FACILITATOR FEEDBACK FORM

It is important to get your feedback on today's workshop. If you could take a few minutes to complete the following questions, we would be very thankful. It is OK if you do not want to. If you had a co-facilitator, it is important that you both complete a form.

Please place this sheet in a sealed envelope and send it, along with the participants' feedback forms, to Dr. Colleen Anne Dell from our research team. Her address is:

Department of Sociology & School of Public Health 1109 Arts Building, 9 Campus Drive Saskatoon, SK S7N 5A5 Canada

| If you have any questions, you | u can contact Colleen 306- 966-5912 or colleen.dell@usask.ca |
|--------------------------------|--|
| Name: | Co-facilitator: |
| Age: V | Vorkshop Facility/Location: |
| Gender: (circle): Female | Male |
| Cultural Background (circle): | First Nations Métis Inuit Other: |

| | Strongly Agree | Agree | Disagree | Strongly Disagree | No Response |
|--|-------------------|-------|----------|----------------------|----------------|
| WORKSHOP CONTENT | l. | | | | |
| The workshop gave the participants an opportunity to discuss their healing journeys from substance abuse. | | | | | |
| The workshop taught the participants that how they see themselves is an important part of their healing journey. | | | | | |
| The workshop taught the participants that understanding their culture is an important part of their healing journey. | | | | | |
| The workshop taught the participants that stigma can be harmful to their healing journey. | | | | | |
| The workshop gave the participants hope for their healing journey. | | | | | |

| | Strongly Agree | Agree | Disagree | Strongly Disagree | No Response |
|---|-------------------|-----------|----------|----------------------|----------------|
| It is important to the participants that the workshop was created based on the experiences of Aboriginal women healing from substance abuse. | | | | | |
| The participants paid attention to the information presented in the workshop. | | | | | |
| The participants engaged with the information presented in the workshop (e.g., asked questions, participated in the discussion and exercises) | | | | | |
| The content of the workshop is at the right education level for participants to comprehend. | | | | | |
| FACILITATOR'S DISCUSSION GUIDE | | | | | |
| The training video shared information that helped me to facilitate the workshop. | | | | | |
| If you did not find the training video helpful, please explain why: | | | | | |
| The discussion guide was user friendly. | | | | | |
| If you did not find the discussion guide user-friend | ly, please e | xplain wh | ny: | | |
| The Device Delicat® DVD | | | | | |
| The PowerPoint® DVD was useful to present the workshop information to the participants. | | | | | |
| I felt comfortable facilitating the workshop. | | | | | |
| 3 hours is the right length for the workshop. | | | | | |
| I feel that I am a part of the "From Stilettos to Moccasins" team. | | | | | |

| Can one of our tear | n members contact you if we ha | ave any additional que | estions (circle)? Yes | No |
|----------------------|----------------------------------|------------------------|------------------------|-------------|
| Contact information | n (address, telephone, email): _ | | | |
| What part(s) of the | workshop worked really well? | | | |
| | | | | |
| What part(s) of the | workshop did not work as well? | | | |
| | | | | |
| Mhat was a samula | : | | | |
| What was your clos | ing exercise? | | | |
| | | | | |
| Overall, how would | you rate the importance of offe | ering this workshop at | your facility? | |
| | Somewhat important [] | Unsure [] | Not at all imp | |
| We are really intere | ested in any additional commen | ts you have (Please at | tach another page if r | needed): |
| | | | | |
| | | | | |
| | | | | |
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