

2025/2026 Prevention Resource Guide Feedback Survey

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) The purpose of this information collection is to gather feedback on the *2025/2026 Prevention Resource Guide* to inform future updates of the guide. The public reporting burden for this collection of information is estimated to average 5 minutes 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. The control number for this project is 0970-0401. The control number expires on 6/30/2027. If you have any comments on this collection of information, please contact Jing Sun, Child Welfare Information Gateway, by email at jing.sun@icf.com.

Please let us know how you are using this year's resource guide and provide feedback by completing the brief survey below. Your responses are anonymous and will help Information Gateway provide useful, informative, and relevant resources in future editions of the resource guide. This survey is intended for customers who are at least 18 years old. If you have any questions or require accessibility assistance with this survey, please contact Information Gateway staff by email at info@childwelfare.gov or by telephone at [800-394-3366](tel:800-394-3366). Thank you for helping us help you.

1. Have you reviewed or read the 2025/2026 Prevention Resource Guide?

- ☐ Yes
- ☐ No
- ☐ I'm not sure

2. How many years have you read or used the Prevention Resource Guide?

- ☐ This is my first time.
- ☐ 2–4 years
- ☐ 5–10 years
- ☐ More than 10 years

2a. [If answered "Yes" to Q1] Please rate your level of agreement with the following statements regarding the Prevention Resource Guide and provide an explanation for your ratings in the space provided.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
The Prevention Resource Guide is useful.	0	0	0	0	0	0
The Prevention Resource Guide is easy to read and understand.	0	0	0	0	0	0
The Prevention Resource Guide content promotes the voices of individuals with lived experience (i.e., those who have personal experience with the child welfare system).	0	0	0	0	0	0
The information in the Prevention Resource Guide has helped me better understand different ways to implement a protective factors approach.	0	0	0	0	0	0
The Prevention Resource Guide content is culturally responsive.	0	0	0	0	0	0
The Prevention Resource Guide enhanced my understanding of how to provide services and supports that address inequities in child abuse prevention.	0	0	0	0	0	0
The information in Chapter 2 has helped me better understand how to promote positive parenting norms and family-supportive policies.	0	0	0	0	0	0
As a result of the information in Chapter 3, I have a better understanding of the benefits of building a child and family well-being system that builds "front-end" capacity for interagency collaboration to make services universal and accessible to all families.	0	0	0	0	0	0
The information in Chapter 4 has helped me better understand how organizations can promote resilience and healing for families, their communities, and the workforce.	0	0	0	0	0	0
The information in Chapter 5 has helped me better understand ways to invite community voices, develop authentic partnerships, and build on the wisdom of families with lived experience (i.e., those who have personal experience with the child welfare system).	0	0	0	0	0	0

2b. [If answered "Yes" to Q1] Please provide an explanation for your rating above. _____

2c. Please select all of the ways you have used and/or intend to use information from the Prevention Resource Guide.

	<i>I have already used the information from the Prevention Resource Guide. . .</i>	<i>I intend to use the information from the Prevention Resource Guide. . .</i>
To support my own professional development	•	•
To share with families or clients in person	•	•
To share with families or clients virtually	•	•
To share in a formal training environment in person	•	•
To share in a formal training environment virtually	•	•
To support collaborative, community-based prevention efforts	•	•
To support practice improvement or sustain family-centered practice	•	•
To implement, sustain, or improve programs	•	•
To enhance my partnerships with parents, caregivers, and youth	•	•
To increase my knowledge or transform my attitude	•	•
To share with professionals or colleagues	•	•
To support policy change or sustain good policies	•	•
To conduct research or evaluation	•	•
To help with grant writing or fundraising	•	•
For personal use	•	•
I have not used the information and resources	•	•
Other (Please describe in the text box below.)	•	•

2d. Please provide an explanation for your response above. _____

2e. [If answered "Yes" to Q1] Were the Conversation Guides helpful when engaging in conversations about protective factors with parents and other caregivers? Please explain your response in the space provided.

- ☐ Yes _____
- ☐ No _____
- ☐ I have not used the Conversation Guides. _____

2f. [If answered "Yes" or "No" to Q2e] Would you use a mobile-friendly (e.g., can be accessed from a website or an app on a mobile device, electronically fillable on a mobile device) Conversation Guide? Please explain your response or provide any suggestions you have in the space provided.

- ☐ Yes, I would be interested in using mobile versions of the Conversation Guides at least some of the time. _____
- ☐ Yes, I currently use the Conversation Guides on a mobile device but think they can be enhanced. _____
- ☐ Maybe _____
- ☐ No, I prefer to use printed or electronic copies of the Conversation Guides on my desktop. _____

3. How did you hear about the Prevention Resource Guide?

- ☐ Search engine
- ☐ Conference or presentation (If known, please describe in the text box below.) _____
- ☐ Email from Information Gateway (If the email is known [e.g., e-blast, *E-lert!*], please describe in the text box below.) _____
- ☐ Browsing Information Gateway's website
- ☐ Notification (e.g., email, intranet posting) from my internal organization
- ☐ Notification (e.g., email, internet posting) from another organization (If known, please describe in the text box below.) _____
- ☐ Link from another organization's website (If known, please describe in the text box below.) _____
- ☐ Colleague or friend
- ☐ Hard copy received in the mail
- ☐ Podcast or webinar
- ☐ Other (Please describe in the text box below.) _____

3a. [If selected "Hard copy received in the mail" in Q3] Please indicate if you placed an order for a hard copy of the Prevention Resource Guide on the Information Gateway website.

- ☐ Yes, I ordered a copy of the Prevention Resource Guide on the website.
- ☐ No, I did not order a copy of the Prevention Resource Guide on the website.
- ☐ I am not sure if I ordered a copy of the Prevention Resource Guide on the website.

4. Which of the following best describes your background or role?

- ☐ Professional
- ☐ Advocate
- ☐ Student
- ☐ Kin caregiver
- ☐ Youth experiencing or with experience in the foster care system
- ☐ Foster parent
- ☐ Prospective adoptive parent
- ☐ Adoptive parent
- ☐ Lived experience advocate or expert
- ☐ Member of the general public
- ☐ Parent (i.e. biological or birth)
- ☐ Other (Please describe in the text box below.) _____

4a. [If answered "Professional" to Q4] Which of the following best describes your professional background or role in child welfare?

- ☐ Prevention services
- ☐ Family support services
- ☐ Child protective services
- ☐ Foster care services
- ☐ Kinship care services
- ☐ Adoption services
- ☐ Youth engagement or youth services
- ☐ Juvenile justice
- ☐ Law enforcement
- ☐ Health/mental health services
- ☐ Substance use services
- ☐ Legal/courts (e.g., guardian ad litem, court-appointed special advocate, attorney)
- ☐ Researcher/evaluator/consultant
- ☐ Early childhood educator (0–5yrs)
- ☐ Teacher (K–12)
- ☐ Professor/faculty (higher education)
- ☐ Media
- ☐ Other (Please describe in the text box below.) _____

4b. [If answered "Professional" to Q4] Which of the following best describes your workplace?

- ☐ Local or county public/private agency
- ☐ State agency
- ☐ Tribal agency/organization
- ☐ Federal agency
- ☐ Community-based organization
- ☐ Mental/behavioral health agency
- ☐ Faith-based organization
- ☐ National organization (e.g., nonprofit, advocacy)
- ☐ Training and technical assistance service provider
- ☐ Educational institution (early education, K–12, college, university)
- ☐ Other (Please describe in the text box below.) _____

4c. [If answered "Professional" to Q4] Which of the following best describes your position?

- ☐ Client-facing staff (e.g., caseworker, direct service worker)
- ☐ Supervisor/manager
- ☐ Director/administrator
- ☐ Training specialist
- ☐ Licensing unit
- ☐ Outreach/communications
- ☐ Mental health counselor
- ☐ Behavioral health unit
- ☐ Other (Please describe in the text box below.) _____

4d. *[If answered "Professional" to Q4]* How many years of service do you have in your current profession?

- ☐ Less than 1 year
- ☐ 1–5 years of service
- ☐ 6–10 years of service
- ☐ 11–15 years of service
- ☐ 16+ years of service

5. Please indicate with whom you have shared and/or plan to share information from the Prevention Resource Guide. Select all that apply.

	<i>I have already shared the information from the Prevention Resource Guide with...</i>	<i>I plan to share the information from the Prevention Resource Guide with...</i>
Families or clients	•	•
Community-based service providers	•	•
My supervisor or agency leader	•	•
My agency's outreach and marketing representative(s)	•	•
Staff who report directly to me	•	•
Colleagues	•	•
Friends and family	•	•
I plan to use the information to increase or enhance my own knowledge.	•	•
Other (Please describe in the text box below.) _____	•	•

6. What suggestions for other types of content to include in the next Prevention Resource Guide do you have? _____

6a. *[if answered "Yes" to Q1]* What types of information or content do you feel is missing from the Prevention Resource Guide that would help you better support families?

8. Do you have any additional comments about the Prevention Resource Guide? _____