



Participant's Name _____ Date _____

The following questionnaire is part of our evaluation of the Incredible Years parenting 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 bonding that I feel with my baby since I took this program is

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

2. My baby's bonding with me since I started this program is

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

3. My feelings about my baby's social, emotional and physical developmental progress are that I am

very dissatisfied dissatisfied slightly dissatisfied neutral slightly satisfied satisfied greatly satisfied

4. To what degree has the Incredible Years parenting program helped with other personal or family problems not directly related to your baby (for example, your feelings of support 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 baby program is

very pessimistic pessimistic slightly pessimistic neutral slightly optimistic optimistic very optimistic

6. I feel that the approaches used to enhance my baby's development and language in this program are

very inappropriate inappropriate slightly inappropriate neutral slightly appropriate appropriate greatly appropriate

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

strongly not recommend not recommend slightly not recommend neutral slightly recommend recommend strongly 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 feeling about achieving my goals in this program 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 program 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

3. Group discussion, sharing and support from other parents during this program was

extremely useless useless slightly useless neutral somewhat useful useful extremely useful

4. Use of practice with my baby during group sessions was

extremely useless useless slightly useless neutral somewhat useful useful extremely useful

5. I found the “buddy calls” to be

extremely useless useless slightly useless neutral somewhat useful useful extremely useful

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

extremely useless useless slightly useless neutral somewhat useful useful extremely useful

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

extremely useless useless slightly useless neutral somewhat useful useful extremely useful

8. Weekly handouts (e.g., Points to Remember) were

extremely useless useless slightly useless neutral somewhat useful useful extremely useful

9. Phone calls from the group leaders were

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 is in improving your interactions with your baby. Please circle the response that most accurately describes the usefulness of the content or techniques.

1. Information about baby’s development and developmental milestones

extremely useless useless slightly useless neutral somewhat useful useful extremely useful

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

extremely useless useless slightly useless neutral somewhat useful useful extremely useful

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

extremely useless useless slightly useless neutral somewhat useful useful extremely useful

4. Baby-Directed Play Interactions (e.g., reading babies' cues and following your baby's lead)

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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5. Descriptive Commenting (e.g., putting your baby's feelings and actions into words)

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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6. Helping Babies Feel Loved, Safe and Secure

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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7. Singing to Babies

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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8. Flexibility in Routines and Transition to Predictable Daily Schedules

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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9. Gaining Support and Importance of Parental Self-Care

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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10. Knowing How to Respond to a Baby's Crying & Strategies for Staying Calm

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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11. Introducing Books to Babies

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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12. Assuring a Baby-proofed Home

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

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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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 facilitation of group discussions was

very poor poor below average average above average superior excellent

2. The group leader's preparation was

very poor poor below average average above average superior 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 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 (name) _____

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

very poor poor below average average above average superior excellent

2. The group leader's preparation was

very poor poor below average average above average superior 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 program was

extremely unhelpful unhelpful slightly unhelpful neutral slightly helpful helpful extremely helpful

E. Overall Program Evaluation

1. What part of the program was most helpful to you?

2. What did you like most about the program?

3. What did you like least about the program?

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