



# Participant Feedback

## *Breaking the Silence: Spring Child Abuse Awareness Training*

March 2013

Facilitator's Name: \_\_\_\_\_

School/Unit/Office: \_\_\_\_\_

Please check the response that best reflects your thinking.

*Strongly  
Agree*

*Strongly  
Disagree*

<b>PARTICIPANT LEARNING</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>N/A</b>
I clearly understand the legal definitions of child abuse after participating in the Child Abuse Awareness training.						
I clearly understand my legal obligation to report suspected child abuse and how to report after participating in the Child Abuse Awareness training.						
I am better equipped to identify and respond to suspected child abuse after working with the <i>Breaking the Silence Vignettes</i> .						
I am able to contact the appropriate agency [Local Law Enforcement Agency or the Department of Children & Family Services (DCFS)] to report suspected child abuse.						
This workshop allowed for healthy and comprehensive conversations of the responsibilities and complexities of child abuse awareness.						
<b>PROCESS</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>N/A</b>
The training was well organized.						
The instructional strategies used effectively supported my learning.						
Participation and interaction were solicited throughout the training.						
Sufficient time was allocated to this training to strengthen my ability to identify, respond to, and report suspected child abuse.						

1) Please describe the component(s) of this staff development that was the most useful and why.

2) Please describe how you might use this information in your job.

3) Please describe the component(s) of this staff development that was the least clear.

4) I would appreciate more information/assistance with . . .

Please return this form to your facilitator.