

Date:
Assigned IFH Staff:
Participant #:



**ANTI-VIOLENCE PARTNERSHIP
of Philadelphia**
Together we can end the cycle of violence

IFH Survivor Quantitative Survey

1. Based on your experience, what were your needs in each of the following areas directly after your loved one was taken from you?

	No/Very Little Need		Some Need		Extreme Need
Financial Needs	1	2	3	4	5
Physical Wellbeing	1	2	3	4	5
Family and Relationships	1	2	3	4	5
Spiritual Well Being	1	2	3	4	5
Job/Occupational Needs	1	2	3	4	5
Psychological/Emotional	1	2	3	4	5
Household	1	2	3	4	5
Court/Legal Navigation	1	2	3	4	5

2. Based on your experience, how well were your needs **met** in each of the following areas across all service providers directly after your loved one was taken?

	Needs Not At All Met		Needs Somewhat Met		Needs Met Very Well
Financial Needs	1	2	3	4	5
Physical Wellbeing	1	2	3	4	5
Family and Relationships	1	2	3	4	5
Spiritual Well Being	1	2	3	4	5
Job/Occupational Needs	1	2	3	4	5
Psychological/Emotional	1	2	3	4	5
Household	1	2	3	4	5
Court/Legal Navigation	1	2	3	4	5

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3. Below is a list of common services survivors receive. Please place an “X” in the column that best fits your experience with each type of service.

	I was NOT aware of this service	I was NOT aware of this service, but I wish I had been	I was aware of this service, but neither myself nor other family members used this service	I did NOT use this service but other family member(s) used this service	I used this service ONCE OR TWICE (and other family members may or may not have also used it)	I used this service THREE OR MORE TIMES (and other family members may or may not have also used it)
Grief/Loss Therapy/Counseling						
Victims' Compensation Reimbursement						
Case Management						
Court/Trial Support						
Case Follow-Up/Notifications						
Behavioral Health Support						
Home Visits/Needs Assessments						
Referrals to Community Agencies						
Food/Utility/Household Resources						
Relocation/Emergency Funds						

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4. In general, how beneficial were each of the following service providers? If you did not use the service, please use the “N/A” response.

	Not Applicable (N/A)	Not At All Beneficial		Somewhat Beneficial		Extremely Beneficial
Grief/Loss Therapy/Counseling						
Victims' Compensation Reimbursement						
Case Management						
Court/Trial Support						
Case Follow-Up/Notifications						
Behavioral Health Support						
Home Visits/Needs Assessments						
Referrals to Community Agencies						
Food/Utility/Household Resources						
Relocation/Emergency Funds						

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5. How helpful in addressing your legal navigation needs were each of the following service providers?

	Not Applicable (N/A)	Not At All Helpful		Somewhat Helpful		Extremely Helpful
Grief/Loss Therapy/Counseling						
Victims' Compensation Reimbursement						
Case Management						
Court/Trial Support						
Case Follow-Up/Notifications						
Behavioral Health Support						
Home Visits/Needs Assessments						
Referrals to Community Agencies						
Food/Utility/Household Resources						
Relocation/Emergency Funds						

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