Seeking Safety Feedback Questionnaire

Your honest feedback about the *Seeking Safety* treatment would be greatly appreciated, so that possible future revisions of it can be as helpful as possible. ***Both patients and clinicians can fill out the first part of this questionnaire; the last part is for clinicians only.*** Return the form by mail, fax, or email (see information below), and answer only the questions you choose to. Thank you!

How many sessions of Seeking Safety *have you done?* _____

For questions below, please use the following scale:

−3	−2	−1	0	+1	+2	+3
Greatly harmful	Somewhat harmful	A little harmful	Neutral	A little helpful	Somewhat helpful	Greatly helpful

★ How helpful is the treatment? ★

___ How helpful is the treatment *overall*?
___ How helpful is the treatment *for PTSD and substance abuse*?
___ How helpful is the treatment *for PTSD alone*?
___ How helpful is the treatment *for substance abuse alone*?

★ How helpful are each of the topics? ★

___ *Safety*
___ *PTSD: Taking Back Your Power*
___ *Detaching from Emotional Pain (Grounding)*
___ *Asking for Help*
___ *Compassion*
___ *Taking Good Care of Yourself*
___ *Setting Boundaries in Relationships*
___ *Honesty*
___ *Discovery*
___ *Coping with Triggers*
___ *Respecting Your Time*
___ *Creating Meaning*
___ *Commitment*
___ *Red and Green Flags*
___ *When Substances Control You*
___ *Community Resources*
___ *Recovery Thinking*
___ *Healthy Relationships*
___ *Getting Others to Support Your Recovery*
___ *Healing from Anger*
___ *Self-Nurturing*
___ *Integrating the Split Self*
___ *The Life Choices Game (Review)*
___ *Termination*

★ How helpful are the parts of the treatment? ★

___ Safety as the priority of treatment
___ The integrated treatment (the focus on both PTSD and substance abuse)
___ The focus on abstinence from all substances
___ The focus on ideals (e.g., honesty, compassion)
___ The focus on learning coping skills
___ The focus on cognitive skills

(cont.)

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___ The focus on behavioral skills
___ The focus on interpersonal skills
___ The focus on community resources
___ The use of quotations
___ The check-in/check-out (if there were any parts you didn't like, write on back of page)
___ The patient handouts
___ The commitments ("homework")
___ The list of Safe Coping Skills (e.g., "persistence")
___ The Safe Coping Sheet (i.e., "old way " vs. "new way")
___ The Core Concepts of Treatment
___ The national resources outside this treatment
___ The length of treatment (25 topics)
___ The amount of written material provided
___ The structured approach (the organized plan for each session)
___ The empirical basis of the treatment (i.e., it has been scientifically evaluated)
___ Other: _____ (add more on back of page if needed)

The next four questions are for clinicians only:

___ The therapist guide for each topic
___ The suggestions for further reading
___ The "Tough Cases" sections
___ The emphasis on therapy process (e.g., countertransference)

Please rate the next four questions 0% (not at all) to 100% (totally):

- How frequently will you use what you learned in this treatment in the future? ___%
- How easy to understand is this treatment? ___%
- How innovative (creative, different from other treatments) is this treatment? ___%
- To what extent would you *recommend* this treatment to someone else? ___%
- How long did it take you to feel comfortable with this treatment? _____ (Please answer using a time frame—e.g., 1 week, 6 months, etc.)
- Your age: ___ Your gender: ___Female ___Male
- Have you experienced (*clinicians, please answer this question too*):

  Trauma? No/Yes PTSD? No/Yes Substance abuse? No/Yes

In your own words (write answers on back of page):

- What do you consider the best/worst aspects of the treatment program?
- What modifications would you like to see made to the program? For example, should it be longer? Shorter? Topics to add? Topics to delete?
- Are there particular types of people you feel the program is especially helpful/unhelpful for?
- Any other comments?

(cont.)