



# THE 2022 UTAH COLLEGE SEXUAL BEHAVIOR SURVEY: INITIAL FINDINGS REPORT

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## Report Summary

**Purpose:** The purpose of the 2022 Utah College Sexual Behavior Survey project was to use retrospective sexual behavior and education measures to gain a better understanding of the sexual behaviors and perceptions of sex education of Utah youth by asking students aged 18-21 years old about their sexual behaviors as youth.

**Measures:** The survey questions represented ten topical areas. These areas included questions about: basic demographics; non-penetrative sex; penetrative sex; contraceptive use and pregnancy and sexually transmitted infection (STI) prevention; communication and consent; sexting; sex education; attitudes about sex; current sex behavior; and university programming.

**Method:** A one-time survey was disseminated to students at three Universities in Utah between the ages of 18-21. We relied on a convenience sampling strategy to answer the research questions guiding this study.

**Analysis:** Univariate statistics were conducted to summarize characteristics of the data derived.

**Results:** This report outlines the descriptive results from the 2022 Utah College Sexual Behavior Survey. Results showed that youth in Utah engage in non-penetrative and penetrative sex. Participants also reported wanting additional sex education, and rated friends and family among their most trusted sources of information related to sex education.

**Funding:** This project was supported by a seed grant from Utah State University (USU) Extension.

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**Contact:** Please contact Dr. Cris Meier ([cris.meier@usu.edu](mailto:cris.meier@usu.edu)) for more information about this study.

**Human Subjects Statement:** This project was approved by the USU IRB prior to any data collection activities (#12947).

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## **Background & Project Purpose**

The Youth Risk Behavior Surveillance System (YRBSS) is a national survey administered to assess adolescent health and risk-taking behaviors (Centers for Disease Control and Prevention (CDC), 2021). Each U.S. state chooses which questions to include from the national survey. Historically, Utah has included **only one question** about sexual behaviors. This singular sexual behavior question was removed after the 2013 YRBSS and in 2019, two questions were added that asked about testing for HIV and sexually transmitted infections (STIs; CDC, 2021). However, beyond these two measures, researchers, organizations, and policy makers do not have a good understanding of the trends and changes in sexual behaviors (e.g., rates of penetrative sex) of Utah youth. Consequently, there is minimal data to inform Utah programming, legislation, and prevention measures to reduce risky sexual behavior in adolescence, such as unprotected sex.

The purpose of the 2022 Utah College Sexual Behavior project was to collect generalizable sexual behavior and perceptions of sex education among college students between the ages of 18-21. This report summarizes the descriptive results from the 2022 Utah College Sexual Behavior Survey.

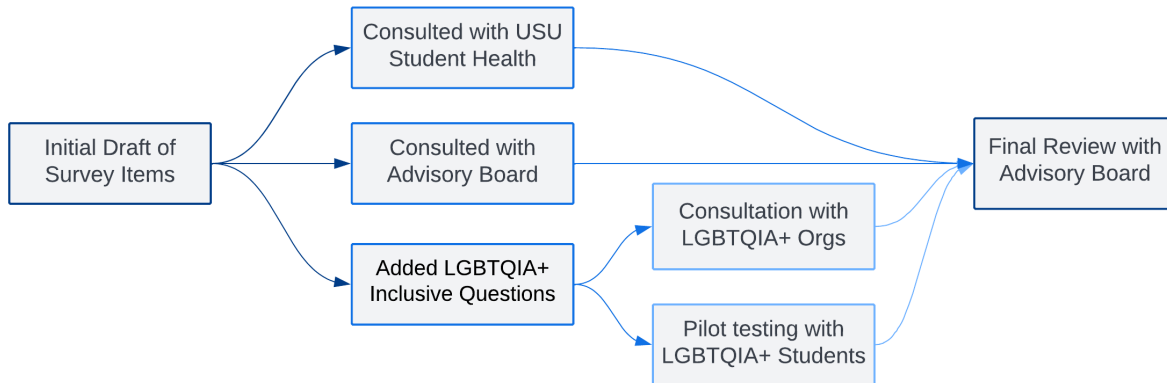
## **Method**

We utilized a one-time survey, using a convenience sampling strategy to answer the research question guiding this study. This section provides a brief overview of the procedures used for this study, including survey creation, data collection procedures, and the measures used to understand youth sexual behaviors and perceptions of sex education.

### **Survey Construction**

The current project utilizes many of the survey questions used in the creation of the 2021 Utah College Sexual Behavior project. Figure 1 shows the process taken to develop the initial survey used in 2021. The process was iterative and consisted of consultation with content experts, stakeholders, and college students.

**Figure 1. The process for developing the survey.**



For the current project, we first began with the questions used in the 2021 survey and removed all questions that were used only to test the reliability of the retrospective measure used. Next, our team made slight adjustments to several questions that were not well worded in the previous version of the survey. Additionally, we adapted several measures that would act as composite measures which were previously not possible because of the level of measurement.

Our project team then formed an advisory board to receive feedback on survey measures, including reexamining the definitions provided to participants (e.g., non-penetrative sex) and measures with specific LGBTQIA+ inclusive response options. The advisory board was comprised of nine members who came from USU, Utah Tech University and from organizations who work in the sex education field (e.g., Planned Parenthood of Utah). Several changes were made to the survey based on their feedback.

### **Data Collection Procedures**

Prior to any data collection activities, this project was approved by the institutional review board at USU (#12947). The one-time survey was sent to USU students and students at three additional universities (UVU, Utah Tech University, and the University of Utah) in September 2022. At USU, to invite students to participate in the survey, one email was sent by the Student Affairs office at USU to students across campuses (both Logan and statewide) who were between the ages of 18-21. The email contained a link to the Qualtrics survey. No additional reminder emails were sent. The survey was left open for a total of three-weeks. To recruit students outside of USU, contacts at partner universities were provided an IRB approved email to send out to students using their preferred method of contact.

## **Sample**

A total of 1,093 students participated in the survey.

## **Incentives**

Participants who completed the survey were able to enter a drawing for one of five prizes (e.g., Amazon gift card).

## **Measures**

The Utah College Sexual Behavior Survey items can be divided into nine sections and are outlined below (see Appendix A for complete survey and definitions used). Students were first asked three selection criteria questions to ensure participants were at least 18 years of age, went to high school in Utah, and were between the ages of 18-21. The survey then began with consent information including the intent and overview of the survey. Resources (e.g., both USU specific and organizations outside of USU) were offered to students at the conclusion of the survey.

**Demographics.** These questions included university currently attending, USU campus attending (if attending USU), county where they attended high school, age, relationship status, sexual orientation, gender identity, ethnicity, race, religious affiliation, parent income, and parent educational attainment.

**Non-penetrative sex.** Questions included engagement in non-penetrative sex, the age at which they first engaged in non-penetrative sex as a youth, and use of drugs or alcohol. Follow up questions were only asked to those who said they had engaged in non-penetrative sex.

**Penetrative sex.** Questions included engagement in penetrative sex, age of first penetrative sex act, number of partners, and alcohol or drug use before penetrative sex. Follow up questions were only asked to those who said they had engaged in penetrative sex.

**Contraceptive use and STI prevention.** Questions assessed use of methods to prevent pregnancy and STIs as youth.

**Communication and consent.** Questions included in this section asked about the level of communication of topics such as consent, STI status, and pregnancy prevention prior to engaging in either non-penetrative or penetrative sex as youth. Follow up questions were only asked to those who said they had engaged in penetrative sex as youth. Additional questions asked all participants about their current confidence in giving and obtaining consent,

at what point in their relationship did they discuss consent and STI testing/status, and who they preferred to talk with about specific questions related to sex as youth.

***Sexting.*** These questions included assessing the taking or receiving of sexually explicit images as a youth.

***Sex education.*** Questions measured perceptions regarding sex education as youth, including whether they felt they received enough information about STIs and pregnancy prevention, healthy sexual behaviors, healthy relationships, sexuality, and LGBTQIA+ orientations and relationships in an unbiased manner. Additionally, participants were asked about sources of information they received for sex education.

***Current sex behaviors.*** Questions asked about current sexual activity, confidence in giving and obtaining consent, confidence to make healthy sexual decisions, and general current feelings about sex.

***University programming.*** This question gauged interest in programs offered by universities related to sexual behaviors.

## Results

### Section 1: Participant Demographics

The demographic characteristics of the participants help illustrate the population that the results represent. The assessed characteristics include college currently attending, USU campus the student attended (if a USU student) at the time of the survey, age, the county where they attended high school, gender identity, sexual orientation, race and ethnicity, family income, religious affiliation, and relationship status.

**College Attending and Campus Response Rate.** Most survey participants attended USU (90%), with some coming from Utah Tech University (5.5%) and Utah Valley University (4%). Among those who attended USU, a majority attended the Logan campus (90.7%). Table 1 shows the top five most frequently attended campus by participants.

**Table 1. Participants by campus (N = 976).**

|                     | %    |
|---------------------|------|
| Logan (main campus) | 90.7 |
| Price (USU Eastern) | 3.5  |
| Uintah Basin        | 1.7  |
| Brigham City        | 1.1  |
| Tooele              | 0.8  |

**Participants Age.** Respondent age was dispersed across all ages included in the study, with 18 years being the most frequently occurring age of participants (35.3%); followed by 21 years (25%), 20 years (20.3%), and 19 years (19.4%).

**County Attended High School.** Most often, participants reported attending high school in Salt Lake County (19.8%). Four additional counties, combined, made up a majority of the counties that participants attended high school in. Table 2 shows the top five counties.

**Table 2. Top five most common counties where participants attended high school (N = 1,069).**

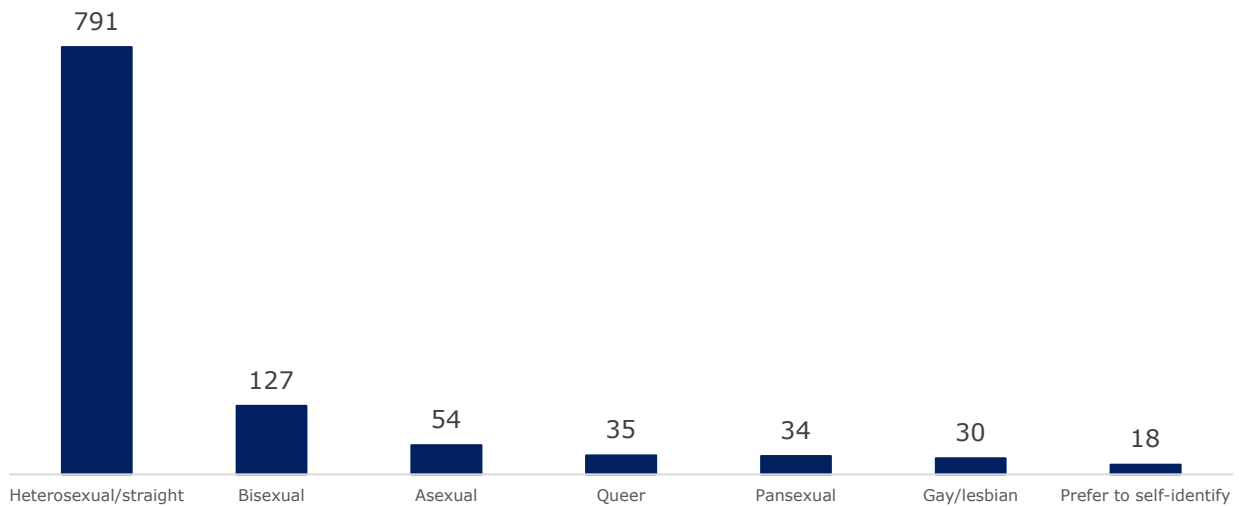
|                  | %    |
|------------------|------|
| Salt Lake County | 19.8 |
| Utah County      | 18.9 |
| Davis County     | 16.7 |
| Cache County     | 16.0 |
| Weber County     | 6.3  |

**Gender Identity.** Female identifying students made up the majority of the sample (65.3%), while male identifying students made up the second largest gender identity represented (28.8%). Additional identities were also reported, including genderqueer/gender non-conforming (4.1%), different identity or more than one identity (1%), trans male/trans man (0.6%), and trans female/trans woman (0.2%).

**Sexual Orientation.** The majority of participants identified as heterosexual (straight; 72.6%). Figure 2 shows there was diversity in the remaining 27% of the responses. This included bisexual (11.7%), asexual (5.0%), and gay/lesbian (2.8%).



**Figure 2. Sexual orientation of participants (N = 1,089).**



**Race and Ethnicity.** As Table 3 shows, the majority of participants were white (91.2%).

**Table 3. Race and ethnicity of participants (N = 1,084).**

|  | %    |
|--|------|
| White/Caucasian                                    | 91.2 |
| Hispanic or Latino                                 | 3.2  |
| Two or more  | 3.0  |
| Asian  | 1.0  |
| American Indian, Native American, or Alaska Native | 0.6  |
| Black or African American                          | 0.5  |
| Native Hawaiian or Pacific Islander                | 0.4  |
| Other  | 0.1  |

**Family Income.** A family’s income is one determining factor of a student’s socioeconomic status. In our sample, participants most often identified not knowing their family’s income in high school (24.6%). The next most frequent response was more than \$125,000 (17.0%). Table 4 shows the breakdown of responses.

**Table 4. Family income in high school of participants (N = 1,092).**

|                       | %    |
|-----------------------|------|
| Less than \$24,999    | 3.8  |
| \$25,000 - \$49,999   | 8.5  |
| \$50,000 - \$74,999   | 15.2 |
| \$75,000 - \$99,999   | 15.2 |
| \$100,000 - \$124,999 | 15.7 |
| More than \$125,000   | 17.0 |
| I don't know          | 24.6 |

**Religious Affiliation.** The majority (62.6%) of participants indicated they were affiliated with the Church of Jesus Christ of Latter-Day Saints faith. The second largest category was non-religious (30.0%; see Table 5).

**Table 5. Religious affiliation of participants (N = 1,066).**

|   | %    |
|---|------|
| Mormon, Church of Jesus Christ of Latter-day Saints               | 62.6 |
| Non-religious   | 30.0 |
| Other   | 2.9  |
| Another Christian denomination (e.g., Baptist, Episcopalian etc.) | 1.9  |
| Catholic  | 1.9  |
| Protestant  | 0.4  |
| Buddhism  | 0.1  |
| Islam   | 0.1  |
| Judaism   | 0.1  |

**Relationship Status.** The majority (54.0%) of participants indicated that they were single. See Table 6 for the distribution of responses across relationship types.

**Table 6. Type of relationship of participants (N = 1,092).**

|                    | %    |
|--------------------|------|
| Single             | 54.0 |
| Dating exclusively | 22.7 |
| Dating around      | 11.5 |
| Married            | 7.6  |
| Engaged            | 1.9  |
| Cohabiting         | 1.8  |
| Other              | 0.5  |

## Section 2: Non-Penetrative & Penetrative Sex

Participants were asked a series of questions related to non-penetrative sex and penetrative sex behaviors as youth. Definitions of each were given to survey participants and are stated here:

**Non-penetrative sex:** The intentional and consensual touching (either giving or receiving), either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks.

**Penetrative sex:** Regardless of the other partner's gender, this is involving the consensual penetration of the vagina, anus, or oral contact by the penis or by other means (e.g., dildo, manual).

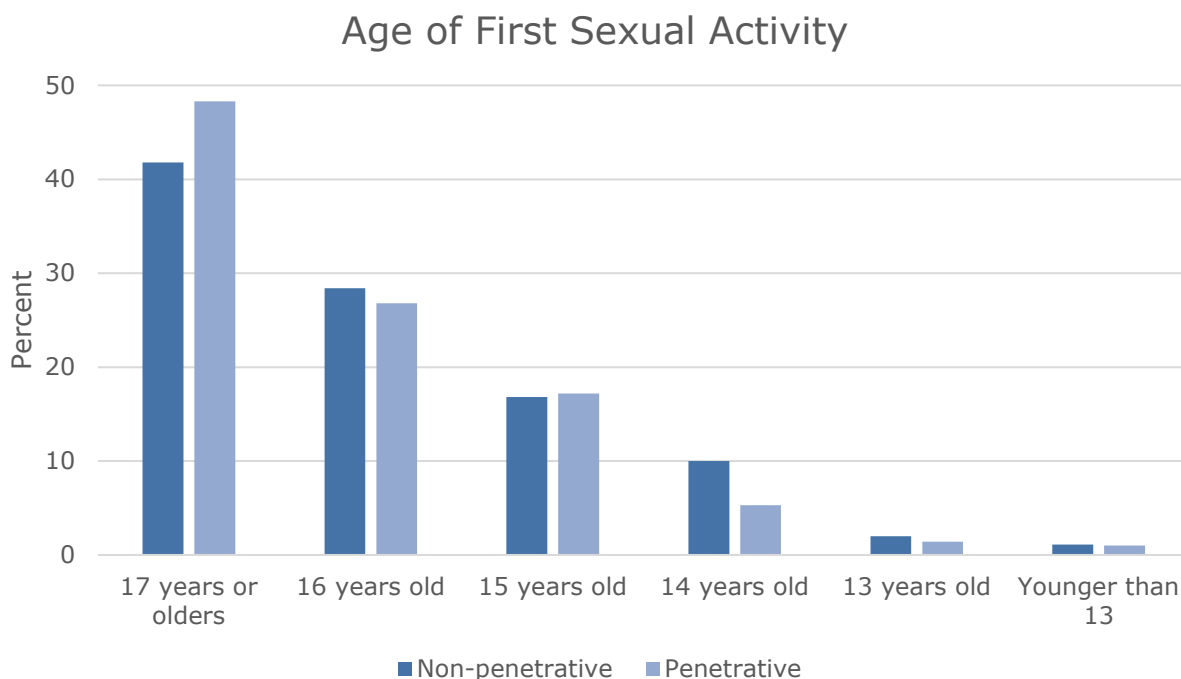
Specifically, participants were asked about having non-penetrative sex and penetrative sex, the age they first had non-penetrative or penetrative sex, the number of partners participants had penetrative sex with, use of drugs or alcohol before having penetrative sex, and the level of preparedness for engaging in penetrative sex.

All questions asked participants to retrospectively report their behaviors by thinking back to middle school and high school unless specified otherwise.

**Rates of Non-Penetrative & Penetrative Sex.** When asked if participants had non-penetrative sex in middle or high school, 33.5% ( $n = 366$ ) said they had non-penetrative sex, while 19.6% ( $n = 211$ ) reported that they had penetrative sex in middle school or high school.

**Age of First Non-Penetrative & Penetrative Sex.** Of those who reported that they had non-penetrative sex ( $n = 366$ ) in middle or high school, participants reported most often having had non-penetrative sex the first time when they were 17 years or older (41.8%; see Figure 6). Similar trends were reported among those who reported they had penetrative sex ( $n = 211$ ) in middle or high school.

**Figure 3. Participant age when they first had non-penetrative sex ( $n = 366$ ) or penetrative sex ( $n = 211$ ).**



**Number of Penetrative Sex Partners.** Among those who had penetrative sex (see Table 7), most often students reported having penetrative sex with one partner (54.3%) as a youth.

**Table 7. Number of penetrative sex partners while in high school ( $n = 208$ ).**

|                  | %    |
|------------------|------|
| 1 person         | 54.3 |
| 2 people         | 19.2 |
| 3 people         | 13.9 |
| 4 people         | 4.3  |
| 5 people         | 3.4  |
| 6 or more people | 4.8  |

**Use of Drugs or Alcohol Before Penetrative Sex.** When asked if participants had drunk alcohol or used drugs before having penetrative sex in middle school or high school, 21.2% selected yes.

### Section 3: Contraceptive Use, STI Prevention, Communication, and Consent

We explored additional sexual health behaviors that described participants use of STI and pregnancy prevention methods. We also assessed participants sex communication prior to engaging in non-penetrative or penetrative sex, regarding topics such as consent and STI testing or status.

**Contraceptive Use & STI Prevention.** Participants who had penetrative sex in high school or middle school ( $n = 211$ ) were asked what method participants used to protect against STIs as youth. Among those who had penetrative sex, participants most often identified that they used condoms ( $n = 162$ ). Table 8 shows the other identified methods of STI protection used.

**Table 8. Method(s) used to protect against STIs ( $n = 211$ ).**

|                    | n   |
|--------------------|-----|
| No method was used | 64  |
| Condoms            | 162 |
| Dental dam         | 84  |
| Other              | 7   |

Finally, when participants were asked to select the method they used to prevent pregnancy in high school, most often participants selected a condom ( $n = 145$ ); however, there were a variety of methods participants selected (see Table 9). Of concern was that approximately half of participants ( $n = 102$ ) who had engaged in penetrative sex used the pullout or withdraw method.

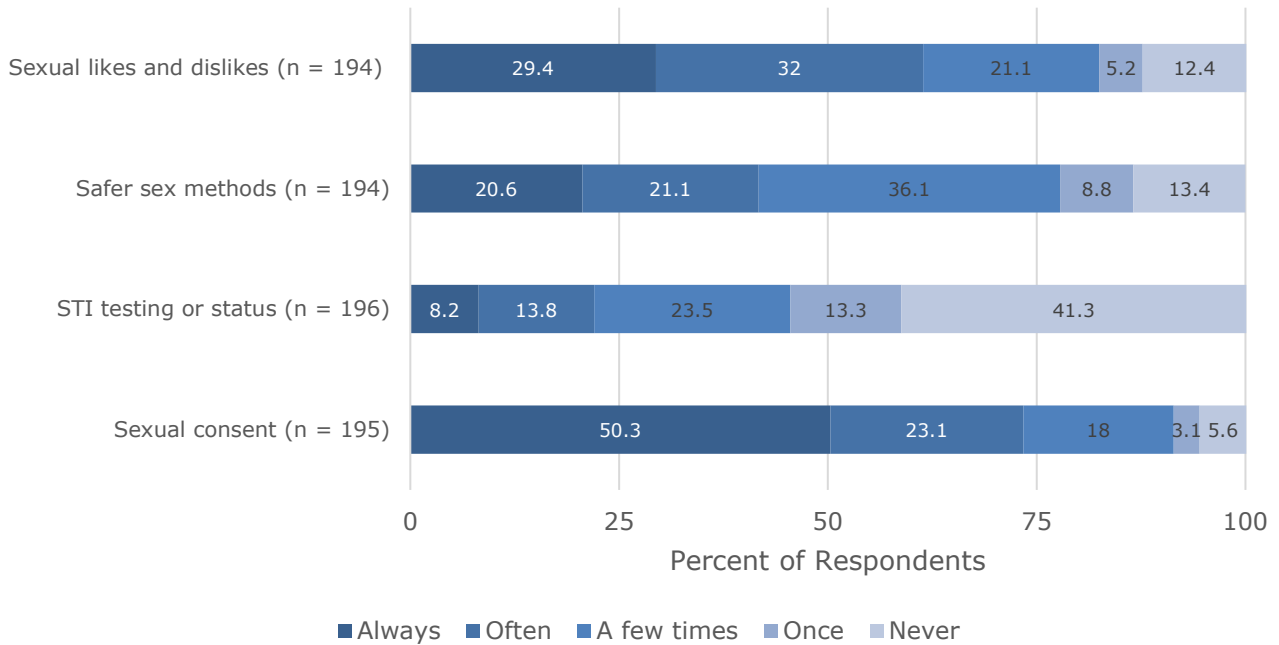
**Table 9. Method(s) used to protect against pregnancy ( $n = 211$ ).**

|  | n   |
|--|-----|
| No method was used                                     | 34  |
| Birth control pills                                    | 88  |
| Condom   | 145 |
| An IUD or implant                                      | 35  |
| A shot, patch, or birth control ring                   | 11  |
| Pullout or withdraw method                             | 102 |
| I did not engage in penis in vagina sexual penetration | 13  |
| I cannot recall  | 1   |

Participants ( $n = 196$ ) who had engaged in penetrative sex were asked to identify the frequency of which they communicated about four topics prior to engaging in penetrative sex in high school.

As Figure 4 shows, students most often said they always talked about consent (50.3%). For the three remaining measures, there was much variation of the responses within each topic area.

**Figure 4. Percent communicate about the following prior to engaging in penetrative sex.**



Next, participants who had engaged in penetrative sex ( $n = 211$ ) and reported communicating about consent ( $n = 175$ ) were asked when they discussed consent in their relationship. As Table 10 shows, most often participants reported discussing consent before the sexual encounter (49.1%).

**Table 10. When participants discussed consent ( $n = 175$ ).**

|                                      | %    |
|--------------------------------------|------|
| At the beginning of the relationship | 14.9 |
| A while into the relationship        | 24.0 |
| Before the sexual encounter          | 49.1 |
| After the sexual encounter           | 4.6  |
| When there was an issue              | 7.4  |

Similarly, participants who had engaged in penetrative sex ( $n = 211$ ) and reported communicating about STI status/testing ( $n = 98$ ) were asked when they discussed their STI status/testing in their relationship. Most often participants reported discussing their STI status/testing before the sexual encounter (35.8%). Table 11 shows the distribution of responses.

**Table 11. When participants discussed STI status/testing (*n* = 98).**

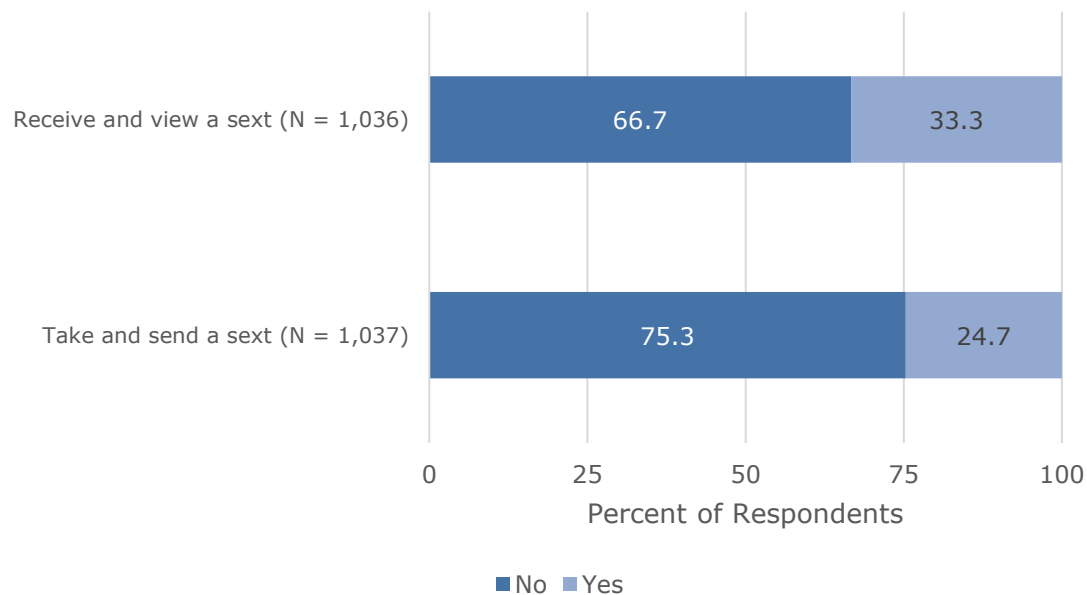
|                                      | %    |
|--------------------------------------|------|
| At the beginning of the relationship | 15.3 |
| A while into the relationship        | 17.4 |
| Before the sexual encounter          | 35.8 |
| After the sexual encounter           | 18.4 |
| When there was an issue              | 13.3 |

## Section 4: Sexting

Students were also asked about their use and participation of sexting while they were in high school. There were two questions assessing participants' sending and receiving sexually explicit images.

As Figure 5 shows below, a majority of participants did not take and send a sext (75.3%) nor did they receive and view a sext (66.7%).

**Figure 5. The responses to each question regarding sexting behavior in middle school and high school.**



## Section 5: Sex Education

The survey asked participants a series of questions about the sex education they received in high school. Sex education questions focused on knowledge about HIV/AIDS, who provided information about sex education topics and in which settings, sources of sex education they were most comfortable

engaging with, the level of information they received, and communication with their parent/guardian about sex education topics. Responses to these questions can provide us with additional evidence about the needs and gaps in the sex education youth receive in Utah.

**Knowledge About HIV/AIDS in High School.** Participants were asked to self-rate their knowledge about HIV/AIDS prevention during high school. Most often, participants (39.7%) indicated a fair level of knowledge (see Table 12).

**Table 12. Self-rated HIV/AIDS knowledge in high school (N = 1,050).**

|           | %    |
|-----------|------|
| Poor      | 21.1 |
| Fair      | 39.7 |
| Good      | 30.1 |
| Excellent | 9.0  |

Participants were also asked to reflect on how much they learned about how to prevent STIs in high school. Participants most often (42.0%) indicated that they learned some information (see Table 13).

**Table 13. Amount learned about STI prevention in high school (N = 1,049).**

|               | %    |
|---------------|------|
| Nothing       | 7.8  |
| Only a little | 33.2 |
| Some          | 42.0 |
| A lot         | 17.0 |

**Confidence Making Healthy Sex Decisions.** We also asked participants to rate their level of confidence for making healthy sexual decisions. Most frequently, participants (34.4%) indicated that they felt confident making healthy sexual decisions (see Table 14).

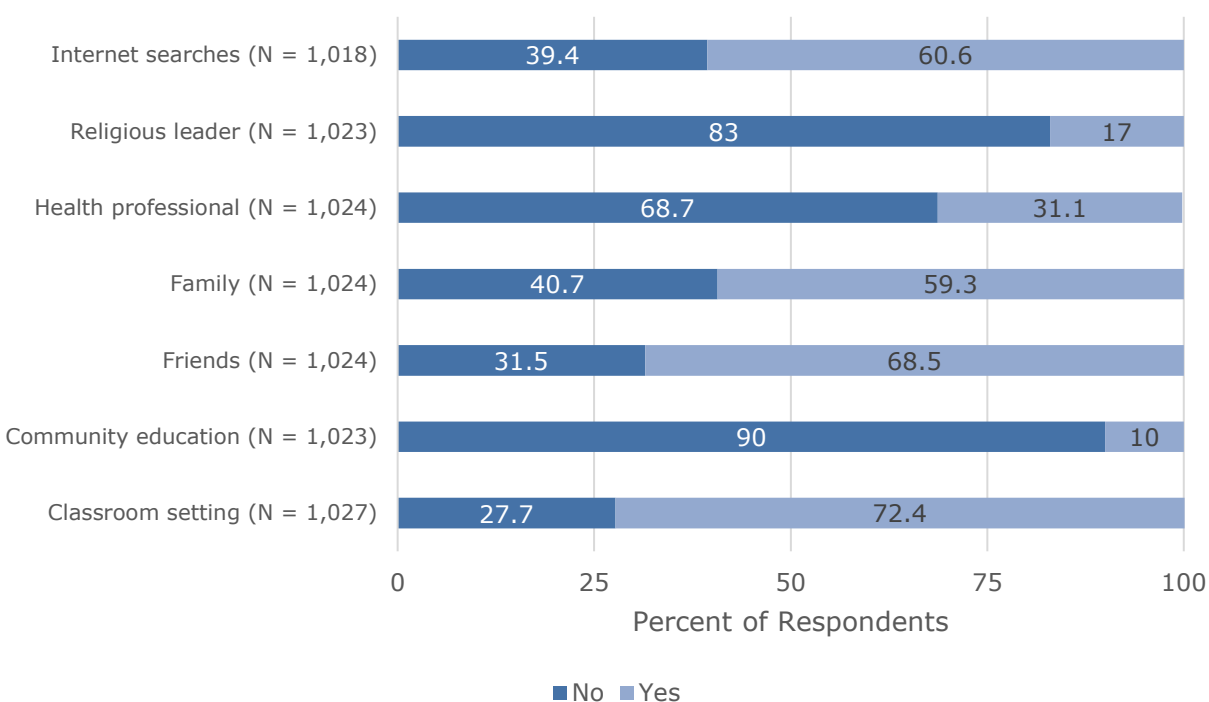
**Table 14. Confidence in making healthy sex decisions (N= 1,051).**

|                      | %    |
|----------------------|------|
| Not at all confident | 5.3  |
| Not very confident   | 11.0 |
| Neutral              | 21.3 |
| Confident            | 34.4 |
| Very confident       | 28.0 |



**Where Participants Learned about Safe Sex Practices.** We were interested in where participants received their information regarding safe sex practices during high school. For the purpose of our survey, safe sex practices referred to methods used to prevent pregnancy and protect against STIs. Figure 11 below visualizes the frequency of responses across seven categories: within the classroom setting (e.g., health class), in a community education setting (e.g., 4-H), by talking with friends, by talking with family, by talking with a health professional, by talking with a religious leader, and through internet searches. As Figure 6 shows, the classroom setting was the most common (72.4%), followed by talking with friends (68.5%) and doing internet searches (60.6%).

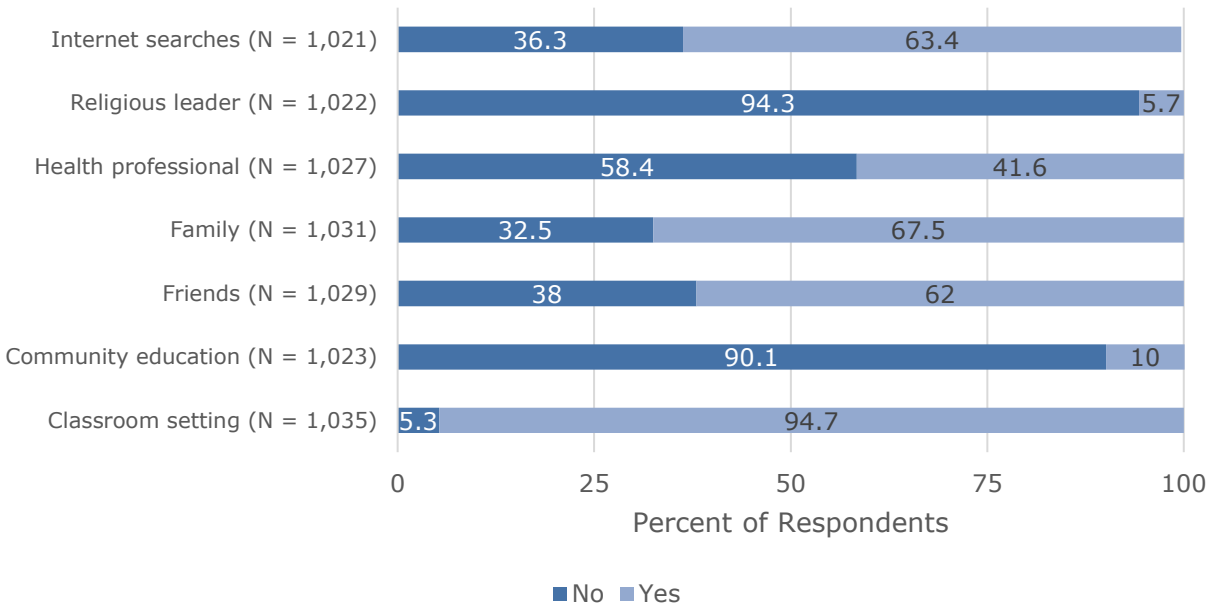
**Figure 6. Where participants learned about safe sex practices (N = 1,018-1,030).**



**Where Participants Learned about Reproductive Systems.** We were interested in where participants received their information regarding reproductive systems. For the purpose of our survey, reproductive systems are defined as the anatomy of organ systems based on sex assigned at birth which are involved in sexual activity safe sex practices referred to methods used to prevent pregnancy and protect against STIs. Figure 7 below visualizes the frequency of responses across seven categories: within the classroom setting (e.g., health class), in a community education setting (e.g., 4-H), by talking with friends, by talking with family, by talking with a health professional, by talking with a religious leader, and through internet

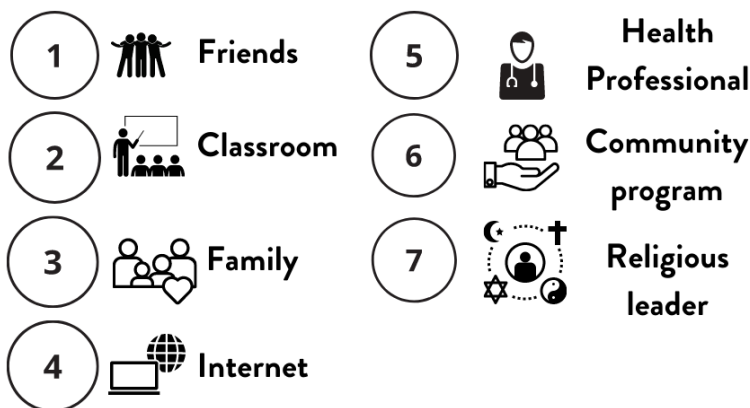
searches. As Figure 7 shows, the classroom setting was the most common (94.7%), followed by talking with family (67.5%) and doing internet searches (63.4%).

**Figure 7. Where participants learned about reproductive systems (N = 1,021-1,035).**



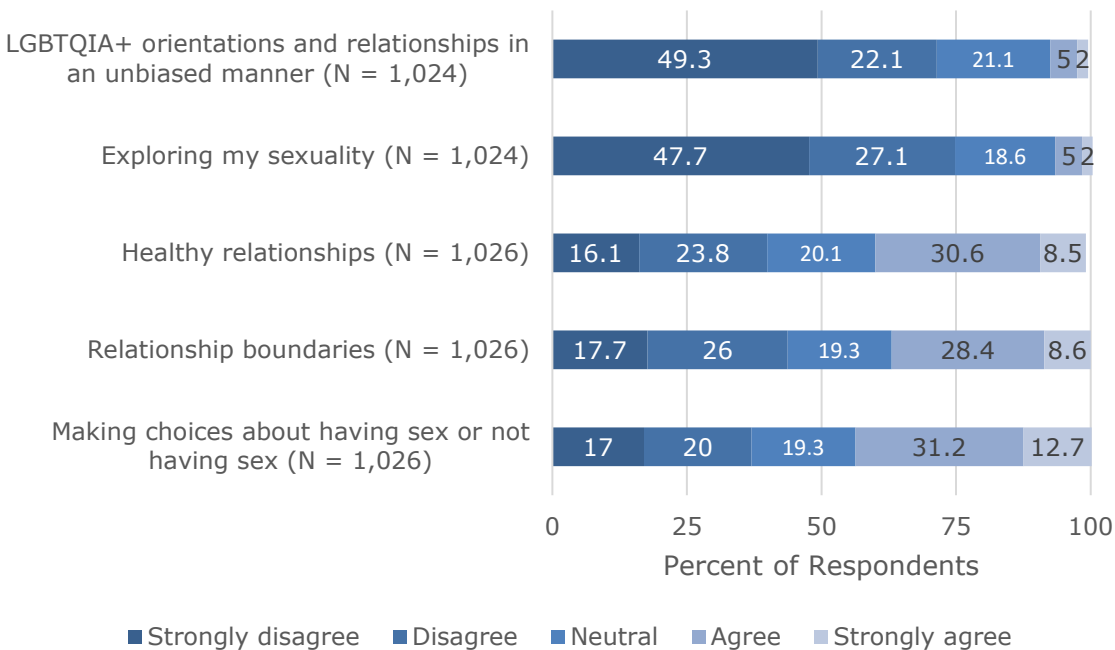
**Comfort with Sources of Sex Education Information.** Participants were next presented with a list of seven sources of sex education and were asked to rank them from most comfortable to least comfortable when they were in high school. Figure 8 shows the overall ranked order, with one being the most comfortable and seven being the least comfortable.

**Figure 8. Ranked comfort level of sources for sex education (N = 1,022).**



**Sufficient Information Learned.** We next asked participants if they felt like they learned enough about five areas related to sex education. Figure 8 highlights the results for the responses and shows that regardless of health topic, participants generally felt like they did not learn a sufficient amount of information during their high school health class.

**Figure 8. Sufficiency of information learned (N = 1,024-1,026).**



An additional question asked whether participants felt like there should be more classes on topics related to non-penetrative and penetrative sex, fewer classes, or if the number of classes offered was adequate. The majority (63.1%) of participants indicated that there was a need for more classes that taught information on non-penetrative and penetrative safe sex practices (see Table 15).

**Table 15. Amount of sex education classes needed in high school (N = 1,025).**

|                                    | %    |
|------------------------------------|------|
| More                               | 63.1 |
| Fewer                              | 3.1  |
| About right                        | 26.2 |
| Don't know or prefer not to answer | 7.5  |

We asked three additional questions about participants communication with their parents about sex education topics. When asked about the frequency

participants communicated with their parental figure(s) about making choices about having sex or not and about healthy relationships, responses varied across response options. Table 16 shows the distribution of responses, with the most often response to both questions being sometimes or often.

**Table 16. Frequency of communication with parents (N= 1,010-1,015).**

|            | Making choices about having sex or not<br>% | Healthy relationships<br>% |
|------------|---|----------------------------|
| Never      | 20  | 13.1                       |
| Rarely     | 29.8  | 19.4                       |
| Sometimes  | 29.8  | 26.2                       |
| Often      | 15.3  | 26.0                       |
| Very often | 5.2   | 15.3                       |

The next question asked participants their level of comfort in asking a parental figure questions related to sexuality. Responses varied greatly, and most often participants were very uncomfortable (25%) asking their parental figure questions about sexuality. Table 17 shows the variation in responses across response options.

The final question asked participants if they had a preference for which parental figure they talked to about their sexuality, with participants most often responding yes (68.7%).

**Table 17. Comfort asking parental figure about sexuality (N = 1,019).**

|                              | %    |
|------------------------------|------|
| Very uncomfortable           | 25   |
| Uncomfortable                | 22.7 |
| Neutral                      | 13.8 |
| Comfortable                  | 19.1 |
| Very comfortable             | 8.6  |
| Have not talked with parents | 10.8 |

## Section 6: Current sex behaviors

The survey asked participants about their current sex behaviors, confidence in giving and obtaining consent, and attitudes towards sex.

First, participants identified if they were currently sexually active. A majority of respondents were not currently sexually active (66%) at the time of the survey.

**Obtaining and Giving Sexual Consent.** Students were prompted with two questions to assess how comfortable they are in obtaining and giving sexual consent. Overall, most often students were very confident in giving and containing consent (see Table 18).

**Table 18. Consent confidence (N = 993-1,001).**

|                             | Not at all<br>confident<br>% | Somewhat<br>confident<br>% | Neutral<br>% | Somewhat<br>confident<br>% | Very<br>confident<br>% |
|-----------------------------|------------------------------|----------------------------|--------------|----------------------------|------------------------|
| Obtaining sexual<br>consent | 2.2                          | 3.3                        | 13.8         | 31.8                       | 49                     |
| Giving sexual<br>consent    | 3.6                          | 6.1                        | 15.1         | 30.1                       | 44.2                   |

**Confidence Making Healthy Sex Decisions.** We also asked participants to rate their level of confidence for making healthy sexual decisions. Most frequently, participants (43.2%) indicated that they felt confident making healthy sexual decisions (see Table 19).

**Table 19. Confident for making healthy sex decisions (N= 1,000).**

|                      | %    |
|----------------------|------|
| Not at all confident | 0.1  |
| Not very confident   | 3.2  |
| Neutral              | 13.5 |
| Confident            | 43.2 |
| Very confident       | 40.0 |

**Perception of who should provide sex education.** Participants were presented with a list of seven sources of sex education and were asked to rank them from who should provide the most sex education to those who should provide the least sex education. Figure 9 shows the overall ranked order, with one being who should be teaching the most sex education and seven being who should be teaching the least sex education.

**Figure 9. Ranked perception of who should provide sex education (N = 990).**



**Attitudes Toward Sex.** These questions measured sex positivity, which assess the level of positive attitudes a person has about sex, sexual identity, and sexual behaviors (Ivanski & Kohut, 2017).

To assess sex positivity, seven questions were asked, all of which can be found in Figure 10 which shows that most often participants had positive attitudes about sex.

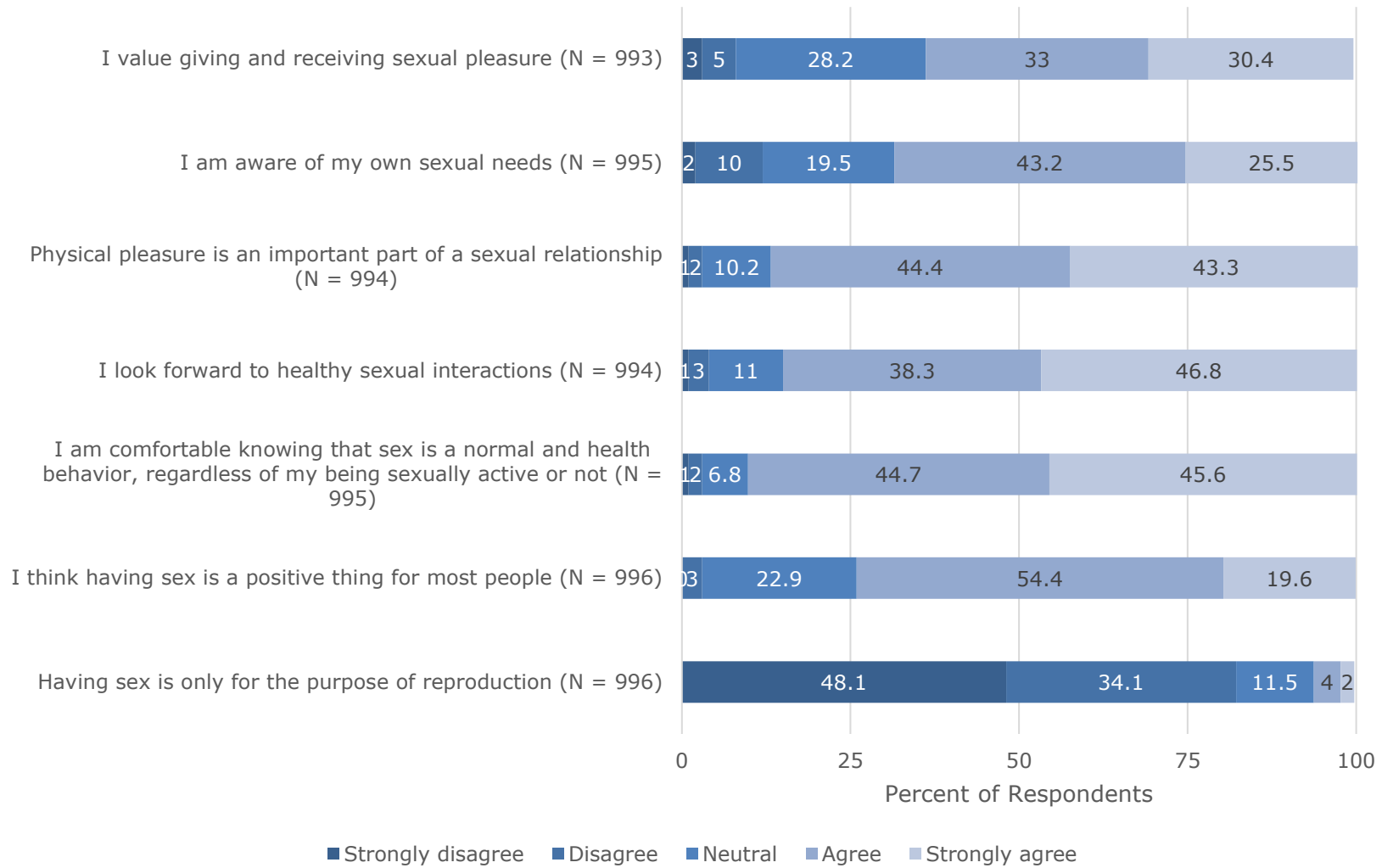
### Section 7: University Programming

The last section of the survey asked participants about their interest in attending a sex education program delivered by their current university. Table 20 shows that most often participants were not at all interested (35.1%) in attending a program.

**Table 20. Interest in attending a university sex education program (N= 1,000).**

|                       | %    |
|-----------------------|------|
| Not at all interested | 35.1 |
| A little interested   | 24.8 |
| Somewhat interested   | 28.7 |
| Very interested       | 7.3  |
| Extremely interested  | 4.1  |

**Figure 10. Sex positivity of participants (N = 1,090-1,193).**



## Section 8: Implications

The results gleaned from the 2022 Utah College Sexual Behavior Survey point towards four key areas that can inform inclusive sexual health policy and programming in the state. These key takeaways are highlighted below.

1. Utah youth are engaging in non-penetrative and penetrative sex in high school. These results are consistent with our 2021 Utah College Sexual Behavior Survey results and suggest that sex education efforts are essential to improve pregnancy and STI prevention efforts.
2. Utah young adults wanted more sex education as youth, especially in areas that are often included in comprehensive sex education. Quantitative and qualitative results (not reported here), point toward the need for additional efforts to use inclusive curriculum to meet the needs of LGBTQIA+ identifying Utahns.
3. Participants reported that the most comfortable sources of sex education are their friends, in the classroom, and their families which mostly aligns with participant perceptions that sex education should be taught in the classroom, by family, and by health professionals. These findings suggest we should continue to strengthen supports for educators, parents, and health professionals to provide medically accurate and inclusive sex education information.
4. The sources of sex education information youth access can be critical in their understanding of reproduction and the basics of anatomy. Participants included searches on the internet in their top three places they searched for information regarding reproductive anatomy. Youth should be provided resources that are credible sources to learn the information they are seeking to ensure they are receiving medically accurate information.



## References

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- Ivanski, C., & Kohut, T. (2017). Exploring definitions of sex positivity through thematic analysis. *The Canadian Journal of Human Sexuality*, 26(3), 216–225. <https://doi.org/10.3138/cjhs.2017-0017>

## **Appendix A**

### **Utah College Sexual Behavior Survey**

Dear Participant,

You are invited to participate in a research study conducted by Dr. Cris Meier, an Assistant Professor in the Social Work Department, and Dr. Julie Gast, a Professor in the Department of Kinesiology and Health at Utah State University.

**The purpose of this research is** to examine risk taking behaviors of youth in Utah retrospectively by asking you about your behaviors as teens in this one-time survey. Specifically, we are interested in learning about your sexual activity as a youth, associated risk taking behaviors (e.g., sexting), and the sex education you received. You are being asked to participate in this research because you are between the ages of 18-21, attended high school in Utah, and are at least 18 years of age.

**Your participation in this study is voluntary** and you may end your participation at any time for any reason.

**If you take part in this study, you will be asked** to answer questions in this one-time survey. We expect this survey to take no more than 20 minutes to complete.

**The possible risks of participating in this study include** loss of confidentiality, since online activities always carry a risk of a data breach; however we will use systems and processes that minimize breach opportunities. Although you will not directly benefit from this study, it has been designed to have implications for programming offered in the state of Utah, including higher education institutions, community organizations, and secondary education institutions. As a result of this survey, you may learn about new programs offered in Utah or new programming may be developed as a result of this survey. Furthermore, the information you provide in this survey will help us gain a better understanding of sexual behaviors and perceptions of sex education and practices among Utah youth. We cannot guarantee that you will directly benefit from this study.

**We will collect your anonymous information through a one-time Qualtrics survey.** This survey data will be securely stored in a restricted-access folder on Box.com, an encrypted and cloud-based storage system. **We will make every effort to ensure that the information you provide remains confidential.**

**For your participation in this research study you will not receive any compensation.** However, you are able to enter a drawing for one of five prizes at the conclusion of the survey. If you decide to enter into the drawing, your entry is not tied to your survey responses in any way. The prizes include two \$50 Amazon gift cards, one pair of Air Pods, and two Saranoni blankets.

**If you have any questions about this study, you can contact** Cris Meier at [cris.meier@usu.edu](mailto:cris.meier@usu.edu). Thank you again for your time and consideration. If you have any concerns about this study, please contact Utah State University's Human Research Protection Office at (435) 797-0567 or [irb@usu.edu](mailto:irb@usu.edu).

**By clicking on the "enter survey here" option, you understand what is being asked of you and that you agree to participate in this study.** You agree that you understand the risks and benefits of participation and that you know what you are being asked to do. You also agree that you will contact the research team with any questions about your participation and are clear on how to stop your participation in this study if you choose to do so. Please be sure to retain a copy of this form for your records.

Please click on "enter the survey" if you wish to participate or "do not enter the survey" if you do not wish to participate.

- Enter the survey
- Do not enter the survey
  - Skip logic to end of survey if selected, as person doesn't want to participate and can therefore not consent

[Page Break]

The first set of questions ask basic information about you.

What is your age in years?

- 18 years (1)
- 19 years (2)
- 20 years (3)
- 21 years (4)
- Prefer not to answer (5) (Excluded from analysis)

What county did you attend high school in? (all counties in drop down)

- Beaver County (1)
- Box Elder County (2)
- Cache County (3)
- Carbon County (4)
- Daggett County (5)
- Davis County (6)
- Duchesne County (7)
- Emery County (8)
- Garfield County (9)
- Grand County (10)
- Iron County (11)
- Juab County (12)
- Kane County (13)
- Millard County (14)
- Morgan County (15)
- Piute County (16)
- Rich County (17)
- Salt Lake County (18)
- San Juan County (19)
- Sanpete County (20)
- Sevier County (21)
- Summit County (22)
- Tooele County (23)
- Uintah County (24)
- Utah County (25)
- Wasatch County (26)
- Washington County (27)
- Wayne County (28)
- Weber County (29)
- I am not sure, but I did attend high school in Utah (30)
- I did not attend high school in Utah (31) (skip logic to end of survey if this response)

[Page Break]

What college or University do you currently attend?

- Utah State University (1)
  - If USU is selected skip logic to next question; If any other school skip to relationship question.
- University of Utah (2)
- Utah Tech University (3) (Dixie State)
- Utah Valley University
- Other (open-ended)

[Page Break]

What Utah State University campus do you currently attend?

- Logan (1) (main campus)
- Beaver (2)
- Bicknell (3)
- Blanding (4)
- Brigham City (5)
- Castle Dale (6)
- Cedar City (7)
- Delta (8)
- Ephraim (9)
- Heber (10)
- Junction (11)
- Kanab (12)
- Kaysville (13)
- Moab (14)
- Montezuma Creek (15)
- Monticello (16)
- Monument Valley (17)
- Nephi (18)
- Orem (19)
- Panguitch (20)
- Park City (21)
- Price (USU Eastern) (22)
- Richfield (23)
- Salt Lake (24)
- St. George (25)
- Tooele (26)
- Tremonton (27)
- Uintah Basin (28)
- Wendover (29)
- I am attending a USU center (30)

[Page Break]

What option best describes your current relationship status?

- Married (1)
- Engaged (2)
- Cohabiting (3)
- Single (4)
- Dating exclusively (5)
- Dating around (6)
- Other (open-ended) (7)

Please specify your race and ethnicity.

- White/Caucasian (1)
- Black or African American (2)
- Latino or Hispanic (3)
- Asian (4)
- American Indian or Alaskan Native/Native American (5)
- Native Hawaiian or Pacific Islander (6)
- Two or more (7)
- Other (8)
- Prefer not to say (9) (Excluded from analysis)

Which of the following category best describes your religious affiliation?

- Protestant (1)
- Mormon/The Church of Jesus Christ of Latter-Day Saints (2)
- Catholic (3)
- Another Christian denomination (e.g., Baptist, Episcopalian etc.) (4)
- Islam (5)
- Hinduism (6)
- Buddhism (7)
- Judaism (8)
- Ethnic and indigenous (9)
- Non-religious (10)
- Other (11) (open-ended)
- Prefer not to say (12) (Excluded from analysis)

What was your family's income during high school?

- Less than \$24,999 (1)
- \$25,000 - \$49,999 (2)
- \$50,000 - \$74,999 (3)
- \$75,000 - \$99,999 (4)
- \$100,000 - \$124,999 (5)
- More than \$125,000 (6)
- I don't know (7)

What is the highest level of education obtained by your....

Parental figure 1

Parental figure 2

- Less than HS (1)
- HS graduate/GED (2)
- Some college (3)
- Associate's degree (4)
- Bachelor's degree (5)
- Graduate degree (6)
- I don't know (7) (Excluded from analysis)

[Page Break]

Please use these definitions to answer the following question:

Please use these definitions to answer the following question:

**Asexual:** The sexual orientation or spectrum of identities associated with experiencing very little or no sexual attraction towards anyone. This also includes those who need strong emotional connections prior to sexual activity (demisexual).

**Bisexual:** A person emotionally, physically, and/or sexually attracted to one or more gender. This attraction is not necessarily split equally between genders and there may be a preference for one gender over others.

**Gay:** A male who's sexually and/or romantically attracted to other males. "Gay" is sometimes used as an umbrella term, referring to those who are attracted to a person of the same gender identity.

**Heterosexual/Straight:** A person who is sexually and/or romantically attracted to a person of the opposite gender.

**Lesbian:** A woman who's sexually and/or romantically attracted to other women.

**Pansexual:** Having sexual or romantic attraction to people of all genders or sexual orientations.

**Queer:** A word that can refer to the exploration of or identifying as a variety of sexual identities and gender identities that are anything other than heterosexual.

Which category best describes your current sexual orientation?

- Asexual (1)
- Bisexual (2)
- Gay/lesbian (3)
- Heterosexual/straight (4)
- Pansexual (5)
- Queer (6)
- Prefer to self-identify (7) (include write in)

Please use these definitions to answer the following question(s)

**Gender identity:** How a person identifies and sees themselves. This may or may not match the sex assigned at birth.

**Transgender (Trans Man/Trans Woman):** If a person's gender identity does not match the sex that was medically assigned at birth.

**Gender Nonconforming (Genderqueer):** When a person's gender expression doesn't fit the traditional male/female categories (sometimes called gender binary)

What best describes your current gender identity?

- Man (1)
- Woman (2)
- Trans male/Transman (3)
- Trans female/Transwoman (4)
- Genderqueer/Gender non-conforming (5)
- Different identity/more than one identity (6)

How comfortable are you currently with your sexuality?

- Very uncomfortable (1)
- Uncomfortable (2)
- Neutral (3)
- Comfortable (4)
- Very comfortable (5)

[Page Break]

The next set of questions ask you about your sexual behaviors in middle school and high school.

Please use this definition to answer the following question(s):

**Non-Penetrative Sex:** The intentional and consensual touching (either giving or receiving), either directly or through clothing of the genitalia, anus, groin, breast, inner thigh, or buttocks.

Did you ever have consensual non-penetrative sex in middle school or high school?

- No (0)
  - If No skip the next page of questions and move to the penetrative sex question.
- Yes (1)



[Page Break]

How old were you when you had consensual non-penetrative sex for the first time?

- Younger than 13 years old (1)
- 13 years old (2)
- 14 years old (3)
- 15 years old (4)
- 16 years old (5)
- 17 years old or older (6)

Please use this definition to answer the following question(s):

**Drug:** A substance that alters the body's function either physically or psychologically that can include illegal substances (e.g., marijuana, cocaine), misusing legal substances (e.g., drinking alcohol under 21), or using legal prescription drugs in ways other than prescribed (e.g., Adderall).

Did you ever drink alcohol or use drugs shortly before you had consensual non-penetrative sex in high school?

- No (0)
- Yes (1)
- I am unsure (2)

[Page Break]

Please use this definition to answer the following question(s):

**Penetrative Sex:** Regardless of the other partner's gender, this is involving the consensual penetration of the vagina, anus, or oral contact by the penis or by other means (e.g., dildo, manual).

Did you ever have consensual penetrative sex in middle school or high school?

- No (0) If No skip beyond the penetrative sex questions
- Yes (1)

[Page Break]

How old were you when you first had consensual penetrative sex?

- Younger than 13 years old (1)
- 13 years old (2)
- 14 years old (3)
- 15 years old (4)
- 16 years old (5)
- 17 years old or older (6)

During high school, how many people did you have consensual penetrative sex with?

- 1 person (1)
- 2 people (2)
- 3 people (3)
- 4 people (4)
- 5 people (5)
- 6 or more people (6)
- I cannot recall the exact number (7) (Exclude from analysis)

[Page Break]

Please use this definition to answer the following question(s):

**Drug:** A substance that alters the body's function either physically or psychologically that can include illegal substances (e.g., marijuana, cocaine), misusing legal substances (e.g., drinking alcohol under 21), or using legal prescription drugs in ways other than prescribed (e.g., Adderall).

Did you ever drink alcohol or use drugs shortly before you had consensual penetrative sex in high school?

- No (0)
- Yes (1)
- I am unsure (2)

[Page Break]

Please use these definitions to answer the following question(s):

**Sexually Transmitted Infection (STI):** Infections that are passed from person to person during vaginal sex, oral sex, anal sex, or skin-to-skin contact. Commonly known as Sexually Transmitted Diseases or STDs.

**Dental dam:** A thin, square piece of latex that helps prevent the spread of STIs when placed over the vulva or anus during oral sex.

What method(s) did you or your partner use to protect against STIs in high school? (Select all that may apply)

- No method was used to prevent STIs (1)
- Condoms (external or internal) (2)
- Dental dams (3)
- I am not sure and cannot recall which method was used (4)
- Other (5) (open-ended)

What method(s) did you or your partner use to prevent pregnancy in high school? (Select all that may apply)

- No method was used to prevent pregnancy (1)
- Birth control pills (2)
- Condoms (internal/external) (3)
- An IUD (such as Mirena or ParaGard) or implant (such as Implanon or Nexplanon) (4)
- A shot (such as Depo-Provera), patch (such as Ortho Evra), or birth control ring (such as NuvaRing) (5)
- Pullout or withdraw method (6)
- I did not engage in penis in vagina sexual penetration (7)
- I cannot recall which method was used (8)

[Page Break]

Please use this definition to answer the following question(s):

**Sexual Consent:** Sexual consent is an agreement to participate in a sexual activity. Before being sexual with someone, you need to know if they want to be sexual with you too. Both people must agree to sex — every single time — for it to be consensual. Without consent, sexual activity (including oral sex, genital touching, and vaginal or anal penetration) is sexual assault or rape.

During high school, how often did you communicate about the following **prior** to engaging in consensual penetrative sex.

Sexual consent.

- Never (1)
- Once (2)
- A few times (3)
- Often (4)
- Always (5)
- I don't know or I prefer not to answer (6) (Exclude from analysis)

Sexually transmitted infection (STI) testing and/or status.

- Never (1)
- Once (2)
- A few times (3)
- Often (4)
- Always (5)
- I don't know or I prefer not to answer (6) (Exclude from analysis)

Safer sex methods.

- Never (1)
- Once (2)
- A few times (3)
- Often (4)
- Always (5)
- I don't know or I prefer not to answer (6) (Exclude from analysis)

Sexual likes and dislikes.

- Never (1)
- Once (2)
- A few times (3)
- Often (4)
- Always (5)
- I don't know or I prefer not to answer (6) (Exclude from analysis)

(If "Once" to "Always" was chosen, populate this question) When did you discuss sexual consent in high school prior to penetrative sex? [select all that apply]

- At the beginning of the relationship (1)
- A while into the relationship (2)
- Before the sexual encounter(s) (3)
- After the sexual encounter(s) (4)
- When there was an issue (5)
- None of the above (6) (Exclude from analysis)

(If "Once" to "Always" was chosen, populate this question) When did you discuss STI testing and/or status in high school prior to penetrative sex? [select all that apply]

- At the beginning of the relationship (1)
- A while into the relationship (2)
- Before the sexual encounter(s) (3)
- After the sexual encounter(s) (4)
- When there was an issue (5)
- None of the above (6) (Exclude from analysis)

[Page Break]

These questions ask you about sexting in high school.

During high school, did you ever:

Take and send a sext?

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

Receive and view a sext?

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

[Page Break]

The next set of questions ask about the level of sexual education you received, the topics covered, and whether or not you feel it was sufficient.

Please use these definitions to answer the following question(s):

**Human Immunodeficiency Virus (HIV):** A chronic virus that breaks down the immune system. Can lead to AIDS if not managed with medication.

**Acquired Immunodeficiency Syndrome (AIDS):** A disease of the immune system due to infection with HIV. The most advanced stage of HIV.

During high school, how would you have rated your knowledge about HIV/AIDS prevention?

- Poor (1)
- Fair (2)
- Good (3)
- Excellent (4)

In high school, how much did you learn about how to prevent STIs?

- Nothing (1)
- Only a little (2)
- Some (3)
- A lot (4)
- I prefer not to answer (5) (Exclude from analysis)

During high school, how confident were you that you could make healthy sexual decisions?

- Not at all confident (1)
- Not very confident (2)
- Neutral (3)
- Confident (4)
- Very confident (5)

[Page Break]

The next set of questions ask about the level of sexual education you received, the topics covered, and whether or not you feel it was sufficient.

In high school, where did you learn about the various methods to preventing pregnancy and protecting against STIs?

Within the classroom setting (e.g., health class).

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

In a community education setting (e.g., 4-H class, community agency, coach).

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

By talking with friends.

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

By talking with family.

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

By talking with a health professional (e.g., doctor, nurse, therapist, etc.).

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

By talking with a religious leader (e.g., youth group leader, bishop, priest).

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

Through internet searches done on my own.

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

Please use this definition to answer the following question(s):

**Reproductive systems:** The anatomy of organ systems based on sex assigned at birth which are involved in sexual activity.

In high school, where did you learn about reproductive systems?

Within the classroom setting (e.g., health class).

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

In a community education setting (e.g., 4-H class, community agency, coach).

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

By talking with friends.

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

By talking with family.

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

By talking with a health professional (e.g., doctor, nurse, therapist, etc.).

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

By talking with a religious leader (e.g., youth group leader, bishop, priest).

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)



Through internet searches done on my own.

- No (0)
- Yes (1)
- I don't know or I prefer not to answer (2) (Exclude from analysis)

From the list below, please arrange the sources of sex education you were most comfortable with (1) to those you were least comfortable with (7) in high school.

Classroom setting (e.g., health class)

Community setting (e.g., 4H class, community agency, coach)

Friends

Family

Health professional (e.g., doctor, nurse, therapist)

Religious leader (e.g., youth group leader, bishop, priest)

The internet

[Page Break]

Please select the option that best describes your experience.

My high school health class taught me enough about...

Making choices about having sex or not having sex

- Strongly Disagree (1)
- Disagree (2)
- Neutral (3)
- Agree (4)
- Strongly Agree (5)

Relationship boundaries

- Strongly Disagree (1)
- Disagree (2)
- Neutral (3)
- Agree (4)
- Strongly Agree (5)

### Healthy relationships

- Strongly Disagree (1)
- Disagree (2)
- Neutral (3)
- Agree (4)
- Strongly Agree (5)

### Exploring my sexuality

- Strongly Disagree (1)
- Disagree (2)
- Neutral (3)
- Agree (4)
- Strongly Agree (5)

### LGBTQIA+ orientations and relationships in an unbiased manner

- Strongly Disagree (1)
- Disagree (2)
- Neutral (3)
- Agree (4)
- Strongly Agree (5)

Do you think that there should be more classes on topics related to consensual non-penetrative and consensual penetrative sex, fewer classes, or were the number of classes you took adequate?

- a. Fewer (1)
- b. About right (2)
- c. More (3)
- d. I don't know or prefer not to answer (4)

[Page Break]

In your opinion, when you think back to high school, what types of sexual health education or programs would you have liked to have access to in your school or the local community? If you have any suggestions on specific content related to sexual health please list those as well. (open-ended)

[Page Break]

When you were in high school, how often did your parental figure(s) talk to you about:

Making choices about having sex or not having sex?

- Never (1)
- Rarely (2)
- Sometimes (3)
- Often (4)
- Very Often (5)

Healthy relationships

- Never (1)
- Rarely (2)
- Sometimes (3)
- Often (4)
- Very Often (5)

In high school, how comfortable were you with asking your parental figure(s) questions related to sexuality?

- Very uncomfortable (1)
- Uncomfortable (2)
- Neutral (3)
- Comfortable (4)
- Very comfortable (5)
- I never asked my parent(s) about sexuality (6)

In high school, did you have a preference for which parental figure(s) you talked to about sexuality?

- No (0)
- Yes (1)

If yes only: Which parental figure(s) did you prefer to talk to about sexuality and/or related questions and why? (open ended)

[Page Break]

The next set of questions will ask about your current sexual behaviors and attitudes.

Are you currently sexually active?

- No (0)
- Yes (1)

Please use this definition to answer the following question(s):

**Sexual Consent:** Sexual consent is an agreement to participate in a sexual activity. Before being sexual with someone, you need to know if they want to be sexual with you too. Both people must agree to sex — every single time — for it to be consensual. Without consent, sexual activity (including oral sex, genital touching, and vaginal or anal penetration) is sexual assault or rape.

How confident are you currently with obtaining sexual consent?

- Not at all confident (1)
- Not very confident (2)
- Neutral (3)
- Confident (4)
- Very confident (5)

How confident are you currently with giving sexual consent?

- Not at all confident (1)
- Not very confident (2)
- Neutral (3)
- Confident (4)
- Very confident (5)

If a romantic partner was asking you to engage in sexual activity and you aren't interested, how would you communicate both verbally and nonverbally that you are not interested? (Open ended)

Currently, how confident are you that you can make healthy sexual decisions?

- Not at all confident (1)
- Not very confident (2)
- Neutral (3)
- Confident (4)
- Very confident (5)

[Page Break]

What is your current level of interest in attending a university delivered program that includes sex education?

- Not at all interested (1)
- A little interested (2)
- Somewhat interested (3)
- Very interested (4)
- Extremely interested (5)

The following questions ask about attitudes toward sex.

Having sex is *only* for the purpose of reproduction.

1. Strongly disagree (1)
2. Disagree (2)
3. Neither agree nor disagree (3)
4. Agree (4)
5. Strongly agree (5)

I think having sex is a positive thing for most people.

1. Strongly disagree (1)
2. Disagree (2)
3. Neither agree nor disagree (3)
4. Agree (4)
5. Strongly agree (5)

I am comfortable knowing that sex is a normal and healthy behavior, regardless of my being sexually active or not.

1. Strongly disagree (1)
2. Disagree (2)
3. Neither agree nor disagree (3)
4. Agree (4)
5. Strongly agree (5)

I look forward to healthy sexual interactions.

1. Strongly disagree (1)
2. Disagree (2)
3. Neither agree nor disagree (3)
4. Agree (4)
5. Strongly agree (5)

Physical pleasure is an important part of a sexual relationship.

1. Strongly disagree (1)
2. Disagree (2)
3. Neither agree nor disagree (3)
4. Agree (4)
5. Strongly agree (5)

I am aware of my own sexual needs.

1. Strongly disagree (1)
2. Disagree (2)
3. Neither agree nor disagree (3)
4. Agree (4)
5. Strongly agree (5)

I value giving and receiving sexual pleasure.

1. Strongly disagree (1)
2. Disagree (2)
3. Neither agree nor disagree (3)
4. Agree (4)
5. Strongly agree (5)

End of Survey