# SOAR ORGANIZATIONAL FEEDBACK Form



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

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 <a href="https://www.nhttacentlemberger.nhtml">NHTTACEval@icf.com</a>.

A	gency: _						
1.		Which of the following <b>best</b> describes the reason your organization incorporated SOAR training into its learning management system (LMS)? (Mark one.)					
	<ul> <li>□ For</li> <li>□ To</li> <li>Υ To</li> </ul>	better provide services to victims/at- use in program development/operati education/community outreach train staff/faculty/victim service provaddress a training mandate er (please specify):	viders				
2.	. In the past year, approximately how many employees at your organization took the SOAR training?						
3.	. In the past year, approximately how many employees worked at your organization?						
4.	. How was the LMS training disseminated in the organization?   Optional   Mandatory						
5.	Was it required for nonmanagement personnel? □ Yes □ No						
6.	Was it 1	required for management?	Yes   No				
7.		Does your organization have a current policy for when a person who is currently being trafficked, at risk of being trafficked, or has been trafficked receives services about:					
	Υ	Screening	Υ	ſ	<insert content=""></insert>		
	Υ	Referrals	Υ	ſ	<insert content=""></insert>		
	Υ	Reporting	Υ	ſ	<insert content=""></insert>		
8.		ast year, have you changed your policeen trafficked receives services abou		ur	rrently being trafficked, at risk of being trafficked		
	Υ	Screening	Υ	ſ	<insert content=""></insert>		
	Υ	Referrals	Υ	ſ	<insert content=""></insert>		
	Υ	Reporting	Υ	ſ	<insert content=""></insert>		

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to enable NHTTAC to collect recipient and stakeholder feedback to improve NHTTAC's T/TA service delivery. Public reporting burden for this collection of information is estimated to average 0.133 hours per respondent, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. If you have any comments on this collection of information, please contact the NHTTAC Evaluation Team at NHTTACEval@icf.com or 9300 Lee Highway, Fairfax, VA 22031.

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

CONTENT	Strongly Disagree	Disagree	Agree	Strongly Agree
9. The training content was applicable to our organization.	1	2	3	4
10. The training content helped our organization improve its efforts to <b>prevent</b> human trafficking.	1	2	3	4
11. The training content helped our organization improve its efforts to <b>identify</b> human trafficking.	1	2	3	4
12. The training content helped our organization improve its efforts to <b>respond</b> to human trafficking.	1	2	3	4
13. The training content was helpful to our organization for developing or revising internal protocols	1	2	3	4
14. The training content was helpful to our organization to expand our referral and resource networks.	1	2	3	4
15. The training was survivor-informed.	1	2	3	4
16. The training was trauma-informed.	1	2	3	4
17. The training was grounded in a multidisciplinary approach to addressing human trafficking	1	2	3	4
18. The training reflects a public health approach to addressing human trafficking.	1	2	3	4
LOGISTICS	Strongly Disagree	Disagree	Agree	Strongly Agree
19. NHTTAC was helpful in assisting our organization to incorporate SOAR into our Learning Management System.	1	2	3	4
20. The process for integrating the training into our organization's LMS was clearly explained.	1	2	3	4
21. The training format was a good fit for our organization.	1	2	3	4
22. The continuing education requirements were clearly explained.	1	2	3	4
23. The training content was appropriate for our organization.	1	2	3	4

24.	Please rank order the modules from 1 (least relevant) to 7 (most relevant) that align with the training needs of your organization.						
	Module 1: <inser Module 2: <inser Module 3: <inser< td=""><td>t name&gt;</td><td>- -</td><td colspan="3">Module 4: <insert name="">Module 5: <insert name="">Module 6: <insert name="">Module 7: <insert name=""></insert></insert></insert></insert></td></inser<></inser </inser 	t name>	- -	Module 4: <insert name="">Module 5: <insert name="">Module 6: <insert name="">Module 7: <insert name=""></insert></insert></insert></insert>			
25.	Please rate the overal	l quality of this training.					
	1	2	3	4			
	Poor	Fair	Good	Excellent			

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26.	Were there any technical problems? $\Box$ Yes $\Box$ No					
	If yes, were the technical issues with the: ☐ SOAR training content ☐ Organization's system ☐ Other (please specify):					
27.	What additional resources could NHTTAC have provided to your organization to help facilitate the incorporation of this SOAR training?					
28.	Has your organization proposed or changed policies pertaining to victims of human trafficking since receiving the training? $\Box$ Yes $\Box$ No					
	If yes, what are the proposed or implemented policies?					
29.	In the past year, have you assisted other organizations with their policy changes for victims of human trafficking? $ \Box  Yes \Box  No$					
	If yes, please explain.					
30.	What are other opportunities for policy and process change at your organization?					
31.	Would you recommend this SOAR online training to other organizations? $\Box$ Yes $\Box$ No					
32.	How frequently does your organization 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					
33.	Is your organization responsible for working with people who are currently being trafficked or have been trafficked?  \[ \subsection \text{Yes}  \subsection \text{No} \]					

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34. Which of the following **best** describes your organization? (Mark all that apply.) OTIP grantee Υ Academic institution Υ Self-employed Υ Anti-trafficking organization Υ Survivor-led organization Υ Business/for-profit organization Υ Tribal government Υ Coalition/multidisciplinary team/task force Union/worker advocacy organization Υ Federal government Υ Victim service provider Υ Faith-based organization Other (please specify): \_\_\_ Υ State/local government Nonprofit/community-based organization 35. Which of the following **best** describes the types of services your organization provides? (Mark all that apply.) Y Legal (e.g., immigration, civil and/or rights-based Y Behavioral health professional (e.g., psychologist, psychiatrist, mental health/substance use counselor) attorney and/or paralegal, clinic) Child welfare (e.g., state agency staff, child welfare Public health (e.g., licensure board, health contractor, nonprofit personnel) department staff, health care executive, community health workers) Corrections-based services (e.g., parole, probation) Social worker (e.g., case manager, school Criminal justice (e.g., law enforcement, prosecutor, counselor, supervisor, administrator) probation, court, forensic interviewer) Survivor empowerment, mentoring, or peer to peer Υ Educator (e.g., teacher, professor, school Violence prevention (e.g., child abuse and neglect; administrator) elder abuse; domestic violence, sexual violence, Υ Health care (e.g., physician, physician assistant, youth violence) nurse practitioner, dentist, nurse, pharmacist) Housing (e.g., case worker, shelter director, public  $\Upsilon$  Other (please specify): housing authority agencies) 36. Which of the following **best** describes your organization's geographic population? (Mark all that apply.) □ National □ Local Urban ☐ State (please specify): \_\_\_\_\_ □ Tribal Rural П ☐ International (please specify country): □ Suburban 37. Please select any of the following populations your organization current works with in a professional capacity. (Mark all that apply.) Juvenile justice Υ Human trafficking Y Runaway/Homeless youth Commercial sexual exploitation of People with disabilities children Υ Deaf/Hearing impaired Sex trafficking Υ Elderly Y Adults Lesbian, gay, bisexual, transgender, and Υ Minors questioning Labor trafficking Foreign nationals (migrant workers, undocumented Υ Adults immigrants, refugees) Υ Minors People with low incomes Υ Children/youth Racial and ethnic minorities

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Y Out of home/Foster care/Kinship care

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TEEDB <i>.</i> Form		Stop. Observe. Ask. Re	spond to Humai	Expiration Date: 05/31/202
OIII		A Training for Health Car		
	Υ	American Indian or Alaska Native	Υ	History of substance use
	Υ	Asian	Υ	Intimate partner violence (e.g., dating, domestic
	Υ	Black or African American		violence)
	Υ	Native Hawaii or other Pacific	Υ	Gang-related crime
		Islander	Υ	Sexual abuse/Violence
	Υ	White	Υ	Other (please specify):
	Υ	Hispanic or Latino ethnicity		
88 Do v	ou hav	e any comments or suggestions for future SOA	R-related train	ings?
ю. Бо у	ou nav	e any comments of suggestions for future 5071.	ix related train	11153.

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

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