

Coalition Survey Pretest

This survey explores your understanding and views about bone health as well as your perceptions about the needs of your team in the coming year. You will note that we use the term “team” to address your site’s coalition throughout the survey. Please read each question carefully and provide your honest feedback. The survey results will be used by the Office on Women’s Health and Hager Sharp to tailor technical and training services to the needs of you and your team through the duration of the pilot project. We look forward to your feedback and suggestions. The survey should take between 15-20 minutes to complete. Thank you in advance for your time.

The first set of items asks about your team and your role on your team.

- 1) Last 4 digits of your HOME phone number: ____ ____ ____ ____
- 2) What is your gender?
 - Male
 - Female
- 3) How old are you?
 - 18-24 years
 - 25-29 years
 - 30-39 years
 - 40-49 years
 - 50-59 years
 - 60+ years
- 4) Are you Hispanic or Latino?
 - No
 - Yes
- 5) What is your race? (Choose one or more.)
 - Black/African American
 - White
 - American Indian or Alaska Native
 - Asian
 - Native Hawaiian or Pacific Islander
- 6) What team do you represent?
 - City 1
 - City 2
 - City 3
- 7) What is your role on your team? (Choose one or more)
 - Site Coordinator
 - Team Leader
 - Team Member
 - Body Works Trainer
 - Other: _____

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990- . The time required to complete this information collection is estimated to average (hours)(minutes) per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 537-H, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

8) What stakeholder group do you primarily represent? (Choose one.)

- Community Organization
- Health Professional
- Nutrition Professional
- Physical Education Professional
- School Administrator
- Teacher
- Business/Industry
- Student
- Parent
- Other: _____

9) Prior to working on this project, in which of the following areas did you have experience working on projects or with partnerships? (Choose one or more.)

- Childhood obesity prevention
- Nutrition
- Physical activity
- Bone health
- None of the above

10) Have members of your team worked together on previous projects or partnerships?

- No, not at all
- Yes, some have worked together before
- Yes, most have worked together before
- Yes, all have worked together before
- Not sure

11) How often will your team...	Weekly	Bi-weekly	Monthly	Quarterly	Never	Not Sure
a. Meet in person?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Conduct conference calls?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Conduct web meetings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This set of questions assesses what you currently know about bone health.

- 12) By age ____, females have built most of their bone mass (how solid and strong bones are from the inside) for the rest of their lives.
 5 yrs 13 yrs 18 yrs 30 yrs 55 yrs
- 13) How many minutes of DAILY physical activity are recommended for pre-teen and adolescent girls to stay healthy?
 20 minutes 30 minutes 45 minutes 60 minutes 90 minutes
- 14) How many days per week of bone-strengthening activity are recommended for pre-teen and adolescent girls to build strong bones?
 1 Day 2 Days 3 Days 4 Days 5 Days
- 15) How many minutes of DAILY physical activity are recommended for adults to be active and stay healthy?
 20 minutes 30 minutes 45 minutes 60 minutes 90 minutes
- 16) How many milligrams (mg) of calcium are recommended DAILY for pre-teen and adolescent girls to build strong bones and stay healthy?
 200 mg 500 mg 750 mg 900 mg 1300 mg
- 17) How many international units (IU) of vitamin D are recommended DAILY for pre-teen and adolescent girls to build strong bones and stay healthy?
 100 IU 200 IU 300 IU 400 IU 500 IU

The next set of items examines your views about bone health and your capacity to help your team in current or future efforts to plan, implement and evaluate a variety of project activities.

18) Please check how important you think it is to help girls and their parents to:	Not At All Important	A Little Important	Quite Important	Very Important
d. Better understand how to build strong bones to prevent osteoporosis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Identify foods and drinks that are high in calcium and Vitamin D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Better understand the role of physical activity in building strong, healthy bones	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Choose foods and drinks that are high in calcium and Vitamin D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Get the recommended amount of physical activity everyday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19) Please check how confident you feel helping girls and their parents to:	Not At All Confident	A Little Confident	Quite Confident	Very Confident
a. Better understand how to build strong bones to prevent osteoporosis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Identify foods and drinks that are high in calcium and Vitamin D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Better understand the role of physical activity in building strong, healthy bones	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Choose foods and drinks that are high in calcium and Vitamin D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Get the recommended amount of physical activity everyday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20) Please check how confident you feel helping your team with....	Not At All Confident	Not Very Confident	Quite Confident	Very Confident
a. Communication and Outreach planning efforts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Communication and Outreach implementation efforts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Communication and Outreach evaluation efforts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Body Works planning efforts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Body Works implementation efforts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Body Works evaluation efforts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21) Below is a list of technical assistance and training services that Hager Sharp could provide to teams. For each, please indicate how valuable that service would be to your team.	Not at All Valuable	Extremely Valuable	Extremely Valuable	Don't Know
a. Understanding Bone Health: Background Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Action Planning Technical Assistance: General	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Evaluation Technical Assistance: General	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Marketing/Communication: Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Marketing/Communication: Implementation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Marketing/Communication: Evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Outreach: Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Outreach: Implementation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Outreach: Evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Body Works: Planning & Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Body Works: Recruitment & Retention of Participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Body Works: Implementation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Body Works: Evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22) Below is a list of resources that Hager Sharp could provide to teams. For each, please indicate how valuable that resource would be to your team.	Not at All Valuable	Extremely Valuable	Extremely Valuable	Don't Know
a. Funding Alerts/Opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Listserv	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Team E-Newsletter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Partnership/Coalition Building Referrals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Best Bones Forever Identity Materials (logo, letterhead)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Best Bones Forever Educational Materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Pilot Site Web Site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Media kit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Partner Toolkits (AFHK, NASN, NOF)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>