



In order to help the Office on Trafficking in Persons' 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 [insert].

Please provide your email address to enable us to track your participation across NHTTAC offerings and your preferences/insights provided. You will be prompted to provide this same email address each time.

If you do not have an email address or prefer to use a unique identifier, create a username to be used and retained for future NHTTAC evaluations. Username example: Provide your two-digit birth month, first initial, and middle initial (e.g., 08JD)

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

OVERALL FEEDBACK	Strongly Disagree	Strongly Agree	Not Applicable
The [information/assistance I received] [content in the resource] was trauma informed.	1	8	NA
The [information/assistance I received] [content in the resource] was person centered.	1	8	NA
The [information/assistance I received] [content in the resource] was culturally and linguistically appropriate.	1	8	NA
The [NHTTAC Customer Support Center/website/resource] provided information on survivor-informed practices.	1	8	NA
The [NHTTAC Customer Support Center/website/resource] provided information on multidisciplinary approaches to addressing human trafficking.	1	8	NA
The [NHTTAC Customer Support Center/website/resource] provided information on public health approaches to addressing human trafficking.	1	8	NA
The [NHTTAC Customer Support Center/website/resource] provided information on current evidence-based research or promising practices.	1	8	NA
I am satisfied with the [information/assistance I received] [content of the site/resource].	1	8	NA
The [NHTTAC Customer Support Center/website/resource] provided information on equity-focused approaches.	1	8	NA
The [information/assistance I received] [information in the resource] will help me in my work.	1	8	NA
The [information/assistance I received] [information in the resource] met my professional needs.	1	8	NA
The [information/assistance I received] [information in the resource] I received met my educational needs.	1	8	NA
The [information/assistance I received] [resource] was clear and easy for me to understand.	1	8	NA
I will return to the [NHTTAC Customer Support Center/this site] for my training and technical assistance needs.	1	8	NA



I will recommend this [resource/site] to others.	1	8	NA
NHTTAC staff were responsive to my questions and needs.	1	8	NA
The resource addressed the critical issues related to the topic(s).	1	8	NA
The terminology included in the resource was used appropriately.	1	8	NA
The resource increased my knowledge about the topic(s).	1	8	NA
The information on this site met my goals/needs.	1	8	NA
I am satisfied with the appearance of the site.	1	8	NA
It is easy to find the information I need on this site.	1	8	NA
The website is user-friendly and I am able to navigate through it with ease.	1	8	NA
The website used appropriate images (e.g., race, ethnicity, sex).	1	8	NA
The website used appropriate language (e.g., sex, race, ethnicity).	1	8	NA

Please select the number that best represents your rating of this assistance for each of the following questions.

How satisfied were you with your overall NHTTAC experience?

1	8
<i>Very Dissatisfied</i>	<i>Very Satisfied</i>

Please rate the overall quality of the [assistance you received/NHTTAC website/resource].

1	8
<i>Poor</i>	<i>Excellent</i>

How well did the [NHTTAC Customer Support Center/NHTTAC website/resource] meet your expectations?

1	8
<i>Was Far Below My Expectations</i>	<i>Exceeded My Expectations</i>



How useful was the [information/assistance] provided through the [NHTTAC Customer Support Center/NHTTAC website/resource] to your work?

1

Not Useful

8

Very Useful

How prepared do you feel in implementing what you learned from the [NHTTAC Customer Support Center/NHTTAC website/resource] in your daily work?

1

Not At All Prepared

8

Very Prepared

How did you first hear about [NHTTAC/the NHTTAC website]?

- | | |
|---|---|
| <input type="checkbox"/> A colleague or friend | <input type="checkbox"/> person |
| <input type="checkbox"/> A link from another website/searching the internet | <input type="checkbox"/> The NHTTAC Customer Support Center |
| <input type="checkbox"/> A publication or newsletter | <input type="checkbox"/> The NHTTAC website |
| <input type="checkbox"/> An exhibit or presentation at a conference | <input type="checkbox"/> [Insert other method] |
| <input type="checkbox"/> My OTIP program monitor or other OTIP staff | <input type="checkbox"/> [Insert other method] |
| | <input type="checkbox"/> Other (please specify): _____ |

How often have you engaged with NHTTAC in the last 12 months?

- | | |
|------------------------------------|------------------------------------|
| <input type="checkbox"/> 1–3 times | <input type="checkbox"/> 7–9 times |
| <input type="checkbox"/> 4–6 times | <input type="checkbox"/> 10+ times |

How did you most recently access NHTTAC? (Mark all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Email | <input type="checkbox"/> Toll-free number for NHTTAC Customer Support Center |
| <input type="checkbox"/> NHTTAC website | <input type="checkbox"/> TTY |
| <input type="checkbox"/> OTIP program monitor or other OTIP staff person | <input type="checkbox"/> Other (please specify): _____ |

Why did you use/contact NHTTAC? (Mark all that apply.)

- | | |
|---|---|
| <input type="checkbox"/> Access online materials or training | <input type="checkbox"/> Request general information about OTIP or NHTTAC |
| <input type="checkbox"/> Acquire help for technical problems on website | <input type="checkbox"/> Request or apply for assistance: |
| <input type="checkbox"/> Apply to be a consultant/trainer | <input type="checkbox"/> Technical assistance |
| <input type="checkbox"/> Funding for a conference/event or speaker | <input type="checkbox"/> Training |
| <input type="checkbox"/> Join the listserv or mailing list | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> Obtain a referral for direct services | |
| <input type="checkbox"/> Obtain information on services for individuals who have experienced trafficking or who have increased risk factors for trafficking | |

In general, how promptly was your request(s) acknowledged?

- | | | |
|---|---|--|
| <input type="checkbox"/> Within 1 day | <input type="checkbox"/> Between 3 and 5 days | <input type="checkbox"/> After more than 7 days |
| <input type="checkbox"/> Between 1 and 2 days | <input type="checkbox"/> Between 6 and 7 days | <input type="checkbox"/> My request was not acknowledged |



Approximately how many times have you used/visited this site in the last 12 months?

- | | | |
|--|----------------------------------|---|
| <input type="checkbox"/> This is my first time | <input type="checkbox"/> Weekly | <input type="checkbox"/> A few times per year |
| <input type="checkbox"/> Daily | <input type="checkbox"/> Monthly | |

Were you familiar with NHTTAC before today's visit?

- ☐ Yes
☐ No

What was the goal of your visit today? **(Mark all that apply.)**

- | | |
|---|---|
| <input type="checkbox"/> Access/download resources | <input type="checkbox"/> Learn more about survivor fellowship programs |
| <input type="checkbox"/> Apply for survivor fellowship programs | <input type="checkbox"/> Obtain contact information |
| <input type="checkbox"/> Learn about NHTTAC | <input type="checkbox"/> Request/apply for SOAR trainings |
| <input type="checkbox"/> Learn about SOAR trainings | <input type="checkbox"/> Request/apply for training or technical assistance |
| <input type="checkbox"/> Learn about training or technical assistance opportunities | <input type="checkbox"/> Review NHTTAC annual statistics |
| | <input type="checkbox"/> Other (please specify): _____ |

What NHTTAC resource did you download or receive?

- | | |
|---|--|
| <input type="checkbox"/> Organizational toolkit | <input type="checkbox"/> [Insert resource] |
| <input type="checkbox"/> Screening toolkit | <input type="checkbox"/> [Insert resource] |
| <input type="checkbox"/> SOAR e-guide | <input type="checkbox"/> [Insert resource] |
| <input type="checkbox"/> State and territory profiles | <input type="checkbox"/> [Insert resource] |
| <input type="checkbox"/> Webinar recordings | <input type="checkbox"/> [Insert resource] |

Which of the following **best** describes the reason you obtained the resource?

- | | |
|---|--|
| <input type="checkbox"/> For academic studies | <input type="checkbox"/> To better provide services to individuals who have experienced trafficking or who have increased risk factors for trafficking |
| <input type="checkbox"/> For education/community outreach | <input type="checkbox"/> To train colleagues |
| <input type="checkbox"/> For use in program development/operations | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> Personal use/to assist a family member/friend | |
| <input type="checkbox"/> To better identify individuals who have experienced trafficking or who have increased risk factors for trafficking | |

How have you used the resource? **(Mark all that apply.)**

- | | |
|---|--|
| <input type="checkbox"/> For outreach efforts | <input type="checkbox"/> [Insert resource] |
| <input type="checkbox"/> For protocol development | <input type="checkbox"/> [Insert resource] |
| <input type="checkbox"/> In your work with patients/clients | <input type="checkbox"/> [Insert resource] |
| <input type="checkbox"/> To train others | <input type="checkbox"/> [Insert resource] |
| | <input type="checkbox"/> Other (please specify): _____ |

Would you recommend the [NHTTAC Customer Support Center/NHTTAC website/resource] to others to receive assistance?

- ☐ Yes ☐ No

How will the information/assistance you received from the [NHTTAC Customer Support Center/NHTTAC website/resource] help your agency in responding to human trafficking?



What are the top three aspects of the *[information/assistance you received from the NHTTAC Customer Support Center/the NHTTAC website] [resource]* that were most helpful and why?

What could NHTTAC do differently to improve *[similar NHTTAC Customer Support Center requests/the website/similar resources]* in the future?

Do you have any other comments or suggestions?

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