

1. **Did the workshop meet your expectations?** *(Please check only one box.)*

Completely [] Partially [] Not at all []

Please explain:

2. **How relevant was the workshop to your organization or project's needs?** *(Please check only one box.)*

Very Relevant [] Somewhat Relevant [] Not Relevant []

Please explain:

3. **What was the greatest strength of the workshop?**

4. **What was the greatest weakness of the workshop?**

5. **How useful was the workshop for learning about promoting the adoption of WASH behaviours?**

Very useful [] Somewhat useful [] Not useful []

Please explain:

6. How would you rate the depth of information on these topics?

	Too Little	Enough	Too Much
Why WASH Matters	[]	[]	[]
The Benefits of WASH	[]	[]	[]
Factors that Influence Behaviour	[]	[]	[]
How Water gets Contaminated	[]	[]	[]
Household Water Treatment	[]	[]	[]
Sanitation	[]	[]	[]
Building a Basic Latrine <i>(optional)</i>	[]	[]	[]
Handwashing	[]	[]	[]
Food Hygiene <i>(optional)</i>	[]	[]	[]
Insects & Animals <i>(optional)</i>	[]	[]	[]
Menstrual Hygiene <i>(optional)</i>	[]	[]	[]
Gender and WASH	[]	[]	[]
Principles of a Household Visit	[]	[]	[]
The WASH Detective	[]	[]	[]
Influencing Behaviour Change	[]	[]	[]
Role Playing Household Visit	[]	[]	[]

7. Trainer 1: _____

How would you rate the following? *(Please check only one box for each statement.)*

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
a. The trainer was well prepared.	[]	[]	[]	[]	[]
b. The trainer was knowledgeable about the content.	[]	[]	[]	[]	[]
c. The trainer was approachable and friendly.	[]	[]	[]	[]	[]
d. The trainer encouraged an engaging, participatory and interactive learning environment.	[]	[]	[]	[]	[]
e. The trainer created an inclusive and respectful learning environment.	[]	[]	[]	[]	[]
f. Overall, I am satisfied with the trainer.	[]	[]	[]	[]	[]

Trainer 2: _____

How would you rate the following? *(Please check only one box for each statement.)*

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
a. The trainer was well prepared.	[]	[]	[]	[]	[]
b. The trainer was knowledgeable about the content.	[]	[]	[]	[]	[]
c. The trainer was approachable and friendly.	[]	[]	[]	[]	[]
d. The trainer encouraged an engaging, participatory and interactive learning environment.	[]	[]	[]	[]	[]

- e. The trainer created an inclusive and respectful learning environment. [] [] [] [] []
- f. Overall, I am satisfied with the trainer. [] [] [] [] []

8. As a result of the workshop, what actions do you plan to take? (Please check all that apply.)

- Share what you learned with others
 Apply what you learned in your work
 Train others on this topic
 Apply what you learned in your personal life
 Do nothing

Other:

9. What support do you need from CAWST to complete your action?

10. Additional comments or suggestions

11. What is your gender? (We ask this question to analyze the responses by gender and report appropriately to stakeholders and funders.)

- Woman [] Man [] Prefer not to say

Name (Optional): _____ Organization (Optional): _____