



## BLO 2017 Host Feedback

### The Big Latch On 2017 Host Feedback

#### Host Evaluation Survey

**Women's Health Action invites you to complete this form to help us evaluate the Big Latch On. Your feedback is really important to us as the information that you provide will be used for planning & evaluation. All the information that we collect will be used in a non- identifiable way. Thank you and we appreciate your support.**

1. Name of host

2. Name of organisation (if applicable)

3. Name of venue & venue registration number

4. Are there any changes you would like in terms of the support provided from Women's Health Action? (Choose all that apply)

- More communication
- Less communication
- More promotional material (eg. posters, postcards, media release etc.)
- Promotional material available earlier
- Venue registrations opening earlier
- Clearer guidelines around organising the event/sponsorship
- Other (please comment)

5. How did you promote your event? (Choose all that apply)

- Print media (flyers, posters)
- Newspapers/magazines
- Facebook
- Other social media (Twitter, Instagram)
- Word of mouth
- Radio
- Email
- Own/organisation's website
- Other website
- Telephone
- Mobile (text)

Other (please specify)

6. Do you think it's important to have events such as the Big Latch On in New Zealand? Why/why not?

7. How likely are you to participate in next year's event?

- Very likely
- Likely
- Unsure
- Unlikely
- Very unlikely

8. How do you think the Big Latch On affected women's awareness of, and connection to, breastfeeding support in your community?

- Positively
- No change
- Negatively
- Unsure

\* 9. Please add any other comments:

10. If you would like to receive email updates from Women's Health Action about events and topics that may be of interest, please enter your details below:

|               |                      |
|---------------|----------------------|
| Name          | <input type="text"/> |
| Email address | <input type="text"/> |