

YOUTH FOLLOW-UP SURVEY

This survey will help us learn about you and the other youth who are participating in the mentoring program. It is important for us to learn as much as we can about what you get out of your participation and how we can improve the program to make it even better next year. It is important that you answer each question as *honestly* as you can. Remember that there are *no right or wrong answers*, so please do not answer the questions based on what you think we want to hear. Only the program coordinator will see how you answer the questions, and he or she will keep your answers confidential.

Your Name: _____ Date: _____

Unless indicated, please CHECK ONLY ONE BOX per item.

1. How old are you?

- | | |
|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> 10 years old | <input type="checkbox"/> 15 years old |
| <input type="checkbox"/> 11 years old | <input type="checkbox"/> 16 years old |
| <input type="checkbox"/> 12 years old | <input type="checkbox"/> 17 years old |
| <input type="checkbox"/> 13 years old | <input type="checkbox"/> 18 years old |
| <input type="checkbox"/> 14 years old | |

2. Are you . . .

- | | |
|-------------------------------|---------------------------------|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female |
|-------------------------------|---------------------------------|

Berndt and Perry, Features of Children's Friendship; 2 subscales: Communication (items a, c, e, g); Conflict (items b, d, f, h)

How often are the following true for you?	Never True	Sometimes True	Often True	Very Often True
a. I talk to my friends about something that is bothering me.				
b. I get into arguments with my friends.				
c. I tell my friends something important that I want them to keep as a secret.				
d. I feel that it's hard to get along with my friends.				
e. I tell my friends when I feel really good about something that happened to me.				
f. My friends annoy or bug me.				
g. I tell my friends things about myself that I won't tell most kids.				
h. Friends tease me about things that I do.				

How many <i>adults in your life</i> (parents, teachers, counselors, relative, friends, etc.) do the following things for you?	None	One	2-3	4-5	6 or more
a. Offer help with schoolwork?					
b. Say something nice when you do something good?					
c. Pay attention to what's going on in your life?					
d. Get on your case if you mess up or make a mistake?					
e. Offer help if you felt physically threatened? For example, if someone was going to hit you or beat you up?					
f. Offer help in an emergency?					
g. Offer advice about personal problems, such as a problem with a friend?					
h. Offer help if you were really upset or mad?					

See pre-survey for source information on items above and below

Other than your mentor, how many <i>adults elsewhere</i> (that are not in your family or at school) do the following things for you?	None	One	2-3	4-5	6 or more
a. Offer help with schoolwork?					
b. Say something nice when you do something good?					
c. Pay attention to what's going on in your life?					
d. Get on your case if you mess up or make a mistake?					
e. Offer help if you felt physically threatened? For example, if someone was going to hit you or beat you up?					
f. Offer help in an emergency?					
g. Offer advice about personal problems, such as a problem with a friend?					
h. Offer help if you were really upset or mad?					

Two scales are embedded in the following items:

- 1) Petersen et al. *Self-Image Questionnaire for Young Adolescents*, Mastery & Coping Scale (items a, b, c, d, f, i, k, l, n)
- 2) Attitudes Toward Adults, adapted from *Across Ages: Attitudes Toward Older Adults* (items e, g, h, j, m)

To what extent do you disagree or agree with the following statements?	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I feel that I am able to make decisions.				
b. My work, in general, is at least as good as the work of most others.				
c. I feel that I cannot handle difficult situations.				
d. New situations are often hard for me to deal with.				
e. Adults can't understand kids/teens.				
f. I feel that I have no talent whatsoever.				
g. It's possible to have fun with adults.				
h. I have a lot in common with adults.				
i. I am looking forward to the years ahead.				
j. There's a lot to learn from adults.				
k. If I put my mind to it, I can learn almost anything.				
l. I am afraid of growing up.				
m. Most adults don't understand kids/teens.				
n. When I decide to do something, I do it.				

Courtesy of MENTOR and Oregon Mentors. Adapted from evaluation instruments developed by Dr. Cynthia L. Sipe, Youth Development Strategies, Inc. for an evaluation of Bear Stearns' "Bear Cares" mentoring project.

See pre-survey for source information on items below

How often are the following true for you?	Never True	Some-times True	Often True	Very Often True
a. I pay attention in class.				
b. I often come to class unprepared.				
c. I don't try very hard in school.				
d. I work very hard on my schoolwork.				

How important is each of the following to you in your life?	Not at All Important	Somewhat Important	Important	Very Important
a. Doing the best I can in school.				
b. Doing what I believe is right even if my friends make fun of me.				
c. Standing up for what I believe, even when it's unpopular to do so.				
d. Telling the truth, even when it's not easy.				
e. Accepting responsibility for my actions when I make a mistake or get in trouble.				
f. Doing my best even when I have to do a job I don't like.				
g. Helping to make the world a better place in which to live.				
h. Giving time or money to make life better for people.				

When you're faced with a problem or difficult situation, how likely are you to do the following?	Not at All Likely	Not Very Likely	Somewhat Likely	Very Likely
a. Go over in my mind what I will say or do.				
b. Forget the whole thing.				
c. Come up with a couple of different solutions to the problem.				
d. Try not to act too hastily or follow my first hunch.				
e. Talk to someone to find out more about the situation.				
f. Try to see things from the other person's point of view.				
g. Ask a relative or friend I respect for advice.				
h. Go on as if nothing is happening.				
i. Wait to see what will happen before doing anything.				
j. Talk to someone about how I'm feeling.				
k. Accept sympathy and understanding from someone.				
l. Talk to someone who can do something to solve the problem.				
m. Make a plan of action and follow it.				

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The following statements describe your mentor or what you discuss with your mentor.	Strongly agree	Agree	Disagree	Strongly disagree
a. My mentor helps me challenge myself to succeed.				
b. I am able to look to my mentor for guidance.				
c. My mentor praises me and encourages me to do well.				
d. My mentor helps me have the courage to take a chance at doing something when I need to.				
e. I am able to discuss problems with my mentor.				
f. I feel I can do more things on my own because of my mentor.				
g. I am proud to tell my mentor when I have done well at some activity.				
h. My mentor helps me to see different ways I can deal with my problems.				
i. My mentor asks about things that matter to me.				
j. I like talking things over with my mentor.				
l. My mentor helps me to spend more time and put more effort into my learning.				
m. My mentor is always there for me.				
n. I discuss with my mentor what I would like to do in the future.				
o. I do better at school because my mentor tells me I can.				
p. When I do something that makes me feel bad, I discuss it with my mentor.				
q. My mentor helps me to feel good about myself.				

How often do you talk with someone at the program about how things are going with your mentor?

- | | |
|--|--|
| <input type="checkbox"/> Never or almost never | <input type="checkbox"/> At least once a month |
| <input type="checkbox"/> About every other month | <input type="checkbox"/> At least once a week |

In general, how helpful was the advice you received from program staff about your mentoring relationship?

- | | |
|---|---|
| <input type="checkbox"/> Very helpful | <input type="checkbox"/> Not very helpful |
| <input type="checkbox"/> Somewhat helpful | <input type="checkbox"/> Not at all helpful |

Would you recommend participating in this mentoring program to your friends?

- | | |
|-----------------------------|------------------------------|
| <input type="checkbox"/> No | <input type="checkbox"/> Yes |
|-----------------------------|------------------------------|

Overall, how has your experience in this mentoring program been for you?

- Very positive
- Somewhat positive
- Somewhat negative
- Very negative

Finally, do you have any final comments about this mentoring program? We are especially interested in any suggestions you might have for things the program might do differently to make this a better experience for youth.

THANK YOU VERY MUCH FOR COMPLETING THIS SURVEY!

Please return to the program coordinator.