

## Family and Youth Development Concentration Area Follow-up Evaluation Tool

The statements below can be used in a survey to evaluate medium-term (MT) outcomes (at least four weeks after a program takes place). *Extension agents should contact specialists in this concentration area for guidance on how to evaluate learning opportunities in this area.*

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### [XYZ-Name of Program] Follow-Up Survey

Please circle the option that best describes your response to each statement.

Indicator # in KERS	Statements	Yes	No
502.2	Since participating in [XYZ-Name of Program], I have used nurturing parenting/caregiving strategies.	Yes	No
502.4	Since participating in [XYZ-Name of Program], I have sought support from local community members and/or organizations.	Yes	No
502.5	Since participating in [XYZ-Name of Program], I have extended support to another parent, grandparent, older adult, or relative raising a child.	Yes	No
502.6	Since participating in [XYZ-Name of Program], I've enhanced the health of my relationships.	Yes	No