

## Community Garden and Horticulture Therapy

### Sample Evaluation

**Appropriate to Survey Program Administration and/or Staff of a Rehabilitation Program, Homeless Shelter, Senior Residential Facilities, or Detention Centers**

**Note to Agents – This is a sample evaluation that you can adapt to meet your county and programs. It is also available on Qualtric to edit, distribute to clients, analysis, and share with specialists electronically. The items on the evaluation align with KERS program indicators and the sample success story that is available.**

The \_\_\_\_\_ County Extension Service is proud to work with people interested in gardening and horticulture therapy. In order to continue our services, please take a few minutes to complete the following survey.

What types of challenges do garden project participants endure?

- |   |  |
|---|--|
| <input type="checkbox"/> Addiction            | <input type="checkbox"/> Loss                      |
| <input type="checkbox"/> Homeless             | <input type="checkbox"/> Physical abuse            |
| <input type="checkbox"/> Illness or injury    | <input type="checkbox"/> Mental or emotional abuse |
| <input type="checkbox"/> Institutionalization | <input type="checkbox"/> Military deployment       |
| <input type="checkbox"/> Life change          | <input type="checkbox"/> Other _____               |

On average how many hours per week were the participants in the garden? \_\_\_\_\_

Did the garden contribute to the participants' ability to adapt to the living environment?

- |                              |                                 |
|------------------------------|---------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> Unsure |
| <input type="checkbox"/> No  |                                 |

How are the participants physically involved in caring for the garden? *Select all that apply.*

- |   |   |
|---|---|
| <input type="checkbox"/> Tilling              | <input type="checkbox"/> Integrated pest management |
| <input type="checkbox"/> Fertilizing          | <input type="checkbox"/> Weeding                    |
| <input type="checkbox"/> Soil testing         | <input type="checkbox"/> Harvesting                 |
| <input type="checkbox"/> Irrigation/ Watering | <input type="checkbox"/> Composting                 |
| <input type="checkbox"/> Planting             | <input type="checkbox"/> Construction or repair     |
| <input type="checkbox"/> Pruning              | <input type="checkbox"/> Other _____                |
| <input type="checkbox"/> Mulching             |   |

How did the participants improve physically? *Select all that apply. (Note to Agents – This questions can be revised to ask the top 3 more frequent observed outcome or could be presented in a Likert Scale.)*

- |  |   |
|--|---|
| <input type="checkbox"/> Increased stamina                         | <input type="checkbox"/> Maintained or improved hand and eye coordination |
| <input type="checkbox"/> Increased physical activity               | <input type="checkbox"/> Maintained or improved balance                   |
| <input type="checkbox"/> Maintained or improved fine motor skills  | <input type="checkbox"/> Maintained or improved strength                  |
| <input type="checkbox"/> Maintained or improved gross motor skills | <input type="checkbox"/> Other _____                                      |

How has the garden contributed to emotional or psychological improvement? *Select all that apply. (Note to Agents – This questions can be revised to ask the top 3 more frequent observed outcome or could be presented in a Likert Scale.)*

- |  |  |
|--|--|
| <input type="checkbox"/> Create a sense of self-efficiency | <input type="checkbox"/> Improved social interaction |
| <input type="checkbox"/> Created a sense of responsibility | <input type="checkbox"/> Inspired                    |
| <input type="checkbox"/> Displayed nurturing feelings      | <input type="checkbox"/> Invigorated                 |
| <input type="checkbox"/> Enhance productivity              | <input type="checkbox"/> Reconnect                   |
| <input type="checkbox"/> Empowered individual(s)           | <input type="checkbox"/> Reduce anger                |
| <input type="checkbox"/> Evoked positive feelings          | <input type="checkbox"/> Reduce negative emotions    |
| <input type="checkbox"/> Increased competence              | <input type="checkbox"/> Reduce stress               |
| <input type="checkbox"/> Increased self-worth              | <input type="checkbox"/> Restore dignity             |
| <input type="checkbox"/> Increased self-confidence         | <input type="checkbox"/> Wakeful relaxation          |
| <input type="checkbox"/> Improved sense of accomplishment  | <input type="checkbox"/> Other _____                 |

In which areas did participants improve cognitive skills? *Select all that apply.*

- |  |  |
|--|--|
| <input type="checkbox"/> Attention           | <input type="checkbox"/> Visual processing/ following directions |
| <input type="checkbox"/> Memory              | <input type="checkbox"/> Process speed                           |
| <input type="checkbox"/> Logic and reasoning | <input type="checkbox"/> Other _____                             |
| <input type="checkbox"/> Auditory processing |  |

How has the garden contributed to the participants' ability to foster recovery or learning?

Have the participants used the garden skills since leaving the program? If yes, how?

How many pounds of produce was harvested from the garden?

How was the produce from the garden used?

How beneficial were the classes conducted by Extension staff and/or volunteers?

- Very beneficial
- Beneficial
- Not beneficial

Was the information relevant?

- Very relevant
- Relevant
- Not relevant

Was the information appropriate for the participants?

- Yes
- Maybe
- No

Do you anticipate future gardening projects with Extension?

- Definitely Yes
- Might or might not
- Definitely No

How can the program be improved?