

AFRC PHAP SURVEY

This survey is designed to determine the effectiveness of the PHAP program for the AFRC members and their families.



1. How did you learn about Psychological Health Advocacy Program?

- Yellow Ribbon Event
- Airman/Family Readiness/Event
- Deployment Briefing
- Commanders Call
- Chaplain
- Friends/Family
- Referral
- Walk In
- eMail
- Other (please specify)

2. How serious was/is the situation for which you are seeking help?

- 1. Very serious problem
- 2. Somewhat serious problem
- 3. A little problem
- 4. Not a problem

3. Was the PHAP representative responsive to your needs in a timely manner?

- 1. Yes
- 2. No

4. Were the referrals given to you helpful?

- 1. Helpful
- 2. Not Helpful
- 3. I never used them
- 4. I found my own
- 5. None were needed

5. How helpful was the program for you?

- 1. Very Helpful
- 2. A Little Helpful
- 3. Not Helpful
- 4. Didn't need services at this time.

6. How likely are you to recommend PHAP to other families/members?

- 1. Extremely
- 2. Very
- 3. Moderately
- 4. Slightly
- 5. Not at all

7. How can we better assist you?

- More morale calls
- More follow up calls
- More or better resources
- Would not change anything

8. Please provide additional comments and suggestions on how we can better assist you.

9. If you wish to be contacted by the AFRC Psychological Health Advocacy Program Manager, provide your name and phone number or call (478) 327-2092.