

Peer Support Group

Post-evaluation Questionnaire



We encourage you to take some time to fill in this post-evaluation questionnaire, which will remain completely confidential. The purpose of the questionnaire is to help us gain information about your experience in the group so we can further improve the delivery and content.

Name: _____ **Date:** _____

Age: _____ **Year Level:** _____

1. Did you register as a member with Young Carers at Carers WA during your time in the Peer Support Group?

- Yes No Unsure

2. Have you had any communication or attended any activities/events with the Young Carers team at Carers WA?

- Yes - communication/activities (circle) No Unsure

3. What is the main reason for withdrawing from the group?

- No school leader/staff member to coordinate.
 The times/days did not suit.
 Not enough people.
 Lost interest.
 Gained what I wanted from the group.
 Conflict within the group.
 My time in the group came to a natural end.
 Other (please comment)

4. How did you feel about how often the group met per term?

- Too much Just enough Not enough

5. Did you learn any skills that have helped you in your caring role? Please state.

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6. What were your favourite activities and topics to discuss in the group?

Please state.

7. What were your least favourite activities and topics to discuss in the group?

Please state.

8. What would you have liked to see more of in the group?

9. Would you recommend the peer support group to other young carers at your school?

Yes

No

If no, please comment;

10. Please provide any further comments that you may wish to add to improve the group.

Thank you for completing the questionnaire 😊