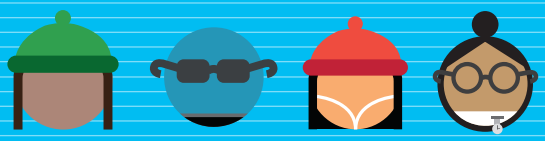
WORKER TOOL



EVALUATION SHEET

We want to know what you think about the sexual health activities we did today. Please click the answer that is closest to how you feel.

	DEFINITELY NOT	NOT REALLY	NOT SURE	A BIT	A LOT
I enjoyed this activity					
This was a good way to learn about sexual health					
I learned something new about sexual health					
After this activity I feel more confident that I can manage sexual health issues					
After this activity I want to find out more about sexual health					
I would feel comfortable getting a sexual health check					
I will talk to other people about the topics we covered today					

We want to know what you learned today. Please click the answer that is closest to what you think.

	YES	NOT SURE	NO
I know I can use a condom correctly			
I know where I can get an STI test			
I know where I can get condoms			
I know what a dam is and how barriers protect my sexual health			
I know how to use the Play Safe website			
I know I could talk about condom use with sexual partners			

Please write a comment in the spaces below

WHAT DID YOU LIKE ABOUT THE ACTIVITY?

WHAT WOULD YOU CHANGE ABOUT THE ACTIVITY?