

# SRAE Participant Entry and Exit Surveys

## Change Guide

Updated January 2022

This document describes updates to performance measures included in the Sexual Risk Avoidance Education (SRAE) participant entry and exit surveys. The purpose of the updates is to reduce burden on participants and to ensure alignment between items and the Title V SRAE, Section 510 legislation and General Departmental (GD) SRAE legislation. The text of the Title V SRAE, Section 510 legislation and General Departmental (GD) SRAE legislation is included at the end of this document for your reference. ***This Change Guide only covers the items that have been changed; for a complete listing of the measures please refer to the Entry and Exit Survey documents.***

There are four separate tables in the guide: 1) middle school entry survey items, 2) middle school exit survey items, 3) high school entry survey items, and 4) high school exit survey items. The tables include only those items in the SRAE participant entry and exit surveys that have been updated. **Please note that, for programs participating in impact evaluations, items #8-11 are excluded from middle school entry surveys and items #8-15 are excluded from high school entry surveys. Programs participating in impact evaluations will use the same version of the exit survey as other grantees.**

Legend: Text in **Green** has been **added** to survey questions.  
Text in **red with a strikethrough** has been **deleted** from survey questions.  
**Highlighted** items reflect a **change in numbering in the updated version** of survey.

**Table 1. Middle school entry survey measures (NOTE: Items #8-11 excluded from impact study surveys)**

Original Middle School Entry Survey Item Showing Text Deleted	Updated Middle School Entry Survey Item
<p><b>3. When you are at home or with your family, what language or languages do you usually speak?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> English</li> <li><input type="checkbox"/> Spanish</li> <li><input type="checkbox"/> Other (<del>please</del>-specify): _____</li> </ul>	<p><b>3. When you are at home or with your family, what language or languages do you usually speak?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> English</li> <li><input type="checkbox"/> Spanish</li> <li><input type="checkbox"/> Other (specify): _____</li> </ul>
<p><b>5. What is your race?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> American Indian or Alaska Native</li> <li><input type="checkbox"/> Asian</li> <li><input type="checkbox"/> Black or African American</li> <li><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</li> <li><input type="checkbox"/> White or Caucasian</li> </ul>	<p><b>5. What is your race?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> American Indian or Alaska Native</li> <li><input type="checkbox"/> Asian</li> <li><input type="checkbox"/> Black or African American</li> <li><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</li> <li><input type="checkbox"/> White or Caucasian</li> <li><input type="checkbox"/> <b>Other (specify): _____</b></li> </ul>
<p><b>7. Are you currently...?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Living with family [parent(s), guardian, grandparents, or other relatives]</li> <li><input type="checkbox"/> In foster care, living with a family</li> <li><input type="checkbox"/> In foster care, living in a group home</li> <li><input type="checkbox"/> Couch surfing or moving from home to home</li> <li><input type="checkbox"/> Living <del>in a place not meant to be a residence, such as</del> outside, in a tent city or homeless camp, in a car, in an abandoned vehicle or in an abandoned building</li> <li><input type="checkbox"/> Staying in an emergency shelter or transitional living program</li> <li><input type="checkbox"/> Staying in a hotel or motel</li> <li><input type="checkbox"/> In juvenile detention, <del>jail, prison or another correctional facility</del>, or under the supervision of a probation officer</li> <li><input type="checkbox"/> None of the above</li> </ul>	<p><b>7. Are you currently...?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Living with family [parent(s), guardian, grandparents, or other relatives]</li> <li><input type="checkbox"/> In foster care, living with a family</li> <li><input type="checkbox"/> In foster care, living in a group home</li> <li><input type="checkbox"/> Couch surfing or moving from home to home</li> <li><input type="checkbox"/> Living outside, in a tent city or homeless camp, in a car, in an abandoned vehicle or in an abandoned building</li> <li><input type="checkbox"/> Staying in an emergency shelter or transitional living program</li> <li><input type="checkbox"/> Staying in a hotel or motel</li> <li><input type="checkbox"/> In juvenile detention <b>center, juvenile group home, and/or</b> under the supervision of a probation officer</li> <li><input type="checkbox"/> None of the above</li> </ul>

Original Middle School Entry Survey Item Showing Text Deleted	Updated Middle School Entry Survey Item
<p><b>8. In the past three months, have you...</b> MARK ONLY ONE ANSWER PER ROW</p> <p>a. alcohol (more than a few sips, including beer, wine, and liquor)?</p> <p>b. smoked cigarettes?</p> <p><del>e. smoked cigars, cigarillos, or little cigars</del></p> <p><del>d.</del> <b>c.</b> used other tobacco products (such as chewing tobacco, snuff, dip, or snus)?</p> <p><del>e.</del> <b>d.</b> used electronic vapor products (such as JUUL, Vuse, MarkTen, and blu)? (electronic vapor products include e-cigarettes, vapes, vape pens, e-cigars, hookahs, hookah pens, and mods)</p> <p>f. <b>e.</b> used marijuana (also called pot, weed, or cannabis)?</p> <p>g. <del>f.</del> taken prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it?</p>	<p><b>Items B and C have been combined.</b></p> <p>b. smoked cigarettes <b>or cigar products (cigars, cigarillos, or little cigars)?</b></p>
<p><b>9. In the past three months, how often would you say you...</b> MARK ONLY ONE ANSWER PER ROW</p> <p>a. resisted or said no to peer pressure?</p> <p>b. managed your emotions in healthy ways (for example, ways that are not hurtful to you or others)?</p> <p><del>e. worked together to find a solution when you disagreed with a friend?</del></p> <p><del>d. chose to spend time with friends that keep you out of trouble?</del></p> <p><del>e. were respectful of others?</del></p> <p>f. <b>c.</b> thought about the consequences before making a decision?</p>	<p><b>Items C, D, and E have been deleted.</b></p> <p><b>New Item D</b></p> <p><b>d. talked with your parent, guardian, or caregiver about sex?</b></p>

Original Middle School Entry Survey Item Showing Text Deleted	Updated Middle School Entry Survey Item
<p><b>10. For each of the items below, please mark how true each statement is of you.</b> MARK ONLY ONE ANSWER PER ROW</p> <p>a. I make plans to reach my goals.</p> <p>b. I care about doing well in school.</p> <p>c. I save money to get things I want.</p> <p><del>d. I plan to graduate high school or get my GED.</del></p> <p><del>e. I plan to get more education and/or training after high school or completing my GED.</del></p> <p><del>f. I plan to get a steady full-time job after school.</del></p> <p><del>g. I feel comfortable talking to my parent, guardian, or caregiver about sex.</del></p> <p><b>h.d.</b> I would speak up or ask for help if I am being bullied in person or online, via text, while gaming, or through other social media.</p> <p><b>i.e.</b> I would speak up or ask for help if others are being bullied in person or online, via text, while gaming, or through other social media.</p>	<p>Items D, E, F, and G have been deleted.</p>
<p><b>11. For each of the items below, please mark how true each statement is of you.</b> MARK ONLY ONE ANSWER PER ROW</p> <p>a. I understand what makes a relationship healthy.</p> <p><del>b. I look for information and resources about dating violence (for example, websites, social media, hotlines, organizations, etc.).</del></p> <p><b>e.b.</b> I would be able to resist or say no to someone <del>I am dating or going out with</del> if they pressured me to participate in <b>sexual</b> acts, such as kissing, touching private parts, or <del>sexual intercourse</del>.</p> <p><del>d. I would talk to a friend if someone I am dating or going out with makes me uncomfortable, hurts me, or pressures me to do things I don't want to do.</del></p> <p><b>e.c.</b> I would talk to a trusted adult (for example, a family member, teacher, counselor, coach, etc.) if someone <del>I am dating or going out with</del> makes me uncomfortable, hurts me, or pressures me to do things I don't want to do.</p>	<p>Items B, D, and F have been deleted.</p> <p><b>Item C has been modified and is now item B.</b> I would be able to resist or say no to someone if they pressured me to participate in acts, such as kissing, touching private parts, or sex.</p> <p><b>Item E has been modified and is now Item C.</b> I would talk to a trusted <b>person</b>/adult (for example, a family member, teacher, counselor, coach, etc.) if someone makes me uncomfortable, hurts me, or pressures me to do things I don't want to do.</p>

~~f. I would talk to a trusted adult if someone *other than* the person I am dating or going out with makes me uncomfortable, hurts me, or pressures me to do things I don't want to do.~~

**Table 2. Middle school exit survey measures**

Original Middle School Exit Survey Item Showing Text Deleted	Updated Middle School Exit Survey Item
<p><b>3. When you are at home or with your family, what language or languages do you usually speak?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> English</li> <li><input type="checkbox"/> Spanish</li> <li><input type="checkbox"/> Other (<del>please</del>-specify)</li> </ul>	<p><b>3. When you are at home or with your family, what language or languages do you usually speak?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> English</li> <li><input type="checkbox"/> Spanish</li> <li><input type="checkbox"/> Other (specify): _____</li> </ul>
<p><b>5. What is your race?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> American Indian or Alaska Native</li> <li><input type="checkbox"/> Asian</li> <li><input type="checkbox"/> Black or African American</li> <li><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</li> <li><input type="checkbox"/> White or Caucasian</li> </ul>	<p><b>5. What is your race?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> American Indian or Alaska Native</li> <li><input type="checkbox"/> Asian</li> <li><input type="checkbox"/> Black or African American</li> <li><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</li> <li><input type="checkbox"/> White or Caucasian</li> <li><input type="checkbox"/> <b>Other (specify):</b> _____</li> </ul>
<p><b>7. Are you currently...?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Living with family [parent(s), guardian, grandparents, or other relatives]</li> <li><input type="checkbox"/> In foster care, living with a family</li> <li><input type="checkbox"/> In foster care, living in a group home</li> <li><input type="checkbox"/> Couch surfing or moving from home to home</li> <li><input type="checkbox"/> Living <del>in a place not meant to be a residence, such as</del> outside, in a tent city or homeless camp, in a car, in an abandoned vehicle or in an abandoned building</li> <li><input type="checkbox"/> Staying in an emergency shelter or transitional living program</li> <li><input type="checkbox"/> Staying in a hotel or motel</li> <li><input type="checkbox"/> In juvenile detention, <del>jail, prison or another correctional facility,</del> or under the supervision of a probation officer</li> <li><input type="checkbox"/> None of the above</li> </ul>	<p><b>7. Are you currently...?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Living with family [parent(s), guardian, grandparents, or other relatives]</li> <li><input type="checkbox"/> In foster care, living with a family</li> <li><input type="checkbox"/> In foster care, living in a group home</li> <li><input type="checkbox"/> Couch surfing or moving from home to home</li> <li><input type="checkbox"/> Living outside, in a tent city or homeless camp, in a car, in an abandoned vehicle or in an abandoned building</li> <li><input type="checkbox"/> Staying in an emergency shelter or transitional living program</li> <li><input type="checkbox"/> Staying in a hotel or motel</li> <li><input type="checkbox"/> In juvenile detention <b>center, juvenile group home, and/or</b> under the supervision of a probation officer</li> <li><input type="checkbox"/> None of the above</li> </ul>

Original Middle School Exit Survey Item Showing Text Deleted	Updated Middle School Exit Survey Item
<p><b>8. Has being in the program made you more likely, about the same, or less likely to...</b> <i>(Note: If the program has not affected your likelihood to do any of the following, choose "About the same.")</i></p> <p>MARK ONLY ONE ANSWER PER ROW</p>	<p>Items B &amp; C have been combined.</p> <p>b. make decisions to not smoke cigarettes <b>or cigar products (cigars, cigarillos, or little cigars)?</b></p>
<p>a. make decisions to not drink alcohol?</p>	
<p>b. make decisions to not smoke cigarettes?</p>	
<p><del>e. make decisions to not smoke cigars, cigarillos, or little cigars?</del></p>	
<p><del>d.</del> make decisions to not use other tobacco products (such as chewing tobacco, snuff, dip, or snus)?</p>	
<p><del>e.</del> make decisions to not use electronic vapor products (such as JUUL, Vuse, MarkTen, and blu)? (electronic vapor products include e- cigarettes, vapes, vape pens, e-cigars, hookahs, hookah pens, and mods)</p>	
<p><del>f.</del> make decisions to not use marijuana (also called pot, weed, or cannabis)?</p>	
<p><del>g.</del> make decisions to not take prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it?</p>	

Original Middle School Exit Survey Item Showing Text Deleted	Updated Middle School Exit Survey Item
<p><b>9. Has being in the program made you more likely, about the same, or less likely to...</b> <i>(Note: If the program has not affected your likelihood to do any of the following, choose "About the same.")</i></p> <p>MARK ONLY ONE ANSWER PER ROW</p> <p>a. resist or say no to peer pressure?</p> <p>b. manage your emotions in healthy ways (for example, ways that are not hurtful to you or others)?</p> <p><del>c. work together to find a solution when you disagree with a friend?</del></p> <p><del>d. choose to spend time with friends that keep you out of trouble?</del></p> <p><del>e. be respectful of others?</del></p> <p><b>f.c.</b> think about the consequences before making a decision?</p>	<p>Items C, D, and E have been deleted.</p> <p>New Item D</p> <p><b>d. talk with your parent, guardian, or caregiver about sex?</b></p>
<p><b>10. Has being in the program made you more likely, about the same, or less likely to...</b> <i>(Note: If the program has not affected your likelihood to do the following, choose "About the same.")</i></p> <p>MARK ONLY ONE ANSWER PER ROW</p> <p>a. make plans to reach your goals?</p> <p>b. care about doing well in school?</p> <p><del>c. save money to get something you want?</del></p> <p><del>d. graduate high school or get your GED?</del></p> <p><del>e. get more education and/or training after high school or completing your GED?</del></p> <p><del>f. get a steady full-time job after school?</del></p> <p><del>g. feel comfortable talking to your parent, guardian, or caregiver about sex?</del></p> <p><del>h. speak up or ask for help if you were being bullied in person or online, via text, while gaming, or through other social media?</del></p> <p><del>i. speak up or ask for help if others were being bullied in person or online, via text, while gaming, or through other social media?</del></p>	<p>Items C through I have been deleted.</p>



Original Middle School Exit Survey Item Showing Text Deleted	Updated Middle School Exit Survey Item
<p><b>11. Has being in the program made you more likely, about the same, or less likely to...</b> (Note: If the program has not affected your likelihood to do <del>any of</del> the following, choose "About the same.")</p> <p>MARK ONLY ONE ANSWER PER ROW</p> <p>a. better understand what makes a relationship healthy?</p> <p><del>b. look for information and resources about dating violence (for example, websites, social media, hotlines, organizations, etc.).?</del></p> <p><b>e.b.</b> resist or say no to someone <del>you are dating or going out with</del> if they pressure you to participate in <del>sexual</del> acts, such as kissing, touching private parts, or <del>sexual intercourse</del>?</p> <p><del>d. talk to a friend if someone you are dating or going out with makes you uncomfortable, hurts you, or pressures you to do things you don't want to do?</del></p> <p><b>e.c.</b> talk to a trusted adult (for example, a family member, teacher, counselor, coach, etc.) if someone <del>you are dating or going out with</del> makes you uncomfortable, hurts you, or pressures you to do things you don't want to do?</p> <p><del>f. talk to a trusted adult if someone other than the person you are dating or going out with makes you uncomfortable, hurts you, or pressures you to do things you don't want to do?</del></p>	<p>Items B, D, and F have been deleted.</p> <p><b>Item C has been modified and is now item B.</b> resist or say no to someone if they pressure you to participate in acts, such as kissing, touching private parts, or sex?</p> <p><b>Item E has been modified and is now Item C.</b> talk to a trusted <b>person</b>/adult (for example, a family member, teacher, counselor, coach, etc.) if someone makes you uncomfortable, hurts you, or pressures you to do things you don't want to do?.</p>

Original Middle School Exit Survey Item Showing Text Deleted	Updated Middle School Exit Survey Item
<p><b>13. Even if you didn't attend all of the sessions or classes in this program, how often <i>in this program</i>...</b> MARK ONLY ONE ANSWER PER ROW</p> <p>a. did you feel interested in program sessions and classes?</p> <p>b. did you feel the material presented was clear?</p> <p>c. did discussions or activities help you to learn program lessons?</p> <p>d. did you have a chance to ask questions about topics or issues that came up in the program?</p> <p>e. did you feel respected as a person?</p>	<p>Item F has been deleted.</p>
<p><del>f. were you picked on, teased, or bullied in this program?</del></p> <p><del><b>14. Now thinking about <u>all</u> youth in this program, how often...</b></del> <del>MARK ONLY ONE ANSWER</del></p> <p><del>a. were any youth in this program picked on, teased, or bullied?</del></p>	<p>Item 14 has been deleted.</p>

**Table 3. High school entry survey measures (NOTE: Items #8-15 excluded from impact study surveys)**

Original High School Entry Survey Item Showing Text Deleted	Updated High School Entry Survey Item
<p><b>1. How old are you?</b> MARK ONLY ONE ANSWER</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> 10</li> <li><input type="checkbox"/> 11</li> <li><input type="checkbox"/> 12</li> <li><input type="checkbox"/> 13</li> <li><input type="checkbox"/> 14</li> <li><input type="checkbox"/> 15</li> <li><input type="checkbox"/> 16</li> <li><input type="checkbox"/> 17</li> <li><input type="checkbox"/> 18</li> <li><input type="checkbox"/> 19</li> <li><input type="checkbox"/> 20 <del>or older</del></li> </ul>	<p><b>1. How old are you?</b> MARK ONLY ONE ANSWER</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> 10</li> <li><input type="checkbox"/> 11</li> <li><input type="checkbox"/> 12</li> <li><input type="checkbox"/> 13</li> <li><input type="checkbox"/> 14</li> <li><input type="checkbox"/> 15</li> <li><input type="checkbox"/> 16</li> <li><input type="checkbox"/> 17</li> <li><input type="checkbox"/> 18</li> <li><input type="checkbox"/> 19</li> <li><input type="checkbox"/> 20</li> </ul>
<p><b>3. When you are at home or with your family, what language or languages do you usually speak?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> English</li> <li><input type="checkbox"/> Spanish</li> <li><input type="checkbox"/> Other (<del>please</del>-specify)</li> </ul>	<p><b>4. When you are at home or with your family, what language or languages do you usually speak?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> English</li> <li><input type="checkbox"/> Spanish</li> <li><input type="checkbox"/> Other (specify): _____</li> </ul>
<p><b>5. What is your race?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> American Indian or Alaska Native</li> <li><input type="checkbox"/> Asian</li> <li><input type="checkbox"/> Black or African American</li> <li><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</li> <li><input type="checkbox"/> White or Caucasian</li> </ul>	<p><b>5. What is your race?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> American Indian or Alaska Native</li> <li><input type="checkbox"/> Asian</li> <li><input type="checkbox"/> Black or African American</li> <li><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</li> <li><input type="checkbox"/> White or Caucasian</li> <li><input type="checkbox"/> <b>Other (specify):</b> _____</li> </ul>

Original High School Entry Survey Item Showing Text Deleted	Updated High School Entry Survey Item
<p><b>7. Are you currently...?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Living with family [parent(s), guardian, grandparents, or other relatives]</li> <li><input type="checkbox"/> In foster care, living with a family</li> <li><input type="checkbox"/> In foster care, living in a group home</li> <li><input type="checkbox"/> Couch surfing or moving from home to home</li> <li><input type="checkbox"/> Living <del>in a place not meant to be a residence, such as</del> outside, in a tent city or homeless camp, in a car, in an abandoned vehicle or in an abandoned building</li> <li><input type="checkbox"/> Staying in an emergency shelter or transitional living program</li> <li><input type="checkbox"/> Staying in a hotel or motel</li> <li><input type="checkbox"/> In juvenile detention, <del>jail, prison or another correctional facility,</del> or under the supervision of a probation officer</li> <li><input type="checkbox"/> None of the above</li> </ul>	<p><b>7. Are you currently...?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Living with family [parent(s), guardian, grandparents, or other relatives]</li> <li><input type="checkbox"/> In foster care, living with a family</li> <li><input type="checkbox"/> In foster care, living in a group home</li> <li><input type="checkbox"/> Couch surfing or moving from home to home</li> <li><input type="checkbox"/> Living outside, in a tent city or homeless camp, in a car, in an abandoned vehicle or in an abandoned building</li> <li><input type="checkbox"/> Staying in an emergency shelter or transitional living program</li> <li><input type="checkbox"/> Staying in a hotel or motel</li> <li><input type="checkbox"/> In juvenile detention <b>center, juvenile group home, and/or</b> under the supervision of a probation officer</li> <li><input type="checkbox"/> None of the above</li> </ul>
<p><b>8. In the past three months, have you...</b> MARK ONLY ONE ANSWER PER ROW</p> <p>a. drunk alcohol (more than a few sips, including beer, wine, and liquor)?</p> <p>b. smoked cigarettes?</p> <p><del>c. smoked cigars, cigarillos, or little cigars</del></p> <p><del>d.</del> <b>c.</b> used other tobacco products (such as chewing tobacco, snuff, dip, or snus)?</p> <p><del>e.</del> <b>d.</b> used electronic vapor products (such as JUUL, Vuse, MarkTen, and blu)? (Electronic vapor products include e-cigarettes, vapes, vape pens, e-cigars, hookahs, hookah pens, and mods)</p> <p>f. <b>e.</b> used marijuana (also called pot, weed, or cannabis)?</p> <p>g. <b>f.</b> taken prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it?</p>	<p><b>Items B &amp; C have been combined.</b></p> <p>c. smoked cigarettes <b>or cigar products (cigars, cigarillos, or little cigars)?</b></p>

Original High School Entry Survey Item Showing Text Deleted	Updated High School Entry Survey Item
<p><b>9. In the past three months, how often would you say you...</b> MARK ONLY ONE ANSWER PER ROW</p> <p>a. resisted or said no to peer pressure?</p> <p>b. managed your emotions in healthy ways (for example, ways that are not hurtful to you or others)?</p> <p><del>c. worked together to find a solution when you disagreed with a friend?</del></p> <p><del>d. chose to spend time with friends that keep you out of trouble?</del></p> <p><del>e. were respectful of others?</del></p> <p><b>f.c.</b> thought about the consequences before making a decision?</p>	<p>Items C, D, and E have been deleted.</p> <p><b>New Item D</b></p> <p><b>d. talked with your parent, guardian, or caregiver about sex?</b></p>
<p><b>10. For each of the items below, please mark how true each statement is of you.</b> MARK ONLY ONE ANSWER PER ROW</p> <p>a. I make plans to reach my goals.</p> <p>b. I care about doing well in school.</p> <p>c. I save money to get <del>something</del> things I want.</p> <p><del>d. I plan to graduate high school or get my GED.</del></p> <p><del>e. I plan to get more education and/or training after high school or completing my GED.</del></p> <p><del>f. I plan to get a steady full time job after school.</del></p> <p><del>g. I feel comfortable talking to my parent, guardian, or caregiver about sex.</del></p> <p><b>h.d.</b> I would speak up or ask for help if I am being bullied in person or online, via text, while gaming, or through other social media.</p> <p><b>i.e.</b> I would speak up or ask for help if others are being bullied in person or online, via text, while gaming, or through other social media.</p>	<p>Items D, E, F, and G have been deleted.</p>

Original High School Entry Survey Item Showing Text Deleted	Updated High School Entry Survey Item
<p><b>11. For each of the items below, please mark how true each statement is of you.</b></p> <p>MARK ONLY ONE ANSWER PER ROW</p> <p>a. I understand what makes a relationship healthy.</p> <p><del>b. I look for information and resources about dating violence (for example, websites, social media, hotlines, organizations, etc.).</del></p> <p><del>e.b.</del> I would be able to resist or say no to someone <del>I am dating or going out with</del> if they pressured me to participate in sexual acts, such as kissing, touching private parts, or <del>sexual intercourse</del>.</p> <p><del>d. I would talk to a friend if someone I am dating or going out with makes me uncomfortable, hurts me, or pressures me to do things I don't want to do.</del></p> <p><del>e.c.</del> I would talk to a trusted adult (for example, a family member, teacher, counselor, coach, etc.) if someone <del>I am dating or going out with</del> makes me uncomfortable, hurts me, or pressures me to do things I don't want to do.</p> <p><del>f. I would talk to a trusted adult if someone other than the person I am dating or going out with makes me uncomfortable, hurts me, or pressures me to do things I don't want to do.</del></p>	<p>Items B, D, and F have been deleted.</p> <p>Item C has been modified and is now item B.</p> <p>I would be able to resist or say no to someone if they pressured me to participate in sexual acts, such as kissing, touching private parts, or sex.</p> <p>Item E has been modified and is now Item C.</p> <p>I would talk to a trusted <b>person</b>/adult (for example, a family member, teacher, counselor, coach, etc.) if someone makes me uncomfortable, hurts me, or pressures me to do things I don't want to do.</p>
<p>The next questions ask about some personal behaviors, including sex and pregnancy. Remember, all of your responses will be kept private.</p>	<p>Introduction to items #13-15 has been modified.</p> <p>The next questions ask about some personal behaviors, including <b>sexual intercourse</b> and pregnancy. Remember, all of your responses will be kept private.</p>

**Table 4. High school exit survey measures**

Original High School Exit Survey Item Showing Text Deleted	Updated High School Exit Survey Item
<p><b>1. How old are you?</b> MARK ONLY ONE ANSWER</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> 10</li> <li><input type="checkbox"/> 11</li> <li><input type="checkbox"/> 12</li> <li><input type="checkbox"/> 13</li> <li><input type="checkbox"/> 14</li> <li><input type="checkbox"/> 15</li> <li><input type="checkbox"/> 16</li> <li><input type="checkbox"/> 17</li> <li><input type="checkbox"/> 18</li> <li><input type="checkbox"/> 19</li> <li><input type="checkbox"/> 20 <del>or older</del></li> </ul>	<p><b>1. How old are you?</b> MARK ONLY ONE ANSWER</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> 10</li> <li><input type="checkbox"/> 11</li> <li><input type="checkbox"/> 12</li> <li><input type="checkbox"/> 13</li> <li><input type="checkbox"/> 14</li> <li><input type="checkbox"/> 15</li> <li><input type="checkbox"/> 16</li> <li><input type="checkbox"/> 17</li> <li><input type="checkbox"/> 18</li> <li><input type="checkbox"/> 19</li> <li><input type="checkbox"/> 20</li> </ul>
<p><b>3. When you are at home or with your family, what language or languages do you usually speak?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> English</li> <li><input type="checkbox"/> Spanish</li> <li><input type="checkbox"/> Other (<del>please</del>-specify)</li> </ul>	<p><b>3. When you are at home or with your family, what language or languages do you usually speak?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> English</li> <li><input type="checkbox"/> Spanish</li> <li><input type="checkbox"/> Other (specify):</li> </ul>
<p><b>5. What is your race?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> American Indian or Alaska Native</li> <li><input type="checkbox"/> Asian</li> <li><input type="checkbox"/> Black or African American</li> <li><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</li> <li><input type="checkbox"/> White or Caucasian</li> </ul>	<p><b>5. What is your race?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> American Indian or Alaska Native</li> <li><input type="checkbox"/> Asian</li> <li><input type="checkbox"/> Black or African American</li> <li><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</li> <li><input type="checkbox"/> White or Caucasian</li> <li><input type="checkbox"/> <b>Other (specify):</b> _____</li> </ul>

Original High School Exit Survey Item Showing Text Deleted	Updated High School Exit Survey Item
<p><b>7. Are you currently...?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Living with family [parent(s), guardian, grandparents, or other relatives]</li> <li><input type="checkbox"/> In foster care, living with a family</li> <li><input type="checkbox"/> In foster care, living in a group home</li> <li><input type="checkbox"/> Couch surfing or moving from home to home</li> <li><input type="checkbox"/> Living <del>in a place not meant to be a residence, such as</del> outside, in a tent city or homeless camp, in a car, in an abandoned vehicle or in an abandoned building</li> <li><input type="checkbox"/> Staying in an emergency shelter or transitional living program</li> <li><input type="checkbox"/> Staying in a hotel or motel</li> <li><input type="checkbox"/> In juvenile detention, <del>jail, prison or another correctional facility</del>, or under the supervision of a probation officer</li> <li><input type="checkbox"/> None of the above</li> </ul>	<p><b>7. Are you currently...?</b> MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Living with family [parent(s), guardian, grandparents, or other relatives]</li> <li><input type="checkbox"/> In foster care, living with a family</li> <li><input type="checkbox"/> In foster care, living in a group home</li> <li><input type="checkbox"/> Couch surfing or moving from home to home</li> <li><input type="checkbox"/> Living outside, in a tent city or homeless camp, in a car, in an abandoned vehicle or in an abandoned building</li> <li><input type="checkbox"/> Staying in an emergency shelter or transitional living program</li> <li><input type="checkbox"/> Staying in a hotel or motel</li> <li><input type="checkbox"/> In juvenile detention <b>center, juvenile group home, and/or</b> under the supervision of a probation officer</li> <li><input type="checkbox"/> None of the above</li> </ul>
<p><b>8. Has being in the program made you more likely, about the same, or less likely to...</b> <i>(Note: If the program has not affected your likelihood to do any of the following, choose "About the same.")</i> MARK ONLY ONE ANSWER PER ROW</p> <p>a. make decisions to not drink alcohol?</p> <p>b. make decisions to not smoke cigarettes?</p> <p><del>c. make decisions to not smoke cigars, cigarillos, or little cigars?</del></p> <p><b>d.c.</b> make decisions to not use other tobacco products (such as chewing tobacco, snuff, dip, or snus)?</p> <p><b>e.d.</b> make decisions to not use electronic vapor products (such as JUUL, Vuse, MarkTen, and blu)? (Electronic vapor products include e- cigarettes, vapes, vape pens, e-cigars, hookahs, hookah pens, and mods)</p> <p>f. <b>e.</b> make decisions to not use marijuana (also called pot, weed, or cannabis)?</p> <p>g. <b>f.</b> make decisions to not take prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it?</p>	<p><b>Items B &amp; C have been combined.</b></p> <p>b. make decisions to not smoke cigarettes <b>or cigar products (cigars, cigarillos, or little cigars)?</b></p>



Original High School Exit Survey Item Showing Text Deleted	Updated High School Exit Survey Item
<p><b>9. Has being in the program made you more likely, about the same, or less likely to...</b> <i>(Note: If the program has not affected your likelihood to do the following, choose "About the same.")</i></p> <p>MARK ONLY ONE ANSWER PER ROW</p>	<p>Items C, D, and E have been deleted.</p>
<p>a. resist or said no to peer pressure?</p>	<p><b>New Item D</b></p>
<p>b. manage your emotions in healthy ways (for example, ways that aren't hurtful to you or others)?</p>	
<p><del>e. work together to find a solution when you disagreed with a friend?</del></p>	
<p><del>d. choose to spend time with friends that keep you out of trouble?</del></p>	
<p><del>e. be respectful of others?</del></p>	
<p><b>f.c.</b> think about the consequences before making a decision?</p>	<p><b>d. talk with your parent, guardian, or caregiver about sex?</b></p>

Original High School Exit Survey Item Showing Text Deleted	Updated High School Exit Survey Item
<p><b>10. Has being in the program made you more likely, about the same, or less likely to...</b> <i>(Note: If the program has not affected your likelihood to do the following, choose "About the same.")</i></p> <p>MARK ONLY ONE ANSWER PER ROW</p> <p>a. make plans to reach your goals?</p> <p>b. care about doing well in school?</p> <p><del>c. save money to get something you want?</del></p> <p><del>d. graduate high school or get your GED?</del></p> <p><del>e. get more education or training after high school or completing your GED?</del></p> <p><del>f. got a steady full-time job after school?</del></p> <p><del>g. feel comfortable talking with your parent, guardian, or caregiver about sex?</del></p> <p><del>h. speak up or ask for help if you are being bullied in person or online, via text, while gaming, or through other social media?</del></p> <p><del>i. speak up or ask for help if others are being bullied in person or online, via text, while gaming, or through other social media?</del></p>	<p>Items C through I have been deleted.</p>
<p><b>11. Has being in the program made you more likely, about the same, or less likely to...</b> <i>(Note: If the program has not affected your likelihood to do any of the following, choose "About the same.")</i></p> <p>MARK ONLY ONE ANSWER PER ROW</p> <p>a. better understand what makes a relationship healthy?</p> <p><del>b. look for information and resources about dating violence (for example, websites, social media, hotlines, organizations, etc.)?</del></p> <p><b>b.</b> resist or say no to someone <del>you are dating or going out with</del> if they pressure you to participate in sexual acts, such as kissing, touching private parts, or <del>sexual intercourse</del>?</p> <p><del>d. talk to a friend if someone you are dating or going out with makes you uncomfortable, hurts you, or pressures you to do things you don't want to do?</del></p> <p><b>e.c.</b> talk to a trusted adult (for example, a family member, teacher, counselor, coach, etc.) if someone <del>you are dating or going out with</del> makes you uncomfortable, hurts you, or pressures you do things you don't want to do?</p>	<p>Items B, D, and F have been deleted.</p> <p>Item C has been modified and is now Item B.</p> <p>resist or say no to someone if they pressure you to participate in sexual acts, such as kissing, touching private parts, or sex?</p> <p>Item E has been modified and is now Item C.</p> <p>talk to a trusted <b>person</b>/adult (for example, a family member, teacher, counselor, coach, etc.) if someone makes you uncomfortable, hurts you, or pressures you to do things you don't want to do?</p>

f. ~~talk to a trusted adult if someone other than the person you are dating or going out with makes you uncomfortable, hurts you, or pressures you to do things you don't want to do?~~

Original High School Exit Survey Item Showing Text Deleted	Updated High School Exit Survey Item
<p>The next questions ask about some personal behaviors, including sex and pregnancy. Remember, all of your responses will be kept private.</p>	<p>Introduction to items #13-15 has been modified.</p> <p>The next questions ask about some personal behaviors, including <b>sexual intercourse</b> and pregnancy. Remember, all of your responses will be kept private.</p>
<p><b>14. How important are each of these reasons in your decision to not have sexual intercourse?</b> MARK ONLY ONE ANSWER PER ROW</p> <p>a. how it might affect your plans for the future b. the possible emotional consequences (for example, feeling sadness or regret) c. <del>the possible social consequences (for example, get a bad reputation or have rumors spread about you, have to deal with drama, make your relationship with someone you are dating or going out with worse, or get in trouble with your parents)</del> d.c. the risk of getting a sexually transmitted infection (STI) e.d. the risk of getting pregnant or getting someone pregnant</p>	<p>Items B and C have been combined and modified.</p> <p>b. the possible emotional <b>and social</b> consequences (for example, feeling sadness or regret, <b>disappointing your parent(s) or guardian(s), and/or negative reactions from your peers</b>)</p>
<p><b>15. Even if you didn't attend all of the sessions or classes in this program, how often <i>in this program</i>...</b> MARK ONLY ONE ANSWER PER ROW</p> <p>a. did you feel interested in program sessions and classes? b. did you feel the material presented was clear? c. did discussions or activities help you to learn program lessons? d. did you have a chance to ask questions about topics or issues that came up in the program? e. did you feel respected as a person? f. <del>were you picked on, teased, or bullied in this program?</del></p>	<p>Item F has been deleted.</p>
<p><del><b>16. Now thinking about <u>all</u> youth in this program, how often...</b></del> <del>MARK ONLY ONE ANSWER</del></p> <p><del>a. were any youth in this program picked on, teased, or bullied?</del></p>	<p>Item 16 has been deleted.</p>

**Excerpt from the Title V, Section 510 legislation:**

- (1) **PURPOSE.**—...the purpose is...to implement education **exclusively on sexual risk avoidance (meaning voluntarily refraining from nonmarital sexual activity)**.
- (2) **REQUIRED COMPONENTS.**—Education on sexual risk avoidance pursuant to an allotment under this section **shall**—
- a. ensure that the unambiguous and primary emphasis and context for each topic described in paragraph (3) is a message to youth that normalizes the optimal health behavior of avoiding nonmarital sexual activity;
  - b. be medically accurate and complete;
  - c. be age-appropriate;
  - d. be based on adolescent learning and developmental theories for the age group receiving the education; and
  - e. be culturally appropriate, recognizing the experiences of youth from diverse communities, backgrounds, and experiences.
- (3) **TOPICS.**—Education on sexual risk avoidance pursuant to an allotment under 42 U.S. Code § 710 shall address **each** of the following topics:
- (A)** The holistic individual and societal benefits associated with personal responsibility, self-regulation, goal setting, healthy decision-making, and a focus on the future.
  - (B)** The advantage of refraining from nonmarital sexual activity in order to improve the future prospects and physical and emotional health of youth.
  - (C)** The increased likelihood of avoiding poverty when youth attain self-sufficiency and emotional maturity before engaging in sexual activity.
  - (D)** The foundational components of healthy relationships and their impact on the formation of healthy marriages and safe and stable families.
  - (E)** How other youth risk behaviors, such as drug and alcohol usage, increase the risk for teen sex.
  - (F)** How to resist and avoid, and receive help regarding, sexual coercion and dating violence, recognizing that even with consent teen sex remains a youth risk behavior.

### General Departmental SRAE legislation:

*Provided further,* That of the funds made available under this heading, \$25,000,000 shall be for making competitive grants which **exclusively implement education in sexual risk avoidance (defined as voluntarily refraining from non-marital sexual activity)**:

*Provided further,* That funding for such competitive grants for sexual risk avoidance shall use medically accurate information referenced to peer-reviewed publications by educational, scientific, governmental, or health organizations; implement an evidence-based approach integrating research findings with practical implementation that aligns with the needs and desired outcomes for the intended audience; and teach the benefits associated with self-regulation, success sequencing for poverty prevention, healthy relationships, goal setting, and resisting sexual coercion, dating violence, and other youth risk behaviors such as underage drinking or illicit drug use without normalizing teen sexual activity:

*Provided further,* That no more than 10 percent of the funding for such competitive grants for sexual risk avoidance shall be available for technical assistance and administrative costs of such programs.