Safe Dates, 4-Session Version, Session 1

Thank you for facilitating <u>Safe Dates Session 1: Defining Caring Relationships and Session 2:</u> <u>Defining Dating Abuse.</u>

Session 1 and Session 2 were combined in this version of Safe Dates with 4-sessions. In this version, the Session 1 activities are considered optional and the Session 2 activities are considered the priority activities. The participants answered survey questions based on Session 2 activities and are the topics of highest interest. This survey will be used to evaluate program fidelity, how closely the program being implemented matches the program described in the curriculum. It will take 5-10 minutes to complete.

Facilitator name:

· Facilitator job title:

• Date of program session:

Month 🕔	/	Day	\sim	Year	\sim

* Name of county where program session took place:

• Name of school or site where program session took place:



* How many years have you work in the field of sexual violence prevention?

- 0 1
- 2
- 3
- 4
- 5
- 6
- \bigcirc
- 0 7
- 8
- 9
- 0 10
- 0 11
- 0 12
- 13
- 0 14
-) 15
-) 16
- 0 17
- 18
- 0 19
- 0 20
- 21
- 22
- 23
- 24
- 25
- 26
- 27
- 28



	29	
)	30	
\supset	31	
\supset	32	
\supset	33	
\mathbf{C}	34	
\supset	35	
\mathbf{C}	36	
\supset	37	
\supset	38	
\supset	39	
)	40	

• How many years have you facilitated this specific program?

- 0 1
- 2
- 3
- 0 4
- **5**
- 6
- 0 7
- 8
- 9
- 0 10
- 0 11
- 12
- 13
- 14
- 0 15



0 16			
0 17			
18			
0 19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			
36			
37			
38			
39			
<u> </u>			

• What is your age?

- 17 or younger
- 0 18-24



- 25-34
- 35-44
- 45-54
- 55-64
- 65 or older

• What best describes you?

- O Man
- 🔿 Woman
- Non-binary, gender fluid, or gender nonconforming
- Other gender identity
- O Prefer not to answer

* What best describes you? You can check one or more than one.

- Asian
- Black/African American
- Hispanic/Latinx
- Native American/Pacific Islander
- White
- Other racial/ethnic identity
- Prefer not to answer
- * What is your highest level of education?
 - High School Diploma
 - O Some college
 - O Bachelor's Degree
 - O Some graduate school
 - Graduate Degree



The following questions are about the Session 1 activities, which are considered optional in the Safe Dates 4-session version. If the activity was not completed, please enter N/A into the comment box that follows.

* Was the Session 1 activity "Introducing the Safe Dates Curriculum" completed?

- O Yes
- O No
- Why was the activity not completed?

- Were any modifications made to the Session 1 activity "Introducing the Safe Dates Curriculum"?
 - O Yes
 - O No
- Describe the modifications made to the activity.

- Was the Session 1 activity "What is Dating" completed?
 - O Yes
 - O No



• Why was the activity not completed?	
• Were any modifications made to the Session 1 activity "What is Dating"?	
⊖ Yes	
○ No	
 Describe the modifications made to the activity. 	
Was the Session 1 activity "Dating Bingo" completed?	
Yes	
○ No	
Why was the activity not completed?	
• Were any modifications made to the Session 1 activity "Dating Bingo"?	
⊖ Yes	
○ No	



Was the Session 1 activity "Caring People and Caring Relationships" completed? Ves No Why was the activity not completed? Were any modifications made to the activity "Caring People and Caring Relationships"? Ves No Describe the modifications made to the activity. Was the Session 1 activity "How I Want to be Treated by a Dating Partner" completed? Ves No	Describe the m	odifications made to the activity.
 Yes No Why was the activity not completed? Why was the activity not completed? Were any modifications made to the activity "Caring People and Caring Relationships"? Yes No Describe the modifications made to the activity. 		
 Yes No Why was the activity not completed? Why was the activity not completed? Were any modifications made to the activity "Caring People and Caring Relationships"? Yes No Describe the modifications made to the activity. 		
 Yes No Why was the activity not completed? Why was the activity not completed? Were any modifications made to the activity "Caring People and Caring Relationships"? Yes No Describe the modifications made to the activity. 		
 No Why was the activity not completed? Why was the activity not completed? Were any modifications made to the activity "Caring People and Caring Relationships"? Yes No Describe the modifications made to the activity. Was the Session 1 activity "How I Want to be Treated by a Dating Partner" completed? Yes	Was the Sessic	on 1 activity "Caring People and Caring Relationships" completed?
Why was the activity not completed? Were any modifications made to the activity "Caring People and Caring Relationships"? Yes No Describe the modifications made to the activity. Was the Session 1 activity "How I Want to be Treated by a Dating Partner" completed? Yes	O Yes	
Were any modifications made to the activity "Caring People and Caring Relationships"? Yes No Describe the modifications made to the activity. Was the Session 1 activity "How I Want to be Treated by a Dating Partner" completed? Yes	O No	
Were any modifications made to the activity "Caring People and Caring Relationships"? Yes No Describe the modifications made to the activity. Was the Session 1 activity "How I Want to be Treated by a Dating Partner" completed? Yes	Why was the ad	ctivity not completed?
 Yes No Describe the modifications made to the activity. Was the Session 1 activity "How I Want to be Treated by a Dating Partner" completed? Yes		
 Yes No Describe the modifications made to the activity. Was the Session 1 activity "How I Want to be Treated by a Dating Partner" completed? Yes		
 Yes No Describe the modifications made to the activity. Was the Session 1 activity "How I Want to be Treated by a Dating Partner" completed? Yes		
 No Describe the modifications made to the activity. Was the Session 1 activity "How I Want to be Treated by a Dating Partner" completed? Yes 	Were any modi	fications made to the activity "Caring People and Caring Relationships"?
Describe the modifications made to the activity.	O Yes	
Was the Session 1 activity "How I Want to be Treated by a Dating Partner" completed?	O No	
Was the Session 1 activity "How I Want to be Treated by a Dating Partner" completed?		
) Yes	Describe the m	odifications made to the activity.
⊖ Yes		
⊖ Yes		
⊖ Yes		
	Was the Session	on 1 activity "How I Want to be Treated by a Dating Partner" completed?
○ No	O Yes	
	O No	



• Why was the activity not completed?
 Were any modifications made to the activity "How I Want to be Treated by a Dating Partner"? Yes
O No
 Describe the modifications made to the activity.
 Was the Session 1 activity "Homework Assignment" completed? Yes No
* Why was the activity not completed?
• Were any modifications made to the Session 1 activity "Homework Assignment"?
⊖ Yes
O No



 Describe the modifications made to the activity.
• Was the Session 1 activity "Conclusion" completed?
⊖ Yes
No
• Why was the activity not completed?
 Were any modifications made to the activity "Conclusion"? Yes
O No
 Describe the modifications made to the activity.
The following questions are about the Session 2 activities, which are considered the priority topics in the Safe Dates 4-session version and of most interest for evaluation purposes.
• Was the Session 2 activity "Ground Rules and Homework" completed?
) Yes
○ No



*	Why	was	the	activity	not	comp	leted?
---	-----	-----	-----	----------	-----	------	--------

- Were any modifications made to the Session 2 activity "Ground Rules and Homework"?
 - O Yes
 - O No
- Describe the modifications made to the activity.

* Was the Session 2 activity "Identifying Harmful Behaviors" completed?

- O Yes
- O No
- * Why was the activity not completed?

• Were any modifications made to the Session 2 activity "Identifying Harmful Behaviors"?

- O Yes
- O No



• Describe the modifications made to the activity.



Was the Se	ession 2	activity	"What i	s Abuse?"	completed?
------------	----------	----------	---------	-----------	------------

\cap	Vac
\bigcirc	103

O No

* Why was the activity not completed?

* Were any modifications made to the Session 2 activity "What is Abuse?"?

- O Yes
- O No

* Describe the modifications made to the activity.

* Was the Session 2 activity "Define Abusive Dating Relationships" completed?

- O Yes
- O No
- * Why was the activity not completed?

• Were any modifications made to the activity "Define Abusive Dating Relationships"?

O Yes



○ No
 Describe the modifications made to the activity.
• Was the Session 2 activity "Facts About Dating Abuse" completed?
⊖ Yes
○ No
• Why was the activity not completed?
• Were any modifications made to the Session 2 activity "Facts About Dating Abuse"?
⊖ Yes
○ No
 Describe the modifications made to the activity.
• Was the Session 2 activity "Conclusion" completed?
O Yes
O No



• Why was the activity not completed?	
• Were any modifications made to the Session 2 activity "Conclusion"?	
⊖ Yes	
O No	
Describe the modifications made to the activity.	



Safe Dates, 4-Session Version, Session 2

Thank you for facilitating the Safe Dates Session 3: "Why Do People Abuse?"

This session is considered the priority session for this version of Safe Dates with 4-sessions. The participants answered survey questions based on Session 3: "Why Do People Abuse?" activities and are the topics of highest interest. This survey will be used to evaluate program fidelity, how closely the program being implemented matches the program described in the curriculum. It will take 5-10 minutes to complete.

The following questions are about the Session 3 activities, which are considered the priority topics in the Safe Dates 4-session version and of most interest for evaluation purposes.

• Was the activity "People Abuse to Control and Manipulate Someone" completed?

- O Yes
- O No

* Why was the activity not completed?

- Were any modifications made to the activity "People Abuse to Control and Manipulate Someone"?
 - O Yes
 - O No



 Describe the modifications made to the activ
--

• Wa	s the	activity	"Other	Reasons	of Abuse"	completed?
------	-------	----------	--------	---------	-----------	------------

- O Yes
- O No
- * Why was the activity not completed?

• Were any modifications made to the activity "Others Reasons of Abuse"?

- O Yes
- O No
- * Describe the modifications made to the activity.

- Was the activity "Consequences of Dating Abuse" completed?"
 - O Yes
 - O No



Why was the ac	ctivity not completed?
Were any modi	fications made to the activity "Consequences of Dating Abuse"?
Describe the m	odifications made to the activity.
	, "Warning Signs of Abuse," completed?
YesNo	
Why was the ac	ctivity not completed?
• Were any modi	fications made to the activity "Warning Signs of Abuse"?
Yes	
\bigcirc	



 Describe the modifications made to the 	e activity.
--	-------------

*	Was	the	activity	"Conclusion"	completed?
---	-----	-----	----------	--------------	------------

- O Yes
- O No

• Why was the activity not completed?

• Were any modifications made to the activity "Conclusion"?

- O Yes
- O No

• Describe the modifications made to the activity.



Safe Dates, 4-Session Version, Session 3

Thank you for facilitating the <u>Safe Dates Session 4: "How to Help Friends" and Session 5:</u> "<u>Helping Friends.</u>"

Session 4 and Session 5 were combined in this version of Safe Dates with 4-sessions. In this version, the Session 4 activities are considered the priority activities and the Session 5 activities are considered optional. The participants answered survey questions based on Session 4 activities and are the topics of highest interest. This survey will be used to evaluate program fidelity, how closely the program being implemented matches the program described in the curriculum. It will take 5-10 minutes to complete.

The following questions are about the Session 4 activities, which are considered the priority topics in the Safe Dates 4-session version and of most interest for evaluation purposes.

• Was the Session 4 activity "Why Don't People Just Leave?" completed?

O Yes

O No

. Why was the activity not completed?

• Were any modifications made to the Session 4 activity "Why Don't People Just Leave?"

- O Yes
- O No



 Describe the modifications made to the activi

Was the Session 4 activ	ty "Why is it Hard to	Get Help?" completed?
-------------------------	-----------------------	-----------------------

- O Yes
- O No
- * Why was the activity not completed?

• Were any modifications made to the Session 4 activity "Why is it Hard to Get Help?"

- O Yes
- O No
- * Describe the modifications made to the activity.

Was the Session 4 activity "How to Help a Friend?" completed?

- O Yes
- O No



Why was the activity not completed?
Were any modifications made to the Session 4 activity "How to Help a Friend?" Yes No
Describe the modifications made to the activity.
Was the Session 4 activity "Community Resources" completed?
Why was the activity not completed?
Were any modifications made to the Session 4 activity "Community Resources"? Yes No



 Describe the modifications made to the a 	activity.
--	-----------

*	Was the	Session 4	activity	"Conclusion"	completed?
---	---------	-----------	----------	--------------	------------

- O Yes
- O No
- * Why was the activity not completed?

* Were any modifications made to the Session 4 activity "Conclusion"?

- O Yes
- O No
- * Describe the modifications made to the activity.

The following questions are about the Session 5 activities, which are considered optional in the Safe Dates 4-session version. If the activity was not completed, please enter N/A into the comment box that follows.

* Was the Session 5 activity "Elijah's Story" completed?

- O Yes
- O No



Why was the activity not completed?
Were any modifications made to the Session 5 activity "Elijah's Story"?
○ Yes
○ No
Describe the modifications made to the activity.
Was the Session 5 activity "Zoey's Story" completed?
→ Yes
○ No
Why was the activity not completed?
Were any modifications made to the Session 5 activity "Zoey's Story"?
→ Yes
○ No



 Describe the modifications made to the activi

- O Yes
- O No
- * Why was the activity not completed?

• Were any modifications made to the Session 5 activity "Being a Friend"?

- O Yes
- O No
- * Describe the modifications made to the activity.

- Was the Session 5 activity "Conclusion" completed?
 - O Yes
 - O No



• Why was the activity not completed?	
• Were any modifications made to the activity "Conclusion"?	
⊖ Yes	
O No	

• Describe the modifications made to the activity.



Safe Dates, 4-Session Version, Session 4

Thank you for facilitating the Safe Dates Session 9: "Preventing Dating Sexual Abuse."

This session is considered the priority session for this version of Safe Dates with 4-sessions. The participants answered survey questions based on Session 9: "Preventing Dating Sexual Abuse" activities and are the topics of highest interest. This survey will be used to evaluate program fidelity, how closely the program being implemented matches the program described in the curriculum. It will take 5-10 minutes to complete.

The following questions are about the Session 9 activities, which are considered the priority topics in the Safe Dates 4-session version and of most interest for evaluation purposes.

• Was the activity "Sexual Assault Facts" completed?

- O Yes
- O No
- Why was the activity not completed?

• Were any modifications made to the activity "Sexual Assault Facts"?

- O Yes
- O No
- Describe the modifications made to the activity.



- O Yes
- O No

*	Why	was	the	activity	/ not	comp	leted?
---	-----	-----	-----	----------	-------	------	--------

• Were any modifications made to the activity "Paying Attention to Signs"?

- O Yes
- O No
- Describe the modifications made to the activity.

- * Was the activity "Precautions" completed?
 - O Yes
 - O No
- Why was the activity not completed?



*	Were any	modifications	made to	the	activity	"Precautions	;"?
---	----------	---------------	---------	-----	----------	--------------	-----

- O Yes
- O No
- Describe the modifications made to the activity.

- * Was the activity "Conclusion" completed?
 - O Yes
 - O No
- * Why was the activity not completed?

- Were any modifications made to the activity "Conclusion"?
 - O Yes
 - O No
- * Describe the modifications made to the activity.

