SOAR Specialized Training and Technical Assistance Feedback Form

SOAR

Stop. Observe. Ask. Respond to Human Trafficking
A Training for Health Care and Social Service Providers

In order to help the National Human Trafficking Training and Technical Assistance Center (NHTTAC) better serve the field, we are reaching out to obtain your feedback. We will protect the privacy of your information in accordance with the Federal Privacy Act, and we will protect the confidentiality of your responses using procedures we have in place, including reporting all information in aggregate to avoid identifying information. Only members of the NHTTAC Evaluation Team have access to information that could identify respondents. If you have any questions about this survey or the evaluation, please contact NHTTACEval@icf.com.

DATE(S): _____

CONSULTANT(S)/FACILITATOR(S): _____

Please provide the information below to create an anonymous ID:

_____

Birth Month

(insert just the month

for your date of birth:

08 for August)

First letter of first name

(example: S for Sara)

First letter of your middle name

(example: M for Maria)

Please rate the extent to which you agree or disagree that the SOAR for Communities training will help your community achieve the following objectives:

LEARNING OBJECTIVES	Strongly Disagree	Disagree	Agree	Strongly Agree
1. <Insert learning objective>	1	2	3	4
2. <Insert learning objective>	1	2	3	4
3. <Insert learning objective>	1	2	3	4
4. <Insert learning objective>	1	2	3	4

Please indicate the extent to which you agree or disagree with the following statements about the overall training:

OVERALL TRAINING	Strongly Disagree	Disagree	Agree	Strongly Agree
5. The training reflected a public health approach to addressing human trafficking.	1	2	3	4
6. The training helped me identify potential language and cultural barriers my community might face in responding to human trafficking.	1	2	3	4
7. The training was trauma informed.	1	2	3	4
8. The training was survivor informed.	1	2	3	4
9. The training was grounded in a multidisciplinary approach to addressing human trafficking.	1	2	3	4
10. The training included evidence-based research or promising practices.	1	2	3	4

SOAR SPECIALIZED TRAINING AND TECHNICAL ASSISTANCE FEEDBACK Form

OMB Control Number: 0970-0519
Expiration Date: 05/31/2020

SOAR
Stop. Observe. Ask. Respond to Human Trafficking
A Training for Health Care and Social Service Providers

11. The training will positively impact my community's response to human trafficking.	1	2	3	4
12. The training met my educational needs.	1	2	3	4
13. The training met my professional needs.	1	2	3	4

Please indicate the extent to which you agree or disagree with the following statements:

SESSION 1: WHAT IS A PUBLIC HEALTH APPROACH?	Strongly Disagree	Disagree	Agree	Strongly Agree
14. This session helped me understand a public health approach to human trafficking.	1	2	3	4
15. I feel confident in my ability to apply what I learned about a public health approach to trafficking in my daily work.	1	2	3	4
16. Learning about a public health approach to trafficking will positively impact my community's ability to serve people who are currently being trafficked, at risk of trafficking, or have been trafficked.	1	2	3	4
17. This session was trauma informed.	1	2	3	4
18. This session was survivor informed.	1	2	3	4
19. This session helped me define a trauma-informed and survivor-informed response.	1	2	3	4
20. This session helped me define a cultural and linguistically appropriate response.	1	2	3	4
21. This session was grounded in a multidisciplinary approach to addressing human trafficking.	1	2	3	4
22. I learned practical ways to apply a trauma-informed framework in my daily work through this session.	1	2	3	4
23. This session improved my knowledge in responding to a person who is currently being trafficked, at risk of trafficking, or has been trafficked.	1	2	3	4
24. I will be able to apply what I learned about trauma in my daily work.	1	2	3	4
SESSION 2: STOP	Strongly Disagree	Disagree	Agree	Strongly Agree
25. This session helped expand my understanding of all types of human trafficking.	1	2	3	4
26. This session helped expand my ability to identify at-risk populations.	1	2	3	4
27. This session helped me identify populations in my community vulnerable to trafficking.	1	2	3	4
28. This session helped increase my awareness of instances of trafficking within my community.	1	2	3	4
29. I have identified the major challenges my community might face in understanding human trafficking.	1	2	3	4
30. I have drafted potential action items and solutions to help my community mitigate challenges in understanding human trafficking.	1	2	3	4
31. I will be able to apply what I learned about understanding human trafficking in my daily work.	1	2	3	4

SOAR SPECIALIZED TRAINING AND TECHNICAL ASSISTANCE FEEDBACK Form

OMB Control Number: 0970-0519
Expiration Date: 05/31/2020

Stop. Observe. Ask. Respond to Human Trafficking
A Training for Health Care and Social Service Providers

SESSION 3: OBSERVE	Strongly Disagree	Disagree	Agree	Strongly Agree
32. This session helped me recognize warning signs of human trafficking.	1	2	3	4
33. This session increased my knowledge about the root causes of trafficking.	1	2	3	4
34. This session helped me discover what my community is doing to identify human trafficking.	1	2	3	4
35. This session helped me identify the major challenges my community might face in identifying human trafficking.	1	2	3	4
36. This session helped me identify potential solutions to help my community mitigate challenges in identifying human trafficking.	1	2	3	4
37. I will be able to apply what I learned about identifying human trafficking to my daily work.	1	2	3	4

SESSION 4: ASK	Strongly Disagree	Disagree	Agree	Strongly Agree
38. This session increased my knowledge about identifying all types of trafficking.	1	2	3	4
39. This session helped identify existing resources and tools used to screen for human trafficking.	1	2	3	4
40. This session helped me identify gaps in how my community identifies a person who is being trafficked.	1	2	3	4
41. This session helped me find assets in my community to improve how a person who is currently being trafficked, at risk of trafficking, or has been trafficked is identified.	1	2	3	4
42. I will be able to apply what I learned about screening for human trafficking to my daily work.	1	2	3	4

SESSION 5: RESPOND	Strongly Disagree	Disagree	Agree	Strongly Agree
43. This session will lead to my community to expand into more trauma-informed and survivor-led practices.	1	2	3	4
44. This session helped me identify areas to improve my community's response to the intermediate needs of a person who is currently being trafficked, at risk of trafficking, or has been trafficked.	1	2	3	4
45. This session helped me identify areas to improve my community's response to the long-term needs of a person who is currently being trafficked, at risk of trafficking, or has been trafficked.	1	2	3	4
46. This session helped me identify how my organization can help improve my community's response to human trafficking.	1	2	3	4
47. This session helped my community develop and/or strengthen a comprehensive response to human trafficking.	1	2	3	4
48. This session helped me identify necessary partners to implement an improved community response to human trafficking.	1	2	3	4
49. I will be able to apply what I learned about responding to human trafficking in my daily work.	1	2	3	4

Please indicate the extent to which you agree or disagree with the following statements:

FACILITATOR 1:	Strongly Disagree	Disagree	Agree	Strongly Agree
50. The facilitator's knowledge and expertise were appropriate for the training.	1	2	3	4

SOAR SPECIALIZED TRAINING AND TECHNICAL ASSISTANCE FEEDBACK Form

OMB Control Number: 0970-0519
Expiration Date: 05/31/2020

SOAR
Stop. Observe. Ask. Respond to Human Trafficking
A Training for Health Care and Social Service Providers

	Strongly Disagree	Disagree	Agree	Strongly Agree
51. The facilitator moved through the strategic planning agenda effectively.	1	2	3	4
52. The facilitator responded positively to questions and comments.	1	2	3	4
53. The facilitator created a respectful environment for participants.	1	2	3	4
54. The facilitator encouraged and initiated helpful discussions.	1	2	3	4
FACILITATOR 2:	**Strongly Disagree**	**Disagree**	**Agree**	**Strongly Agree**
55. The facilitator's knowledge and expertise were appropriate for the training.	1	2	3	4
56. The facilitator moved through the strategic planning agenda effectively.	1	2	3	4
57. The facilitator responded positively to questions and comments.	1	2	3	4
58. The facilitator created a respectful environment for participants.	1	2	3	4
59. The facilitator encouraged and initiated helpful discussions.	1	2	3	4
FACILITATOR 3:	**Strongly Disagree**	**Disagree**	**Agree**	**Strongly Agree**
60. The facilitator's knowledge and expertise were appropriate for the training.	1	2	3	4
61. The facilitator moved through the strategic planning agenda effectively.	1	2	3	4
62. The facilitator responded positively to questions and comments.	1	2	3	4
63. The facilitator created a respectful environment for participants.	1	2	3	4
64. The facilitator encouraged and initiated helpful discussions.	1	2	3	4
LOGISTICS	**Strongly Disagree**	**Disagree**	**Agree**	**Strongly Agree**
65. Overall, this was an effective way to support the content and purpose of the strategic planning process.	1	2	3	4
66. The training was well organized.	1	2	3	4
67. The meeting space and use of technology provided a good learning environment.	1	2	3	4
68. NHTTAC was responsive to my questions and needs.	1	2	3	4

69. Following the training, what three steps will you take to enhance your community's response to human trafficking?

   a. _____

   b. _____

   c. _____

70. How do you plan to engage survivors in implementing your strategic plan?

   _____

   _____

   _____

SOAR SPECIALIZED TRAINING AND TECHNICAL ASSISTANCE FEEDBACK Form

OMB Control Number: 0970-0519
Expiration Date: 05/31/2020

SOAR
Stop. Observe. Ask. Respond to Human Trafficking
A Training for Health Care and Social Service Providers

71. Following the training, how prepared do you feel to take steps toward addressing human trafficking in your community?

1	2	3	4
Not At All Prepared	*Somewhat Prepared*	*Mostly Prepared*	*Completely Prepared*

72. Please rate the <u>overall</u> quality of this training.

1	2	3	4
Poor	*Fair*	*Good*	*Excellent*

73. What could NHTTAC do in the future to enhance your level of preparedness <u>during</u> this type of SOAR T/TA?

_____

_____

_____

74. What could NHTTAC do in the future to enhance your level of preparedness <u>following</u> this type of SOAR T/TA?

_____

_____

_____

75. Would you recommend NHTTAC to others to receive T/TA?   ☐ Yes   ☐ No

76. Which of the following **best** describes the organization in which you work? **(Mark all that apply.)**

☐ Academic institution
☐ Anti-trafficking organization
☐ Business/For-profit organization
☐ Coalition/Multidisciplinary team/Task force
☐ Federal government
☐ Faith-based organization
☐ State/Local government
☐ Nonprofit/Community-based organization

☐ OTIP grantee
☐ Self-employed
☐ Survivor-led organization
☐ Tribal government
☐ Union/Worker advocacy organization
☐ Victim service provider
☐ Other (please specify): _____

77. Is your organization responsible for working with people who are currently being trafficked or have been trafficked?
☐ Yes   ☐ No

SOAR SPECIALIZED TRAINING AND TECHNICAL ASSISTANCE FEEDBACK Form

SOAR
Stop. Observe. Ask. Respond to Human Trafficking
A Training for Health Care and Social Service Providers

OMB Control Number: 0970-0519
Expiration Date: 05/31/2020

78. Which of the following **best** describes your professional capacity or types of services you provide? (**Mark all that apply.**)

☐ Behavioral health professional (e.g., psychologist, psychiatrist, mental health/substance use counselor)
☐ Child welfare (e.g., state agency staff, child welfare contractor, nonprofit personnel)
☐ Corrections-based services (e.g., parole, probation)
☐ Criminal justice (e.g., law enforcement, prosecutor, probation, court, forensic interviewer)
☐ Educator (e.g., teacher, professor, school administrator)
☐ Professional capacity/types of services, continued
☐ Health care (e.g., physician, physician assistant, nurse practitioner, dentist, nurse, pharmacist)
☐ Housing (e.g., case worker, shelter director, public housing authority agencies)

☐ Legal (e.g., immigration, civil and/or rights-based attorney and/or paralegal, clinic)
☐ Public health (e.g., licensure board, health department staff, health care executive, community health workers)
☐ Social worker (e.g., case manager, school counselor, supervisor, administrator)
☐ Survivor empowerment, mentoring, or peer to peer
☐ Violence prevention (e.g., Child abuse and neglect; elder abuse; domestic violence, sexual violence, youth violence)
☐ Other (please specify):

79. In your professional capacity, how frequently do you come into contact with a person who is currently being trafficked, at risk of being trafficked, or has been trafficked?

1	2	3	4
Never	*Occasionally*	*Frequently*	*Daily*

80. Which of the following **best** describes the number of years of experience you have in your current field of work?

☐ Less than 3 years   ☐ 3–5 years   ☐ 6–10 years   ☐ More than 10 years

81. Which of the following **best** describes your primary role in your current position?

☐ Direct delivery/frontline staff   ☐ Consultant/trainer   ☐ Administration
☐ Management   ☐ Volunteer   ☐ Peer educator
☐ Other (please specify): _____

82. Which of the following **best** describes your geographic population? (**Mark all that apply.**)

☐ National
☐ State (please specify): _____
☐ Tribal
☐ International (please specify country): _____

☐ Local
☐ Urban
☐ Rural
☐ Suburban

83. Please select any of the following populations you currently work with in a professional capacity. (**Mark all that apply.**)

☐ Human trafficking
  ☐ Commercial sexual exploitation of children
  ☐ Sex trafficking

☐ Adults
☐ Minors
☐ Labor trafficking
  ☐ Adults
  ☐ Minors

SOAR SPECIALIZED TRAINING AND TECHNICAL ASSISTANCE FEEDBACK Form

OMB Control Number: 0970-0519
Expiration Date: 05/31/2020

Stop. Observe. Ask. Respond to Human Trafficking
A Training for Health Care and Social Service Providers

- Children/youth
  - Out of home/Foster care/Kinship care
  - Juvenile justice
  - Runaway/Homeless youth
- People with disabilities
- Deaf/Hearing impaired
- Elderly
- Lesbian, gay, bisexual, transgender, and questioning
- Foreign nationals (migrant workers, undocumented immigrants, refugees)
- People with low incomes

- Racial and ethnic minorities
  - American Indian or Alaska Native
  - Asian
  - Black or African American
  - Native Hawaii or other Pacific Islander
  - White
  - Hispanic or Latino ethnicity
- History of substance use
- Intimate partner violence (e.g., dating, domestic violence)
- Gang-related crime
- Sexual abuse/Violence
- Other (please specify): _____

Thank you for taking the time to complete this form and helping to improve SOAR activities.