English

Post-Session Feedback Form

## Session Feedback Form: Capacity Building Programs for Mental Health Practitioners-ECHO NHM Mizoram

Thank you for attending this ECHO session! We appreciate your feedback on this brief survey. If you choose to participate, your input will improve our understanding of the impacts of ECHO sessions for participants. Before proceeding, please review the link below with the consent for responses to be used in research: https://echoindia.in/survey-consent.pdf

### Please fill the responses for the following questions.

**Q1. Consent for responses to be used in research:** *

- ◯ I agree to Project ECHO using my responses in their research project
- ◯ I do not agree; however, I do wish to leave feedback

**Q2. How likely are you to recommend this session to a colleague?** *

1 is "Not at all likely" & 10 is "Extremely likely"

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|---|---|---|---|---|---|---|---|---|
| Not at all likely | | | | | | | | | Extremely likely |

**Q3. Rate your knowledge of (or skill in) the topic before the session.** *

- ◯ Not at all knowledgeable
- ◯ Slightly knowledgeable
- ◯ Moderately knowledgeable
- ◯ Very knowledgeable
- ◯ Extremely knowledgeable

**Q4. Rate your knowledge of (or skill in) the topic after the session.** *

- ◯ Not at all knowledgeable
- ◯ Slightly knowledgeable

- Moderately knowledgeable
- Very knowledgeable
- Extremely knowledgeable

**Q5. Will you use what you learned in this session in your work?** *

- Definitely not
- Probably not
- Possibly
- Probably yes
- Definitely yes
- Not applicable

**Q6. Do you have any additional feedback or comments regarding the session?**

Enter your response

Submit