

# Mindfulness Training Follow-up Survey

These questions ask about your experiences with mindfulness practice over the past several months and will take about 10-15 minutes to complete. Thank you for taking the time to complete this survey!

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Did you attend workshops held at your school led by Christy Langman, mindfulness implementation coach?  
Check one.

- Yes, I attended 1 workshop
- Yes, I attended more than 1 workshop
- No, I didn't attend any of these workshops
- Don't recall

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If no, why didn't you attend any of the workshops?  
Check one.

- Not interested
- My schedule didn't allow it
- Other, specify below:

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Please specify:

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**How satisfied were you with each component of the mindfulness coaching workshops?**

	1= Highly Unsatisfied	2	3	4	5 = Highly Satisfied
Mindfulness expertise of the instructor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mindfulness resources shared	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Length of sessions (1-1.5 hours)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Number of workshops offered	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please provide any comments about the mindfulness coaching workshops you attended here. Your feedback is very helpful in improving future coaching workshops.

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Have you used any of the resources shared by the mindfulness coach? Check one.

- Yes  
 No  
 Did not receive any resources from the coach

If yes, what was the resource and how did you use it?

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Did you create a mindfulness plan for yourself, your school, or your classroom using the template provided by the mindfulness coach? Check all.

- Yes, myself  
 Yes, my school  
 Yes, my classroom  
 No

If yes, have you implemented any part of the plan or plans? Please describe.

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**Thinking about your experience with mindfulness over the past 6 months, how much do you agree or disagree with each of the following statements?**

	1 = Strongly Disagree	2	3	4	5	6	7 = Strongly Agree
I have increased my understanding of what mindfulness is	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I know of at least 1 simple way to use mindfulness practice in my daily life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I plan to practice mindfulness on my own	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I think mindfulness skills will be useful to me in my work with students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I plan to use mindfulness skills with students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mindfulness has helped me cope with stressful situations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My own mindfulness practice has had a positive impact on how I interact with students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have noticed a change in the atmosphere of my classroom or other school setting since I began my mindfulness practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My mindfulness practice has helped me to manage student behaviors effectively and compassionately	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My mindfulness practice has helped me to establish and maintain supportive relationships with students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mindfulness has helped me to promote awareness and concentration among students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mindfulness has helped me with my life in school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mindfulness has helped me with my life at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would recommend mindfulness training to my coworkers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**In a typical week over the past 6 months (or semester), how often did you practice mindfulness on your own? Check one box for both formal and informal practice. Formal practice includes planned sessions or setting aside time and informal practice includes unplanned moments of mindfulness throughout the day.**

	Formal Practice	Informal Practice
0 days	<input type="radio"/>	<input type="radio"/>
1 day	<input type="radio"/>	<input type="radio"/>
2 days	<input type="radio"/>	<input type="radio"/>
3 days	<input type="radio"/>	<input type="radio"/>
4 days	<input type="radio"/>	<input type="radio"/>
5 days	<input type="radio"/>	<input type="radio"/>
6 days	<input type="radio"/>	<input type="radio"/>
7 days	<input type="radio"/>	<input type="radio"/>

**On a typical day, estimate how much time did you spend on average when you practiced mindfulness on your own? Check one box for both formal and informal practice. Use your practice journal to help you answer this question if you kept one.**

	Formal Practice	Informal Practice
Didn't practice	<input type="radio"/>	<input type="radio"/>
Less than 5 minutes	<input type="radio"/>	<input type="radio"/>
5-10 minutes	<input type="radio"/>	<input type="radio"/>
10-20 minutes	<input type="radio"/>	<input type="radio"/>
20-30 minutes	<input type="radio"/>	<input type="radio"/>
More than 30 minutes	<input type="radio"/>	<input type="radio"/>

**When you practiced mindfulness on your own, what types of practices did you engage in?**

	Never or very rarely true	Rarely true	Sometimes true	Often true	Very often or always true
Mindfulness of the breath	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mindfulness of the body	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mindfulness of sounds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mindfulness of emotion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mindfulness of thinking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Kindness practices	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (describe below)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other:

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Do you plan to continue to practice mindfulness on your own?

- Yes, definitely  
 Yes, probably  
 Maybe, I'm not sure  
 Probably not  
 Definitely not

What barriers have you encountered that make it difficult to practice mindfulness? (Check all.)

- I don't have a place to practice mindfulness  
 I don't have anyone to practice with  
 I don't feel comfortable with practicing mindfulness  
 I can't find time to practice mindfulness  
 Other (describe below)

Describe:

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Have you used mindfulness strategies with students?

- Never  
 Rarely  
 Sometimes  
 Often  
 Very often

Please describe the mindfulness strategies you have used with students:

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Estimate the number of students you used mindfulness strategies with:

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Does this number represent:

- None of your students  
 Just a few of your students  
 Less than half of your students  
 About half of your students  
 Most of your students  
 Almost all of your students

Please provide examples of any changes or impact you think your own mindfulness practice has had on your students or the classroom/school setting overall.

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**To what degree do you think using mindfulness strategies with your students has impacted them?**

	Not at all	Very little	Somewhat	A great deal	Very much
Overall behavior	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Helped students stay focused and on-task	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to complete tasks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to self-calm	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If you observed changes in your students, did they occur in:

- No changes observed
- Just a few of your students
- Less than half of your students
- About half of your students
- Most of your students
- Almost all of your students

**Please rate each of the following statements using the scale by checking the box that best describes your own opinion of what is generally true for you.**

	Never or very rarely true	Rarely true	Sometimes true	Often true	Very often or always true
There is a lot I can do to support students to believe they can do well in school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It is difficult to keep students engaged in learning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The students I work with feel like they belong at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is a lot I can do to help calm a student who is disruptive or noisy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It is very challenging to get students to follow classroom or school rules	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



**Please rate each of the following statements using the scale by checking the box that best describes your own opinion of what is generally true for you.**

	Never or very rarely true	Rarely true	Sometimes true	Often true	Very often or always true
I cope well with highly stressful situations at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I cope well with highly stressful situations at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am confident in my ability to control my emotions in stressful situations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I'm in a stressful situation, I focus my attention on the aspects of the situation I can manage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When highly stressed, I am able to change my thinking to calm down	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Please rate each of the following statements using the scale by checking the box that best describes your own opinion of what is generally true for you.**

	Never or very rarely true	Rarely true	Sometimes true	Often true	Very often or always true
There are days when I feel tired before I arrive at work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After work, I tend to need more time than in the past in order to relax and feel better	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can tolerate the pressure of my work very well	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
During my work, I often feel emotionally drained	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I work, I usually feel energized	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I find my work to be a positive challenge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After my work, I usually feel worn out and weary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel more and more engaged in my work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Please rate each of the following statements using the scale by checking the box that best describes your own opinion of what is generally true for you.**

	Never or very rarely true	Rarely true	Sometimes true	Often true	Very often or always true
When I'm walking, I deliberately notice the sensations of my body moving	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I'm good at finding words to describe my feelings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I criticize myself for having irrational or inappropriate emotions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I perceive my feelings and emotions without having to react to them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I do things, my mind wanders off and I'm easily distracted	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I take a shower or bath, I stay alert to the sensations of water on my body	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can easily put my beliefs, opinions, and expectations into words	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I don't pay attention to what I'm doing because I'm daydreaming, worrying, or otherwise distracted	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I watch my feelings without getting lost in them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I tell myself I shouldn't be feeling the way I'm feeling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Please rate each of the following statements using the scale by checking the box that best describes your own opinion of what is generally true for you.**

	Never or very rarely true	Rarely true	Sometimes true	Often true	Very often or always true
I notice how foods and drinks affect my thoughts, bodily sensations, and emotions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It's hard for me to find the words to describe what I'm thinking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am easily distracted	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I believe some of my thoughts are abnormal or bad and I shouldn't think that way	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I pay attention to sensations, such as the wind in my hair or sun on my face	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have trouble thinking of the right words to express how I feel about things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I make judgments about whether my thoughts are good or bad	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I find it difficult to stay focused on what's happening in the present	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I have distressing thoughts or images, I "step back" and am aware of the thought or image without getting taken over by it	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I pay attention to sounds, such as clocks ticking, birds chirping, or cars passing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Please rate each of the following statements using the scale by checking the box that best describes your own opinion of what is generally true for you.**

	Never or very rarely true	Rarely true	Sometimes true	Often true	Very often or always true
In difficult situations, I can pause without immediately reacting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I have a sensation in my body, it's difficult for me to describe it because I can't find the right words	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It seems I am "running on automatic" without much awareness of what I'm doing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I have distressing thoughts or images, I feel calm soon after	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I tell myself that I shouldn't be thinking the way I'm thinking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I notice the smells and aromas of things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Even when I'm feeling terribly upset, I can find a way to put it into words	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I rush through activities without being really attentive to them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Please rate each of the following statements using the scale by checking the box that best describes your own opinion of what is generally true for you.**

	Never or very rarely true	Rarely true	Sometimes true	Often true	Very often or always true
When I have distressing thoughts or images I am able just to notice them without reacting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I think some of my emotions are bad or inappropriate and I shouldn't feel them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I notice visual elements in art or nature, such as colors, shapes, textures, or patterns of light and shadow	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My natural tendency is to put my experiences into words	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I have distressing thoughts or images, I just notice them and let them go	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I do jobs or tasks automatically without being aware of what I'm doing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I have distressing thoughts or images, I judge myself as good or bad, depending what the thought/image is about	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I pay attention to how my emotions affect my thoughts and behavior	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can usually describe how I feel at the moment in considerable detail	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I find myself doing things without paying attention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I disapprove of myself when I have irrational ideas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>