**Audience Evaluation**

In Our Own Voice (IOOV)/ Lived Experience Presentation

<table>
<thead>
<tr>
<th>Presentation Date</th>
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<p>| What time did this presentation begin? |</p>
<table>
<thead>
<tr>
<th>(If unsure, please estimate)</th>
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</table>

<p>| Presentation location, including city |</p>
<table>
<thead>
<tr>
<th>(for virtual presentations, put &quot;virtual&quot;)</th>
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</table>

<table>
<thead>
<tr>
<th>Presenter name(s)</th>
</tr>
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</table>

**My favorite part of the presentation was:**

- [ ] What Happened
- [ ] What Helped
- [ ] What’s Next

Prior to today, had you seen an IOOV or lived experience presentation before?

- [ ] Yes
- [ ] No
- [ ] Other/Unsure

Prior to this presentation, were you aware of NAMI or NAMI Missouri?

- [ ] Yes
- [ ] No
- [ ] Other/Unsure

For the below questions, please select one response option for each item.

**Upon completion of the presentation, please rate the following:**

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

- The presentation provided useful information.
- The presentation was easy to follow.
- I enjoyed the discussion portions.
- I believe recovery from mental illness is possible.

**Before and after statements**

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

- Before this presentation, I did not believe mental illnesses were as real as physical illnesses.
- As a result of this presentation, I believe mental illnesses are as real as physical illnesses, like diabetes or heart disease.
- Before this presentation, I felt I had nothing in common with people who have mental illness.
- As a result of this presentation, I feel I have more in common with people with mental illness.
- Before this presentation, I was more fearful of people with mental illness than those without mental illness.
- As a result of this presentation, I am less fearful of people with mental illness.
- Before this presentation, I would not have felt comfortable working with a person with mental illness.
- As a result of this presentation, I would feel comfortable working with a person with mental illness.
Thank you for taking the time to complete this survey. Your input is valuable.

What was most helpful to you? (Select all that apply)
- □ Hearing the stories
- □ Watching the video(s)
- □ The opportunity to ask questions
- □ Viewing the handouts
- □ Learning what was helpful in times of need
- □ Learning about mental health
- □ Other (please specify) ____________________________

Select up to three actions you plan to take to help yourself or others who struggle with mental health challenges.
- □ Reading about mental health
- □ Talking to a professional
- □ Finding additional resources
- □ Asking someone if they need help
- □ Contacting NAMI
- □ Being more compassionate
- □ Listening to others
- □ Advocating for services
- □ Finding a support group
- □ Other (please specify) ____________________________

What, if any, changes would you suggest making to the presentation?

Do you have any additional comments about the presentation?

We are required to report the below demographic information as a condition of grant and other funding that allows us to offer this and other programs free of charge. Please help us by selecting all that apply to you.

<table>
<thead>
<tr>
<th>Background/Occupation</th>
<th>Ethnicity/ Race</th>
<th>Gender</th>
<th>Sexual Orientation</th>
<th>Age</th>
<th>Military Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Student</td>
<td>□ African American or Black</td>
<td>□ Female</td>
<td>□ Heterosexual (straight)</td>
<td>□ 17 or under</td>
<td>□ Active Military</td>
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<tr>
<td>□ Educator</td>
<td>□ Asian</td>
<td>□ Male</td>
<td>□ Lesbian</td>
<td>□ 18-34</td>
<td>□ Veteran</td>
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<td>□ Law enforcement</td>
<td>□ Bi/Multi-Racial</td>
<td>□ Non-binary</td>
<td>□ Gay</td>
<td>□ 35-54</td>
<td>□ Family Member of Active</td>
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<tr>
<td>□ Physician/Nurse</td>
<td>□ Caucasian</td>
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<td>□ Bisexual</td>
<td>□ 55-64</td>
<td>Military or Veteran</td>
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<tr>
<td>□ Social Worker</td>
<td>□ Hispanic/ Latino</td>
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<td>□ 65-74</td>
<td>□ Other</td>
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<tr>
<td>□ Mental Health Provider</td>
<td>□ Hawaiian/ Pacific Islander</td>
<td></td>
<td></td>
<td>□ 75-84</td>
<td>□ None</td>
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<tr>
<td>□ Other</td>
<td>□ Native American/ Alaskan Native</td>
<td></td>
<td></td>
<td>□ 85+</td>
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<tr>
<td></td>
<td>□ Other</td>
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</tbody>
</table>

Household Income:
- □ $0 - $9,999
- □ $10,000 - $14,999
- □ $15,000 - $19,999
- □ $20,000 - $29,999
- □ $30,000 – $49,999
- □ $50,000 - $99,999
- □ $100,000 +

Zip code: ____________________

Other experiences:
Are you a family member of a person who has experienced a mental illness/ mental health disorder? □ Yes □ No
Have you experienced a mental illness/ mental health disorder? □ Yes □ No
Have you ever experienced homelessness? □ Yes □ No
Have you ever been jailed or incarcerated? □ Yes □ No
Have you ever had a substance use disorder? (drugs or alcohol) □ Yes □ No