SMART Moves: Core Post-Evaluation Survey - For Members

Thank you very much for taking this survey today! Your opinion is important to us and we appreciate your time.

This survey is designed to find out about you, your opinions and your experiences. Your answers will help make the Boys & Girls Clubs and Youth Centers more interesting and enjoyable for you and others like you, so please answer honestly.

You can answer honestly because your survey won't have your name on it, and nobody seeing the survey will know your name. This means your answers will never be shared with your parents, friends or anyone in your Club or Youth Center. Your answers will be kept confidential and used to better understand Boys & Girls Clubs, Youth Centers and their members.

Instructions:

- 1. This is not a test. There are no right or wrong answers.
- 2. If you don't find the answer that fits exactly, use the answer that comes closest.
- 3. If you need help with a question, raise your hand and quietly ask the staff member helping you today so that you don't disturb others around you.
- 4. If any question makes you feel uncomfortable, you don't have to answer it. Just skip it and go to the next question.
- 5. Your participation is voluntary and will not affect your membership in the Club.

Remember, there are no right or wrong answers – only your opinion and your experiences.

Thanks again for your time.

| BOYS & GIRLS CLUBS OF AMER | ICA |
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| [Unique Identifier] | [Club Site] | [Date] | _ |
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| For each of the following statements | , choose the ans | wer that bes | t describes | you. |
|--|--------------------|---------------|--------------|----------------|
| When I have a problem, I can work it out myself. | Not True at All | Not Very True | Sort of True | Very True |
| If I try my best, I can do most things. | Not True at All | Not Very True | Sort of True | Very True |
| There are many things that I can do well. | Not True at All | Not Very True | Sort of True | Very True |
| I feel confident in my ability to communicate assertively. | Not True at All | Not Very True | Sort of True | Very True |
| I feel certain in my ability to make a decision on my own about my health. | Not True at All | Not Very True | Sort of True | Very True |
| I feel confident talking with adults about health questions. | Not True at All | Not Very True | Sort of True | Very True |
| How much do you agree | e or disagree witl | h the followi | ng? | |
| I can describe my feelings. | Strongly Disagree | Disagree | Agree | Strongly Agree |
| I understand my actions. | Strongly Disagree | Disagree | Agree | Strongly Agree |
| I can say what I am thinking or feeling without using words. | Strongly Disagree | Disagree | Agree | Strongly Agree |
| I can tell others what I am thinking or feeling. | Strongly Disagree | Disagree | Agree | Strongly Agree |
| I make decisions that help me achieve my future goals. | Strongly Disagree | Disagree | Agree | Strongly Agree |
| I feel good about my future. | Strongly Disagree | Disagree | Agree | Strongly Agree |
| I can achieve my dreams if I focus on them. | Strongly Disagree | Disagree | Agree | Strongly Agree |
| I think about how what I do today could affect my plans for my future. | Strongly Disagree | Disagree | Agree | Strongly Agree |
| I feel confident that I can say no to a behavior that I think is unhealthy. | Strongly Disagree | Disagree | Agree | Strongly Agree |
| I feel confident that I can say no when pressured by a peer to participate in a behavior I think is unhealthy. | Strongly Disagree | Disagree | Agree | Strongly Agree |
| It's important for me to choose healthy behaviors. | Strongly Disagree | Disagree | Agree | Strongly Agree |
| For each of the following statements, please to | ell us how easy or | difficult the | se behavior | s are for you. |
| Knowing the emotions I feel. | Very Difficult | Difficult | Easy | Very Easy |
| Understanding how my feelings influence how I act. | Very Difficult | Difficult | Easy | Very Easy |
| Explaining issues related to my health to adults. | Very Difficult | Difficult | Easy | Very Easy |
| Explaining issues related to my health to my peers. | Very Difficult | Difficult | Easy | Very Easy |
| Thinking of past choices when making new decisions. | Very Difficult | Difficult | Easy | Very Easy |
| Applying new knowledge to make decisions. | Very Difficult | Difficult | Easy | Very Easy |
| Taking the time to List–Compare–Choose my options and consequences when making decisions about my health. | Very Difficult | Difficult | Easy | Very Easy |
| Asking for advice from a trusted adult before making an important decision. | Very Difficult | Difficult | Easy | Very Easy |
| Being able to get information about health from the internet when I need it. | Very Difficult | Difficult | Easy | Very Easy |
| Knowing which places online or in person provide truthful information. | Very Difficult | Difficult | Easy | Very Easy |

| [Unique Identifier] | [Club Site] | | [Date] | | | | |
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| Complete your responses for each of the questions. | | | | | | | |
| 1. What did you like best about the program? | | | | | | | |
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| 2. What did you like least about the program? | | | | | | | |
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| 3. What would you change about the program | ? | | | | | | |
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