys & Data Collection I give my consent for my child to participate in Wyman surveys. In compliance with Children’s Online Privacy Protection Act (COPPA), Wyman provides the following information to survey participants. Wyman Center, Inc. operates a secure environment to collect and store information from student participants in its Teen Outreach Program®.

Wyman collects the following types of information directly from TOP® participants through online surveys:

- Opinions about their experience in TOP®
- Demographics – Zip code, ethnicity, gender, most frequent guardian, parents’ education level
- School records - Grade in school, absences, truancy, suspension, course failure, graduation and schooling plans
- Health information - Pregnancy, parenting

I understand Wyman uses the participants’ responses to improve the Teen Outreach Program®. I understand that survey and data collection is voluntary and that my child may choose to participate or discontinue participation at any point in the process without risk of losing Wyman’s services. I am also aware Wyman will not require my child to disclose more information than is reasonably necessary to participate in Teen Outreach Program® as a condition of participation. I am aware Wyman will use and may share responses with third parties to market Teen Outreach Program® to increase awareness and funding and that Wyman will not disclose my child’s identifying information to third parties or program staff. I also understand that the associated risks for my child to participate in this survey are minimal and will not exceed any discomfort that may be found in any daily life situations when answering routine survey questions. For a sample report on how Wyman compiles and reports this data, go to [www.wymantop.org](http://www.wymantop.org)

I give my consent to allow my child to participate in **Wyman’s Teen Outreach Program (TOP®)**:  YES  NO

I give my consent to allow my child to participate in the **ADHS Evaluation**:  YES  NO

I give my consent to allow my child to participate in the Wyman Evaluation:  YES  NO

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Legal Guardian Name (Please Print): \_\_\_\_\_

**\*\*For questions concerning program and/or ADHS Evaluation: {INSERT CONTACT NAME & PHONE NUMBER} \*\***

## **Appendix C – Script for Introducing the Pre Evaluation**

### **Script for Introducing the Pre Evaluation**

Thank you for participating in the program evaluation. All the teens participating in groups like this across Arizona are taking this evaluation. Your answers will be very helpful in improving the program for future participants. This is not a test. We are only gathering your opinions about your attitudes, beliefs, knowledge, and experiences related to the information you'll get during the program you are about to begin.

Your parent or legal guardian has given their permission for you to participate in this evaluation process but your participation is voluntary. If you choose not to participate, you may simply raise your hand and I/we will speak with you privately.

Your answers will be kept confidential which means I will not see them and they will not be shared with your teachers, school administrators, classmates or parents. I will ask you to place your completed evaluation in this large envelope which I will seal after all evaluations have been added and it will be mailed to the Arizona Department of Health Services who will analyze the data. Your responses will be combined with those of other people your age.

When filling out the evaluation:

- Do not write your name on the instruction sheet or on the evaluation. The Arizona Department of Health Services does not need to know who completed the evaluation.
- Complete the tool using only a #2 lead pencil. If you need one, please raise your hand and I will loan you one.
- Fill in the bubbles neatly.
- For the question asking you to identify your race, you may mark all that apply but for the rest of the questions please mark only **one** answer per question.
- We hope that you will answer all the questions, but you may skip any questions you do not wish to answer.
- Answer each question honestly. It is better to leave a question blank than to mark an answer you know is incorrect or not true.
- If you don't understand what a word means or what a question is asking, please ask me.
- When you have finished filling out the evaluation, put your pencil down so I know you're done and hold on to your paper. I will bring the envelope around after everyone has finished. Feel free to read or sit quietly until everyone has completed the evaluation.

Do you have any questions? Ok, let's get started!

## **Appendix D – Script for Introducing the Post Evaluation**

### **Script for Introducing the Post Evaluation**

Thank you for participating in the program evaluation. All the teens participating in groups like this across Arizona are taking this evaluation. Your answers will be very helpful in improving the program for future participants. This is not a test. We know that the questions are the same as the evaluation you took prior to beginning this program but we are re-asking questions on purpose, to see what you think and what your experiences have been after participating in the program.

Your parent or legal guardian has given their permission for you to participate in this evaluation process but your participation is voluntary. If you choose not to participate, you may simply raise your hand and I/we will speak with you privately.

Your answers will be kept confidential which means I will not see them and they will not be shared with your teachers, school administrators, classmates or parents. I will ask you to place your completed evaluation in this large envelope which I will seal after all evaluations have been added and it will be mailed to the Arizona Department of Health Services who will analyze the data. Your responses will be combined with those of other people your age.

When filling out the evaluation:

- Do not write your name on the instruction sheet or on the evaluation. The Arizona Department of Health Services does not need to know who completed the evaluation.
- Complete the survey using only a #2 lead pencil. If you need one, please raise your hand and I will loan you one.
- Fill in the bubbles neatly.
- For the question asking you to identify your race, you may mark all that apply but for the rest of the questions please mark only **one** answer per question.
- We hope that you will answer all the questions, but you may skip any questions you do not wish to answer.
- Answer each question honestly. It is better to leave a question blank than to mark an answer you know is incorrect or not true.
- If you don't understand what a word means or what a question is asking, please ask me.
- When you have finished filling out the evaluation, put your pencil down so I know you're done and hold on to your paper. I will bring the envelope around after everyone has finished. Feel free to read or sit quietly until everyone has completed the evaluation.

Do you have any questions? Ok, let's get started!



**Appendix F – Checklist for Facilitators**

**Evaluation Checklist for Facilitators**

Preparing to administer the evaluation:

- \_\_\_\_\_ Copy of attendance sheet verifying active parental permission slips are on file for each youth to participate in the evaluation.
- \_\_\_\_\_ Gather supplies needed – Pre or post evaluation script, pre-teen or teen evaluation forms, extra #2 pencils, large envelope addressed to the Arizona Department of Health Services / Teen Pregnancy Prevention Program / 150 N. 18<sup>th</sup> Ave., #320 / Phoenix, AZ 85007.
- \_\_\_\_\_ Identify/create a space where teens will be able to focus and have privacy while completing evaluations.
- \_\_\_\_\_ Identify/create a space where teens will be able to go if they do not have active parental consent to participate in the evaluation or if they choose to opt out of participating.

Supplies needed:

- \_\_\_\_\_ Script for administering pre or post evaluation.
- \_\_\_\_\_ Extra #2 pencils.
- \_\_\_\_\_ Large envelope for youth to insert their completed evaluations.

While administering the evaluation:

- \_\_\_\_\_ Stay in a central location in the room so that teens will know you cannot look over their shoulders to see how they are responding.
- \_\_\_\_\_ Be prepared to answer any questions that may arise.
- \_\_\_\_\_ Make efforts to keep the room quiet so that teens are able to completely focus on the evaluation.
- \_\_\_\_\_ Handout pre or post evaluation to youth.
- \_\_\_\_\_ Read script (administering pre or post evaluation) to youth.
- \_\_\_\_\_ Collect completed evaluations from the youth by having them place their completed evaluations in the larger envelope addressed to ADHS.

**Appendix G – Spanish Translation of Pre-teen Pre/Post Questions**

**Spanish Translation of Pre/Post Questions – Pre-Teen Version**

Por favor, díganos lo que piensas acerca de ti. Contesta cada declaración con Totalmente de Acuerdo, De Acuerdo, Ni de Acuerdo Ni en Desacuerdo, Desacuerdo o Totalmente en Desacuerdo.

	Totalmente en Desacuerdo	Desacuerdo	Ni de Acuerdo Ni en Desacuerdo	De Acuerdo	Totalmente de Acuerdo
1. Si hago un esfuerzo puedo resolver mis problemas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Para mi es fácil seguir con mis planes y lograr mis metas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Me siento muy orgulloso de mí mismo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Estoy contento conmigo mismo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Normalmente puedo manejar cualquier cosa que enfrente en mi camino.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Siento que estoy haciendo casi todo bien.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Por favor, díganos qué crees. Contesta cada declaración con Totalmente de Acuerdo, De Acuerdo, Ni de Acuerdo Ni en Desacuerdo, Desacuerdo o Totalmente en Desacuerdo.

	Totalmente en Desacuerdo	Desacuerdo	Ni de Acuerdo Ni en Desacuerdo	De Acuerdo	Totalmente de Acuerdo
1. Tener sexo es solamente para las parejas casadas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Está bien decir “NO” cuando alguien quiere tocarme o que yo le toque.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Tener sexo es una forma de hacerse popular.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Si usan anticonceptivos, está bien que los adolescentes tengan sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Tener sexo es una forma de mostrar tu amor para una persona.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. La mejor forma para evitar un embarazo o enfermedades de transmisión sexual (ETS) es la abstinencia (no tener relaciones sexuales).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Una relación sexual es lo mejor que puede tener un adolescente.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



	Totalmente en Desacuerdo	Desacuerdo	Ni de Acuerdo Ni en Desacuerdo	De Acuerdo	Totalmente de Acuerdo
8. Es probable contraer VIH (Virus de la Inmunodeficiencia Humana) u otras enfermedades de transmisión sexual (ETS) si los adolescentes tienen sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Es probable que ocurra un embarazo entre adolescentes que están teniendo sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Si los adolescentes beben alcohol y/o toman otras drogas es más probable que tengan sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Los adolescentes pueden tener una enfermedad de transmisión sexual sin saber.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Cuando los hombres están sexualmente excitados, no pueden aguantar las ganas de tener sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Cuando las mujeres están sexualmente excitadas, no pueden aguantar las ganas de tener sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Para probar su amor, es importante que una mujer tenga sexo con su pareja.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Para probar su amor, es importante que un hombre tenga sexo con su pareja.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. No es un gran problema presionar a alguien para tener sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Por favor, díganos *qué harías*. Contesta cada declaración con Sí, No, o No Sé.**

23. ¿Si estuvieras saliendo con una persona que te gusta mucho y no querías tener sexo, podrías hacer lo siguiente?	Sí	No	No Sé
a. ¿Mantener tu decisión de no tener sexo?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. ¿Hablar con tu pareja sobre tu decisión de no tener sexo?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. ¿Evitar una situación que podría afectar tu decisión de no tener sexo (como acompañar a alguien a una recámara o tomar drogas)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. ¿Decir "NO" y explicar tus razones de no querer tener sexo?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. ¿Dejar de salir con tu pareja si él o ella te presiona a tener sexo?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Por favor, díganos *qué piensas del futuro*. Contesta cada declaración con Sí, No, o No Sé.

	Sí	No	No Sé
24. ¿Crees que <b>no</b> tendrás sexo desde hoy hasta que te gradúes de la secundaria?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. ¿Crees que <b>no</b> tendrás sexo desde hoy hasta que cumplas 20 años?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. ¿Crees que <b>no</b> tendrás sexo desde hoy hasta el matrimonio?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Por Favor, elija una respuesta que es el más probable.

27. ¿Cuál es la probabilidad de que decidas tener sexo una o más veces este año?

- Estoy seguro/a que no pasará
- Probablemente no pasará
- Hay una probabilidad del 50% de que pudiera o no pasar
- Probablemente sí pasará
- Estoy seguro/a que pasará

**(Note: The following questions are only on the post evaluation tool.)**

Estas son preguntas sobre tu experiencia en este programa. Elija solo una respuesta para cada pregunta. Tus respuestas son privadas y no serán mostradas a nadie.

	Todo el tiempo	La Mayoría del tiempo	Parte del tiempo	Casi Nunca	Nunca
28. ¿Estabas interesado/a en el programa y las clases?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. ¿Estaba clara la información del programa?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. ¿Fueron útiles las pláticas y actividades del programa?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. ¿Te sentiste respetado como persona?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. ¿Tuviste la oportunidad de hacer preguntas sobre los diferentes temas o problemas que ocurrieron durante el programa?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

33. ¿En otra ocasión has participado en un programa o clase que se enfocaba en la misma información o tema?

- Sí       No       No Sé

**Appendix H – Spanish Translation of Teen Pre/Post Questions**

**Spanish Translation of Pre/Post Questions – Teen Version**

Por favor, díganos lo que piensas acerca de ti. Contesta cada declaración con Totalmente de Acuerdo, De Acuerdo, Ni de Acuerdo Ni en Desacuerdo, Desacuerdo o Totalmente en Desacuerdo.

	Totalmente en Desacuerdo	Desacuerdo	Ni de Acuerdo Ni en Desacuerdo	De Acuerdo	Totalmente de Acuerdo
1. Si hago un esfuerzo puedo resolver mis problemas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Para mi es fácil seguir con mis planes y lograr mis metas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Me siento muy orgulloso de mí mismo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Estoy contento conmigo mismo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Normalmente puedo manejar cualquier cosa que enfrente en mi camino.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Siento que estoy haciendo casi todo bien.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Por favor, díganos qué crees. Contesta cada declaración con Totalmente de Acuerdo, De Acuerdo, Ni de Acuerdo Ni en Desacuerdo, Desacuerdo o Totalmente en Desacuerdo.

	Totalmente en Desacuerdo	Desacuerdo	Ni de Acuerdo Ni en Desacuerdo	De Acuerdo	Totalmente de Acuerdo
17. Tener sexo es solamente para las parejas casadas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Tener sexo es una forma de mantener mi relación con mi novio o novia.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. Está bien decir “NO” cuando alguien quiere tocarme o que yo le toque.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Tener sexo es hacer lo que todos están haciendo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. Tener sexo es una forma de hacerse popular.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. Si usan anticonceptivos, está bien que los adolescentes tengan sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Tener sexo es una forma de mostrar tu amor para una persona.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Totalmente en Desacuerdo	Desacuerdo	Ni de Acuerdo Ni en Desacuerdo	De Acuerdo	Totalmente de Acuerdo
24. Las relaciones sexuales crean más problemas que satisfacciones a los adolescentes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. Está bien que los adolescentes tengan sexo si han salido con su pareja por mucho tiempo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. La mejor forma para evitar un embarazo o enfermedades de transmisión sexual (ETS) es la abstinencia (no tener relaciones sexuales).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. Una relación sexual es lo mejor que puede tener un adolescente.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. Es probable contraer VIH (Virus de la Inmunodeficiencia Humana) u otras enfermedades de transmisión sexual (ETS) si los adolescentes tienen sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. Es probable que ocurra un embarazo entre adolescentes que están teniendo sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. Si los adolescentes beben alcohol y/o toman otras drogas es más posible que tengan sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. Los adolescentes pueden tener una enfermedad de transmisión sexual sin saber.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. Cuando los hombres están sexualmente excitados, no pueden aguantar las ganas de tener sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. Cuando las mujeres están sexualmente excitadas, no pueden aguantar las ganas de tener sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. Para probar su amor, es importante que una mujer tenga sexo con su pareja.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. Para probar su amor, es importante que un hombre tenga sexo con su pareja.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. Los hombres jamás deben de emborrachar a su pareja para tener sexo con ellos.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37. Las mujeres jamás deben de emborrachar a su pareja para tener sexo con ellos.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. No es un gran problema presionar a alguien para tener sexo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. Está bien presionar a alguien para tener sexo si ya lo han hecho antes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Por favor, díganos qué harías. Contesta cada declaración con Sí, No, o No Sé.**

30. ¿Si estuvieras saliendo con una persona que te gusta mucho y no querías tener sexo, podrías hacer lo siguiente?			
	Sí	No	No Sé
a. ¿Mantener tu decisión de no tener sexo?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. ¿Hablar con tu pareja sobre tu decisión de no tener sexo?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. ¿Evitar una situación que podría afectar tu decisión de no tener sexo (como acompañar a alguien a una recámara o tomar drogas)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. ¿Decir "NO" y explicar tus razones de no querer tener sexo?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. ¿Dejar de salir con tu pareja si él o ella te presiona a tener sexo?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Por favor, díganos qué piensas del futuro. Contesta cada declaración con Sí, No, o No Sé.**

	Sí	No	No Sé
31. ¿Crees que <b>no</b> tendrás sexo desde hoy hasta que te gradúes de la secundaria?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. ¿Crees que <b>no</b> tendrás sexo desde hoy hasta que cumplas 20 años?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. ¿Crees que <b>no</b> tendrás sexo desde hoy hasta el matrimonio?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Por Favor, elija una respuesta que es el más probable.**

34. ¿Cuál es la probabilidad de que decidas tener sexo una o más veces este año?

- Estoy seguro/a que no pasará
- Probablemente no pasará
- Hay una probabilidad del 50% de que pudiera o no pasar
- Probablemente sí pasará
- Estoy seguro/a que pasará

**(Note: The following questions are only on the post evaluation tool.)**

Estas son preguntas sobre tu experiencia en este programa. Elija solo una respuesta para cada pregunta. Tus respuestas son privadas y no serán mostradas a nadie.

	Todo el tiempo	La Mayoría del tiempo	Parte del tiempo	Casi Nunca	Nunca
35. ¿Estabas interesado/a en el programa y las clases?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. ¿Estaba clara la información del programa?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37. ¿Fueron útiles las pláticas y actividades del programa?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. ¿Te sentiste respetado como persona?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. ¿Tuviste la oportunidad de hacer preguntas sobre los diferentes temas o problemas que ocurrieron durante el programa?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

40. ¿En otra ocasión has participado en un programa o clase que se enfocaba en la misma información o tema?

- Sí       No       No Sé

## **Appendix I – Spanish Translation of Script for Introducing the Pre Evaluation**

### **Script for Introducing the Pre Evaluation -Spanish**

Gracias por participar en la evaluación del programa. Todos los jóvenes participando en grupos como éste en Arizona están tomando esta evaluación. Sus respuestas serán muy útiles para mejorar el programa para futuros participantes. Esto no es una prueba. Sólo juntamos sus opiniones al lado de sus actitudes, creencia, conocimiento y experiencias relacionadas con la información que obtendrá durante el programa que está a punto de comenzar.

Su padre o guardián legal ha dado permiso para participar en este proceso de evaluación, pero su participación es voluntaria. Si usted decide no participar, simplemente coloque su mano y yo/nosotros hablará con usted en privado.

Sus respuestas se mantendrán confidenciales esto significa que yo no los veo y no se compartirán con sus maestros, administradores escolares, compañeros o padres. Les pido que después de completar su evaluación lo coloquen en este sobre que sellará después de todas las evaluaciones se han añadido y se enviará al departamento de servicios de salud de Arizona que analizará los datos. Sus respuestas serán combinadas con los de otras personas de su edad.

Al completar la evaluación:

- No escribe su nombre en la hoja de instrucciones o en la evaluación. El departamento de Servicios de Salud de Arizona no necesita saber quién completó la evaluación.
- Completa la evaluación solo usando un lápiz #2. Si necesita un lápiz #2, por favor levante la mano y yo le presto uno.
- Rellene cuidadosamente las burbujas en la evaluación.
- Para la pregunta que le pide identificar su raza, puede marcar todos los que se aplican, pero para las otras preguntas por favor marque sólo una respuesta por pregunta.
- Esperamos que contestes todas las preguntas, pero usted puede dejar en blanco cualquier pregunta que usted no desea responder.
- Responde a cada pregunta honestamente. Es mejor dejar una pregunta en blanco que al marcar una respuesta que es incorrecta o no es cierto.
- Si no entiendes una palabra o frase, por favor pregúntame por ayuda.
- Cuando haya terminado de llenar la evaluación, pon su lápiz encima de su papel hasta que todos hayan terminado. Voy a traer el sobre a cada participante después de que todos hayan terminado su evaluación. Por favor siéntese en silencio hasta que todos los participantes hayan terminado de completar la evaluación

Hay alguna pregunta? Bueno, empezamos!

**Script for Introducing the Post Evaluation - Spanish**

Gracias por participar en la evaluación del programa. Todos los jóvenes participando en grupos como éste en Arizona están tomando esta evaluación. Sus respuestas serán muy útiles para mejorar el programa para futuros participantes. Esto no es una prueba. Sabemos que las preguntas son las mismas que la evaluación al principio del programa, pero nuevamente estamos pidiendo preguntas a propósito, para ver lo que piensas y cuáles han sido sus experiencias después de participar en el programa.

Su padre o guardián legal ha dado permiso para participar en este proceso de evaluación, pero su participación es voluntaria. Si usted decide no participar, simplemente coloque su mano y yo/nosotros hablaremos con usted en privado.

Sus respuestas se mantendrán confidenciales esto significa que yo no los veo y no se compartirán con sus maestros, administradores escolares, compañeros o padres. Les pido que después de completar su evaluación lo coloquen en este sobre que sellará después de todas las evaluaciones se han añadido y se enviará al departamento de servicios de salud de Arizona que analizará los datos. Sus respuestas serán combinadas con los de otras personas de su edad.

Al completar la evaluación:

- No escriba su nombre en la hoja de instrucciones o en la evaluación. El departamento de Servicios de Salud de Arizona no necesita saber quién completó la evaluación.
- Complete la evaluación solo usando un lápiz #2. Si necesita un lápiz #2, por favor levante la mano y yo le presto uno.
- Rellene cuidadosamente las burbujas en la evaluación.
- Para la pregunta que le pide identificar su raza, puede marcar todos los que se aplican, pero para las otras preguntas por favor marque sólo una respuesta por pregunta.
- Esperamos que conteste todas las preguntas, pero usted puede dejar en blanco cualquier pregunta que usted no desea responder.
- Responda a cada pregunta honestamente. Es mejor dejar una pregunta en blanco que al marcar una respuesta que es incorrecta o no es cierto.
- Si no entiendes una palabra o frase, por favor pregúntame por ayuda.
- Cuando haya terminado de llenar la evaluación, pon su lápiz encima de su papel hasta que todos hayan terminado. Voy a traer el sobre a cada participante después de que todos hayan terminado su evaluación. Por favor siéntese en silencio hasta que todos los participantes hayan terminado de completar la evaluación

Hay alguna pregunta? Bueno, empezamos!



**Appendix K – Spanish Translation of ADHS Active Parental Consent Form**

{INSERT AGENCY NAME –PROGRAM NAME}

Formulario de Consentimiento

Nombre del participante:			Fecha de Nacimiento:
Edad:	Grado:	Sexo: <input type="checkbox"/> Masculino <input type="checkbox"/> Femenino	Escuela/Ubicación del programa:
Dirección:			
Nombre de Padre(s) o Guardián(ana) Legal:		Teléfono:	Celular:

{INSERT AGENCY NAME} recibió un contrato de parte del Departamento de Salud de Arizona para implementar el programa {INSERT NAME OF PROGRAM and/or CURRICULUM}. Durante el programa su hija/o explorará su propio crecimiento y desarrollo de sus metas para el futuro. El programa se enfocará en los siguientes temas: {INSERT KEY PROGRAM/CURRICULUM TOPICS}. Su hija/o aprenderá la importancia del éxito académico y como establecer metas para mantener una vida saludable también aprenderá técnicas para prevenir el embarazo no planeado en adolescentes. La escuela o agencia ya ha aprobado la inclusión de este programa y toda la información relacionada con la implementación del programa.

El contrato con el Departamento de Salud de Arizona también requiere una evaluación del programa que pide su consentimiento. La evaluación ha sido revisada y aprobada por el Consejo de Revisión Institucional para proteger la confidencialidad de su hija/o. La evaluación no colectara nombres u información personal. Los resultados de la evaluación serán reportados agregados y en total del grupo no de una sola persona. El Departamento de Salud de Arizona y sus socios mantendrán todos los resultados de la evaluación seguros. La evaluación será basada en los siguientes datos:

- Información demográfica: edad, raza, etnicidad, sexo, y condado de residencia
- Información de salud: actitud ante el embarazo, practicar el abstinencia, y consecuencias de las relaciones sexuales
- Técnicas: habilidad de tomar decisiones, resistir la presión negativa y habilidad de negociar su posición personal
- Otra información: conocimiento sobre las relaciones saludables, influencia de los compañeros, autoestima y conocimiento sobre sus posiciones personales
- Opinión sobre su experiencia en el programa

Entiendo que 1) los resultados de la evaluación serán colectados por el propósito de mejorar el programa, asesar si los componentes y actividades del programa fueron implementados fielmente y para determinar si hubo un impacto en la actitud o comportamiento ante la salud entre participantes; 2) que participar en el programa y la evaluación es voluntario y que puedo elegir que mi hija/o no participa sin cualquier riesgo; 3) que no exigirá que mi hijo divulgue más información de lo necesario para participar en el programa; 4) que no se compartirá las respuestas individuales con la administración de la escuela; 5) que no divulgará la información personal de mi hija/o con nadie; 6) que los riesgos asociados a la participación de mi hija/o en la evaluación son mínimos y no causaran incomodidad más que tener que responder a las preguntas de la evaluación; y 6) que puedo revisar una copia de la evaluación.

Yo doy mi consentimiento para que mi hija/o participa en el programa {INSERT PROGRAM NAME}:     YES     NO

Yo doy mi consentimiento para que mi hija/o participé en la **Evaluación**:     YES     NO

Firma de Padre/Guardián Legal: \_\_\_\_\_ Fecha: \_\_\_\_\_

Nombre en Imprenta: \_\_\_\_\_

**\*\*Contacto para preguntas sobre el programa o evaluación: {INSERT CONTACT NAME & PHONE NUMBER} \*\***

**Appendix L – Spanish Translation of ADHS/Wyman Combined Active Parental Consent Form**



{INSERT AGENCY NAME –PROGRAM NAME}

Formulario de Consentimiento

Nombre del participante:			Fecha de Nacimiento:
Edad:	Grado:	Sexo: <input type="checkbox"/> Masculino <input type="checkbox"/> Femenino	Escuela/Ubicación del programa:
Dirección:			
Nombre de Padre(s) o Guardián(ana) Legal:		Teléfono:	Celular:

{INSERT AGENCY NAME} recibió un contrato de parte del Departamento de Servicios de Salud de Arizona para implementar el programa {INSERT NAME OF PROGRAM and/or CURRICULUM}. Durante el programa su hija/o explorará su propio crecimiento y desarrollo de sus metas para el futuro. El programa se enfocará en los siguientes temas: {INSERT KEY PROGRAM/CURRICULUM TOPICS}. Su hija/o aprenderá la importancia del éxito académico y como establecer metas para mantener una vida saludable también aprenderá técnicas para prevenir el embarazo no planeado en adolescentes. La escuela o agencia ya ha aprobado la inclusión de este programa y toda la información relacionada con la implementación del programa.

El Departamento de Servicios de Salud de Arizona incluye una evaluación pre y post que requiere el consentimiento de los padres. Hay dos evaluaciones independiente administrado; uno de Wyman Teen Outreach Program® y el otro del Departamento de Servicios de Salud de Arizona. Se requiere consentimiento para cada una de estas evaluaciones.

**Consentimiento para participar en la evaluación del Departamento de Servicios de Salud de Arizona**

La evaluación ha sido revisada y aprobada por el Consejo de Revisión Institucional para proteger la confidencialidad de su hija/o. La evaluación no colectara nombres u información personal. Los resultados de la evaluación serán reportados agregados y en total del grupo no de una sola persona. El Departamento de Salud de Arizona y sus socios mantendrán todos los resultados de la evaluación seguros. La evaluación será basada en los siguientes datos:

- Información demográfica: edad, raza, etnicidad, sexo, y condado de residencia
- Información de salud: actitud ante el embarazo, practicar el abstinencia, y consecuencias de las relaciones sexuales
- Técnicas: habilidad de tomar decisiones, resistir la presión negativa y habilidad de negociar su posición personal
- Otra información: conocimiento sobre las relaciones saludables, influencia de los compañeros, autoestima y conocimiento sobre sus posiciones personales
- Opinión sobre su experiencia en el programa

Entiendo que 1) los resultados de la evaluación serán colectados por el propósito de mejorar el programa, asesar si los componentes y actividades del programa fueron implementados fielmente y para determinar si hubo un impacto en la actitud o comportamiento ante la salud entre participantes; 2) que participar en el programa y la evaluación es voluntario y que puedo elegir que mi hija/o no participa sin cualquier riesgo; 3) que no exigirá que mi hijo divulgue más información de lo necesario para participar en el programa; 4) que no se compartirá las respuestas individuales con la administración de la escuela; 5) que no divulgará la información personal de mi hija/o con nadie; 6) que los riesgos asociados a la participación de mi hija/o en la evaluación son mínimos y no causaran incomodidad más que tener que responder a las preguntas de la evaluación; y 6) que puedo revisar una copia de la evaluación.

## Consentimiento para participar en la evaluación de Wyman Teen Outreach Program®

Yo doy mi consentimiento para que mi hijo/a participe en encuestas de Wyman. En cumplimiento con Children's Online Privacy Protection Act (Ley de la Protección de la Privacidad en el Internet de los Niños, COPPA, por sus siglas en Ingles), Wyman provee la siguiente información a los participantes de las encuestas. Wyman Center, Inc . opera un ambiente seguro para recolectar y guardar información de estudiantes partícipes en su Teen Outreach Program®.

Wyman recolecta los siguientes tipos de información directamente de los participantes de TOP® a través de sus encuestas por Internet:

- Opiniones acerca de su experiencia en TOP®
- Demográficas – Código postal, etnicidad, género, guardián más frecuente, nivel de educación de los padres
- Historiales escolares – grado en la escuela, ausentismos, ausentismos injustificados, suspensiones, cursos reprobados, planes de graduación y planes de estudio
- Información de salud – Embarazo, crianza de los hijos

Entiendo que Wyman usa las respuestas de los participantes para mejorar el Teen Outreach Program®. Entiendo que recolección de datos y de encuestas es voluntario y que mi hijo puede elegir participar o discontinuar su participación en cualquier punto en el proceso sin correr el riesgo de perder los servicios de Wyman. También estoy consciente que Wyman no exigirá que mi hijo divulgue más información de lo razonablemente necesario para participar en Teen Outreach Program® como condición de participación. Estoy consciente que Wyman usará y podría compartir respuestas con terceras partes para comercializar a Teen Outreach Program® para despertar conciencia e incrementar financiación y que Wyman no divulgará la información identificadora de mi hijo a terceras partes o al personal del programa. También entiendo que los riesgos asociados a la participación de mi hijo en esta encuesta son mínimos y no excederán cualquier incomodidad que podría encontrarse en cualquier situación de la vida cotidiana cuando esté contestando preguntas rutinarias de encuesta. Para una muestra de un reporte de cómo Wyman recopila y reporta estos datos, diríjase a [www.wymantop.org](http://www.wymantop.org).

Yo doy mi consentimiento para que mi hija/o participa en el programa **{INSERT PROGRAM NAME}**:

YES       NO

Yo doy mi consentimiento para que mi hija/o participé en la Evaluación del **Departamento de Servicios de Salud de Arizona**:

YES       NO

Yo doy mi consentimiento para que mi hija/o participé en la Evaluación de **Wyman Teen Outreach Program®**:

YES       NO

Firma de Padre/Guardián Legal: \_\_\_\_\_ Fecha: \_\_\_\_\_

Nombre en Imprenta: \_\_\_\_\_

\*\*Contacto para preguntas sobre el programa o evaluación: **{INSERT CONTACT NAME & PHONE NUMBER}** \*\*

**Appendix M – ADHS Pre and Post Evaluation Cover Page**

**Arizona Department of Health Services**

**ADHS Pre and Post Evaluation Cover Page**

Please complete and include this cover page with every submittal of pre and post evaluations that are delivered to the ADHS Teen Pregnancy Prevention Program. **Please note that evaluations will now need to be separated by Pre-teen and Teen evaluations, then by curriculum and setting.**

**I. Contractor (select contractor & type of evaluation):**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Apache County                 | <input type="checkbox"/> Cochise County  | <input type="checkbox"/> Mohave County               |
| <input type="checkbox"/> Arizona Facts of Life         | <input type="checkbox"/> Coconino County | <input type="checkbox"/> Navajo County               |
| <input type="checkbox"/> Arizona Youth Partnership     | <input type="checkbox"/> Gila County     | <input type="checkbox"/> Pima County                 |
| <input type="checkbox"/> BJ Foundation                 | <input type="checkbox"/> Graham County   | <input type="checkbox"/> Pima Prevention Partnership |
| <input type="checkbox"/> Campesinos Sin Fronteras      | <input type="checkbox"/> Greenlee County | <input type="checkbox"/> U of A Cooperative Maricopa |
| <input type="checkbox"/> Capacity Builders             | <input type="checkbox"/> ITCA - _____    | <input type="checkbox"/> Yavapai County              |
| <input type="checkbox"/> Catholic Charities (Maricopa) | <input type="checkbox"/> La Paz County   | <input type="checkbox"/> Yuma County                 |
| <input type="checkbox"/> Catholic Charities (Yavapai)  | <input type="checkbox"/> Maricopa County |  |
| <input type="checkbox"/> Catholic Charities (Title V)  |  |  |

**II. Program Setting (select only one):**

- |  |                                      |  |
|--|--------------------------------------|--|
| <input type="checkbox"/> Middle School | <input type="checkbox"/> High School | <input type="checkbox"/> Community-based |
|--|--------------------------------------|--|

**III. Curriculum (select only one):**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Choosing the Best Series       | <input type="checkbox"/> Native Stand                                 | <input type="checkbox"/> Smart Girls            |
| <input type="checkbox"/> Cuídate                        | <input type="checkbox"/> Promoting Health among Teens (Abstinence)    | <input type="checkbox"/> Teen Outreach Program® |
| <input type="checkbox"/> Draw the Line/Respect the Line | <input type="checkbox"/> Promoting Health Among Teens (Comprehensive) | <input type="checkbox"/> Wise Guys              |
| <input type="checkbox"/> Making A Difference            | <input type="checkbox"/> Reducing the Risk                            | <input type="checkbox"/> Worth the Wait         |
| <input type="checkbox"/> Making Proud Choices           |   |   |