

Parent Program Satisfaction Questionnaire Autism Spectrum & Language Delays Program

(Hand out at e	end of the pro	gram)				
Participant's N	Name		[Date		
Parenting Propossible. The	gram that you information o	is part of our evenue have participate btained will help is greatly appre	ted in. It is im p us to evaluat	portant that yo	ou answer as l lly improve th	nonestly as ne program
A. The Ove	rall Progra	ım				
Please circle the participating i	•	nat best express n.	ses how you h	nonestly feel at	this point as	a result of
1. My child's s	social and emo	otional skills are				
considerably worse	worse	slightly worse	the same	slightly improved	improved	greatly improved
2. My child's բ	ore-academic s	skills for languag	ge, reading rea	adiness, and pe	rsistence at a	task are
considerably worse	worse	slightly worse	the same	slightly improved	improved	greatly improved
3. My child's s	self-regulation	and imaginary	play skills are			
considerably worse	worse	slightly worse	the same	slightly improved	improved	greatly improved
•	feelings about nting skills are	my personal pr that I am	ogress at usin	g the autism sp	ectrum/langu	ıage
very pessimistic	pessimistic	slightly pessimistic	neutral	slightly optimistic	optimistic	very optimistic
5. I feel that the program is	ne approach u	sed to strength	en my child's s	social and emo	tional behavio	ors in this
very inappropriate	inappropriate	slightly inappropriate	neutral	slightly appropriate	appropriate	greatly appropriate

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

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

7. My overall feeling about achieving my goals for my child and family in this program is

very negative slightly neutral slightly positive very negative positive positive 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 slightly neutral somewhat useful extremely useless useful useful useful

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

extremely useless slightly neutral somewhat useful extremely useless useful useful useful

3. Group discussion of parenting skills was

extremely useless slightly neutral somewhat useful extremely useless useful useful useful useful

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

extremely useless slightly neutral somewhat useful extremely useless useful useful useful

5. Reading chapters from the *Incredible Years* or *Incredible Toddlers* book was

extremely useless slightly neutral somewhat useful extremely useless useful useful useful useful

6. Weekly handouts (e.g., spotlighting tips & others) were

extremely useless slightly neutral somewhat useful extremely useless useful useful useful useful

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

extremely useless slightly neutral somewhat useful extremely useless useful useful 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. Narrated of	child-d	lirected	p	ay
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extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful	
2. Academic and	persistence co	aching					
extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful	
3.Social coaching	g						
extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful	
4. Emotion coach	ning						
extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful	
5. Using pretend	play and pupp	oets					
extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful	
6. Using emotion	nal self-regulati	on skills					
extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful	
7. Using praise and rewards							
extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful	
8. Limit setting and managing misbehavior							
extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful	

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 Leade	r #1						
•			(name)				
1. I feel that t	the leader's tea	ching was	,				
very poor	poor	slightly below average	average	slightly above average	high	superior	
2. The leader's preparation was							
very poor	poor	slightly below average	average	slightly above average	high	superior	
3. Concernin	g the leader's ir	nterest and con-	cern in me and	l my child, I wa	s		
extremely dissatisfied	dissatisfied	slightly dissatisfied	neutral	slightly satisfied	satisfied	extremely satisfied	
4. At this poi	nt, I feel that th	e leader in the	program was				
extremely unhelpful	unhelpful	slightly unhelpful	neutral	slightly helpful	helpful	extremely helpful	
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							
1 I feel that t	the leader's tea	ching was	(name)				
very	poor	slightly below average	average	slightly above average	high	superior	
2. The leader's preparation was							
very poor	poor	slightly below average	average	slightly above average	high	superior	
3. Concerning the leader's interest and concern in me and my child, I was							
extremely dissatisfied	dissatisfied	slightly dissatisfied	neutral	slightly satisfied	satisfied	extremely satisfied	
4. At this point, I feel that the leader in the program was							
extremely unhelpful	unhelpful	slightly unhelpful	neutral	slightly helpful	helpful	extremely helpful	

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 somewhat neutral somewhat very unsupportive unsupportive supportive supportive supportive supportive

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

very somewhat neutral somewhat very uninterested uninterested uninterested interested interested 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 somewhat neutral somewhat very unlikely unlikely likely likely 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 parenting assistance? Please elaborate.

3. What did you see as the main benefit of the Autism Spectrum & Language Delays 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.