

Date: _____

Coalition/Community Name: _____

Coalition Evaluation

We need your feedback! We are interested in learning more about your experience as a member of the coalition. This survey is voluntary and confidential. Your answers will be combined with the responses of the whole group. There are no "right" or "wrong" answers.

1. When did you become involved with the coalition?

_____ Month _____ Year

2. Do you live in the community served by your coalition?

¹ Yes ² No

3. How many coalition meetings have you attended during the past 12 months?

_____ (number of meetings)

4. Which sector do you think you **most** represent by being part of the coalition? Please select one response.

¹ Business

⁸ Healthcare professionals

² Media

⁹ State, local, tribal government

³ School

¹⁰ Civic volunteer group

⁴ Youth-serving organization

¹¹ Youth

⁵ Law enforcement

¹² Parent

⁶ Spiritual or fraternal organization

¹² Other prevention organization

⁷ Justice/corrections

¹² Specific cultural group (specify) _____

Please rate how much you agree or disagree with each of the following statements about your coalition.

	Strongly disagree	Disagree	Agree	Strongly agree
Community Environment				
5. The community climate seems to be "right" for this coalition accomplishing its goals.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
6. In the community, there is a big need for ATOD prevention programs and services.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
7. Any single organization would not be able to accomplish what we are trying to accomplish with our coalition.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
8. The coalition is well-known among people that do not directly participate.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
9. Community members are generally supportive of the coalition's efforts.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
Leadership				
10. I understand the coalition leadership roles.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
11. The people who lead this coalition communicate well with members.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
12. The people in leadership positions bring good leadership skills to the coalition.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
13. The coordinator guides the coalition's direction:	<input type="checkbox"/> ¹ More than I would like <input type="checkbox"/> ² Less than I would like <input type="checkbox"/> ³ As much as I would like			

	Strongly disagree	Disagree	Agree	Strongly agree
Administration				
14. When the coalition makes major decisions, there is usually enough time for members to confer with colleagues before making the final decision.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
15. There is a clear process for making decisions among coalition members.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
16. The coalition does a good job of coordinating all the people, organizations, and activities related to this project.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
17. The coalition's overall plan of action is effective.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
18. My abilities are effectively used by the coalition.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
19. The changes this coalition is making in the community will be able to sustain after the grant ends.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
Goals				
20. The coalition has established realistic goals.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
21. The coalition's members fully understand the Strategic Prevention Framework (SPF) model.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
22. The coalition's members believe that the SPF model is effective.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
23. The coalition uses data to guide decisions.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
24. The coalition will be able to effectively serve the entire community, including priority populations.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
25. The coalition will be able to effectively reach groups in our community requiring culturally-specific services.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
26. The coalition promotes collaboration with community groups concerned with preventing other types of problems (e.g., HIV, violence, teen pregnancy, suicide mental illness prevention & mental health promotion).	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
Membership				
27. I have a lot of respect for other people involved in this coalition.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
28. Everyone who is a member of our coalition wants this project to succeed.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
29. The level of commitment among members is high.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
30. Coalition members are open to different approaches to how we can do our work.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
31. Coalition members have a clear sense of their roles and responsibilities.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
32. Coalition members communicate openly with one another.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
33. I am informed as often as I should be about what goes on in the coalition.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
34. I have a clear understanding of what our coalition is trying to accomplish.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
35. Coalition members share a common vision for ATOD prevention in our community.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
36. The coalition's direction is dominated by one or a few members.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
37. There is a lot of tension and conflict among coalition members.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
38. I feel strongly committed to this coalition.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴

Now, please indicate how much you feel that your coalition has accomplished in the following areas.

How much has your coalition...	Not at all	A little	A lot	Not a focus
39. Increased community awareness of ATOD problems.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁹
40. Improved services and programs for ATOD prevention in this community.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁹
41. Helped organizations working for ATOD prevention to increase their capacity.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁹
42. Increased the use of evidence-based prevention efforts in this community.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁹
43. Strengthened ATOD-related policies and regulations in the community (e.g., tobacco, under-age drinking).	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁹
44. Caused a shift in community attitudes around ATOD.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁹

45. What has been the most rewarding aspect of being a coalition member?

46. What benefits to the community do you **expect** to see as a result of the coalition's activities?

47. What barriers or challenges, if any, have made it difficult for your coalition to achieve its goals?

48. What would you recommend changing about the coalition to improve its functioning and/or effectiveness?

49. If you are not able to attend coalition meetings regularly, what are some of the barriers?

Thank you for completing this survey!
Results from this survey will be shared with the coalition at an upcoming meeting.