

## Cuidate Participant Survey (Post)

### Default Section

# Cuidate: Take Care of Yourself

#### Building Skills to Prevent Pregnancy, HIV, and STD

This survey is about your knowledge, attitude, and behavior related to HIV and reproductive health education. The information you give will be used to improve reproductive health education for people your age.

The answers you give will be kept private so please answer the questions honestly.

Completing the survey is voluntary. If you are not comfortable answering a question, just leave it blank.

The questions that ask about your background (i.e., age and Hispanic ethnicity) will be used only to describe the types of students completing this survey. The information will NOT be used to find out your name. No names will EVER be reported.

Make sure to read every question carefully. Select the answer or answers that you agree with most.

Thank you very much for your help.

Post-Survey (to be administered after Cuidate curriculum is presented)

### Page 1

In which region is the program site located?

1. Are you a female or male?

☐ Female

☐ Male

2. What is your birth date?

MM DD YYYY  
MM/DD/YYYY  /  /

3. What is the FIRST and THIRD initial of your first name?

4. What is the FIRST and THIRD initial of your last name?

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### 5. Are you of Hispanic or Latino origin?

- ☐ Yes
- ☐ No

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### 6. Please answer the following questions about HIV/AIDS. Select the button under the heading "True" if you think the statement is true. Select the button under the heading "False" if you think the statement is false.

|   | True                  | False                 |
|---|-----------------------|-----------------------|
| A. AIDS is a medical condition in which your body cannot fight off diseases.  | <input type="radio"/> | <input type="radio"/> |
| B. Anyone can get HIV/AIDS.   | <input type="radio"/> | <input type="radio"/> |
| C. AIDS can be cured.   | <input type="radio"/> | <input type="radio"/> |
| D. Abstinence is the only sure way of preventing HIV/AIDS infection.  | <input type="radio"/> | <input type="radio"/> |
| E. You can tell by looking whether someone is HIV positive.   | <input type="radio"/> | <input type="radio"/> |
| F. Condoms are effective in preventing HIV infection.   | <input type="radio"/> | <input type="radio"/> |
| G. You can get HIV/AIDS by sharing a needle with someone who is infected with HIV.                                  | <input type="radio"/> | <input type="radio"/> |
| H. Having only one boyfriend or girlfriend is a sure way to prevent HIV infection.                                  | <input type="radio"/> | <input type="radio"/> |
| I. HIV can be spread by using someone's personal belongings (like a comb or hairbrush) or sitting on a toilet seat. | <input type="radio"/> | <input type="radio"/> |
| J. HIV is present in semen, blood, vaginal secretions, and the breast milk of infected people.                      | <input type="radio"/> | <input type="radio"/> |

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### 7. Can the following behaviors put you at risk for getting HIV?

|  | Yes                   | No                    | Not sure              |
|--|-----------------------|-----------------------|-----------------------|
| A. Sharing needles for tattooing or piercing | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| B. Having sex without a condom               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| C. Donating blood                            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| D. Using the same condom twice               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| E. Hugging                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

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### 8. Whose job is it to see that a female doesn't get pregnant when having sex?

- ☐ The female's
- ☐ The male's
- ☐ Both
- ☐ Neither

### 9. Having a baby when you are in high school: (SELECT THE ANSWER THAT YOU AGREE WITH MOST)

- ☐ Is not a problem at all
- ☐ Is not a problem because your family helps
- ☐ Is a problem but it's okay
- ☐ Is a problem for the mother and the baby but not for the father of the baby
- ☐ Is a problem for the mother, the baby, and the father of the baby

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### 10. Do you think you will have sex while you are a teenager?

- ☐ I'm certain I won't.
- ☐ I probably won't.
- ☐ I'm not sure whether I will or not.
- ☐ I probably will.
- ☐ I'm certain I will.

### 11. Which of the following best describes your expectations about sexual partners during the rest of your teen years?

- ☐ I don't expect to have any sexual partners during the rest of my teen years.
- ☐ I expect to have only one sexual partner.
- ☐ I expect to have two or three sexual partners, but only one at a time.
- ☐ I expect to have two or three sexual partners at the same time.
- ☐ I expect to have several sexual partners at the same time.

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### 12. Which of the following best describes your plans about you or your partner using a contraceptive the first time or next time you have sex?

- ☐ I plan to use a contraceptive, and will not have sex without using one.
- ☐ I plan to use a contraceptive, as long as it is convenient.
- ☐ I plan to use a contraceptive as long as my partner does not object.
- ☐ I plan to use a contraceptive only if my partner insists on it.
- ☐ I do not plan to use a contraceptive.

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### 13. Following is a list of many contraceptive methods that people use to avoid becoming pregnant, or use to avoid sexually transmitted diseases. Which of these methods do you intend to use in the next year?

#### (SELECT ALL THAT APPLY)

- ☐ This question does not apply—I don't intend to be sexually active
- ☐ None—even though I expect to be sexually active
- ☐ Birth control medication (pills, shots, or implant)
- ☐ Condom
- ☐ Rhythm (having sex during the "safe time" of the month )
- ☐ Withdrawal (pulling out before sperm comes out)

Other (please name)

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**14. What method of birth control, if any, did you or your partner use the last time you had sex?**

**(IF YOU USED TWO OR MORE METHODS TOGETHER, PLEASE SELECT EACH METHOD THAT YOU USED)**

- ☐ The question does not apply—I haven't had sexual intercourse
- ☐ None—We did not use any method of birth control the last time we had sexual intercourse.
- ☐ Birth control medication (pills, shots, or implant)
- ☐ Condom
- ☐ Rhythm (having sex during the "safe time" of the month)
- ☐ Withdrawal (pulling out before sperm comes out)

Other (please name)

**15. Thinking of all the times you have had sex, about what percentage of the time did you or your partner used a condom?**

- ☐ The question does not apply—I haven't had sexual intercourse
- ☐ Never (0%)
- ☐ A few times (1%-40%)
- ☐ Half the time (41%-60%)
- ☐ Most times (61%-99%)
- ☐ Every time (100%)

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**16. What we know about sex and having babies and where we learned it can have an important effect on our lives. In your own life, have you ever talked with any of your parents or guardians about:**

**b. How pregnancy occurs?**

- ☐ Yes
- ☐ No

**c. Sexually transmitted diseases (STDs)?**

- ☐ Yes
- ☐ No

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### d. How to say “no” to sex?

- ☐ Yes
- ☐ No

### e. Methods of birth control—that is, how to prevent a pregnancy from happening?

- ☐ Yes
- ☐ No

### f. How to prevent human immunodeficiency virus (HIV) by using safer sex practices?

- ☐ Yes
- ☐ No

### g. Sexual abstinence? (For example, not having sex until you are older or married.)

- ☐ Yes
- ☐ No

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**17. Please look at each choice below and mark whether you think each one is an "effective" or "not effective" birth control method. If you do not know what the method is or do not know how effective it is for preventing pregnancy, mark the "don't know" column.**

|   | Effective             | Not Effective         | Don't Know            |
|---|-----------------------|-----------------------|-----------------------|
| a. Diaphragm (contraceptive barrier inserted into the vagina before sexual intercourse) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| b. Condom (rubber)  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| c. IntraUterine (IUD)   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| d. Rhythm ("safe" time of the month)  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| e. Sponge (contraceptive barrier inserted into the vagina before sexual intercourse)    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| f. Birth Control Medication (the Pill, Evra patch, NuvoRing, or Depo shot)              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| g. Withdrawal ("pulling out")   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

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**18. Here are some statements about various methods of contraception. Read each statement, then decide if you think it is true or false.**

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**a. A sexually active female can become pregnant if she forgets to take her birth control pills for several days in a row.**

- ☐ True
- ☐ False
- ☐ I don't know

**b. Birth control pills can help prevent HIV.**

- ☐ True
- ☐ False
- ☐ I don't know

**c. A teen boy cannot make a teen girl pregnant the first few times he has sex.**

- ☐ True
- ☐ False
- ☐ I don't know

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**19. A female can become pregnant:**

- ☐ The first time she has sexual intercourse
- ☐ If she has sexual intercourse during her menstrual period
- ☐ If she has sexual intercourse standing up
- ☐ If the male sperm gets near the opening of the vagina without the penis actually entering her body
- ☐ All of the above
- ☐ I don't know

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Please read the following statements and indicate if you "agree" or "disagree."

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**20. It is against my parents' values for me to have sex while I am a teenager.**

- ☐ Strongly agree
- ☐ Agree
- ☐ Not sure
- ☐ Disagree
- ☐ Strongly disagree

**21. It is against my values for me to have sex while I am a teenager.**

- ☐ Strongly agree
- ☐ Agree
- ☐ Not sure
- ☐ Disagree
- ☐ Strongly disagree

**22. My friends think I should not have sex while I'm a teenager.**

- ☐ Strongly agree
- ☐ Agree
- ☐ Not sure
- ☐ Disagree
- ☐ Strongly disagree

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**23. How comfortable are you:**

**a. Talking with friends about sex.**

- ☐ Very comfortable
- ☐ Comfortable
- ☐ A little uncomfortable
- ☐ Very uncomfortable
- ☐ This does not apply—I have not been in this situation.



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### **b. Talking with a date or boy/girlfriend about sex.**

- ☐ Very comfortable
- ☐ Comfortable
- ☐ A little uncomfortable
- ☐ Very uncomfortable
- ☐ This does not apply—I have not been in this situation.

### **c. Talking with parents or guardians about sex.**

- ☐ Very comfortable
- ☐ Comfortable
- ☐ A little uncomfortable
- ☐ Very uncomfortable
- ☐ This does not apply—I have not been in this situation.

### **d. Talking with friends about birth control.**

- ☐ Very comfortable
- ☐ Comfortable
- ☐ A little uncomfortable
- ☐ Very uncomfortable
- ☐ This does not apply—I have not been in this situation.

### **e. Talking with a date or boy/girlfriend about birth control.**

- ☐ Very comfortable
- ☐ Comfortable
- ☐ A little uncomfortable
- ☐ Very uncomfortable
- ☐ This does not apply—I have not been in this situation.

### **f. Talking with parents or guardians about birth control.**

- ☐ Very comfortable
- ☐ Comfortable
- ☐ A little uncomfortable
- ☐ Very uncomfortable
- ☐ This does not apply—I have not been in this situation.

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### **g. Telling a date or boy/girlfriend what you want to do and do not want to do sexually.**

- ☐ Very comfortable
- ☐ Comfortable
- ☐ A little uncomfortable
- ☐ Very uncomfortable
- ☐ This does not apply—I have not been in this situation.

### **h. Saying no to a sexual come-on.**

- ☐ Very comfortable
- ☐ Comfortable
- ☐ A little uncomfortable
- ☐ Very uncomfortable
- ☐ This does not apply—I have not been in this situation.

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### **24. Is there pressure from your friends for you to have sex?**

- ☐ No pressure at all
- ☐ A little pressure
- ☐ A moderate amount of pressure
- ☐ A lot of pressure

### **25. About how many of your friends have had sex?**

- ☐ None of them
- ☐ A few of them
- ☐ About half of them
- ☐ Most of them
- ☐ All of them

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**26. In which of the ways shown below, if any, have you changed your sexual behavior since participating in Cuidate? (SELECT ALL THAT APPLY)**

- ☐ Decided to wait to have sex
- ☐ Stopped having sex
- ☐ Stopped having other types of sexual relations
- ☐ Don't have sex as often
- ☐ Stopped having sex with more than one partner
- ☐ Stopped having sex with partners I don't know as well
- ☐ Started to use condoms
- ☐ Used condoms more often
- ☐ No changes