



**Incredible Years**  
**Parent Program Satisfaction Questionnaire**  
**Basic + School + Advance Parent Program**

(Hand out at end of the program)

Participant's Name \_\_\_\_\_ Date \_\_\_\_\_

The following questionnaire is part of our evaluation of the Incredible Years program that you have received. It is important that you answer as honestly as possible. The information obtained will help us to evaluate and continually improve the program we offer. Your cooperation is greatly appreciated. All responses will be strictly confidential.

**A. The Overall Program**

Please circle the response that best expresses how you honestly feel at this point.

1. The problem(s) that originally prompted me to take this program for my child is (are)

considerably worse      worse      slightly worse      the same      slightly improved      improved      greatly improved

2. My child's problems which I/we have tried to change using the methods presented in this program are

considerably worse      worse      slightly worse      the same      slightly improved      improved      greatly improved

3. My feelings about my child's progress are that I am

very dissatisfied      dissatisfied      slightly dissatisfied      neutral      slightly satisfied      satisfied      greatly satisfied

4. To what degree has the Incredible Years program helped with other personal or family problems not directly related to your child (for example, your marriage, your feelings in general)?

hindered much more than helped      hindered      hindered slightly      neither helped nor hindered      helped slightly      helped      helped very much

5. My expectation for good results from the Incredible Years program is

very pessimistic      pessimistic      slightly pessimistic      neutral      slightly optimistic      optimistic      very optimistic

6. I feel that the approach used to change my child's problems in this program is

very inappropriate      inappropriate      slightly inappropriate      neutral      slightly appropriate      appropriate      greatly appropriate

7. Would you recommend the program to a friend or relative?

strongly not recommend      not recommend      slightly not recommend      neutral      slightly recommend      recommend      strongly recommend

8. How confident are you in managing current behavior problems in the home on your own?

very unconfident      unconfident      slightly unconfident      neutral      slightly confident      confident      very confident

9. How confident are you in your ability to manage future behavior problems in the home using what you learned from this program?

very unconfident      unconfident      slightly unconfident      neutral      slightly confident      confident      very confident

10. My overall feeling about achieving my goal in this program for my child and family is

very negative      negative      slightly negative      neutral      slightly positive      positive      very positive

## ***B. Teaching Format***

### ***Usefulness***

In this section, we would like you to indicate how useful each of the following types of teaching is for you now. Please circle the response that most clearly describes your opinion.

1. Content of information presented was

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

2. Demonstration of parenting skills through the use of videotape vignettes was

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

3. Group discussion of parenting skills was

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

4. Practice of play skills at home with your child was

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

5. Other home activities (e.g., practice praise, positive comments, list of behaviors) were

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

6. Reading chapters from the book was

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

7. If you used the CD/audiotape of the chapter, did you find them

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

8. Weekly handouts (e.g., refrigerator notes & others) were

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

9. I found the “buddy calls” to be

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

10. Use of practice or role plays during group sessions were

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

11. Phone calls from the group leaders were

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

### ***C. Specific Parenting Techniques***

#### ***Usefulness***

In this section, we would like to get your ideas of how useful each of the following techniques is in improving your interactions with your child. Please circle the response that most accurately describes the usefulness of the technique.

1. Child-Directed Play and/or Special Time with Children

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

2. Descriptive Commenting (academic, social and emotional coaching)

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

3. Praise

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

4. Rewards (sticker, charts, etc.,)

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

5. Ignoring

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

6. Supporting your child’s education (homework & reading routines at home)

extremely useless      useless      slightly useless      neutral      somewhat useful      useful      extremely useful

### 7. Positive Commands (e.g., “when-thens”)

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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### 8. Time Out

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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### 9. Loss of Privileges, Logical Consequences

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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### 10. Communication—listening & speaking up

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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### 11. Personal Self-Control, Anger & Depression Management

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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### 12. Giving & Getting Support

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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### 13. Problem solving with adults and teachers

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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### 14. Problem solving with children

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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### 15. Helping child control his/her anger

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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### 16. Problem Solving—Family Meetings

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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### 17. This Overall Group of Techniques

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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## ***D. Evaluation of Parent Group Leaders***

In this section we would like you to express your opinions about your parent group leader(s). Please circle the response to each question that best describes how you feel.

Group Leader #1 \_\_\_\_\_

(name)

1. I feel that the leader's teaching was

very poor	poor	slightly below average	average	slightly above average	high	superior
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2. The leader's preparation was

very poor	poor	slightly below average	average	slightly above average	high	superior
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3. Concerning the leader's interest and concern in me and my child, it was

extremely dissatisfied	dissatisfied	slightly dissatisfied	neutral	slightly satisfied	satisfied	extremely satisfied
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4. At this point, I feel that the leader in the program was

extremely unhelpful	unhelpful	slightly unhelpful	neutral	slightly helpful	helpful	extremely helpful
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If more than one group leader was involved in your program, please fill in the following. (Go to Section E if only one leader was involved.)

Group Leader #2 \_\_\_\_\_

(name)

1. I feel that the leader's teaching was

very poor	poor	slightly below average	average	slightly above average	high	superior
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2. The leader's preparation was

very poor	poor	slightly below average	average	slightly above average	high	superior
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3. Concerning the leader's interest and concern in me and my child, it was

extremely dissatisfied	dissatisfied	slightly dissatisfied	neutral	slightly satisfied	satisfied	extremely satisfied
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4. At this point, I feel that the leader in the program was

extremely unhelpful	unhelpful	slightly unhelpful	neutral	slightly helpful	helpful	extremely helpful
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### ***E. Parent Group***

In this section, we'd like to get your ideas about your group. Please circle the response that describes how you feel.

1. I feel the group was

very  
unsupportive      unsupportive      somewhat  
unsupportive      neutral      somewhat  
supportive      supportive      very  
supportive

2. Concerning other group members' interest in me and my child, I felt they were

very  
uninterested      uninterested      somewhat  
uninterested      neutral      somewhat  
interested      interested      very  
interested

3. I would like to keep meeting as a group

YES      NO

4. How likely is it that you will continue meeting with one or more of the parents in your group?

highly  
unlikely      unlikely      somewhat  
unlikely      neutral      somewhat  
likely      likely      very  
likely

### ***F. Your Opinion***

1. How could the program have been improved to help you more?

2. At this time do you feel the need for additional further parenting assistance? Please elaborate.

3. What did you see as the main benefit of the Incredible Years program?

Thank you for your patience in filling out all of these questionnaires. Your input is very much appreciated, and really helps us to plan future programs.