Incredible Years®
Parent Programme Satisfaction Questionnaire
Babies Programme (British version)

(Hand out at end of the programme)

Participant’s Name ___________________________________ Date __________________________

Attending Partner’s Name __________________________

The following questionnaire is part of our evaluation of the Incredible Years parenting programme 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 programme we offer. Your cooperation is greatly appreciated. All responses will be strictly confidential and will not be shared with group leaders.

A. The Overall Programme

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

1. The bonding that I feel with my baby since I took this programme is
   considerably worse  worse  slightly worse  the same  slightly improved  improved  greatly improved

2. My baby’s bonding with me since I started this programme is
   considerably worse  worse  slightly worse  the same  slightly improved  improved  greatly improved

3. How do you feel about your baby’s social, emotional and physical developmental progress?
   very dissatisfied  dissatisfied  slightly dissatisfied  neutral  slightly satisfied  satisfied  greatly satisfied

4. To what degree has the Incredible Years® parenting programme helped with other personal or family problems not directly related to your baby (for example, your feelings of support in general)?
   made things much worse  made things worse  made things slightly worse  made no difference  helped slightly  helped  helped very much

5. My expectation for good results from the Incredible Years baby programme is
   very unlikely  unlikely  slightly unlikely  neutral  slightly likely  likely  very likely

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6. I feel that the approaches used to enhance my baby’s development and language (for example, speaking Parentese) in this programme are

   very unsuitable  unsuitable  slightly unsuitable  neutral  slightly suitable  suitable  greatly suitable

7. Would you recommend the Incredible Years programme to a friend or relative with a baby?

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

8. How confident are you in parenting your baby at this time?

   very unconfident  unconfident  slightly unconfident  neutral  slightly confident  confident  very confident

9. How confident are you in your ability to provide physical, tactile and visual stimulation at this time?

   very unconfident  unconfident  slightly unconfident  neutral  slightly confident  confident  very confident

10. My overall feelings about achieving my goals in this programme for my baby are

    very negative  negative  slightly negative  neutral  slightly positive  positive  very positive

B. Incredible Years Teaching Format/Methods

Usefulness

In this section, we would like you to indicate how useful each of the following types of methods used to deliver this programme 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 video vignettes was

   extremely useless  useless  slightly useless  neutral  somewhat useful  useful  extremely useful
C. Specific Parenting Techniques/Topics

Usefulness

In this section, we would like you to indicate how useful each of the following topics and techniques are in improving your interactions with your baby. Please circle the response that most accurately describes the usefulness of the content or techniques. Leave the question blank if you did not attend the session.

1. Information about baby’s development and developmental milestones

2. Group discussion, sharing and support from other parents during this programme was

3. Practicing the approaches I learned in the group session was

4. I found the “buddy calls” to be

5. The “baby-proof safety checklist” and “things I can do” journal was

6. Practicing things I learned at home with my baby was

7. Weekly handouts (e.g., refrigerator notes) were

8. Phone calls from the group leaders were

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2. Providing Physical, Tactile and Visual Stimulation (e.g., baby massage, games, exercises)

<table>
<thead>
<tr>
<th>Rating</th>
<th>extremely useless</th>
<th>useless</th>
<th>slightly useless</th>
<th>neutral</th>
<th>somewhat useful</th>
<th>useful</th>
<th>extremely useful</th>
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</table>

3. Promoting Baby Language and Brain Development (e.g., speaking “parent-ese”)

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<thead>
<tr>
<th>Rating</th>
<th>extremely useless</th>
<th>useless</th>
<th>slightly useless</th>
<th>neutral</th>
<th>somewhat useful</th>
<th>useful</th>
<th>extremely useful</th>
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4. Child-Directed Play Interactions (e.g., reading babies’ cues)

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<tr>
<th>Rating</th>
<th>extremely useless</th>
<th>useless</th>
<th>slightly useless</th>
<th>neutral</th>
<th>somewhat useful</th>
<th>useful</th>
<th>extremely useful</th>
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</table>

5. Descriptive Commenting/Social and Emotion Coaching

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<thead>
<tr>
<th>Rating</th>
<th>extremely useless</th>
<th>useless</th>
<th>slightly useless</th>
<th>neutral</th>
<th>somewhat useful</th>
<th>useful</th>
<th>extremely useful</th>
</tr>
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</table>

6. Helping Babies Feel Loved, Safe and Secure

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<thead>
<tr>
<th>Rating</th>
<th>extremely useless</th>
<th>useless</th>
<th>slightly useless</th>
<th>neutral</th>
<th>somewhat useful</th>
<th>useful</th>
<th>extremely useful</th>
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</thead>
</table>

7. Singing to Babies

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<thead>
<tr>
<th>Rating</th>
<th>extremely useless</th>
<th>useless</th>
<th>slightly useless</th>
<th>neutral</th>
<th>somewhat useful</th>
<th>useful</th>
<th>extremely useful</th>
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</table>

8. Flexibility in Routines and Transition to Predictable Daily Schedules

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<tr>
<th>Rating</th>
<th>extremely useless</th>
<th>useless</th>
<th>slightly useless</th>
<th>neutral</th>
<th>somewhat useful</th>
<th>useful</th>
<th>extremely useful</th>
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9. Gaining Support and Importance of Parental Self-Care

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<tr>
<th>Rating</th>
<th>extremely useless</th>
<th>useless</th>
<th>slightly useless</th>
<th>neutral</th>
<th>somewhat useful</th>
<th>useful</th>
<th>extremely useful</th>
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</table>

10. Knowing How to Respond to a Baby’s Crying and Strategies for Staying Calm

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<tr>
<th>Rating</th>
<th>extremely useless</th>
<th>useless</th>
<th>slightly useless</th>
<th>neutral</th>
<th>somewhat useful</th>
<th>useful</th>
<th>extremely useful</th>
</tr>
</thead>
</table>
11. Introducing Books to Babies

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<thead>
<tr>
<th>extremely</th>
<th>useless</th>
<th>slightly</th>
<th>neutral</th>
<th>somewhat</th>
<th>useful</th>
<th>extremely</th>
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</thead>
</table>

12. Assuring a Baby-proofed Home

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<tr>
<th>extremely</th>
<th>useless</th>
<th>slightly</th>
<th>neutral</th>
<th>somewhat</th>
<th>useful</th>
<th>extremely</th>
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</table>

13. This Overall Group of Techniques

<table>
<thead>
<tr>
<th>extremely</th>
<th>useless</th>
<th>slightly</th>
<th>neutral</th>
<th>somewhat</th>
<th>useful</th>
<th>extremely</th>
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</table>

**D. Evaluation of Incredible Years Parent Group Leader(s)**

In this section we would like you to express your opinions about your 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 group leader's teaching and leading of group discussions was

<table>
<thead>
<tr>
<th>very poor</th>
<th>poor</th>
<th>below average</th>
<th>average</th>
<th>above average</th>
<th>very good</th>
<th>excellent</th>
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</thead>
</table>

2. The group leader's preparation was

<table>
<thead>
<tr>
<th>very poor</th>
<th>poor</th>
<th>below average</th>
<th>average</th>
<th>above average</th>
<th>very good</th>
<th>excellent</th>
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</thead>
</table>

3. Concerning the group leader's interest and concern in me and my baby, I was

<table>
<thead>
<tr>
<th>very dissatisfied</th>
<th>dissatisfied</th>
<th>below average</th>
<th>average</th>
<th>slightly satisfied</th>
<th>satisfied</th>
<th>extremely satisfied</th>
</tr>
</thead>
</table>

4. At this point, I feel that the group leader in the programme was

<table>
<thead>
<tr>
<th>extremely unhelpful</th>
<th>unhelpful</th>
<th>slightly unhelpful</th>
<th>neutral</th>
<th>slightly helpful</th>
<th>helpful</th>
<th>extremely helpful</th>
</tr>
</thead>
</table>
5. Concerning my personal feelings toward the group leader, I

| dislike him/her very much | dislike him/her slightly | have a neutral attitude toward him/her | like him/her slightly | like him/her | like him/her very much |

If more than one group leader was involved in your programme, please fill in the following. (Go to Section E if only one leader was involved.)

Group Leader #2 _________________________________________________________

(name)

1. I feel that the group leader’s teaching and facilitation of group discussion was

| very poor | poor | below average | average | above average | very good | excellent |

2. The group leader’s preparation was

| very poor | poor | below average | average | above average | very good | excellent |

3. Concerning the group leader’s interest and concern in me and my baby, I was

| very dissatisfied | dissatisfied | slightly dissatisfied | average | slightly satisfied | satisfied | extremely satisfied |

4. At this point, I feel that the group leader in the programme was

| extremely unhelpful | unhelpful | slightly unhelpful | neutral | slightly helpful | helpful | extremely helpful |

5. Concerning my personal feelings toward the group leader, I

| dislike him/her very much | dislike him/her slightly | have a neutral attitude toward him/her | like him/her slightly | like him/her | like him/her very much |
E. Overall Programme Evaluation

1. Which parts of the programme were most helpful to you?

2. What did you like most about the programme?

3. What did you like least about the programme?

4. How could the programme have been improved to help you more?

F. Practical Considerations

1a. How many sessions of the 10-week programme did you attend?

   1-2  3-4  5-6  7-8  9-10

b. If you attended less than half of the sessions, why was this?
2a. Was the location of the sessions convenient for you?

Yes  No

b. How did you travel to the group sessions?

Walked  Public transport  Drove myself  Someone else drove me (friend/family)  Taxi  Transport provided by the programme

3a. Did you need child care to enable you to attend the group sessions?

Yes  No

b. Did you use the crèche provided for the parents on this programme?

Yes  No

4. The number of group sessions was:

Far too few  Slightly too few  Just right  Slightly too many  Far too many

5. The length of the group sessions was:

Far too short  Slightly too short  Just right  Slightly too long  Far too long

6a. Was the time of day that the group sessions were held suitable for you?

Yes  No

b. If no, what would have been a better time for you?

7a. Did you attend the Incredible Years Toddler group programme?

Yes  No