

Date: _____ Location: _____

 CIWA <small>Calgary Incest and Sexual Assault</small>	Family Conflict Program SUPPORT GROUP FEEDBACK FORM
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1. The support group helped me gain good understanding of domestic violence and related issues.

Strongly Disagree	Disagree	Agree	Strongly Agree
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2. I am now able to handle family conflict better.

Strongly Disagree	Disagree	Agree	Strongly Agree
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3. I was able to express my opinion and share my feelings.

Strongly Disagree	Disagree	Agree	Strongly Agree
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4. I have better problem-solving skills as a result of this group.

Strongly Disagree	Disagree	Agree	Strongly Agree
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5. My safety and support network has improved.

Strongly Disagree	Disagree	Agree	Strongly Agree
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6. I feel less isolated.

Strongly Disagree	Disagree	Agree	Strongly Agree
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7. I have better communication skills than before.

Strongly Disagree	Disagree	Agree	Strongly Agree
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8. I'm more aware of services in the community and would be comfortable accessing them independently.

Strongly Disagree	Disagree	Agree	Strongly Agree
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9. I know how to take care of myself and manage my stress levels.

Strongly Disagree	Disagree	Agree	Strongly Agree
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10. I was respected by the group facilitators.

Strongly Disagree	Disagree	Agree	Strongly Agree
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11. I would recommend this group to others and it was a great experience.

Strongly Disagree	Disagree	Agree	Strongly Agree
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12. I am satisfied with childcare services provided.

Strongly Disagree	Disagree	Agree	Strongly Agree
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13. Do you have any additional comments? (Use back page if necessary)