

## ***Elder Abuse in Oregon: Building Awareness and Encouraging Action*** **Lesson Evaluation**

County \_\_\_\_\_ Date \_\_\_\_\_

We'd like to know more about how your participation in this lesson has affected you. Please take a few minutes to answer these questions.

1. To what extent did the lesson increase your awareness/knowledge of the following?  
**Circle one for each.**

	Not at all					A lot
• Types of elder abuse	1	2	3	4	5	
• Warning signs of abuse	1	2	3	4	5	
• Community resources that address abuse	1	2	3	4	5	
• Ways to take action for self and community	1	2	3	4	5	

2. As a result of this lesson, you may change some of your ideas or behaviors. Which of the following do you plan to do as a result of this lesson? **Check all that apply.**

- stay as healthy and mobile as I can by eating healthier foods, getting more physical activity, and carefully managing chronic health conditions for optimum health.
- do more activities that help keep my mind sharp.
- work on developing stronger ties to family members and friends.
- increase my social network by getting out of the house more and making new friends.
- keep track of my finances or ask a trusted person for help if I need it.
- make friends with the workers at my financial institution.
- get to know my attorney, or if I don't have one, get one.
- set up or review my will and powers of attorney for finances and health care.
- check references when hiring a person to work for me.
- contact Adult Protective Services when I feel unsafe or see someone who may be unsafe.
- write down the phone number for my local office of Adult Protective Services and keep it in a visible location near the phone.

**Please continue this evaluation on the back of this page.**

- visit and make phone calls to older friends who don't get out much.
- sign up for training to become a volunteer Ombudsman at a local long-term care facility.
- visit a local long-term care facility to share your hobby or pet, or to write letters to family members for residents.
- adopt a resident at a long-term care facility.
- join an advocacy group that focuses on elder abuse.

3. Are there other things you would do differently as a result of this lesson?

*Thank you! Please return your completed evaluation to your leader, who will forward it to the OSU Extension Service office.*

COOPERATIVE EXTENSION SERVICE  
Marion, Polk, Yamhill County Office



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## Informed Consent Statement

To: Elder Abuse lesson participants

This Elder Abuse lesson is being taught to Family and Community Education study groups in several counties. The OSU Extension Service asks you to fill out this evaluation form so that they can assess the impact that the lesson may have had on you. Please only do so if you are aged 18 or older.

The completed forms will be forwarded to OSU by the county Extension office. Your responses, together with others, will be combined and used for statistical summaries only. A summary of the findings will be included in the 2006 Extension Family and Community Development program's annual report that will be shared with OSU administrators. The information may also be included in reports on Extension accomplishments. You're welcome to see the results if you like.

Your participation in this evaluation is VOLUNTARY. You may choose not to participate. You are free to answer only those questions you feel comfortable answering. Your relationship with the FCE program or with OSU Extension Service will not be affected, whether you choose to participate or not. It should take you about 5 minutes to complete each evaluation.

The responses that you provide will be kept CONFIDENTIAL to the extent permitted by law. No one will know whose responses are whose. Only your county's name will be on the form. Please be sure NOT to put your name or any identifying marks on the evaluation forms.

There are no foreseeable risks or direct benefits associated with your participation in this study. Your feedback will help the OSU Extension Service to provide lessons that meet your needs. You will not receive any compensation for your participation in the evaluation. If you have questions about the survey, contact me at 503-623-8395. If I'm not available, please leave a message so that I can call you back. If you have questions about your rights as a human research subject, please contact the Oregon State University Institutional Review Board (IRB) Human Protections Administrator at 541-737-3437 or [IRB@oregonstate.edu](mailto:IRB@oregonstate.edu).

Sincerely,

A handwritten signature in black ink that reads "Debra Minar Driscoll".

**OSU IRB Approval Date: 10-16-05**  
**Approval Expiration Date: 10-15-06**

Debra Minar Driscoll  
Extension Family and Community Development Faculty