



# Support Services Feedback Survey

Please take a few minutes to complete this survey. Your feedback is confidential and will help ARCH provide better programs and services. *Thank you for your time!*

Is this your first time completing this survey since April 2015?  Yes  No  Don't know

How long have you been coming to ARCH? \_\_\_\_\_

Do you currently volunteer with any ARCH programs?  Yes  No

If yes, which one(s) \_\_\_\_\_

Which support services do you use?	✓	How often do you use them?		
		Not Very Often	Once in a While	Regularly
Telephone Support				
Social Hour or Social Activities				
Community/Educational Workshops				
Individual/Group Counselling or Support Groups				
Financial Assistance				
Appointment Transportation				
Massage/Complementary Therapy				
Needle Exchange				
Practical Support (i.e. bus tickets, food vouchers, etc.)				
Referrals				
Volunteering				
Housing-related services				
Benefits Counselling/Advocacy (ODSP, Trillium, etc.)				
ARCH Clinic				
Other (please specify):				

**Please rate the extent to which you agree or disagree to the following statements.**

	Doesn't meet my needs				Meets my needs
Our office hours	1	2	3	4	5
Our availability by phone	1	2	3	4	5
Our availability by email	1	2	3	4	5
Helpfulness of staff	1	2	3	4	5
As a place to come when you need someone to talk to	1	2	3	4	5

	Strongly Disagree			Strongly Agree	
My mental health has improved.	1	2	3	4	5
I have adopted better coping strategies.	1	2	3	4	5
I have built a social network/community.	1	2	3	4	5
My physical health has improved.	1	2	3	4	5
I feel less isolated and/or alone.	1	2	3	4	5
My self-esteem has improved.	1	2	3	4	5

**As a result of using ARCH Support Services, have you gained knowledge or strategies to adopt safer or healthier behaviours?**     Yes     No     Don't know

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**The most helpful aspects of ARCH support services are:**

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**ARCH could improve their support services by (e.g., hours of operation, programs of interest, etc.):**

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**It's hard for me to use ARCH service because:**

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**How did you first hear about our organization?**

- Doctor                       Public Health Unit                       Media (e.g., radio, newspaper)  
 Website                       Friend or Relative                       Social media (e.g., Facebook, Twitter)  
 Brochures/Pamphlets     Other (please specify): \_\_\_\_\_