

UNITED STATES
DEPARTMENT OF VETERANS AFFAIRS



This survey is about the Department of Veterans Affairs Office of Public Health newsletters. We are interested in improving our services. As part of this process, this survey collects information on how you receive our newsletters and the usefulness of their content. Your input is very important! We want provide the right information in the right format.

Your participation is voluntary, and you can refuse to answer any questions. All information obtained will be kept confidential. The answers you give us will be used to improve the way we prepare information about deployment-related exposures for Veterans. The survey should take 5 minutes.

Thank you for your participation!

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The following questions concern your use of newsletter(s) that provide information on deployment-related exposures.

1. In addition to this newsletter, please indicate what other VA newsletters you currently receive by mail?
(select all that apply)

- € Agent Orange Review
- € Gulf War Veterans' Illnesses
- € Operation Enduring Freedom/Operation Iraqi Freedom (OEF/OIF) Hazardous Exposures
- € Ionizing Radiation Review
- € I do *not* receive any VA newsletters.

2. In addition to receiving this mailed newsletter, how else do you access *hardcopy* newsletters(s)
(select all that apply)?

- € Print Newsletter at a Veterans Affairs Medical Center
- € Print Newsletter from Veterans Service Organization (VSO)
- € Download & Print from VA website

€ I do *not* access hardcopy newsletters in any other ways

3. What do you like *most* about these newsletter(s)?
(select all that apply)

- € Information about healthcare benefits
- € Information on benefits for health conditions recognized for presumptive service connection
- € Information about other benefits (mortgage, education)
- € General information about deployment related health issues
- € Specific health concern
- € Specific deployment-related exposure
- € Other: _____

4. Overall, how useful do you find the information in these newsletters?

(1 to 4 where 1= Not Useful and 4 = Very Useful)

- € 4 (Very Useful)
- € 3
- € 2
- € 1 (Not Useful). What additional information would you like to receive?

5. How would you *prefer* to receive these newsletter(s)?
(select all that apply)

- € Mail
- € Veterans Affairs Medical Center
- € Veterans Service Organization (VSO)
- € VA Website
- € Notice by Email
- € Notice by Social media sites (Facebook, Twitter)
- € Other: _____

6. Imagine that you had a strong need to get information about deployment-related exposures. Where would you go first?

(Please indicate your first 3 choices with 1, 2, 3)

- € VA Brochures, Pamphlets, etc
- € Non-VA Brochures, Pamphlets, etc

- € Family/Friend/Co-worker
- € VA Health Care Provider
- € Non-VA Health Care Provider

- € VA Website
- € Other Websites
- € Library
- € Magazines

- Newspapers
- Radio
- Telephone Information Number (1-800 NUMBER)
- Other: _____

7. Overall, how *confident* are you in the information about deployment-related exposures that is provided by the VA?

- Very confident
- Somewhat confident
- Slightly confident
- Not confident at all

8. How much would you trust the information about deployment-related exposures from the following sources?

	A Lot	Some	A Little	Not at All
Internet -VA website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet - non-VA websites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VA Newsletters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family or friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newspapers/Magazines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radio/Television	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Based on your overall search for information on deployment-related exposures, indicate how much you agree or disagree with the following statements.

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree
You wanted more information, but did not know where to find it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It took a lot of effort to get the information you needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
You did not have the time to get all the information you needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
You felt frustrated during your search for the information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
You were concerned about the quality of the information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The information you found was too hard to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

understand.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
You were satisfied with the information you found.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Have you ever visited a VA Internet web site to learn specifically about deployment related exposures?

- No
- Yes

10b. If Yes, overall, how *useful* was the deployment-related exposure information you got from the VA website?

- Very useful
- Somewhat useful
- A little useful
- Not at all useful

The following questions are about you.

11. Please choose the category that best describes you:

- Veteran
- Family member of a Veteran
- Caregiver of a Veteran
- Other: _____

12. To which conflict(s) have you deployed (*mark all that apply*)?

- World War II
- Korean War
- Vietnam
- Gulf War I
- Operation Enduring Freedom
- Operation Iraqi Freedom
- Other: _____

13. What is your gender?

- Male
- Female

14. How old are you (years)?

- 18-21
- 22-25
- 26-30
- 31-40
- 41-50
- 51-60
- 61-65
- 65+