

EVALUATION FORMS

Keeping our Children Safe from Harm

Course for keeping children safe from harm in church and community.

an initiative of the SCWA Coalition

developed in collaboration with CAAES in the D.R.Congo

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Questionnaire — Module 1

Please look at the images below and respond to the questions at the side.



1. A child wets the bed.	
a. What are the possible explanations, in your view?	
b. What do you think should happen to the child?	



2. A child has a nightmare.
a. What are the possible explanations, in your view?
b. What do you think should happen to the child?



3. A parent is very ill, and a child with a swollen stomach.
a. What are the possible explanations, in your view?
b. What do you think should happen to the child?

Questionnaire — Module 7

Please look at the images below and respond to the questions at the side.

1. A child wets the bed.



a. What are the possible explanations, in your view?
b. What do you think should happen to the child?



2. A child has a nightmare.
a. What are the possible explanations, in your view?
b. What do you think should happen to the child?



3. A parent is very ill, and a child with a swollen stomach.
a. What are the possible explanations, in your view?
b. What do you think should happen to the child?

Personal Action Plan — Module 7

Personal Action Plan		
Things to Stop	Things to Start	Things to Continue
Things I used to do that I will no longer do in the light of this training.	Things I did not do before but which I will start to do in the light of this training.	Things I used to do and will continue to do in the light of this training.
1.	1.	1.
2.	2.	2.
3.	3.	3.
New Insights and Ke	ey Principles which will	influence my work
a.		
b		
C.		

Initial Evaluation Form

Questions for the facilitator to ask the participants immediately after the training:

- 1. What have you learnt from this training? -3 to 5 things per person.
- 2. What will you do differently in the future as a result of this training? -3 to 5 things per person.

3.	How will you share what you have learnt with other people?
•••••	
•••••	
•••••	
•••••	
•••••	
•••••	
•••••	

Note the responses. Continue on another sheet of paper if necessary. Keep these all safe for future reference, and to compare with the responses to the **Follow-On Evaluation Questions**.

Follow-On Evaluation Form

Questions for the facilitator to ask the participants after 3 months / 6 months / 1 year:

- 1. Did you make a **Personal Action Plan** after the training? YES or NO.
 - if YES, what have you been able to put into practice? How have you done this?
 - if NO, what have you done differently in the light of the training you received? What changes have you put in place?
- 2. What changes have you noticed since the training? Please include any statistics and specific testimonies. Why do you think these changes are linked to the training?
 - changes personally;
 - changes in your church;
 - changes in your community.

	3.	What do you plan to do over the next six months or year to bring about further change, or to reinforce and build upon these changes? — Mention 2 or 3 things, if possible.
•••••		
•••••		
•••••		
•••••		
•••••		

Note the responses. Continue on another sheet of paper if necessary. Keep these all safe for future reference. Compare these responses with the responses to the **Initial Evaluation Questions**.

The Heart of the Matter

If possible, contact SCWA to let them know what progress has been made as a result of this training. Thank you very much.

Contact Details

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