

CLEARINGHOUSE FOR MILITARY FAMILY READINESS

Client Satisfaction Surveys for Victim Advocacy Programs: Rapid Literature Review

Clearinghouse Technical Assistance Team

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Introduction

The Technical Assistance (TA) team at the Clearinghouse for Military Family Readiness at Penn State (Clearinghouse) conducted a rapid literature review on the topic of client satisfaction questionnaires for victim advocacy programs. Research that examines these types of surveys was identified by searching peer-reviewed journal articles and grey literature, and an emphasis was placed on research published between 2010 and 2020. Search queries included various combinations of the following terms: survey, survey questions, service satisfaction, feedback, feedback form, Family Advocacy Program (FAP), victim advocacy program, domestic violence, and client.

This report provides the following elements:

- Sample client satisfaction questionnaires for victim advocacy programs;
- Recommendations for questionnaire development and implementation;
- Recommendations for questionnaire administration; and
- Additional online resources.

Note, this rapid literature review provides a preliminary examination of the research. Thus, given the brief timeline, this report is not intended to serve as a comprehensive review of the literature, and the resources provided are not endorsed by the Clearinghouse. Rather, the information about the resources are provided for you to make a data-driven decision.

Client Satisfaction Questionnaires for Victim Advocacy Programs

This section provides information on self-report satisfaction questionnaires used in victim advocacy programs. The TA team identified two client satisfaction questionnaires: Children's Advocacy Center (CAC) Nonoffender Caregiver Satisfaction Survey and Empowerment and Satisfaction Questionnaire. Two additional resources that contain self-report feedback questionnaires for victim advocacy programs were also identified. More details on each of these resources are provided below.

Children's Advocacy Center (CAC) Nonoffender Caregiver Satisfaction Survey

The Children's Advocacy Center (CAC) Nonoffender Caregiver Satisfaction Survey was developed by Bonach et al. (2010) to identify nonoffending caregivers' satisfaction with

services offered by the CAC. The survey was developed by reviewing existing literature; examining extensive input from program staff on program goals, objectives, and desired outcomes; and adapting existing survey measures used by other CACs (Bonach et al., 2010). The authors suggest that programs modify this survey to meet their individual needs. In addition, the authors suggest that programs include additional questions on applicable coordinated services, such as timeliness and communication with prosecution, experiences with medical evaluation, and experiences with mental health services.

The CAC Nonoffender Caregiver Satisfaction Survey is below. Note, questions 1-3 ask the parent to identify their level of satisfaction with the same statement multiple times (i.e., for different partners). In addition, due to recommendations from the authors, the “Not Applicable” response option that was included in the original survey has been omitted.

Table 1

CAC Nonoffending Caregiver Satisfaction Survey

	Statement	Please indicate your level of agreement with each statement by circling your response using the following scale:			
		Strongly Disagree (1)	Disagree (2)	Agree (3)	Strongly Agree (4)
1	Agency personnel were courteous.				
	Children’s Advocacy Center	1	2	3	4
	Child Welfare	1	2	3	4
	Police/Law Enforcement	1	2	3	4
	District Attorney	1	2	3	4
2	Agency personnel were helpful.				
	Children’s Advocacy Center	1	2	3	4
	Child Welfare	1	2	3	4
	Police/Law Enforcement	1	2	3	4
	District Attorney	1	2	3	4
3	Agency personnel acted in a timely manner.				
	Children’s Advocacy Center	1	2	3	4
	Child Welfare	1	2	3	4
	Police/ Law Enforcement	1	2	3	4
	4	I was given enough information to know what to expect at the	1	2	3

	interview at the children's advocacy center.				
5	I was given enough information about what would happen after the initial interview at the children's advocacy center.	1	2	3	4
6	If the child(ren) was referred to a physician for a medical evaluation, the physician was helpful.	1	2	3	4
7	My child(ren) was questioned by too many different professionals. [Reverse coded]	1	2	3	4
8	My child(ren) was made to feel comfortable.	1	2	3	4
9	I was made to feel comfortable.	1	2	3	4
10	The scheduling of the forensic interview fit my schedule.	1	2	3	4
11	The location of the children's advocacy center was convenient.	1	2	3	4
12	Overall, how satisfied are you with the services you received through the children's advocacy center?	1	2	3	4
13	Is there anything else you would like to share with us? [Open-ended response.]				
Bonach et al. (2010, pp. 707-708)					

Empowerment and Satisfaction Questionnaire (ESQ)

The Empowerment and Satisfaction Questionnaire (ESQ) was developed in 2002 by the Victim Service Program Evaluation Collaboration (VSPEC), formerly known as the Outcome Based Evaluation Tool Collaboration (Collins et al., 2008). The ESQ has two formats - the Long Form (LF) and Short Form (SF). The ESQ-LF combines questions from the 2000 version of the [Mental Health Statistics Improvement Program survey](#) with questions developed by the VSPEC for a total of 25 questions. The ESQ-SF has nine questions and measures a client's general empowerment and his or her satisfaction with services (Collins et al., 2008). The ESQ-SF is provided in this document. To view the ESQ-LF please visit <https://pcar.org/resource/victim-service-program-evaluation> (pp. A-4 – A-8).

The ESQ includes the following components:

- Designed as a self-report instrument;

- Intended to be administered to clients at the completion of services;
- Created for clients with at least a sixth-grade reading level over the age of 14. Caregivers are encouraged to complete the questionnaire for a loved one who cannot complete the questionnaire him or herself (e.g., young child, individual with cognitive disabilities) (Collins et al., 2008); and
- Administered (if desired) in conjunction with the Short Post-Traumatic Stress Disorder Rating Interview or SPRINT (SPRINT; Connor & Davidson, 2001). The ESQ-SF provided below in Table 2 includes the SPRINT measure as Section B. However, questions from SPRINT should only be asked if relevant and if the information from the measure will provide actionable outcomes for the victim advocacy program.

Table 2

Empowerment and Satisfaction Questionnaire-Short Form (ESQ-SF)

As a client of our agency, you received services in response to a traumatic event(s). In order to provide the best possible services, we would like to know how much our agency helped you to deal with that particular trauma. Please read the following statements about the services and other aspects of the agency and circle if you strongly agree, somewhat agree, are neutral (don't feel strongly one way or the other), somewhat disagree, or strongly disagree with the statements.

Section A:						
		Strongly Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Strongly Agree
1.	Staff respected my background (e.g. gender, race, culture, ethnicity, sexual orientation, disability, lifestyle, etc.).	1	2	3	4	5
2.	Services were available at times that were good for me.	1	2	3	4	5
3.	I was asked to participate in deciding what services I would receive.	1	2	3	4	5
4.	I feel the staff heard me.	1	2	3	4	5
5.	I got the kind of service I wanted.	1	2	3	4	5
6.	The services I received helped me deal more effectively with my problems.	1	2	3	4	5

7.	I would return to this agency if I needed victim services in the future.	1	2	3	4	5
8.	I would recommend this agency to a friend in need of victim services.	1	2	3	4	5
9.	In an overall, general sense, I am satisfied with the services I received.	1	2	3	4	5
Is there anything else you would like to say?						

Section B: Please consider the following reactions, which sometimes occur after a traumatic event. This section is concerned with your personal reactions to the traumatic event that happened to you. Please circle one answer for each question.

	In the past week...	Not at all	A little bit	Moderately	Quite a lot	Very much
10.	How much have you been bothered by unwanted memories, nightmares, or reminders of the event?	1	2	3	4	5
11.	How much effort have you made to avoid thinking or talking about the event or doing things which remind you of what happened?	1	2	3	4	5
12.	To what extent have you lost enjoyment for things, felt sad or depressed, kept your distance from people, or found it difficult to experience feelings?	1	2	3	4	5
13.	How much have you been bothered by poor sleep, poor concentration, jumpiness, irritability, or feeling watchful around you?	1	2	3	4	5
14.	How much have you been bothered by pain, aches, or tiredness?	1	2	3	4	5

15.	How angry or upset do you become when stressful events or setbacks happened to you?	1	2	3	4	5
16.	How much have you been blaming yourself or feeling guilty for what happened to you?	1	2	3	4	5
17.	How much have the above symptoms (i.e., unwanted memories, nightmares, or reminders of the event; loss of enjoyment for activities; distancing yourself from others; difficulty experiencing feelings; poor sleep; poor concentration; jumpiness; irritability; feeling watchful; pains; aches; tiredness; or becoming upset when stressful events or setbacks happen) interfered with your ability to work or carry out daily activities?	1	2	3	4	5
18.	How much have the above symptoms (i.e., unwanted memories, nightmares, or reminders of the event; loss of enjoyment for activities; distancing yourself from others; difficulty experiencing feelings; poor sleep; poor concentration; jumpiness; irritability; feeling watchful; pains; aches; tiredness; or becoming upset when stressful events or setbacks happen) interfered with your relationships with family or friends?	1	2	3	4	5
19.	How much better do you feel since beginning services? (as a percentage)					
100%		50%			0%	

20.	Overall, how much have the above symptoms (i.e., unwanted memories, nightmares, or reminders of the event; loss of enjoyment for activities; distancing yourself from others; difficulty experiencing feelings; poor sleep; poor concentration; jumpiness; irritability; feeling watchful; pains; aches; tiredness; or becoming upset when stressful events or setbacks happen) improved since starting services? (circle one)				
	Very Much	Much	Minimally	No Change	Worse
	1	2	3	4	5
	What did you find helpful about our services?				
	What did you find not helpful about our services? Please include any suggestions you have for improvement.				
	Collins et al. (2008, pp. A-9 - A-11) Note, questions 15, 17, 18, and 20 have been edited from their original version to increase readability. Question 16 is not part of the original SPRINT; it was added by the VSPEC.				

Additional Questionnaires

The TA team identified additional self-report feedback questionnaires that have been administered in domestic violence or victim advocacy programs. These questionnaires include some questions that ask clients about their satisfaction with services; however, most questions ask about the knowledge, skills, and abilities a client has gained from participation in the program. The additional questionnaires are provided below for reference in case the victim advocacy program facilitator wishes to explore these resources further.

Outcome Performance Measurement Guide for Direct Victim Assistance Programs

This document was designed for direct victim assistance programs. It provides information on how to design and implement an outcome evaluation, and it provides sample outcome questionnaires. The following one-page, self-report client outcome questionnaires are provided in the document (Criminal Justice Coordinating Council, 2010, pp. 36-43):

- Domestic Violence and Shelter Services
- Sexual Assault Centers
- Adult Victim or Survivor Counseling
- Prosecution and Law Enforcement: Victim and Witness Assistance Program
- Legal Services

- Child Advocacy Centers, Victim-Witness Programs for Children
- Family or Child Counseling Programs
- Court-Appointed Special Advocates

Program Evaluation for Victims of Crime Act (VOCA) Grantees, Advanced Training

This document provides information on why evaluation is important; things to consider before starting an evaluation; definitions of process and outcome evaluations; considerations for collecting, analyzing, and using the data collected; and sample questionnaires. The following self-report feedback questionnaires are provided in this document (Sullivan, 2012, pp. 71- 80, 85-86):

- Individual Counseling Feedback
- Group Counseling Feedback
- Legal Advocacy Feedback
- Parent or Guardian Feedback about Children's Advocacy
- Victim or Witness Unit, Customer Service Survey

Recommendations for Questionnaire Development and Implementation

The questionnaires provided in the previous section can be used as examples for organization and question or topic ideas. However, each program is different, so the questionnaires should be customized to meet the goals of the individual programs. It is suggested that the victim advocacy program strive to include questions that provide necessary information while respecting a client's time by not including extraneous questions.

In addition, the victim advocacy program facilitators may want to consider developing an implementation plan. This plan may help the program developers identify goals for the questionnaire, choose questions, develop a plan to solicit responses, and develop a plan to train or inform staff of the questionnaire. For example, the plan may answer logistical questions, such as how will the questionnaire be administered; who will administer it; who is responsible for ensuring there is an adequate number of questionnaires; and how will

the data be collected, stored, analyzed, and shared. The following resource may be beneficial for program developers to review before creating an implementation plan:

- Clearinghouse for Military Family Readiness, Evaluation Planning Worksheet: <https://militaryfamilies.psu.edu/wp-content/uploads/2018/08/Evaluation-Planning-Worksheet-9-9-17.pdf>

Recommendations for Questionnaire Administration

The following section provides a list of recommendations for administering client satisfaction questionnaires for victim advocacy programs. The recommendations have been adapted from those listed in the literature (Collins et al., 2008; Lyon & Sullivan, 2007; Sullivan, 2012). Most of the tips highlight the need for high-quality communication between the program facilitators and clients.

- Explain to the client that the questionnaire is voluntary and they can choose to complete it in whole, in part, or not at all. Reassure clients that completion of the questionnaire will in no way effect the services they receive.
- Describe what information is being requested, why it is being requested, and how the information will be used. For example, the sample questionnaires provided in this document assess a client's satisfaction with the services received and will be used to improve services for other clients.
- Clarify whether the questionnaire is anonymous or confidential. Anonymous questionnaires have no identifying information and cannot be traced to a client. Confidential questionnaires can potentially be traced to a client. To help protect anonymity, Sullivan (2012) provides the following tips for paper and pen questionnaires administered in the office:
 - Provide a quiet space for the client to complete the questionnaire by him or herself.
 - Provide all clients the same questionnaire and writing utensil. Explain to the participant that this is so the staff cannot track the questionnaire back to any individual participant.
 - Make it clear to participants that they should not write their name on the questionnaire.
 - Have clients put completed questionnaires into a locked box. Ensure that the questionnaires are only taken from the locked box when enough questionnaires have been completed. The timeframe for reviewing

questionnaires will depend on how many clients are seen in the office. For example, a small office may only see one or two clients a week and may wait a month to open the locked box; however, a larger office may see 10 clients per day and waiting a month to open the locked box would not be necessary (Lyon & Sullivan, 2007).

Additional Online Resources

The TA team conducted a rapid review of publicly available online resources that may benefit the victim advocacy program. Resources identified through this search are listed below with a brief description and link to their websites.

Domestic Violence Resource Center

The Domestic Violence Resource Network (DVRN) is funded by the U.S. Department of Health and Human Services to inform and strengthen domestic violence intervention and prevention efforts at the individual, community, and societal levels. This website provides brief information and links to the member organizations, including two national resource centers, four special issue resource centers, three culturally specific resource centers, the National Domestic Violence Hotline, and the National LGBTQ Domestic Violence Capacity Building Learning Center.

- <https://www.acf.hhs.gov/fysb/programs/family-violence-prevention-services/programs/centers>

EvaluACTION: Putting Evaluation to Work, Centers for Disease Control and Prevention (CDC)

This website is part of VetoViolence, a CDC project that intends to help communities prevent violence and implement evidence-based prevention strategies. This project provides information on the importance of evaluation, debunks myths regarding evaluation, offers a framework for program evaluation in public health, and helps facilitators build an evaluation plan.

- <https://vetoviolence.cdc.gov/apps/evaluaction/#engage>

Program Evaluation, Center for Victim Research

This website provides information on the four types of program evaluation, tools and tips, training, and additional resources on program evaluation. It is funded through a grant from the Office for Victims of Crime, within the Office of Justice Programs, U.S. Department of Justice.

- <https://victimresearch.org/tools-training/program-evaluation/>

Additional Assistance

The TA specialists at the Clearinghouse provide support to professionals as they examine and make informed decisions about which programs fit specific situations and are worth the investment. Whether connecting one with the resources and tools to conduct a needs assessment in a specific community, suggesting the best evidence-based program or practice for a certain situation, or developing an evaluation plan, the TA team of experts is a call or email away.

Please visit the Clearinghouse's website at www.militaryfamilies.psu.edu or call 1-877-382-9185 to speak with a TA specialist.

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