

Name: _____ Facilitator: _____ Date: _____

Please check off the START NOW Unit you just completed:

1- My Foundation 2- My Emotions 3- My Relationships 4- My Future

START NOW PARTICIPANT SATISFACTION QUESTIONNAIRE

Please help us improve our program by answering some questions about the START NOW unit you just completed. We are interested in your honest opinions, whether they are positive or negative. Please answer all of the questions. We also welcome your comments and suggestions on ways we can improve START NOW.

Thank you very much. We really appreciate your help.

Please circle your answer:

1. How would you rate the quality of the START NOW unit you just completed?



Excellent (4)

Good (3)

Fair (2)

Poor (1)

2. Did you get the kind of help you wanted?



No, definitely (1)

No, not really (2)

Yes, generally (3)

Yes, definitely (4)

3. To what extent has this START NOW unit met your needs?



Almost all of my needs
have been met (4)

Most of my needs
have been met (3)

Only a few of my needs
have been met (2)

None of my needs
have been met (1)

4. If a friend were in need of similar help, would you recommend that he/she participate in this START NOW unit?



No, definitely not (1)

No, I don't think so (2)

Yes, I think so (3)

Yes, definitely (4)

5. How satisfied are you with the amount of help you have received?



Quite dissatisfied (1)

Indifferent or mildly
dissatisfied (2)

Mostly satisfied (3)

Very satisfied (4)

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6. Has this START NOW unit helped you to deal more effectively with your problems?



Yes, it helped a great deal (4)

Yes, it helped (3)

No, it really didn't help (2)

No, it seemed to make things worse (1)

7. Has participation in this START NOW unit helped you cope with daily life in prison/jail?



Yes, it helped a great deal (4)

Yes, it helped (3)

No, it really didn't help (2)

No, it seemed to make things worse (1)

8. If you were to seek help again would you participate in this START NOW unit?



No, definitely not (1)

No, I don't think so (2)

Yes, I think so (3)

Yes, definitely (4)

9. What were the activities or topics you liked the most about this unit?

10. What would you change about this unit to make it better?