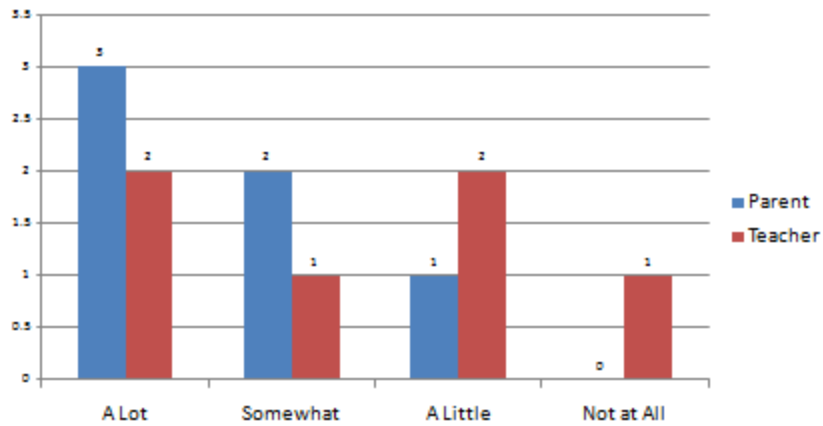
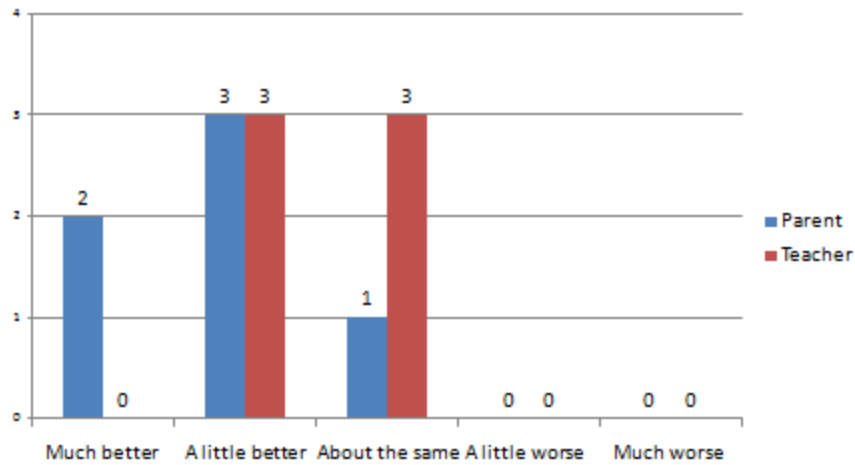


## Program Two: Survey Data

How much was your child helped by the Program?



Compared to before the Program, how would you rate your child's ability to deal with social situations now?



Compared to before the Program, how would you rate your child's problems or symptoms now

