

CUSTOMER SURVEY (PERSONAL CUSTOMER)

How are we doing? Please take 5 minutes to answer the questions below. Your input will help strengthen Child Welfare Information Gateway services to better meet your needs. Your participation in this survey is voluntary, and your responses will be reported anonymously. **This survey is intended for Child Welfare Information Gateway customers who are at least 18 years old.** If you would prefer to provide your responses by telephone, contact Child Welfare Information Gateway staff at 800.394.3366. If you have any questions, contact Child Welfare Information Gateway staff by email at info@childwelfare.gov or by telephone at 800.394.3366. Thank you for helping us help you.

- 1) Which of the following best describes why you are visiting Child Welfare Information Gateway? (*Check one*)
 - a. I am looking for information to help me in my work (*please indicate your primary background/role related to child welfare services*):
 - Prevention/Family support
 - Child protective services
 - Foster care/Foster parenting
 - Adoption
 - Youth services
 - Juvenile justice
 - Health/Mental health
 - Legal/Courts
 - Researcher/Evaluator/Consultant
 - Early childhood educator (0–5yrs)
 - Teacher (K–12)
 - Professor/Faculty (higher education)
 - Other (*please describe*) _____
 - b. I am looking for information to help me with my education (*please indicate level*):
 - Undergraduate
If so, are you pursuing a BSW?
 - Postgraduate
If so, are you pursuing an MSW/DSW/Ph.D.?
 - Other (*please describe*) _____
 - c. I am looking for information to help me with a personal situation. I am a(n):
 - Parent
 - Legal guardian/Relative
 - Adopted person
 - Foster youth (current or former)
 - Concerned person
 - Other (*please describe*) _____
- 2) If you are a parent, are you a(n): (*Check all that apply*)
 - Birth parent
 - Adoptive parent
 - Foster parent
- 3) In which State/territory do you live?
- 4) What was the primary topic of information you were looking for today? (*Check one*)
 - Child abuse & neglect
(*please describe*) _____
 - Family support & preservation
(*please describe*) _____
 - Out-of-home care (e.g., foster care, transitioning youth, residential group care, etc.) (*please describe*) _____
 - Adoption
(*please describe*) _____
 - Systemwide (e.g., courts, domestic violence, substance abuse, mental health, youth, etc.)
(*please describe*) _____
 - Other
(*please describe*) _____
- 5) Did you find the information you were looking for? (*Check one*)
 - Yes, I found what I was looking for.
 - I found some of what I was looking for.
What information do you still need?
 - No, I did not find what I was looking for.
What information do you still need?
 - I'm not sure.

6) Overall, how satisfied are you with your interaction with Child Welfare Information Gateway? (Check one)

- Very satisfied
(please explain) _____
- Somewhat satisfied
(please explain) _____
- Neither satisfied nor dissatisfied
(please explain) _____
- Somewhat dissatisfied
(please explain) _____
- Very dissatisfied
(please explain) _____

7) How did you first find out about Child Welfare Information Gateway? (Check one)

- Search engine (e.g., Google, Yahoo)
- Linked from another website
- Conference (please name) _____
- Email announcement
- Print advertisement (please name) _____
- Referral from someone
- Social media (e.g., Facebook, Twitter).
- U.S. Postal Mail
- Other (please describe) _____

8) How frequently do you contact Child Welfare Information Gateway? (Check one)

- This is my first time
- More than once a week
- 1–4 times a month
- 1–4 times a year
- Less than once a year

9) If you have any other comments to help us improve our services or products, please write them below:

Thank you very much for your participation. Your time and input are greatly appreciated.