

PRE- AND POST-WORKSHOP EVALUATION

ABORTION ATTITUDE TRANSFORMATION: VALUES CLARIFICATION FOR HUMANITARIAN AUDIENCES

Workshop location: _____

Workshop date(s): _____

INSTRUCTIONS

Please answer the following questions as honestly as possible based on your current knowledge and beliefs. You may need to review the questions carefully as questions are both negatively and positively phrased. There is no need to include your name but PLEASE develop your confidential unique identifier in the section below **to help us match your pre- and post-survey responses.**

Develop your confidential unique identifier:

Complete the unique identifier to allow us to match your pre- and post-survey responses while maintaining your confidentiality. We will use these responses to evaluate the workshop and activities, but they will not be useful if we cannot match your pre-and post-survey responses.

	YOUR BIRTHDAY MONTH	YOUR NUMBER OF SISTERS	LAST 3 DIGITS OF YOUR MOBILE
<i>Example:</i>	<i>April</i>	<i>0</i>	<i>057</i>
Your information:			

Turn it in!

We could really use your help. We would love to be able to better evaluate these workshops and be able to tell others that VCAT works and would be useful to their organizations. To do this, we are collecting pre- and post-evaluation forms from around the globe. If you are able, please scan your pre- and post-evaluation forms from your workshop (they are anonymous) and email the document as an attachment to this address: humanitarianVCAT@ipas.org.

Thank you in advance for helping us make this a useful and valuable workshop for others.

INSTRUCTIONS

Please respond below based on your current beliefs and comfort levels. Please circle only **one response** for each question.

STATEMENT	STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE
I feel conflicted about abortion.	1	2	3	4	5
I believe my agency should provide safe abortion care to any woman or girl who requests it.	1	2	3	4	5
I feel that safe abortion care is an important medical service for reducing maternal mortality and morbidity.	1	2	3	4	5
I feel comfortable supporting the direct provision of safe abortion care in my work.	1	2	3	4	5
I do not feel comfortable talking about safe abortion care with my colleagues.	1	2	3	4	5
I believe a woman should be allowed to have an abortion if she is married and wants no more children.	1	2	3	4	5
I believe a woman should be allowed to have an abortion if she cannot afford to have the child.	1	2	3	4	5
I believe a woman should not be allowed to have an abortion if she had a previous abortion.	1	2	3	4	5
I believe abortion is morally wrong.	1	2	3	4	5
Access to safe abortion services is every girl's right.	1	2	3	4	5
I believe that a woman should always have a right to have an abortion in case of an unwanted pregnancy.	1	2	3	4	5
Survivors of sexual assault should have access to abortion.	1	2	3	4	5
A woman should have the right to decide for herself whether or not to have an abortion.	1	2	3	4	5
STATEMENT	STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE

I would not refer a patient for abortion under any circumstances.	1	2	3	4	5
Governments and humanitarian organizations should provide abortions as part of primary health care.	1	2	3	4	5
Abortion should only be available to married women.	1	2	3	4	5
Abortion should be available to girls who get pregnant so they can stay in school.	1	2	3	4	5
I do believe that abortion should be a part of essential maternal health care for women in acute emergencies.	1	2	3	4	5
I believe a married woman should have her husband's consent to have an abortion.	1	2	3	4	5
I feel challenged providing abortion to adolescents.	1	2	3	4	5
Health-care providers in conflict settings have a professional obligation to provide abortion to survivors of sexual assault.	1	2	3	4	5