University of South Florida – College of Nursing NUSRING FACULTY IN PILOT RESEARCH PROJECT

Application for February 2010

Title of Proposal: Virtual Environments and its use in Viral Sex	kually Transmitted Infection Prevention
Name of Principal Investigator: Versie Johnson-Mallard	Faculty Rank/Title: Assistant Professor
PI's GEMS ID number: 0000054594	Mo/Yr appointed to this rank: 12/20/2007
PI's e-mail address: vejohnso@health.usf.edu	Tenure Status: tenured/tenure earning <u>Earning</u> non-tenure track
Pl's telephone number: 813 974-7210	
PI's Campus mailing address: MDC 22 CON	Type of contract: 9 month 12 month <u>x</u>
Desired Start Date: March 2010 Total Funds Requested Keywords describing the project (up to 5): Viral STIs, Second	
Research Integrity and If your project will include the use of human subjects, protect biohazardous materials, you must receive approval from the the study. Check all that apply:	ted health information, live vertebrates, or
IRB (humans)x HIPAA (health information) IACUC (live animals) IBC (biohazards)	-
Waive	er
I, <u>Versie Johnson-Mallard</u> , with full knowledge of my right of connection with official public business granted by the Florid (chapter 119), expressly waive all rights whatsoever that I had individuals who provide written feedback on this proposal. I these records because I believe it will help ensure a truly can Signature	da Constitution (article I, section 24) and Florida Statutes ave to request records containing the identity of the voluntarily agree to this waiver of my right of access to

PROJECT SUMMARY/ABSTRACT

Principal Investigator Versie Johnson-Mallard

Title of Proposal Virtual Environments and its use in Viral Sexually Transmitted Infection Prevention

Word Count 161

Viral sexually transmitted infections (STIs) in men contribute to viral STIs and disease in women.

College students engage in sexual behaviors that put them at risk for contracting STIs. Internet resources have become an increasingly acceptable intervention for dissemination of health information in the US and worldwide. Given the stable increases in the number of reported sexually transmitted infections cases among young adults; Second Life® a virtual environment can be used for getting safer sex messages across. This project has significance to the discipline of nursing in that a multi-user 3-D online environment(Second Life) represents a viable educational venue for STI prevention messaging and skill building. The objective of this proposal is to pilot test a web-based intervention (i.e. Second Life) may enhance knowledge and decrease risky sexual behavior among young adults aged.

The study **hypothesis** is that the Second Life 3-D multi-user education intervention will result in increased knowledge, as well as sustained positive changes in "behavioral", "normative", and "control" beliefs regarding consistency of condom use. The anticipated **results** of this study will reflect the importance of integrating innovative technology into research and dissemination of findings into the community, classroom and clinical practice.

Background: Given the stable increases in the number of reported sexually transmitted infections (STIs) cases among young adults; Second Life® a virtual environment can be used for getting safer sex messages across. 1-3 Second Life is a simulated 3-dimensional virtual world that can be accessed from any location with a high-speed internet connection.² This state of the art technology avails the opportunity to test knowledge of STIs though quizzes, games and virtual conversations. Second Life is created by multiple users who interact with each other in real time or asynchronized. 1-3 Users, called residents, create their own virtual selves, called avatars. Researchers and clinicians can introduce avatars that can be scripted with safer sex messages or simulated scenarios that young adults may encounter during social gatherings.⁴ Additional teaching strategies of Second Life include CDC laboratory tours and sexually health resource centers for STI information.¹⁻⁵ These teaching strategies can also be presented in bulletin, Blackboard and PowerPoint.¹⁻⁵ Young adults of this generation are media savvy and have an appreciation for active learning using technology. This pilot study will use state of the art uncomplicated technology as an innovative intervention targeted at limiting the spread of STIs. This technology has the potential to allow researchers and clinicians to build and create experiential learning environments though simulated situations. An experiential learning environment can provide distant learning in a safe environment using simulation to practice safer sex communications skills.

The **significance** of this project **to** the discipline of **nursing** is the opportunity to introduce a multi-user 3-D online environment representing a viable venue for STI prevention messaging. This project will allow a rich variety of educational experiences that may appeal to young adults and allows researchers and clinicians a venue of reaching unique audiences not adequately reached by other methods.

Specific Aims: The broad objective of this proposal is to identify a web-based intervention (i.e. Second Life) that may enhance knowledge and decrease risky sexual behavior among young adults aged 18-25.

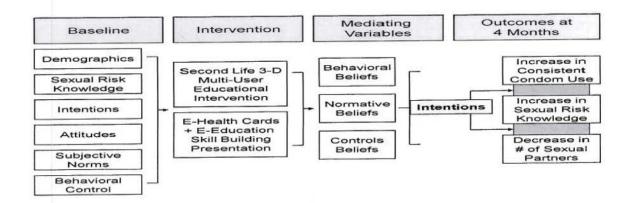
Aim 1: To assess the utility of Second Life for dissemination of STI prevention educational information Aim 2:

To assess the efficacy of Second Life as an educational intervention in improving knowledge and sexual risk behavior for prevention of viral sexually transmitted infections Aim 3: Use the TPB to assess the efficacy of an educational intervention in improving knowledge and favorably altering "behavioral", "normative", and

"control" beliefs with respect to prevention of viral STIs through number of sexual partners and consistency of condom use.

Research plan: The research plan, design and conduct of the study will be based on the Theory of Planned Behavior (TPB). This theory posits that performance of a given behavior is determined by a person's intention to perform that behavior. This intention, in turn, is determined by: (i) the person's attitude toward the behavior; (ii) influence of the person's social environment or subjective norms; and (iii) perceived control (e.g. belief) over the opportunities, resources, and skills necessary to perform the behavior. The study hypothesis is that the Second Life 3-D multi-user education intervention will result in increased knowledge, as well as sustained positive changes in "behavioral", "normative", and "control" beliefs regarding consistency of condom use. Importantly, condom use has been shown to relate to attitudes, normative beliefs, self efficacy, and intentions. Thus, based on the TPB⁹, Figure 1 depicts a logic model of the variables related to the proposed intervention and outcomes for this study.

Figure 1: Logic Model: Viral STIs an Educational/Behavior Intervention

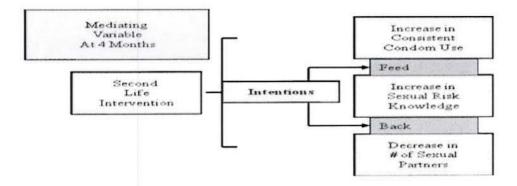


Design: A randomized controlled trial will be used to pilot test Second Life, using Crossover design. The randomized control trial uses 1) a PowerPoint intervention and 2) a PowerPoint plus e-card CDC STI prevention intervention. All students will receive online pretest surveys, followed by a PowerPoint audio educational presentation on knowledge and skill building information for the prevention of viral STIs, followed by posttest surveys. After posttest the participants will then be randomly assigned by computer to one of two

conditions, 1. a weekly e-card from the CDC STI prevention message center for 4 months (experimental group); or 2 a control group who does not receive the e-card. All participants (experimental and control group) will be contacted and asked to complete a 4-month follow-up survey.

Crossover design will be used to pilot test the Second Life intervention. After receiving the PowerPoint audio educational presentation and after 4 months posttest; subjects in the control group (group not receiving the e-cards from the CDC) will be offered the Second Life 3-D Multi-User Educational intervention (Figure 2). Second Life participants will receive a questionnaire (10 questions) asking for feedback about the overall experience and specific features of Second Life. Second Life Participants will be instructed to register for an account online at http://secondlife.com and download the free software to run the program. Participants will be directed to tour two virtual islands the Sexual Health Sim and CDC Island

Figure 2. Logic Model: Second Life Intervention



The study will be implemented online at 3 Universities: University of South Florida; Bethune Cookman University (Daytona Beach), and Florida Agriculture and Mechanical University (Tallahassee). **Sample:** Approximately 320 students_the control group (60% women and 40% men) will be invited to participant in the Crossover design study. Race/ethnicity is projected to be 60% African American and 40% Caucasian.

Recruitment: After IRB design modification request and approval for (Crossover) arm, participants will be invited via e-mail (e.g. control group only). Participants in the experimental and control group will complete the surveys **three** times; at pre-intervention, after intervention, and 4 months following the weekly messaging regimen (CDC e-cards). The control group will complete a one time feedback questionaire and the survey instruments a fourth time (after Second Life intervention).

Data Collection and Instruments: The Self-Efficacy Survey of Protective Sexual Behaviors, is a 22item, 5-point Likert scale that measures respondents' perception of their ability to refuse sexual intercourse, question potential sexual partners, and use condoms. Higher total scores indicate higher levels of self-efficacy for protective sex. Cronbach's alpha reliability estimate for the entire survey is 0.80. Reliability estimates for subscales are: Refusing sexual intercourse (0.85); Questioning potential sexual partners (0.80); Condom use (0.81). The HPV Knowledge Scale is based on the TPB and uses a 5-point Likert scales. The subscales include; (i) Intention to use condoms (3 items, coefficient alpha = 0.94); (ii) Attitude towards condom use (10 items, coefficient alpha = 0.80); (iii) Subjective norms regarding condom use (4 items, coefficient alpha = 0.86); and (iv) Perceived behavioral control regarding condom use (17 items, coefficient alpha = 0.87). The instruments will be transferred from the paper version to an electronic version using the Ultimate Survey software® (Prezza Technologies, 2007). This program is designed to distribute electronic recruitment messages with survey links, via e-mail, to a large volume of recipients. The software has the ability to track responses, and large-scale invitation distribution. The Second Life Feedback Questionnaire is a 10 question instrument. Participants will complete the instruments using a computer with internet access. The provision of informed consent will also occur online prior to completion of any of the survey materials.

Description of Second Life Intervention: The Second Life intervention will occur on virtual education Islands. Major component of the Second Life intervention consist of real world health communication tools such as prepared messages disseminated through interactive information kiosks, poster and bulletin boards, health videos, slideshows and links to Web pages. The Sexual Health Sim contains public health information about STIs. This island contains photographs of symptoms of various STIs and a 3-D tour of the testes. Users can read about condoms and safe sex practices, and receive a virtual condom for their avatars to use. The CDC island is a 3-D virtual representation of the US Centers for Disease Control and Prevention. This island contains many displays that link users to discussions and focus groups.

Data Analysis: The survey data retrieved from participants will be exported, in bulk, from the Ultimate Survey® program and analyzed using the SAS System. Descriptive statistics will be used to examine data for missing values and outliers. Aim 1 involve "within-person" analyses, that is, does the Second Life intervention increase knowledge and change behavior for prevention of STIs through number of sexual partners and consistency of condom use. Thus, the primary analytic methods will be paired t-tests for continuous variables

and McNemar's tests for proportions. ¹⁰ For Aim #2, we seek to evaluate whether the control group, which will receive the Second Life intervention, exhibits higher knowledge and behavioral after exposure to the education Islands compared to the experimental (i.e. "between-group" analyses). The primary analytic method will be mixed models ¹⁰ which use random effects to induce correlation over time between observations (i.e. at pre-intervention, post-intervention, 4 months) on the same participant. This approach will allow for a range of possible covariance structures, and the random effects structure described above can account for across-participant heterogeneity regarding rates of change in beliefs, while facilitating estimation of fixed effects, the weekly e-card messaging regimen in particular.

Projected timeline for the completion of pilot project:

Year 1 Tasks	Month											
	1	2	3	4	5	6	7	8	9	10	11	12
IRB modification Approval		3										
Recruitment			- CHE									
Administer pre-test study questionnaires												
Administer web-based education												
Administer post-test study questionnaires				5.1								
Weekly E-card messaging								4.3				
Four month crossover study								119				
Five month post survey data collection												
Conduct preliminary data analyses										1	-	

Going forward, I seek to (i) transitioning the proposed pilot study into a larger NIH-funded R01 study, by use of a randomized controlled experimental study design; (ii) validating the effectiveness of the Second Life intervention in different populations classified by age, gender, race, ethnicity, and socioeconomic status; (iii) building a nationally and international recognized interdisciplinary program of research and education in prevention of STIs; and (iv) formally enhancing positive beliefs and skill building to the prevention of STIs among adolescents and young adults.

EXPECTED OUTCOMES OF PROJECT

No word limit. Single-spaced outline format is permitted.

Plan	Action	Timeline	Metrics
 Presentation and dissemination of research 	Attend CANS conference Washington DC ✓ Submit abstract for presentation	January 2011	Abstract accepted for podium presentation
	Attend NPWH Conference Rhode Island ✓ Submit abstract for presentation	October 2010	Abstract accepted for podium presentation
	Develop abstracts into manuscript for publication in practice journals ✓ Virtual Environments and its use in Viral Sexually Transmitted Infection Prevention: Women's Health Care: A Practice Journal for Nurse Practitioners ✓ Innovative Teaching Methods for Computer Savvy Students: Journal of Nursing Scholarship ✓ Using Innovative Technology in the 21 st Century to Decrease Viral STIs in Young Adult Women: The Female Patient ✓ A Survey of Innovative Technology in three university settings Aimed at Decreasing Viral STIs in Young Adults: Journal of Medical Internet Research	November 2010 December 2010	Manuscript accepted for publication Manuscript accepted for publication
Service	Dissemination research findings within the community ✓ narrow the gap of health disparities relating to women and adolescent reproductive health	October 2010- October 2011	Invitation to present research at • Moffitt Cancer Center Nursing Research Education Working Group: • Annual Polk County Advance Practice Nurse Symposium • Tampa Speaking of Women's Annual Health Event

b. **Proposal Plan** – Briefly describe how the results of this project might develop into a proposal for external funding. Include the name of potential funding mechanisms and agencies/foundations and submission timelines. Higher priority will be given to plans that show how this study might fit published funding priorities of agencies/foundations.

Submit: 1 April 2011 American Cancer Society Institutional Research Grant, Narrow the gap of health disparities relating to women and adolescent reproductive health, five year budget of \$135,000 per year (direct cost), plus 8% allowable indirect costs.

Submit: 5 May 2011 National Cancer Institute, Adolescent and Future reproductive Health Narrowing the

Gap For Cervical Cancer, Awards issued under this FOA are contingent upon the

availability of funds and the submission of a sufficient number of meritorious

applications. Because the nature and scope of the proposed research will vary from

application to application, it is anticipated that the size and duration of each award will

also vary. The total amount awarded and the number of awards will depend upon the

mechanism numbers, quality, duration, and costs of the applications received.

PROPOSED BUDGET

Research Assistant Graduate Students (list each individual/position with percentage of effort as FTE & length of employment)	
a rength of employment)	Requested
All other Personnel (List each individual/position separately, include length of employment)	Amt.
——————————————————————————————————————	Requested
SUBTOTAL OF "SALARIES & WAGES"	\$
OTHER BUDGET ITEMS	
Equipment (list each item separately)	Amt. Requested
Annually Island cost \$72.00 X 2 Islands (CDC & Sexual Health Sim)	\$144
Supplies	
Full Region (65, 536 sqm) \$1000	\$1000
Travel (Must be necessary to conduct the study; may not include travel to present results)	
Operating Expenses	Amt. Requested
monthly maintenance fee \$295 x18 months	
Other	Amt. Requested
SUBTOTAL OF "OTHER BUDGET ITEMS" REQUESTED	\$ 6454
TOTAL AMOUNT REQUESTED \$ 64	154

TOTAL AMOUNT REQUESTED	\$ 6454

END OF PROJECT FINAL REPORT FORM Nursing Faculty in Pilot Research Projects Initiated Spring 2010

Send to:

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Principal Investigator:
Title of Project:
Date of Award: Period of Award:
Award Amount:
Attach the following information to this cover sheet.
1. Provide a 200-word abstract describing in non-technical language your project and its results.
 List the tangible products/results of this specific project (i.e., articles, books, exhibitions, papers presented, performances, other grant proposals and/or funding).
 Write a 1-2 page single-space summary report of your project including purpose, methods, finding recommendations/conclusions. The inclusion of supporting material, such as reprints, slides, etc. is optional.

4. List all personnel funded by this grant.

References

- Kamel Boulos, N., & Toth-Cohert, S., (2009). The University of Plymouth Sexual Health SIM experience in Second Life: evaluation and reflections after 1 year. Health Information and Libraries Journal, 26, 279-288.
- Skiba, D. (2009). Nursing Education 2.0: A Second Look at Second Life. Emerging Technologies, 30 (2),129-131.
- 3. Boulos, M., Ramioll, R., Jones, R., & Toth-Cohen, T. (2008). Web 3D for Public, Environmental and Occupational Health: Early Examples for Second Life. International Journal of Environmental Research and Public Health, 5, 291-317.
- 4. Beard, L., Wilson, K., Morra, D., & Keelan, J. (2009). A Survey of Health Related Activities on Second Life. Journal Medical Internet Research, 11 (2), e17
- 5. Schmidt, B., & Stewart, S. (2009). Implementing the Virtual Reality Learning Environment. Nursing Education, 34 (4). 152-155.
- 6. Ajzen, (1991). Behavioral interventions based on the theory of planned behavior. Retrieved from www.http://people.umass.edu/aizen/tpb.diag.html
- 7. O'Leary A, Jemmott LS, Jemmott JB.(2008). Mediation analysis of an effective sexual risk-reduction intervention for women: the importance of self-efficacy. *Health Psychol. 27* (2 Suppl): S180-4.
- 8. Lin, J., Whitlock, E., O'Connor, E., & Bauer, V. (2008). Behavioral counseling to prevent sexually transmitted infections: a systematic review for the U.S. preventive task force. *Annals of Internal Medicine*, 147 (7), 497-509.
- 9. Heeren, G. A., Jemmott, J. B., Mandeya A., & Tyler, J.C., (2007). Theory-based predictors of condom use among university students in the United States and South Africa. *AIDS Education Prevention*, 19 (1), 1-12.
- Laird NM, & Ware JH. (1982). Random-effects models for longitudinal data. *Biometrics* (4):963-974.

Please take a moment to answer this Second Life Questionnaire

o Yes	o No	
How useful wa	as this place/session	for you?
o Very	o Fair	ly o Not Useful
Did you learn a	anything that was ne	ew to you?
o Yes	o No	o Unsure
•		change your behavior?
o Definite	ly o Pos	ssibly o Not at all
- V	1.11.	to many Calon do
Would you rec	ommend this place t	to your iriends
Would you rec O Yes	ommend this place to No	o Not Sure
9000 00000000		o Not Sure
o Yes What did you l	o No	o Not Sure

COLLEGE STUDENT DEMOGRAPHIC DATA FORM HUMAN PAPILLOMAVIRUS

Please do not put your name or any self identifying information on this sheet. Please be completely honest with your response.

Your age
What is your gender?
() MALE
() FEMALE
What is your work status? (please check all that apply):
() Unemployed
() Unemployed, laid off
() Disabled
() In school
() Employed full time
() Employed part time
What is your marital status? (please check)
() Married
() Separated
() Never married
() Divorced
() Widowed
() Living together
() Other
Do you consider yourself to be Hispanic?
() Yes () No
What is your ethnic/race group? (please check all that apply)
() Caucasian
() African American/Black
() Hispanic
() Native American
() Asian
() Other

What is your class standing?
() Freshman
() Sophomore
() Junior
() Senior
() Graduate Student
() Other
() Oulei
Where do you currently live?
() College dormitory or residence hall
() Fraternity or sorority house
() Other university/college housing
() Off-campus house or apartment
() Parent/guardian's home
() Other
Are you currently in a monogamous relationship (an exclusive relationship with one person)?
() YES
() NO
During the past 30 days, on how many days did you have at least one drink of alcohol?
() 0 days
() 1 or 2 days
() 3 to 5 days
() 6 to 9 days
() 10 to 19 days
() 20 to 29 days
() all 30 days
During the past 30 days, how many times did you drive a car or other vehicle when you had been drinking
alcohol?
() 0 times
() 1 time
O 2 or 3 times

() 4 or 5 times() 6 or more times

you rid	le in a car or othe	r vehicle driven by someone who had been drinking alcohol?
0	0 times	
O	1 time	
0	2 or 3 times	
0	4 or 5 times	
Ö	6 or more times	
How	do you describe y	our status as a cigarette smoker?
() Sm	noker	
() No	n -smoker	
Did yo	ou drink alcohol o	or use drugs before you had sexual intercourse the last time?
() Ye		
() No		
What is	s your annual hou	sehold income? (Dollars)
() 19,99	99 or less	And Annual Control of the Control of Control
	00-29,000	
	00-39,000	
() 50,00	00 or more	
What is	s your medical co	verage status?
() Med	icaid	
() Priva	ate insurance	
	nsurance	
47	ol Insurance	
() Othe	r	
	The last time yo pregnancy?	u had sexual intercourse, what method did you or your partner use to prevent
	() The Pill	() Patch
	() The shot (dep	V a see a se
		() IUD
	() Diaphragm	
	() None () other	
	() not applicable	have never had sex
	Do you use cond	doms?
	() Yes	() No

During the past 30 days, how many times did

Sexual preference
() Heterosexual
() Homosexual
() Bisexual
() Bisexual
December and market and any 2
Does your sex partner use condoms?
() Yes () No
How old were you the first time you had vaginal sex?
Your age
ON
() Never had vaginal sex
With it also be a second of the second of th
Within the last year how many different sex partners have you had? (be serious
Number of sex partners
Have you ever had an abnormal Pap Test?
() Yes () No
() Don't know () Male gender
Have you ever refused a vaccine for yourself?
() yes () No
Have you ever refused a vaccine for any family member?
0
() yes () no
Do you have difficulty asking your HealthCare Provider about vaccinations?
() yes
() no
VI
Have you heard of the HPV vaccine (Gardasil)?
() yes
() no
Would you recommend the HPV vaccine to a friend?
would you recommend the rir v vaccine to a mend:
() yes
() no

Would you recommend the HPV vaccine to a family member?
() yes
() no
Have been vaccinated with the HPV vaccine (Gardasil)?
() yes () no
() no plans to be vaccinated against HPV
Would you have your child vaccinated with the HPV vaccine?
() yes
() no
() I don't have a child
Do you have difficulty talking to your child's Health Care Provider about vaccinations?
() yes
() no
() I don't have a child
Do you have difficulty talking to your child about cancer?
() yes
() no
() I don't have a child
Do you have difficulty talking to your child about sex?
() yes () no
() I don't have a child
Do you know anyone with cervical cancer?
() Yes
() No

INTERVENTION: COLLEGE STUDENT PRE-INTERVENTION KNOWLEDEGE SURVEY

Date:	ID#:
	Session #:
We would like to ask you some questions about you and feelings are important to us. There are no right about your knowledge of health issues. It's import skip any of them.	at or wrong answers. Some of the questions ask
The survey does not have your name on it, so your will see them are the research staff. We will not she parents. Please be honest and answer as best you contains the survey of the surv	are any of your answers with your friends or
Male Female	
wate	

First we are going to ask you some questions about what you might have seen or heard about human papilloma virus (HPV) and the HPV shot, also called Gardasil ® 1. Before today, had you ever heard of HPV? Yes No Don't know 2. Before today, had you ever heard of cervical cancer? Yes No Don't know 3. Before today, had you ever heard of the HPV shot, also called Gardasil ®? No Don't know Yes 4. Have you seen or heard any news or ads about the HPV shot? Yes No Don't know 5. Has what you have learned about the HPV shot from the media in the last 3 months, say in the newspaper or on TV, been mostly good, mostly bad, or both? Both Good I haven't seen Mostly Mostly Bad and Bad anything Good 6. Has a doctor or nurse talked to you about the HPV shot? No Don't know Yes 7. Do you know someone who has gotten the HPV shot?

Someone else No one

Friend

Sister

8.	HPV is the me	ost common	STD in the U.S.
		П	П
	True	False	Don't know
9.	HPV causes n	nost cases of	cervical cancer and genital warts.
	True	False	Don't know
10.	The HPV shot	protects aga	ainst most cases of cervical cancer.
			П
	True	False	Don't know
11.	The HPV shot	protects aga	ainst most cases of genital warts.
	- 🗆		
	True	False	Don't know
12.	Women will n	ever need Pa	ap tests if they get the HPV shot.
	True	False	Don't know
13.	Everyone who	has cervical	I cancer has HPV.
	True	False	Don't know
14.	You cannot ge	et HPV if the	re is no penetration during sex.
	True	False	Don't know
15.	Having sex wi	th more than	one person increases your chances of getting HPV.
	True	False	Don't know

Now we are going to ask you some questions about HPV and the HPV shot.

16. Using a cond	om during se	x lowers the chance of getting HPV.
True	False	Don't know
17. Genital warts	caused by H	PV are always seen on the outside of the vagina or penis.
True	False	Don't know
18. HPV is most	commonly tr	ansmitted from unprotected sex.
		П
True	False	Don't know
19. You can tell i	f your sexual	partner has HPV.
П	П	П
True	False	Don't know
20. The HPV sho	t is recomme	nded for girls as young as 9 years old.
True	False	Don't know
21. Girls who ha	ve never had	sex do not need to get the HPV shot.
True	False	Don't know
22. If a girl gets t	he HPV shot	she does not need to use condoms during sex.
П		
True	False	Don't know
23. Some doctors	and nurses o	ffer the HPV shot to girls 18 years of age and younger for free.
True	False	Don't know
24. All girls need	their parent	or guardians permission to get the HPV shot.
П	П	
True	False	Don't know

25. All three	shots of the HPV	shot are needed t	o fully prote	ct against HPV.	
True Now we are g shot. If you a	False going to ask you a ure a male check	Don't know about some of you male gender	ır thoughts a	nd feelings about I	HPV and the HPV
26. I plan to g	get the HPV shot	in the next 3 mon	ths.		
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Mal Disagree	e Gender
27. How likel	y is it that you w	ill decide to get th	e HPV shot	in the next 3 mont	hs?
□ Very Lik	□ kely Likely	☐ In the Middle	□ Unlikely	Uvery Unlikely	☐ Male Gender
28. Who wou than one b		u got the HPV sho	ot in the next	3 months? You ca	an check more
29. Who wou than one b	Id be <u>un</u> happy if	enter urse ual partner er	shot in the no	ext 3 months? You	can check more
	Me My Mother My Father				
	Other guardian				

	П	My religious					
		School health					
		My doctor or	nurse				
	[]	My friends					
		My sister					
		My partner/se	exual partner				
		My Grandmo	ther				
		No one					
		Male Gender					
		Other: Who?					
			n if you were trying		hether or not t	o get t	he HPV shot in
the ne.	AL S	monuis? Tou	can check more tha	in one box.			
		My Mother					
		My Father					
		Other guardia					
		My religious					
		School health					
		My doctor or	nurse				
		My friends					
		My sister					
		My partner/se	xual partner				
		My Grandmo	ther				
		No one					
		Male Gender					
		Other: Who?					
31. I plan	to ta	alk to my paren	it or guardian abou	t HPV and th	e HPV shot in	the ne	ext 3 months.
Stron	gly	Agree	Maybe Agree	Disagree	Strongly	Male	e Gender
Agre	-		or Disagree		Disagree		
		y is it that you in the next 3 m	will decide to talk	to your paren	t or guardian a	about l	HPV and the
П			П				П
Very	Lik	ely Likely	In the Middle	Unlikely	Very Unlik	cely	Male Gender
33. I plan	to ta	ilk to my docto	r or nurse about H	PV and the H	PV shot in the	next	3 months.
П							
Stron	glv	Agree	Maybe Agree	Disagree	Strongly	Male	Gender
Agre		0	or Disagree	0	Disagree		

	the next 3		il decide to talk to	your doctor of	r nurse abou	t HPV and the HPV
□ Very	Likely	□ Likely	☐ In the Middle	□ Unlikely	□ Very Unlike	ely Male Gender
35. It is im	portant to	have my p	arent or guardian	's OK before I	get the HPV	shot.
Stron Agre	-	☐ Agree	Maybe Agree or Disagree	☐ Disagree	☐ Strongly Disagree	☐ Male Gender
36. I am co	omfortable	talking to	my parent or gua	rdian about the	HPV shot is	n the next 3 months
Stron Agre	ee		Maybe Agree or Disagree	□ Disagree	☐ Strongly Disagree	
37. If I tall	k to my pa	rent or gua	rdian about the H	[PV shot, they']	ll think I'm l	naving sex.
Stron Agre		☐ Agree	☐ Maybe Agree or Disagree	☐ Disagree	Strongly Disagree	
38. If I rea	ally want to	o, I can get	the HPV shot in	the next 3 mont	ths.	
Stron Agre	-	☐ Agree	☐ Maybe Agree or Disagree	☐ Disagree	☐ Strongly Disagree	Male Gender
39. I am al	ble to get t	he HPV sh	ot in the next 3 m	onths.		
Stron Agre	<u> </u>	Agree	Maybe Agree or Disagree	☐ Disagree	Strongly Disagree	☐ Male Gender
40. I know	enough a	bout the H	PV shot to decide	if I want to get	t it in the nex	xt 3 months.
Stron Agre		□ Agree	☐ Maybe Agree or Disagree	☐ Disagree	Strongly Disagree	Male Gender

41. I know where	I could go t	o get the HPV sho	ot in the next	3 months.	
Strongly Agree	☐ Agree	Maybe Agree or Disagree	☐ Disagree	☐ Strongly Disagree	☐ Male Gender
42. I could explain	n to my pare	ent or doctor why	I want to get	the HPV shot in	the next 3 months.
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly M Disagree	Male Gender
43. It will be okay	to have sex	more often if I go	et the HPV sh	not.	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
44. There is a char	nce I could	get HPV infection	L.		
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
45. HPV infection	can be pre-	vented.			
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
46. Getting HPV i	nfection is	not a big deal.			
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
47. Getting the HI	PV shot wou	ald protect me from	m cervical car	ncer and genital	warts.
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	

48. It is important	to get all th	ree HPV shots.			
Strongler	□ ^ ~~~~~	Marka	D:		
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
49. The HPV shot	doesn't wo	ork.			
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
50. I don't know he	ow the HP	V shot will affect	the body.		
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
51. Only "dirty girl	ls" (girls w	ho have sex with	a lot of people	e) get HPV.	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
52. If I decide to at	ostain from	sex I do not need	to get the HP	V shot.	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gende
53. I am scared to g	get the HP	V shot because I a	m afraid of ne	edles.	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
54. Even if I don't	like needle	s, it is important f	for me to get the	he HPV shot.	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender

55. I'll get HPV	V, genital warts	s or cervical cance	er if I get the l	HPV shot.	
Strongly Agree	☐ Agree	Maybe Agree or Disagree	☐ Disagree	Strongly Disagree	☐ Male Gender
56. The HPV s	hot is a cure fo	r HPV and other	diseases.		
Strongly Agree	Agree	☐ Maybe Agree or Disagree	☐ Disagree	☐ Strongly Disagree	
57. If I get the diseases (S'		have sex withou	t worrying abo	out getting any	sexually transmitted
☐ Strongly Agree	☐ Agree	☐ Maybe Agree or Disagree	☐ Disagree	☐ Strongly Disagree	☐ Male Gender
58. What would more than o		for you to get the	HPV shot in	the next 3 mont	hs? You can check
59. Would any more than o	Not knowing ed Having to got to Having to get a Needing permit Being too busy Male Gender Other: What? of these stop you have so	o get the HPV sho enough about it he appointment al a painful needle ission from my pa you from getting the would stop me to get the HPV sho enough about it	one rent or guardi he HPV shot i		onths? You can check
	Having to get	he appointment al a painful needle ission from my pa		an	

60. I would g	et the HPV shot	even if I knew I r	night get side	effects.	
Strongly Agree	☐ Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	☐ Male Gende
61. How easy	or hard is it for	you to go to the d	loctor when ye	ou need to?	
Very Easy		□ Sometimes Easy or Hard	□ Hard	□ Very Hard	
62. How ofter	o do you miss do Sometimes	ctor's appointment A lot	nts?		
63. Why do y	ou miss doctor's	appointments? Y	ou can check	more than one b	oox.
	I forget about it I don't have tra I have somethin I have somethin I have somethin I have somethin No one can go I don't feel sick I don't like goin	nsportation / It's ag else to do- Schag else to do- Wong else to do- Song else to do- Fanwith me ag to the doctor might get a shot	hard to get the lool rk nething with r	ny friends	
64. Who do you one box.	ou talk to when y	you have question	as about your	health? You can	check more than
	Other guardian My religious le School health c	enter			

My sister
My partner/sexual partner
My Grandmother
No one
Other: Who?
tes most of the decisions about your health? You can check more than one box
I do
My Mother
My Father
Other guardian
My religious leader
School health center
My doctor or nurse
My friends
My sister
My partner/sexual partner
My Grandmother
Other: Who?
1
es doctor's appointments for you? You can check more than one box.
I do
My Mother
My Father
Other guardian
School health center
My doctor or nurse
My friends
My sister
My partner/sexual partner
My Grandmother
Other: Who?
s with you to the doctor? You can check more than one box.
I go alone
My Mother
My Father
Other guardian

	My religious leader
J	School health center
	My doctor or nurse
	My friends
	My sister
	My Partner/sexual partner
	My Grandmother
	Other: Who?

Sexual Self-Efficacy Survey

You are being asked to respond to statements on a three part questionnaire regarding Sexual Self-Efficacy by marking one of the five spaces.

1. Refuse Sexual Intercourse

On a scale of 1 to 5, indicate how sure you are that you would be able to say **NO** to have sexual intercourse for each item. Please bubble in your response

l= Not at All	2=A Little Sure	3=Somewhat Sure	4=Pretty S	Sure	5=\	ery S	ure	
	eone you have			1 O	2 O	3 O	4 O	5 O
	few days or LESS?							
The state of the s	eone whose sex and is not known to	l.		0	0	0	0	0
3. With son dated a long	neone you have time?			0	0	0	0	0
	neone you what to			O	O	O	O	O
	neone with whom ready had sexual			0	0	0	0	0
6. With som to fall in lov	eone who you want e with you?			0	0	0	0	0
	eone who is pushing sexual intercourse?			0	0	0	0	0
	neone after you have ng marijuana?	ė		0	0	0	0	0
9. With son been drinkin	neone after you have	e		0	0	0	0	0

2. Question Potential Sex Partners

On a scale of 1 to 5, indicate how sure you are that you would be able to discuss each of the following with your boyfriend or girlfriend. Please bubble in your response.

=	Not at	All	2=A Little Sure	3=Somewhat Sure	4=Pretty S	ure	5=\	ery S	ure	
	if he/sl	ne has s heroi	ooyfriend/girlfriend ever injected drugs n or cocaine into			1 O	2 O	3 O	4 O	5 O
	sexual (gonor	ly trans rhea, e	eventing AIDS or smitted infections tc.) or pregnancy yfriend/girlfriend?			0	0	0	0	0
	about s	sexual	poyfriend/girlfriend relationships that d in the past?	ĺ		0	0	0	0	0
	if she l	nas eve	ooyfriend/girlfriend er had anal (rectal course?	ı		0	0	0	0	0
	if he/sl	he has	boyfriend/girlfrien ever had a sexually nfection?			0	0	0	0	0

3. Condom Use

On a scale of 1 to 5, indicate how sure you are that you would be able to perform each of the following. Please bubble in your response.

1= Not at All	2=A Little Sure	3=Somewhat Sure	4=Pretty Sure	•	5=X	ery S	ure	
1. Use a con	ndom correctly.		(0	0	0	0	0
	ndom every time you intercourse?	1	(0	0	0	0	0
	ondom during sex ave been drinking?		(0	0	0	0	0
	ndom during sex ave been using		(0	0	0	0	0
during sex of boyfriend/g	using a condom even if your girlfriend does not a condom?		(0	0	0	0	0
	o have sex if your girlfriend will not use		(0	0	0	0	0
7. Get the condoms?	money needed to buy	y	C	0	0	0	0	0
8. Walk in condoms?	to a store and buy		(0	0	0	0	0

INTERVENTION: COLLEGE STUDENT POST-INTERVENTION SURVEY

Date:		ID#:
making decisions what you saw too important to us.	s about your own health. Now, we wo lay and how you feel about certain hea There are no right or wrong answers.	on. We hope that you found it useful when ould like to ask you some questions about alth topics. Your ideas and feelings are Some of the questions ask about your wer every question. Please do not skip any
will see them are		wers will be private. The only people who any of your answers with your friends or
Male	Female	

1 11	That we are going to ask you some questions about HPV and the HPV shot.					
1.	HPV is the m	ost common	STD in the U.S.			
	□ True	☐ False	Don't know			
2.	HPV causes r	nost cases of	cervical cancer and genital warts.			
	□ True	□ False	Don't know			
3.			ainst most cases of cervical cancer.			
٠.		r protects age	manufacture of the state of the			
	True	False	Don't know			
4.	The HPV sho	t protects aga	ainst most cases of genital warts.			
	True	False	Don't know			
5.	Women will i	never need Pa	ap tests if they get the HPV shot.			
	True	False	Don't know			
6.	Everyone who	o has cervica	l cancer has HPV.			
	True	False	Don't know			
7.	A girl cannot	get HPV if th	nere is no penetration during sex.			
			D // lo our			
	True	False	Don't know			
8.	Having sex w	ith more thar	n one person increases girls chances of getting HPV.			
	True	False	Don't know			
9.	Using a condo	om during se	x lowers the chance of getting HPV.			

	True	False	Don't know	
10. G	enital warts c	aused by HP	V are always seen	on the outside of the vagina.
			, me arrays seen	on the outside of the vagina.
	True	False	Don't know	
	Truc	1 disc	Don't know	
11 H	PV is most co	mmonly tran	smitted from uppr	otected vaginal sex.
	i v is most co	minomy train	isinitica from unpr	otected vaginal sex.
	П			
	True	False	Don't know	
	True	raise	Don t know	
12 A	girl can tell it	f har sayual n	artner has HPV.	
12. A	giri can ten n	nei sexuai p	daruier nas Fir v.	
		П		
	True	[] Foloo	Don't know	
	True	raise	Don t know	
12 TI	a LIDV shot:		lad for airly as very	
15. 11	ie fir v snot i	s recommend	led for girls as you	ing as 9 years old.
	m		ET.	
	T	L .	D 2:1	
	True	False	Don't know	
14 0				at the LIDY about
14. G	iris wno nave	never nad se	x do not need to ge	et the HPV shot.
	m			
	T	L.	D 2+ 1	
	True	False	Don't know	
1.5 T.C		TTD37 -14 -1		
15. 11	a giri gets the	HPV snot sr	ne does not need to	use condoms during sex.
			П	
	1000			
	True	False	Don't know	
16 0-			and a UDV about to	-i-l- 10f d for free
10. 50	me doctors at	nd nurses off	er the HPV shot to	girls 18 years of age and younger for free.
		П	П	
	~	LJ	D 111	
	True	False	Don't know	
17 11	1 1 .1	.1	!	ion to got the UDV shot
1 /. Al	i giris need th	eir parent or	guardians permiss	ion to get the HPV shot.
	177	r		
	LJ	L.	D 1:1	
	True	False	Don't know	

18. All three shots of the HPV shot are needed to fully protect against HPV.

True	False	Don't know			
Now we are g shot.	oing to ask you	about some of yo	ur thoughts an	nd feelings about	HPV and the HPV
68. I plan to g	et the HPV shot	in the next 3 mor	nths.		
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
60 How like	v is it that you w	ill daaida ta gat t	ha UDV shot :	n the next 2 men	tha?
09. How like	y is it that you w	ill decide to get the			uns:
Very Lik	tely Likely	In the Middle	Unlikely	Very Unlikely	Male Gender
	•		And a ten Carolina real •		
70. Who wou than one b		u got the HPV sh	ot in the next	3 months? You c	an check more
man one t	oox.				
	Me				
	My Mother				
	My Father				
	Other guardian				
	My religious le				
	School health c				
	My doctor or no My friends	urse			
П	My sister				
	My partner/sex	ual partner			
	My Grandmoth				
	No one				
	Male Gender				
	Other: Who? _				
71 Who wou	ld be unhappy if	you got the HPV	shot in the ne	ext 3 months? Yo	u can check more
than one b		you got the III v	Shot in the ne	At 3 mondis. 10	
3555355, 5 57.5					
	Me				
	My Mother				
	•				
	My religious le	ader			

	My sister My partner/se My Grandmot No one	nurse xual partner her				
72. Who wou the next 3	ld you talk with months? You c	if you were tryin an check more tha	g to decide wan one box.	hether or not t	o get the HPV sl	hot in
73. I plan to ta	My religious le School health My doctor or r My friends My sister My partner/sex My Grandmoth No one Male Gender Other: Who?	eader center nurse kual partner her	t HPV and th	e HPV shot in	the next 3 mont	hs.
П		П	П	П	П	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender	
	y is it that you win the next 3 mo	vill decide to talk	to your paren	t or guardian a	bout HPV and t	he
П	П	П	П	П	П	
Very Lik	ely Likely	In the Middle	Unlikely	Very Unlik	ely Male Ge	nder
75. I plan to ta	alk to my doctor	or nurse about H	PV and the H	PV shot in the	next 3 months.	
	П	П	П		П	
Strongly	Agree	Maybe Agree	Disagree	Strongly	Male Ge	nder
Agree		or Disagree	D. LOUISIAN	Disagree		

shot in the next			to your doctor	or nurse about HF	V and the HPV
Very Likely	Likely	In the Middle	Unlikely	Very Unlikely	Male Gender
77. It is important	to have my	parent or guardia	n's OK before	I get the HPV sho	ot.
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
78. I am comfortab	le talking t	o my parent or gu	ardian about tl	ne HPV shot in the	e next 3 months.
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
79. If I talk to my p	parent or gu	ardian about the	HPV shot, they	'll think I'm havi	ng sex.
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
80. If I really want	to, I can ge	et the HPV shot in	the next 3 mc	onths.	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
81. I am able to get	t the HPV s	shot in the next 3	months.		
П	П	П	[]	П	П
Strongly	Agree	Maybe Agree	Disagree	Strongly	Male Gender
Agree		or Disagree		Disagree	
82. I know enough	about the I	HPV shot to decid	e if I want to g	get it in the next 3	months.
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender

83. I know where	I could go t	o get the HPV sho	ot in the next	3 months.	
Strongly Agree	□ Agree	Maybe Agree or Disagree	☐ Disagree	Strongly Disagree	□ Male Gender
84. I could explain	to my pare	ent or doctor why	I want to get t	he HPV shot in	the next 3 months.
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
85. It will be okay	to have sex	more often if I g	et the HPV sh	ot.	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
86. There is a char	nce I could	get HPV infection			
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
87. HPV infection	can be pre-	vented.			
Strongly	Agree	Maybe Agree	Disagree	Strongly Disagree	
Agree		or Disagree		Disagree	
88. Getting HPV i	nfection is	not a big deal.			
Strongly	Agree	Maybe Agree	Disagree	Strongly	
Agree		or Disagree		Disagree	
89. Getting the HP	V shot wor	ald protect me from	m cervical car	ncer and genital v	warts.
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	

90. It is importan	it to get all th	ree HPV shots.			
Strongly Agree	☐ Agree	Maybe Agree or Disagree	☐ Disagree	Strongly Disagree	
91. The HPV sho	ot doesn't wo	ork.			
			П	П	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
92. I don't know	how the HP	V shot will affect	my body.		
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
93. Only "dirty g	irls" (girls w	ho have sex with	a lot of people	e) get HPV.	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
94. If I decide to	abstain from	sex I do not need	l to get the HP	V shot.	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
95. I am scared to	get the HP	V shot because I a	ım afraid of ne	eedles.	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
96. Even if I don'	t like needle	es, it is important	for me to get t	he HPV shot.	
Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
97. I'll get HPV,	genital warts	s or cervical cance	er if I get the I	HPV shot.	

Strongl Agree	y Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
rigice		of Disagree		Disagree	
98. The HPV	V shot is a cure for	HPV and other of	diseases.		
Strongl Agree	y Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
99. If I get the diseases		have sex without	t worrying ab	out getting any se	exually transmitted
		П		П	П
Strongl Agree	y Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	Male Gender
	I do not want to Not knowing er Having to go th Having to get a Needing permis Being too busy Male Gender	o get the HPV sho nough about it he appointment al painful needle ssion from my pa	one rent or guard		nonths? You can
	None of these value of these value of these value of these value of the Not knowing end of the Having to go the Having to get a Needing permission being too busy Male Gender	o get the HPV sho nough about it he appointment al painful needle ssion from my pa	one	ian	

102.	I would	get the HPV sh	ot even if I knev	w I might get s	side effects.			
	☐ Strongly Agree	☐ Agree	Maybe Agree or Disagree	☐ Disagree	Strongly Disagree	☐ Male Gender		
103.								
	□ Yes	□ No	□ Male Ger	nder				
	we would	like to ask you	some questions	about the Wel	b-based education	n session you just		
104.	Where d	Where did you learn about this web-based session?						
	□ A friend □ A recreation center □ Library □ Community organization □ Church □ Someone who approached me on the street □ Flyer or poster □ School □ Public housing project □ Store □ Newspaper ad in the Metro □ Other:							
105. How easy was it for you to schedule your session?								
V	□ ′ery Easy	□ Easy	☐ Difficult	Uery Difficul	t			
106.	How cor	How convenient was the time of your web-based health session?						
(U Very Convenient	Convenient	[] Inconvenient	Very Inconvenien	t			
107.	How cor	venient was th	e health session	as web-based	?			

	Very	Convenient	Inconvenient	Very				
(Convenient		Name and the specialist	Inconvenient				
108. I learned a lot from the health session.								
					· [7]			
	Strongly	Agree	Maybe Agree	Disagree	Strongly			
	Agree		or Disagree		Disagree			
			J					
109.	9. The health session was fun.							
	Strongly	Agree	Maybe Agree	Disagree	Strongly			
	Agree		or Disagree		Disagree			
110.	The health	n session was	worth my time.					
	Strongly	Agree	Maybe Agree	Disagree	Strongly			
	Agree		or Disagree		Disagree			
102	* / * //							
111.	I understo	od what was	talked about on t	the web-based P	owerPoint health session.			
		-		-	_			
				🗆				
	Strongly	Agree	Maybe Agree	Disagree	Strongly			
	Agree		or Disagree		Disagree			
112	T 1 J 1			shave mer baalele	after viewing the web based			
112.			better decisions a	about my nearm	after viewing the web-based			
11	ealth session	•						
		ra.		П	П			
	Ctuon also	<u> </u>	Mariha Amaa	Diagaraa	Strongly			
	Strongly	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree			
	Agree		of Disagree		Disagree			
113. The presenter of the web-based health session were respectful of my thoughts.								
	Strongly	Agree	Maybe Agree	Disagree	Strongly			

	Agree		or Disagree		Disagree	
114.	The CDC electronic cards were respectful of my thoughts.					
	Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
115.	The presenter knew what she was talking about.					
	Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
116.	I want to tall	k to my fri	ends and family a	bout what I le	arned.	
	Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
117.	I want to talk to my partner/sex partner about what I have learned.					
	Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
118.	I would tell my friends to watch the web-based health session.					
	Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
119.	Overall, I really liked this health session.					
	Strongly Agree	Agree	Maybe Agree or Disagree	Disagree	Strongly Disagree	
120.	Do you think e-mailing for HPV shot appointment reminders will be helpful					
	Vec	No				