

# SoonerStart Family Survey



This survey is for families currently (or recently) receiving SoonerStart services. Your responses will help guide efforts to improve services and results for children and families. The survey should take less than ten minutes to complete. Your participation is entirely voluntary and you may stop at any time.

**You may fill in each circle or use an X or a ✓ to indicate your answer.**

Over the past year, SoonerStart has helped me and/or my family...		Strongly Agree	Agree	Disagree	Strongly Disagree	Not Sure
1.	...Identify and engage in learning activities that I can do with my child throughout the day.	<input type="radio"/>				
2.	...Do things with and for my child that are good for my child's development.	<input type="radio"/>				
3.	...Be able to evaluate how much progress my child is making.	<input type="radio"/>				
4.	...Understand my child's and family's rights concerning all services provided.	<input type="radio"/>				
5.	...Communicate more effectively with the people who work with my child and family.	<input type="radio"/>				
		Strongly Agree	Agree	Disagree	Strongly Disagree	Not Sure
6.	My family is better off because of the services we have received through SoonerStart.	<input type="radio"/>				
7.	I am comfortable sharing concerns and asking questions about the services my family receives with Soonerstart staff.	<input type="radio"/>				
		Yes	No	Not Sure		
8.	My family was given information about the rights of parents regarding SoonerStart services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
9.	My family was given information about who to call if I am not satisfied with the services my child receives.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
10.	My family was given information about how to advocate for my child and my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		

11. Please tell us anything you would like SoonerStart to know about your experiences this past year:

Empty text area for question 11.

12. Is your child male or female?

- Male
- Female
- Prefer not to answer

13. How old is your child currently?

- Birth to 12 months
- 13 to 24 months
- 25 to 36 months
- More than 3 years old
- Prefer not to answer

14. How old was your child when referred to SoonerStart?

- Birth to 12 months
- 13 to 24 months
- More than 2 years old
- Prefer not to answer

15. What is your child's racial or ethnic identity? Check all that apply.

- American Indian or Alaska Native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian or Pacific Islander
- White or Caucasian
- Prefer not to answer

16. In which county do you currently live?

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-- Thank you for your time! --

