



Participant Survey

Please take some time to fill in this survey, which is also being completed at many other family resource programs in Canada. Your answers will help us to provide high quality programming for all participants. We will also forward the information we get from the surveys to the Canadian Association of Family Resource Programs in order to build a cross-Canada picture of family resource programs.

Your information is provided anonymously. All the participants' answers will be pulled together so it won't be possible to identify any individual participant's answers. You are under no obligation to take part in this survey. If you choose to answer the questionnaire, you can skip any question you would rather not answer.

General Instructions:

Please read each item carefully and follow the instructions provided. If none of the response options fit exactly for a question, select the response that comes closest to your desired response.

First we would like to ask you about your experiences at this centre. Please indicate the extent of your agreement with each of the following items.

| | No Agreement | A Little Agreement | Moderate Agreement | Strong Agreement | Cannot Say or Does Not Apply |
|--|--------------------------|--------------------------|--------------------------|--------------------------|------------------------------|
| 1 When I come to this centre, I feel welcomed and accepted. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 Staff members of this centre treat me with respect. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 Programs and activities at this centre are designed in a way that makes it possible for me to participate. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 Staff and services are available when I need them. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 There are opportunities for me to become involved in decision making about the programming and operations of this centre. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 This centre does its best to be welcoming to the diverse groups of people who live in this community. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7 Since we have been participating at this centre, our family has more ideas and ways for getting along. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 Since coming to this centre, I am able to deal more effectively with the day-to-day challenges that we encounter as a family. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9 Since coming to this centre, I have felt more confident as a parent or caregiver. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10 Since coming to this centre, I have made friends I can connect with and turn to outside of the centre. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11 Since coming to this centre, I have become more aware of the services and resources available in my community. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Next we have a few other questions, related to parenting and child development.

| | No Agreement | A Little Agreement | Moderate Agreement | Strong Agreement | Cannot Say or Does Not Apply |
|--|--------------------------|--------------------------|--------------------------|--------------------------|------------------------------|
| 12 Since coming to this centre, I am more aware of activities that are appropriate for my child/children. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13 Since coming to this centre, I am more aware of what to expect my child to do at his or her age. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14 I use strategies for guiding my child/ children's behaviour that I learned at the centre. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15 I use activities at home that I learned at the centre. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16 Since coming to this centre, I feel more supported in my role as a parent or caregiver. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17 Since coming to this centre, I understand my child/children better. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18 Since coming to this centre, my child is more comfortable in social situations. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19 Since coming to this centre, my child has increased opportunities to play with other children. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20 Since coming to this centre, my child has increased opportunities to interact with adults. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21 Since coming to this centre, my child has increased opportunities to explore new environments. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22 Since coming to this centre, my child has increased opportunities to play with age-appropriate toys and equipment. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23 Since coming to this centre, my child has increased opportunities to interact with people from different cultures. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

In the following section, we would like to ask you about you and your family.

- If you are bringing both your own as well as other children, respond to Questions 25-31 for your own family only.
- If you are a caregiver bringing other children only, respond to Questions 25-31 for your own family.
- If you do not have the information to answer a question, or would rather not answer a question, please skip that question.

24 How are you connected to the child/children you bring to the Centre? (Check one only.)

- Parent
 Grandparent
 Relative
 Caregiver (check only if you are not related to any children you bring)
 Other (please explain): _____

25 How long have you been living in your current neighborhood? (Check one only.)

- Under one year
 1-3 years
 Over 3 years

26 How long have you been participating in programs offered by this centre? (Check one only.)

- Under one year
 1-3 years
 Over 3 years

27 What language do you use most often at home? (Check one only.)

- English
 French
 Other (please specify): _____

28 How long have you been a resident of Canada?

- Less than 1 year
 1-2 years
 3-10 years
 More than 10 years but not born in Canada
 Born in Canada

29 Where did you receive information that led you to participate in this centre's programs? (Select the most important source and check one only.)

- Family or friends
- Another participant
- Health care provider
- Social services professional
- School system
- Religious organization
- Advertising, pamphlets, posters, presentations
- Internet
- Other (please explain): _____

30 What is the total income of all adults in your household?

- Under \$1,000 per month (under \$12,000 per year)
- \$1,000 to \$1,999 per month (\$12,000 to \$23,999 per year)
- \$2,000 to \$2,999 per month (\$24,000 to \$35,999 per year)
- \$3,000 to \$3,999 per month (\$36,000 to \$47,999 per year)
- \$4,000 to \$4,999 per month (\$48,000 to \$59,999 per year)
- \$5,000 or over per month (over \$60,000 per year)
- Don't know or choose not to answer

31 Finally, we would like to obtain some information about you and members of your family. Beginning with yourself, please provide information about all members of your family (including adults and children) *who have participated in services of this centre during the past year.*

| | | Gender | Age | How many times per month does this person participate in programs offered by this centre? |
|----------|---|---|-----|---|
| You | → | <input type="checkbox"/> female <input type="checkbox"/> male | | |
| Person 2 | → | <input type="checkbox"/> female <input type="checkbox"/> male | | |
| Person 3 | → | <input type="checkbox"/> female <input type="checkbox"/> male | | |
| Person 4 | → | <input type="checkbox"/> female <input type="checkbox"/> male | | |
| Person 5 | → | <input type="checkbox"/> female <input type="checkbox"/> male | | |
| Person 6 | → | <input type="checkbox"/> female <input type="checkbox"/> male | | |
| Person 7 | → | <input type="checkbox"/> female <input type="checkbox"/> male | | |

32 In addition to children listed in Question 31, how many other children do you bring to this centre as a caregiver: _____

33 How has this program or centre made a difference for you or your family?

34 What would you like this program or centre to do differently?

35 Please share any other comments or suggestions.

Thank you for participating in this survey!