



Now that you have completed the Mindful Moms program, we would like to know about your experience. Your feedback will help us to improve the classes so please answer the questions as honestly as you can. We will summarize the responses of all class members before sharing it with the teaching staff. The information that you tell us will not be linked with your name. Thank you for taking the time to complete the evaluation.

1. How many Mindful Moms classes have you attended? _____

2. How convenient is the class location?
 Very convenient Somewhat convenient Not at all convenient

3. How convenient is the day and time of the class?
 Very convenient Somewhat convenient Not at all convenient

4. Did you have enough opportunities to ask questions of the teachers during or after class?
 Yes No Not applicable; I did not have any questions.

5. What is the main reason you enrolled in the program? _____

6. How satisfied are you with the program so far?
 Very satisfied Satisfied Dissatisfied Very dissatisfied

7. Please list two things you like about the program.
1. _____
2. _____

8. Please list two things you dislike about the program.
1. _____
2. _____

9. If there was one thing you could change about the program, what would it be? _____

10. How useful was learning to meditate, or do Mindful Awareness of Breathing?

Very useful Useful Not very useful Not at all useful

a. How often have you used this tool over the past week?

Did not use A few times Once a day on most days Several times on most days

b. Comments: _____

11. How useful was learning Mindful Movement – in other words, mindful walking or yoga?

Very useful Useful Not very useful Not at all useful

a. How often have you used this tool over the past week?

Did not use A few times Once a day on most days Several times on most days

b. Comments: _____

12. How useful was learning Mindful Eating?

Very useful Useful Not very useful Not at all useful

a. How often have you used this tool over the past week?

Did not use A few times Once a day on most days Several times on most days

b. Comments: _____

13. How useful was the eating and movement advice for outside of class (like, the three basic commitments and tips for eating healthy and movement)?

Very useful Useful Not very useful Not at all useful

a. Comments: _____

In your own words, please explain what mindfulness is.

14. How well would you say you understand the idea of acceptance?

Very well Somewhat well A little Not at all

15. Have you used any of the skills you learned in Mindful Moms outside of class?

No

Yes. Please tell us which skill you used and how you used it: _____

16. On average, how much time outside of class have you spent practicing these new skills each week?

_____ minutes or hours

(Please circle one)

17. Is there anything else you would like to tell us about your experience so far?

