

THE DARE FOUNDATION

SKILLS FOR LIFE



EVALUATION PROJECT 2009-2012

FACILITATOR QUESTIONNAIRE

TO BE COMPLETED BY FACILITATORS AT THE CONCLUSION
OF EACH DARE PROGRAMME DELIVERED.

The DFNZ is committed to independent evaluation of the DARE community programmes and in this regard request that all facilitators complete this questionnaire at the conclusion of delivery of either the DARE to be You or the DARE to Move On programmes. The information collated is for the purposes of an independent evaluation to ensure the programmes are achieving their aims.

First Name: _____ Last Name: _____

School/Organisation for which the
DARE programme was delivered: _____

Home Address: _____

Position Held: (Counsellor, RTLB, Teacher, Mentor etc) _____

Home phone no.: _____ Cell phone no.: _____

Email: _____ Date: _____

Signature: _____

DARE Programme you have just concluded: (Circle either) **DARE to be You** **DARE to Move On**

Total No. of Participants: _____ No. of Males: _____ No. of Females _____

Name: _____ Age: _____ Ethnicity: _____

Name: _____ Age: _____ Ethnicity: _____

Name: _____ Age: _____ Ethnicity: _____

Name: _____ Age: _____ Ethnicity: _____

Name: _____ Age: _____ Ethnicity: _____

Name: _____ Age: _____ Ethnicity: _____

(IF MORE PARTICIPANTS – PLEASE CONTINUE OVER THE PAGE)

For each participant, you are being asked to rate them in their demonstration of skills learned from the 10 core life skills which are:

- (1) **problem solving:** ability to recognise problems and find or action appropriate solutions.
- (2) **critical thinking:** ability to think more deeply about issues or situations.
- (3) **effective communication skills;** ability to be understood when speaking to others and express feelings clearly.
- (4) **decision making:** ability to understand the problem and identify an appropriate action/solution.
- (5) **creative thinking:** ability to 'think outside the square' and use other methods to look for solutions to situation/problems.
- (6) **relationship building skills:** ability to form and maintain friendships with people and bringing a positive influence to the friendship.
- (7) **self awareness:** ability to recognise their own strengths, abilities and weaknesses – and acknowledge them.
- (8) **empathy:** ability to put themselves into another persons situation and understand and respect their feelings.
- (9) **coping with stress:** ability to recognise and manage situations (that make them feel vulnerable or powerless) in a positive way.
- (10) **managing emotions:** ability to recognise and manage situations (that make them feel upset, angry or scared etc.) in a positive way.

For each participant, please mark on the scale how you feel they have mastered in the following specified life skill:

- (1): Needs Further Assistance to master the skill
- (2): Poor mastery and application of skill
- (3): No change – won't or hasn't used skill
- (4): Confident use and mastery of skill
- (5): Excellent application of skill in practice

MARK YOUR ANSWER WITH AN '✓' IN THE BOX MOST APPROPRIATE

PARTICIPANT NO.1: Name: _____

	Needs Further Assistance to Master (1)	Poor Mastery (2)	No Change (3)	Confident Mastery (4)	Excellent Application (5)
Problem solving					
Critical thinking					
Effective Communication Skills					
Decision Making					
Creative Thinking					
Relationship Building Skills					
Self Awareness					
Empathy					
Coping with Stress					
Managing Emotions					

PARTICIPANT NO.2: Name: _____

	Needs Further Assistance to Master (1)	Poor Mastery (2)	No Change (3)	Confident Mastery (4)	Excellent Application (5)
Problem solving					
Critical thinking					
Effective Communication Skills					
Decision Making					
Creative Thinking					
Relationship Building Skills					
Self Awareness					
Empathy					
Coping with Stress					
Managing Emotions					

PARTICIPANT NO.3: Name: _____

	Needs Further Assistance to Master (1)	Poor Mastery (2)	No Change (3)	Confident Mastery (4)	Excellent Application (5)
Problem solving					
Critical thinking					
Effective Communication Skills					
Decision Making					
Creative Thinking					
Relationship Building Skills					
Self Awareness					
Empathy					
Coping with Stress					
Managing Emotions					

PARTICIPANT NO.4: Name: _____

	Needs Further Assistance to Master (1)	Poor Mastery (2)	No Change (3)	Confident Mastery (4)	Excellent Application (5)
Problem solving					
Critical thinking					
Effective Communication Skills					
Decision Making					
Creative Thinking					
Relationship Building Skills					
Self Awareness					
Empathy					
Coping with Stress					
Managing Emotions					

PARTICIPANT NO.5: Name: _____

	Needs Further Assistance to Master (1)	Poor Mastery (2)	No Change (3)	Confident Mastery (4)	Excellent Application (5)
Problem solving					
Critical thinking					
Effective Communication Skills					
Decision Making					
Creative Thinking					
Relationship Building Skills					
Self Awareness					
Empathy					
Coping with Stress					
Managing Emotions					

PARTICIPANT NO.6: Name: _____

	Needs Further Assistance to Master (1)	Poor Mastery (2)	No Change (3)	Confident Mastery (4)	Excellent Application (5)
Problem solving					
Critical thinking					
Effective Communication Skills					
Decision Making					
Creative Thinking					
Relationship Building Skills					
Self Awareness					
Empathy					
Coping with Stress					
Managing Emotions					

(IF MORE PARTICIPANTS – PLEASE CONTINUE OVER THE PAGE)

Common Characteristics of participants entering the programme:

In order for effective evaluation of the programme outcomes, we request documented common characteristics of programme participants. Participants have been chosen to participate in this programme for many reasons including: for example, displaying antisocial attitudes and feelings, aggressive or violent behaviour, have antisocial peer associations and/or substance abuse and/or dependency. They may benefit by teaching skills aimed at increasing self control, problem solving skills, self motivation and relationship skills etc.

Please identify the characteristics noted below which apply to your participants. Feel free to add as appropriate.

Possible common behaviours: (tick those behaviours that apply to your programme participants)

No. of participants displaying this behaviour in the group (eg. 1-6)	<input type="checkbox"/>	Behaviour	No. of participants displaying this behaviour in the group (eg. 1-6)	<input type="checkbox"/>	Behaviour
	<input type="checkbox"/>	Aggressive		<input type="checkbox"/>	Impulsive
	<input type="checkbox"/>	Egocentric		<input type="checkbox"/>	Low self esteem
	<input type="checkbox"/>	Poor decision making		<input type="checkbox"/>	High risk behaviour
	<input type="checkbox"/>	Poor attachment to family		<input type="checkbox"/>	Unstable family structure
	<input type="checkbox"/>	Family breakup		<input type="checkbox"/>	History of violence
	<input type="checkbox"/>	History of abuse		<input type="checkbox"/>	Grief and loss issues
	<input type="checkbox"/>	Petty crime involvement		<input type="checkbox"/>	Truancy
	<input type="checkbox"/>	Has been suspended		<input type="checkbox"/>	Diagnosed condition ie ADHD; epilepsy
	<input type="checkbox"/>	Easily influenced by peers		<input type="checkbox"/>	Gang affiliation
	<input type="checkbox"/>	Inappropriate sexual behaviour		<input type="checkbox"/>	Has moved schools often
	<input type="checkbox"/>	Substance abuse		<input type="checkbox"/>	Poor communication
	<input type="checkbox"/>	Poor problem solving skills		<input type="checkbox"/>	Doesn't cope with stress
	<input type="checkbox"/>	Unable to cope with emotions		<input type="checkbox"/>	Difficulty making friends
	<input type="checkbox"/>	Learning disability eg. Dyslexia		<input type="checkbox"/>	Achieving at appropriate chronological age
	<input type="checkbox"/>	Willing to make changes		<input type="checkbox"/>	
	<input type="checkbox"/>			<input type="checkbox"/>	
	<input type="checkbox"/>			<input type="checkbox"/>	
	<input type="checkbox"/>			<input type="checkbox"/>	
	<input type="checkbox"/>			<input type="checkbox"/>	
	<input type="checkbox"/>			<input type="checkbox"/>	

In your opinion, was the programme worthwhile?

Why/Why Not? _____

Would you use the programme again? (circle one) YES NO

Why/Why Not? _____

Did you make any alterations to the programme to suit your particular participants? If so, what were they?

What would you do differently next time? Why? (include as much detail as appropriate - for R&D purposes).

Did you have assistance from another adult when delivering the programme? (circle one) YES NO

- | | | |
|-------------|----------------------------|--------------------------|
| Did you (1) | Read the story? | <input type="checkbox"/> |
| (2) | Tell the story? | <input type="checkbox"/> |
| (3) | Listen to recorded version | <input type="checkbox"/> |
| (4) | Combination of _____ | |

If delivering the **DARE to be You** programme – ✓ which module/s mostly used?

- (1) Family Issues
- (2) Self Esteem Issues
- (3) Disabilities Issues
- (4) Celebrating Diversity
- (5) Conservation Issues

Do you have any particular success stories you would like to share? (Please feel free to attach relevant photos, graphics, artwork etc as appropriate.)

Many thanks for your honesty and efforts in completing this questionnaire.



Please send the completed questionnaire to:

EVALUATION PROJECT
DARE FOUNDATION OF NZ
PO BOX 50906
WELLINGTON