Instrument 3: SAVES Center Grantee Meeting T/TA Feedback Survey

Survey 1: Demographics

Consent

Thank you for participating in the SAVES Center Grantee Meeting. To help ensure the quality of our services, we will be collecting a series of feedback surveys after each session. These surveys are voluntary and you do not have to answer any questions if you don't want to. All feedback will be kept private amongst SAVES Center team members. Results will be summarized in a way that cannot identify any individual.
Each survey takes about 5 minutes to complete. Click "Next" at the bottom of the screen to continue.

Survey logistics

On the next page, we will ask you for some of your background characteristics, including professional setting, length of time working in the field, and race/ethnicity. We hope to connect these characteristics to your responses about each session. To do so, we need to create a unique ID for each person, which we will ask you to enter in each satisfaction survey.

You may want to write down or take a screen shot of this number. Please enter your first, middle, and last initial and two-digit year of birth as your unique ID on all surveys. For example, Michelle LaVaughn Obama (born 1/17/64) would enter: MLO64. Please note that we will reassign your unique ID after the meeting so it is not identifiable to you individually. We are using this ID temporarily so people do not need to remember their ID number.

1. Please enter your unique ID here_____

Demographics

Why do we ask for demographic information? These questions are about ways you describe yourself. This information is important to us because we want our training and technical assistance (T/TA) to be useful, meaningful, and respectful for everyone. If we find out something about this event is not as helpful for a particular group, we will be able to improve future T/TA to be sure it is more responsive to that group's needs.

2. What program setting do you work with? (check all that apply)
    a. State child support agency [CONTINUE TO Q3]
    b. County or regional child support agency [CONTINUE TO Q3]
    c. DV agency [SKIP TO Q4]
    d. Other (please specify)_____ [CONTINUE TO Q3]

The Paperwork Reduction Act Statement: This collection of information is voluntary and will be used to better understand efforts to increase safe access to child support, parenting time, and establishment of parentage services for survivors of domestic violence. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-0531, Exp: 09/30/2025. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Center for Policy Research; 1570 Emerson Street Denver, Colorado 80218.

3. For those who work in child support, what is your role? (check all that apply)
    a. Organizational leadership
    b. Policy
    c. Establishment
    d. Enforcement
    e. Legal Services
    f. Client information
    g. Administration
    h. Caseworker
    i. DV specialist
    j. Other: _____

4. What state or Tribal group do you work in?
    a. Ohio
    b. New York
    c. Missouri
    d. Minnesota
    e. Georgia
    f. Texas
    g. Wisconsin
    h. Virginia
    i. Washington
    j. Michigan
    k. Oklahoma
    l. Colorado
    q. Lac Courte Oreilles

5. How many years have you been working in the child support or domestic violence field? (multiple choice)
    a. 0-2 years
    b. 3-5 years
    c. 6-10 years
    d. 11-20 years
    e. More than 20 years

6. What is your gender identity?
    a. Woman
    b. Man
    c. Non-binary, gender non-conforming, or gender expansive

7. Which is your race and/or ethnicity? (select all that apply)
    a. American Indian or Alaska Native – For example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.
    b. Asian – For example, Chinese, Asian Indian, Filipino, Vietnamese, Korean, Japanese, etc.
    c. Black or African American – For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.
    d. Hispanic or Latino – For example, Mexican, Puerto Rican, Salvadoran, Cuban, Dominican, Guatemalan, etc.
    e. Middle Eastern or North African – For example, Lebanese, Iranian, Egyptian, Syrian, Iraqi, Israeli, etc.
    f. Native Hawaiian or Pacific Islander – For example, Nativa Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese, etc.
    g. White – For example, English, German, Irish, Italian, Polish, Scottish, etc.

8. How frequently do you work with clients who are survivors of domestic violence?
    a. Daily to a couple of times a week
    b. Once or twice a month
    c. A couple of times a year
    d. Less than once a year
    e. Don't know

9. How comfortable do you feel handling cases that involve domestic violence?
    a. Very comfortable
    b. Somewhat comfortable
    c. Neutral
    d. Somewhat uncomfortable
    e. Very uncomfortable

Thank you for completing the survey! Click "Next" at the bottom of the screen to submit the survey.

Surveys 2+: Session specific surveys

Consent

These surveys are voluntary and you do not have to answer any questions if you don't want to. All feedback will be kept private amongst SAVES Center team members. Results will be summarized in a way that cannot identify any individual. This survey will take about 5 minutes to complete. Click "Next" at the bottom of the screen to continue.

Survey logistics

1. Please enter your unique ID here_____

2. Which session did you just attend?

[insert drop down list of session titles and presenter names]

Overall satisfaction

Please indicate your level of agreement with each of the following statements.

3. I was satisfied with the quality of this session.
    a. Strongly disagree
    f. Disagree
    g. Neutral
    b. Agree
    c. Strongly agree

4. The presenter(s) was/were knowledgeable in the content area.
    a. Strongly disagree
    h. Disagree
    i. Neutral
    b. Agree
    c. Strongly agree

5. The content of the session was relevant to my work.
    a. Strongly disagree
    b. Disagree
    c. Neutral
    d. Agree
    e. Strongly agree

6. Did the presentation include concrete examples and information about working with communities that have been marginalized?
    a. Yes
    b. No
    c. Not applicable

7. Did the presentation discuss how survivors might have different experiences with the topic at hand based on their various identities (race, income, immigration status, sexual orientation, etc.)?
    a. Yes
    b. No
    c. Not applicable

8. Do you have concerns about the way the presenter(s) spoke about communities that have been marginalized (i.e., with stereotypes or bias)?
    a. No
    b. Yes (please specify) _____

9. Was the content presented in this session…
    a. Far too advanced
    b. A bit too advanced
    c. About right
    d. A bit too simple
    e. Far too simple

10. The amount of time spent on the topic was…
    a. Too much
    b. Too little
    c. About right

Knowledge and practice

11. BEFORE this session, my knowledge of the content/topics addressed can best be described as …
    a. I had no knowledge of the content/topic addressed
    b. I had minimal knowledge of the content/topic addressed
    c. I had moderate knowledge of the content/topic addressed
    d. I had a high level of knowledge of the content/topic addressed

12. AFTER this session, my knowledge of the content/topics addressed can best be described as …
    a. I have no knowledge of the content/topic addressed
    b. I have minimal knowledge of the content/topic addressed
    c. I have moderate knowledge of the content/topic addressed
    d. I have a high level of knowledge of the content/topic addressed

13. I learned something during this session that I plan to use in my work.
    a. Strongly disagree
    f. Disagree
    b. Neutral
    c. Agree
    d. Strongly agree

14. I gained valuable insight from other SAVES demonstration grantees through attending the session.
    a. Strongly disagree
    g. Disagree
    b. Neutral
    c. Agree

d. Strongly agree

Presentation strengths and areas for improvement

15. What do you think worked well in this presentation? [open-ended]

Consider the content, the presenter's style, the format of the session, the resources provided during the session, etc.

16. How can we improve this session? [open-ended]

Consider the content, the presenter's style, the format of the session, the resources provided during the session, etc.

17. What other topics or issues would you have liked to have discussed, if there had been additional time?

Thank you for completing the survey!

End of Grantee Meeting Satisfaction Survey

Consent

These surveys are voluntary and you do not have to answer any questions if you don't want to. All feedback will be kept private amongst SAVES Center team members. Results will be summarized in a way that cannot identify any individual. This survey will take about 5 minutes to complete

Survey logistics

1. Please enter your unique ID here_____

Overall satisfaction

Please indicate your level of agreement with each of the following statements.

2. I was satisfied with the quality of the meeting overall.
    a. Strongly disagree
    h. Disagree
    b. Neutral
    c. Agree
    d. Strongly agree

3. I feel more connected to other grantees after this meeting than I did before.
    a. Strongly disagree
    i. Disagree
    b. Neutral
    c. Agree
    d. Strongly agree

4. I feel (even more) inspired after attending this meeting about the importance of the SAVES work.

a. Strongly disagree
j. Disagree
b. Neutral
c. Agree
d. Strongly agree

Knowledge and practice

5. I feel better equipped to… (check all that apply)

- o engage with their local DV coalition
- o include survivors in future activities
- o do effective process mapping
- o organize an advisory council
- o develop interventions with courts/dealing with parenting time
- o develop triage teams
- o identify knowledge, attitudes, behavior, and policy or system changes that might be necessary to meet our long-term goals
- o articulate the supports provided on the evaluation by the SAVES Center
- o recognize similar and different structures and strategies across demonstration sites
- o identify strategies and concerns for engaging people who use violence
- o create authentic relationships in which survivors can share their lived experiences
- o identify components of equitable and sustainable partnerships at the local, state, and national levels
- o articulate the values, goals, structures, and roles people play in the SAVES initiative

Meeting strengths and areas for improvement

11. Please list 2-3 things that you learned during this meeting that you plan to implement in your work going forward?

12. What do you think worked well in this meeting? [open-ended]

Consider the content, the presenters' style, the flow of the sessions, the resources provided throughout the meeting, the time for breaks, the balance between interactive workshops or networking and presentations, etc.

13. How could this meeting have been better? [open-ended]

Consider the content, the presenters' style, the flow of the sessions, the resources provided throughout the meeting, the time for breaks, the balance between interactive workshops or networking and presentations, etc.

14. What topics or issues discussed in the meeting would you like to discuss in more depth in future meetings or calls?

15. What other topics or issues not discussed in the meeting would you like to discuss in future meetings or calls?