

CR Coaching Survey

Today's Date: ___/___/___

*INSTRUCTIONS FOR STAFF: **Please ask CR coaching participants to complete this survey at the anticipated last coaching visit (i.e. the end of the current period of Community Response participation) AND/OR within 30-90 days of a family's participation in Community Response.** This survey should only be completed for families participating in Community Response and that are receiving coaching (i.e. do not complete for families who have only accessed Support Services Funds).*

FOR STAFF PROVIDING THIS SURVEY TO PARTICIPANT:


1) Write in the participant ID number below. This is the first two letters of the participant's first name, first two letters of last name, two digit month of birth, two digit day of birth (ex: Sally Jones DOB 10/16/80 would be SAJO1016)

➤ Participant's ID Number: _____

2) Write in your information:

Agency Name	
Staff Name	
CWB/CYI Community Name	

For each of the following, mark the response that most closely matches how you feel

Social Connections	A. Not at all like my life	B. Not much like my life	C. Somewhat like my life	D. Quite a lot like my life	E. Just like my life	Not applicable - I do not have kids						
I have people who believe in me.												
I have someone in my life who gives me advice, even when it's hard to hear.												
When I am trying to work on achieving a goal, I have friends who will support me.												
When I need someone to look after my kids on short notice, I can find someone I trust												
I have people I trust to ask for advice about (check all that apply)												
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">A. ___ Money/Bills/Budgeting</td> <td style="width: 33%;">C. ___ Food/Nutrition</td> <td style="width: 33%;">E. ___ Parenting/My Kids (if applicable)</td> </tr> <tr> <td>B. ___ Relationships and/or My Love Life</td> <td>D. ___ Stress, Anxiety, and/or Depression</td> <td>F. ___ None of the above</td> </tr> </table>							A. ___ Money/Bills/Budgeting	C. ___ Food/Nutrition	E. ___ Parenting/My Kids (if applicable)	B. ___ Relationships and/or My Love Life	D. ___ Stress, Anxiety, and/or Depression	F. ___ None of the above
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B. ___ Relationships and/or My Love Life	D. ___ Stress, Anxiety, and/or Depression	F. ___ None of the above										

Concrete Supports	A. Not at all like my life	B. Not much like my life	C. Somewhat like my life	D. Quite a lot like my life	E. Just like my life
I was able to cover all my expenses last month (<i>expenses include costs like rent, utility bills, food, transportation, child care, and medical expenses</i>)					
The transportation I use is reliable and consistent					
My housing situation is affordable, safe, and stable					
Over the past three months, my children and I have been able to see a doctor when we needed to.					
Over the past three months, I have found a job and/or worked when I needed to					

CR Coaching Survey (continued)

Please think back to three months ago. For each of the following items, mark the first row based on how you felt or what you experienced at that time. On the second row, respond based on how you feel or what you experience NOW.






Resilience		Not at all true	Somewhat true	Mostly True	Completely True
I tend to bounce back quickly after hard times	3 mos. ago				
	Now				
I have a hard time making it through stressful events	3 mos. ago				
	Now				
It does not take me long to recover from a stressful event	3 mos. ago				
	Now				
It is hard for me to snap back when something bad happens	3 mos. ago				
	Now				
I usually come through difficult times with little trouble	3 mos. ago				
	Now				
I tend to take a long time to get over set-backs in my life	3 mos. ago				
	Now				

Hope		Definitely false	Mostly false	Somewhat false	Slightly false	Slightly true	Somewhat true	Mostly true	Definitely true
If I should find myself in a jam, I could think of many ways to get out of it.	3 mos. ago								
	Now								
At the present time, I am energetically pursuing my goals.	3 mos. ago								
	Now								
There are lots of ways around any problem that I face.	3 mos. ago								
	Now								
Right now, I see myself as being pretty successful.	3 mos. ago								
	Now								
I can think of many ways to reach my current goals.	3 mos. ago								
	Now								
At this time, I am meeting the goals I have set for myself.	3 mos. ago								
	Now								






Accessing Services		Not at all true	Somewhat true	Mostly True	Completely True
If I need help, I know where to go and/or who to talk to.	3 mos. ago				
	Now				

SATISFACTION SURVEY






1. I felt respected and valued as a participant. Circle the option that best describes your opinion.

				
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. I have learned new techniques that improve my interactions with my child or children. Circle the option that best describes your opinion, or note if not applicable.

					
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Not Applicable
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. I feel my family relationships are better than before. Circle the option that best describes your opinion.

				
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. What could we have done differently to make things better?

5. What were the benefits to you and your family?

THANK YOU for completing this survey!