

Healthy Babies ARE WORTH THE WAIT™

TOOLKIT FEEDBACK FORM

Please copy and complete this form and mail or fax it to:

Kentucky Folic Acid Partnership Coordinator
Barren River District Health Department
PO Box 1157
Bowling Green, KY 42102-1157
Fax: 270-796-8946

Or, complete and submit the form online:
www.prematurityprevention.org

1. When will you use these materials? (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> First month received | <input type="checkbox"/> Within 3 months received |
| <input type="checkbox"/> Within year 2007 | <input type="checkbox"/> Not at all |

2. Where are you most likely to use these materials? (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Worksite | <input type="checkbox"/> Schools |
| <input type="checkbox"/> Hospitals/Clinics | <input type="checkbox"/> Community-wide |
| <input type="checkbox"/> Churches/Temples | <input type="checkbox"/> Statewide |
| <input type="checkbox"/> Business | <input type="checkbox"/> Radio/TV/Newspaper |
| <input type="checkbox"/> Other (write-in) _____ | |

3. Who is your target audience? (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Pregnant women | <input type="checkbox"/> General public |
| <input type="checkbox"/> Health care providers | <input type="checkbox"/> Women of childbearing age |
| <input type="checkbox"/> Groups at high risk for preterm birth | |

4. What are the most helpful components of the Toolkit? (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Introductory information | <input type="checkbox"/> Tips for Success |
| <input type="checkbox"/> PowerPoint presentation | <input type="checkbox"/> Activities |
| <input type="checkbox"/> Fact Sheets | <input type="checkbox"/> Personal Stories |
| <input type="checkbox"/> Resources | <input type="checkbox"/> Contacts |

5. Please rate the level of helpfulness of the Toolkit to present the Preterm Birth message and additional information.

- | | |
|---|---|
| <input type="checkbox"/> Not helpful | <input type="checkbox"/> Somewhat helpful |
| <input type="checkbox"/> Moderately helpful | <input type="checkbox"/> Very helpful |

6. Please rate your confidence in using the materials in the Toolkit.

- | | |
|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Not at all | <input type="checkbox"/> Very little |
| <input type="checkbox"/> Some | <input type="checkbox"/> Strong |
| <input type="checkbox"/> Very strong | |

7. How would you change the Toolkit to better assist you in presenting the Preterm Birth message? (Write in suggestions)
