



**Incredible Years®**  
**Parent Program Satisfaction Questionnaire**  
**Babies Program**

(Hand out at end of the program)

Participant's Name \_\_\_\_\_ Date \_\_\_\_\_

The following questionnaire is part of our evaluation of the Incredible Years parenting program that you have received. It is important that you answer as honestly as possible. The information obtained will help us to evaluate and continually improve the program we offer. Your cooperation is greatly appreciated. All responses will be strictly confidential.

**A. The Overall Program**

Please circle the response that best expresses how you honestly feel at this point.

1. The bonding that I feel with my baby since I took this program is

considerably worse	worse	slightly worse	the same	slightly improved	improved	greatly improved
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2. My baby's bonding with me since I started this program is

considerably worse	worse	slightly worse	the same	slightly improved	improved	greatly improved
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3. My feelings about my baby's social, emotional and physical developmental progress are that I am

very dissatisfied	dissatisfied	slightly dissatisfied	neutral	slightly satisfied	satisfied	greatly satisfied
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4. To what degree has the Incredible Years parenting program helped with other personal or family problems not directly related to your baby (for example, your feelings of support in general)?

hindered much more than helped	hindered	hindered slightly	neither helped nor hindered	helped slightly	helped	helped very much
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5. My expectation for good results from the Incredible Years baby program is

very pessimistic	pessimistic	slightly pessimistic	neutral	slightly optimistic	optimistic	very optimistic
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6. I feel that the approaches used to enhance my baby's development and language in this program are

very inappropriate	inappropriate	slightly inappropriate	neutral	slightly appropriate	appropriate	greatly appropriate
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7. Would you recommend the Incredible Years program to a friend or relative with a baby?

strongly not recommend    not recommend    slightly not recommend    neutral    slightly recommend    recommend    strongly recommend

8. How confident are you in parenting your baby at this time?

very unconfident    unconfident    slightly unconfident    neutral    slightly confident    confident    very confident

9. How confident are you in your ability to provide physical, tactile and visual stimulation at this time?

very unconfident    unconfident    slightly unconfident    neutral    slightly confident    confident    very confident

10. My overall feeling about achieving my goals in this program for my baby are

very negative    negative    slightly negative    neutral    slightly positive    positive    very positive

## ***B. Incredible Years Teaching Format/Methods***

### ***Usefulness***

In this section, we would like you to indicate how useful each of the following types of methods used to deliver this program is for you *now*. Please circle the response that most clearly describes your opinion.

1. Content of information presented was

extremely useless    useless    slightly useless    neutral    somewhat useful    useful    extremely useful

2. Demonstration of parenting skills through the use of video vignettes was

extremely useless    useless    slightly useless    neutral    somewhat useful    useful    extremely useful

3. Group discussion, sharing and support from other parents during this program was

extremely useless    useless    slightly useless    neutral    somewhat useful    useful    extremely useful

4. Use of practice with my baby during group sessions was

extremely useless    useless    slightly useless    neutral    somewhat useful    useful    extremely useful

5. I found the “buddy calls” to be

extremely      useless      slightly      neutral      somewhat      useful      extremely  
useless                      useless                      useful                      useful                      useful

6. The “baby-proof safety checklist” and “things I can do” journal was

extremely      useless      slightly      neutral      somewhat      useful      extremely  
useless                      useless                      useful                      useful                      useful

7. Practicing things I learned at home with my baby was

extremely      useless      slightly      neutral      somewhat      useful      extremely  
useless                      useless                      useful                      useful                      useful

8. Weekly handouts (e.g., refrigerator notes) were

extremely      useless      slightly      neutral      somewhat      useful      extremely  
useless                      useless                      useful                      useful                      useful

9. Phone calls from the group leaders were

extremely      useless      slightly      neutral      somewhat      useful      extremely  
useless                      useless                      useful                      useful                      useful

### ***C. Specific Parenting Techniques/Topics***

#### ***Usefulness***

In this section, we would like you to indicate how useful each of the following topics and techniques is in improving your interactions with your baby. Please circle the response that most accurately describes the usefulness of the content or techniques.

1. Information about baby’s development and developmental milestones

extremely      useless      slightly      neutral      somewhat      useful      extremely  
useless                      useless                      useful                      useful                      useful

2. Providing Physical, Tactile and Visual Stimulation (e.g., baby massage, games, exercises)

extremely      useless      slightly      neutral      somewhat      useful      extremely  
useless                      useless                      useful                      useful                      useful

3. Promoting Baby Language and Brain Development (e.g, speaking “parent-ese”)

extremely      useless      slightly      neutral      somewhat      useful      extremely  
useless                      useless                      useful                      useful                      useful

#### 4. Child-Directed Play Interactions (e.g., reading babies' cues)

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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#### 5. Descriptive Commenting/Social and Emotion Coaching

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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#### 6. Helping Babies Feel Loved, Safe and Secure

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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#### 7. Singing to Babies

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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#### 8. Flexibility in Routines and Transition to Predictable Daily Schedules

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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#### 9. Gaining Support and Importance of Parental Self-Care

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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#### 10. Knowing How to Respond to a Baby's Crying & Strategies for Staying Calm

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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#### 11. Introducing Books to Babies

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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#### 12. Assuring a Baby-proofed Home

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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#### 13. This Overall Group of Techniques

extremely useless	useless	slightly useless	neutral	somewhat useful	useful	extremely useful
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### **D. Evaluation of Incredible Years Parent Group Leader(s)**

In this section we would like you to express your opinions about your group leader(s). Please circle the response to each question that best describes how you feel.

Group Leader #1 \_\_\_\_\_

(name)

1. I feel that the group leader's teaching and facilitation of group discussions was

very poor	poor	below average	average	above average	superior	excellent
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2. The group leader's preparation was

very poor	poor	below average	average	above average	superior	excellent
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3. Concerning the group leader's interest and concern in me and my baby, I was

very dissatisfied	dissatisfied	slightly dissatisfied	average	slightly satisfied	satisfied	extremely satisfied
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4. At this point, I feel that the group leader in the program was

extremely unhelpful	unhelpful	slightly unhelpful	neutral	slightly helpful	helpful	extremely helpful
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If more than one group leader was involved in your program, please fill in the following. (Go to Section E if only one leader was involved.)

Group Leader #2 \_\_\_\_\_

(name)

1. I feel that the group leader's teaching and facilitation of group discussion was

very poor	poor	below average	average	above average	superior	excellent
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2. The group leader's preparation was

very poor	poor	below average	average	above average	superior	excellent
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3. Concerning the group leader's interest and concern in me and my baby, I was

very dissatisfied	dissatisfied	slightly dissatisfied	average	slightly satisfied	satisfied	extremely satisfied
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4. At this point, I feel that the group leader in the program was

extremely unhelpful	unhelpful	slightly unhelpful	neutral	slightly helpful	helpful	extremely helpful
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## ***E. Overall Program Evaluation***

1. What part of the program was most helpful to you?

2. What did you like most about the program?

3. What did you like least about the program?

4. How could the program have been improved to help you more?