

# Evaluation Contents

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**Answer Key**  
**Pre- and Post- Self-Assessment Questions**

<b>Module 1</b>  1. True 2. True 3. False 4. True 5. True	<b>Module 2</b>  1. False 2. False 3. False 4. True 5. True	<b>Module 3</b>  1. True 2. True 3. True 4. False 5. False
<b>Module 4</b>  1. True 2. True 3. False 4. True 5. True	<b>Module 5</b>  1. True 2. True 3. False 4. False 5. False	<b>Module 6</b>  1. True 2. False 3. True 4. True 5. True
<b>Module 7</b>  1. True 2. False 3. True 4. True 5. False		

**TO:** Teresa Guthrie, RN, MN **Date:** \_\_\_\_\_

**Fax:** 206-667-7792 **Number of Pages:** \_\_\_\_\_

**Please fax this form to Teresa Guthrie (Phone: 206-667-7593) after using Cancer 101 for training/education. If you are mailing completed evaluation forms, please send with this worksheet. The address is located on reverse side of this page.**



Dear Trainer: We need your help! As a Cancer 101 user, you are part of a very important educational initiative to educate American Indian and Alaska Native people about cancer. A strong feedback loop between our office and the users of the Cancer 101 curriculum is critical to the ongoing success of the program. This feedback loop will provide you with the opportunity to let us know how you are using the materials, how the curriculum can be strengthened to more closely meet your needs, and how we can provide you with the assistance and support you may want with your program planning. Your suggestions will enable us to modify the curriculum to suit the needs of your audiences, and to provide you with additional resource materials and/or training assistance. Thank you very much for your participation in Cancer 101!!



## Trainer Activity Report

*After using Cancer 101 for training/education, please fax this form to Teresa Guthrie at: 206-667-7792*

Trainer \_\_\_\_\_ Tribe \_\_\_\_\_

Date of training/activity \_\_\_\_\_ Training location \_\_\_\_\_

Number of participants \_\_\_\_\_

### Type of Activity

- Tribal staff training
- Patient/family education session
- Community Health Representative Training
- Group Presentation \_\_\_\_\_ support group
  - \_\_\_\_\_ women's group
  - \_\_\_\_\_ men's group
  - \_\_\_\_\_ student group
  - \_\_\_\_\_ other (please indicate group)

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### *Materials Used for My Activity*

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Module 1            | <input type="checkbox"/> powerpoint slides     | <input type="checkbox"/> pre/post self-assessment |
| <input type="checkbox"/> Module 2            | <input type="checkbox"/> powerpoint slides     | <input type="checkbox"/> pre/post self-assessment |
| <input type="checkbox"/> Module 3            | <input type="checkbox"/> powerpoint slides     | <input type="checkbox"/> pre/post self-assessment |
| <input type="checkbox"/> Module 4            | <input type="checkbox"/> powerpoint slides     | <input type="checkbox"/> pre/post self-assessment |
| <input type="checkbox"/> Module 5            | <input type="checkbox"/> powerpoint slides     | <input type="checkbox"/> pre/post self-assessment |
| <input type="checkbox"/> Module 6            | <input type="checkbox"/> powerpoint slides     | <input type="checkbox"/> pre/post self-assessment |
| <input type="checkbox"/> Module 7            | <input type="checkbox"/> powerpoint slides     | <input type="checkbox"/> pre/post self-assessment |
| <input type="checkbox"/> Workshop Evaluation | <input type="checkbox"/> Health Changes Intent |   |

If you did not use the pre/post self-assessment, why didn't you, or did you use them in some other way, i.e. as a discussion guide?

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Would you like additional assistance with planning/implementing training sessions or other educational activities? Please contact Teresa Guthrie for assistance (Phone: 206-667-7593).

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Would you like to be notified of any updates or changes to the Cancer 101 curriculum material? For example, updates to cancer screening guidelines.

- Yes. Please include me on a mailing list.     No. I do not wish to receive the updates.

***Note: It will strengthen our evaluation of the Cancer 101 curriculum if you can send us copies of the completed pre/post assessments, workshop evaluation, and health changes intent. This is optional. Please mail to Teresa Guthrie at the address below.***

Please fax this form to Teresa Guthrie at FAX: 206-667-7792 (Phone: 206-667-7593) after using Cancer 101 for training/education. If you are mailing completed evaluation forms, please send with this worksheet to: Teresa Guthrie, RN, MN

Cancer Information Service – Pacific Region  
Fred Hutchinson Cancer Research Center  
1100 Fairview Ave. N., J2 400  
P.O. Box 19024  
Seattle, WA 98109-1024



## Health Change Checklist Next Steps After Training!

*After this workshop using the Cancer 101 Curriculum, some health changes I intend to make are:*

- Share information about cancer issues in AI/AN communities with my family, community, and others.
- Share what I've learned about cancer and information about some of the treatments for cancer.
- Share information about support services available for people who are dealing with cancer.
- Offer my support to people who are dealing with cancer.
- Get regular physical exams which include screening for cancer.
- Pay attention to changes in my body that last more than two weeks (such as a lump in the breast or a cough that doesn't go away), and seek medical attention.
- Increase the amount of physical activity I get each day.
- Make changes to a healthier diet that includes a variety of fruits and vegetables and is lower in fat.
- Stop smoking and reserve the use of tobacco for traditional purposes.
- Limit alcohol consumption.
- Protect myself from sun exposure.
- Protect myself and my partner from sexually transmitted diseases.
- Other health changes I would like to make:

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## Workshop Evaluation

**Directions:** please take a few minutes to complete this evaluation. Your responses allow us (1) to evaluate the overall usefulness of the learning modules, and (2) to make any changes that you might recommend. Please circle the number corresponding to your answer and write any questions or comments below each question.

<b>Module 1</b>	<b>Cancer Among American Indians and Alaska Natives</b>	Strongly Disagree	Disagree	Don't Know/ Not Sure	Agree	Strongly Agree
<b>A</b>	Module 1 will add to my community's knowledge about <b>cancer as a health concern among American Indians and Alaska Natives.</b>	1	2	3	4	5
<b>B</b>	Module 1 will add to my community's knowledge about <b>how data contributes to your knowledge of cancer for American Indians and Alaska natives.</b>	1	2	3	4	5
<b>C</b>	Module 1 will add to my community's knowledge about <b>the poor survival for American Indians and Alaska Natives diagnosed with cancer and what could improve survival rates.</b>	1	2	3	4	5

Comments/Questions/What you would like to know about **cancer among American Indians and Alaska Natives** (Use additional paper or the space at the end of the evaluation, if needed.)

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<b>Module 2</b>	<b>What is Cancer?</b>	Strongly Disagree	Disagree	Don't Know/ Not Sure	Agree	Strongly Agree
<b>D</b>	Module 2 will add to my community's knowledge about <b>how cancer develops?</b>	1	2	3	4	5
<b>E</b>	Module 2 will add to my community's knowledge about <b>how data contributes to my knowledge of cancer for American Indians and Alaska Natives.</b>	1	2	3	4	5
<b>F</b>	Module 2 will add to my community's knowledge about <b>two types of tumors: benign and malignant.</b>	1	2	3	4	5

Comments/Questions/What you would like to know about **cancer among American Indians and Alaska Natives** (Use additional paper or the space at the end of the evaluation, if needed.)

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<b>Module 3</b>	<b>Cancer Screening and Early Detection</b>	Strongly Disagree	Disagree	Don't Know/ Not Sure	Agree	Strongly Agree
<b>G</b>	Module 3 will add to my community's knowledge about <b>the importance of early detection practices.</b>	1	2	3	4	5
<b>H</b>	Module 3 will add to my community's knowledge about <b>barriers that may be associated with practicing early detection.</b>	1	2	3	4	5

Comments/Questions/What you would like to know about **cancer among American Indians and Alaska Natives** (Use additional paper or the space at the end of the evaluation, if needed.)

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<b>Module 4</b>	<b><i>Cancer Diagnosis and Staging</i></b>	Strongly Disagree	Disagree	Don't Know/ Not Sure	Agree	Strongly Agree
<b>I</b>	Module 4 will add to my community's knowledge about <b>how cancer is diagnosed.</b>	1	2	3	4	5
<b>J</b>	Module 4 will add to my community's knowledge about <b>how the stages of cancer are determined.</b>	1	2	3	4	5
<b>K</b>	Module 4 will add to my community's knowledge about <b>specific terms such as biopsy, differentiation and staging.</b>	1	2	3	4	5

Comments/Questions/What you would like to know about **cancer among American Indians and Alaska Natives** (Use additional paper or the space at the end of the evaluation, if needed.)

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<b>Module 5</b>	<b><i>Cancer Risk Factors and Risk Reduction</i></b>	Strongly Disagree	Disagree	Don't Know/ Not Sure	Agree	Strongly Agree
<b>L</b>	Module 5 will add to my community's knowledge about <b>cancer risk factors.</b>	1	2	3	4	5
<b>M</b>	Module 5 will add to my community's knowledge about <b>ways to take personal action to reduce risk for cancer.</b>	1	2	3	4	5

Comments/Questions/What you would like to know about **cancer among American Indians and Alaska Natives** (Use additional paper or the space at the end of the evaluation, if needed.)

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**CANCER 101**

<b>Module 6</b>	<b>Basics of Cancer Treatment</b>	Strongly Disagree	Disagree	Don't Know/ Not Sure	Agree	Strongly Agree
<b>N</b>	Module 6 will add to my community's knowledge about <b>how cancer is treated and the potential side effects of cancer treatment.</b>	1	2	3	4	5
<b>O</b>	Module 6 will add to my community's knowledge about <b>traditional and Western approaches to cancer treatment.</b>	1	2	3	4	5

Comments/Questions/What you would like to know about **cancer among American Indians and Alaska Natives** (Use additional paper or the space at the end of the evaluation, if needed.)

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<b>Module 7</b>	<b>Support for Patients and Caregivers</b>	Strongly Disagree	Disagree	Don't Know/ Not Sure	Agree	Strongly Agree
<b>P</b>	Module 7 will add to my community's knowledge about <b>providing support for family (and community) caregivers for loved ones who have been diagnosed with cancer.</b>	1	2	3	4	5
<b>Q</b>	Module 7 will add to my community's knowledge about <b>how to bring a sense of balance back into their lives after cancer treatment.</b>	1	2	3	4	5

Comments/Questions/What you would like to know about **cancer among American Indians and Alaska Natives** (Use additional paper or the space at the end of the evaluation, if needed.)

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	<i>Needs Met</i>		<i>Needs Unmet</i>		
1. The training met the overall objectives. Comments:	1	2	3	4	5
2. The training met my needs. Comments:	1	2	3	4	5
3. There was enough time for discussion. Comments:	1	2	3	4	5
4. There was enough time for reflection. Comments:	1	2	3	4	5
5. The hand out materials were helpful. Comments:	1	2	3	4	5
6. What aspects of this training do you think will be <b>most</b> helpful when you plan your own trainings?					
7. What aspects of this training were <b>least</b> helpful?					
8. What are your plans for use of the materials when you get back to your community?					
9. Would you like any additional assistance with planning/implementing training session (resource materials or technical assistance)?					
10. Was the training meeting room comfortable?					
11. How were the meals and refreshments?					

