# Workshop Assessment Follow-Up on Mapping (WAFU)

**The anonymous linkage code below will be used to match data from different evaluation forms without using your name or information that can identify you.**

**Please complete the following items for your anonymous code:**

First letter in your mother’s first name: |\_\_\_| First letter in your father’s first name: |\_\_\_|

First digit in your social security number: |\_\_\_| Last digit in your social security number: |\_\_\_|

**Instructions**: For this questionnaire, “mapping” means any use of nodes and links. This can be in the form of fill-in guide maps, free maps that are made from “scratch”, or any combination of these.

**PLEASE FILL IN THE CIRCLE THAT SHOWS YOUR ANSWER TO EACH ITEM**

 ***Disagree Agree***

 ***Strongly Disagree Undecided Agree Strongly***

 ***(1) (2) (3) (4) (5)***

 1. You have used mapping strategies
from the training. ⭘ ⭘ ⭘ ⭘ ⭘

 2. You will continue using mapping even if you
move to another job. ⭘ ⭘ ⭘ ⭘ ⭘

 3. You are committed to integrating mapping
into your clinical style. ⭘ ⭘ ⭘ ⭘ ⭘

 4. You are comfortable using mapping
with clients. ⭘ ⭘ ⭘ ⭘ ⭘

 5. You have used mapping extensively since
the training workshop. ⭘ ⭘ ⭘ ⭘ ⭘

 6. You have put your own personal touch
or style on how you use mapping. ⭘ ⭘ ⭘ ⭘ ⭘

 7. You have talked with colleagues about
the ways you have used mapping. ⭘ ⭘ ⭘ ⭘ ⭘

 8. Your colleagues have seemed interested in
what you have been doing with mapping. ⭘ ⭘ ⭘ ⭘ ⭘

 9. You feel confident explaining how you are
using mapping to colleagues. ⭘ ⭘ ⭘ ⭘ ⭘

 10. You will continue talking with colleagues and
other staff about the uses of mapping. ⭘ ⭘ ⭘ ⭘ ⭘

 ***Disagree Agree***

 ***Strongly Disagree Undecided Agree Strongly***

 ***(1) (2) (3) (4) (5)***

 11. Colleagues you have told about mapping
are using it themselves. ⭘ ⭘ ⭘ ⭘ ⭘

 12. Mapping has been well-received by most
of your clients. ⭘ ⭘ ⭘ ⭘ ⭘

 13. Mapping has improved your individual
counseling sessions with clients. ⭘ ⭘ ⭘ ⭘ ⭘

 14. Mapping has improved your group counseling
sessions with clients. ⭘ ⭘ ⭘ ⭘ ⭘

 15. Mapping has improved your communication
with clients. ⭘ ⭘ ⭘ ⭘ ⭘

 16. Mapping has improved focus and clarity
in your counseling sessions. ⭘ ⭘ ⭘ ⭘ ⭘

 17. Mapping has helped improve your clients’
decision making and planning. ⭘ ⭘ ⭘ ⭘ ⭘

 18. Since the workshop, you have trained others
in mapping. ⭘ ⭘ ⭘ ⭘ ⭘

 19. The materials provided at the workshop made
it easy for you to train others in mapping. ⭘ ⭘ ⭘ ⭘ ⭘

 20. You have gotten a positive response to the
mapping training you have provided. ⭘ ⭘ ⭘ ⭘ ⭘

 21. You plan to conduct mapping training
in the future. ⭘ ⭘ ⭘ ⭘ ⭘

**You have not conducted any mapping training because –**

 22. it is not your job to provide training. ⭘ ⭘ ⭘ ⭘ ⭘

 23. your agency does not have the time or
resources needed to offer training. ⭘ ⭘ ⭘ ⭘ ⭘

 24. you don’t have enough time to provide
mapping training. ⭘ ⭘ ⭘ ⭘ ⭘

 25. you do not feel properly trained
to train others. ⭘ ⭘ ⭘ ⭘ ⭘

 26. the training materials seem cumbersome
and difficult to use. ⭘ ⭘ ⭘ ⭘ ⭘