

Participant Evaluation

Change for our Children Ltd

“Through the Tubes”

We invite your feedback on this peer education session. A summary of feedback from participants across the country will be included in the service report to the Ministry of Health.

Thank you.

1. How would you rate the overall value of this session to you? (on a scale of 1 to 9)

(low value) 1 2 3 4 5 6 7 8 9 (high value)

2. How confident do you now feel to discuss infant safe sleep practices with families and others in your circle of influence?

(no more confident) 1 2 3 4 5 6 7 8 9 (much more confident)

3. Comments on the session:

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