Form Approved OMB Control No.: 0920-1154 Expiration date: 03/31/2026

| Record ID  |                   |               |                   |          |                   |
|--|-------------------|---------------|-------------------|----------|-------------------|
| Language:  |                   |               |                   |          |                   |
| Date:  |                   |               | Today D-M-        | -Y       |                   |
| Ministry/Organization Affiliation:   |                   |               |                   |          |                   |
| Sector:  |                   |               |                   | ~        |                   |
| Specify Other:   |                   |               |                   |          |                   |
| Country:   |                   |               |                   | $\neg$   |                   |
| Specify Other:   |                   |               |                   |          |                   |
| Indicate your agreement with the following   | ng statements abo | out the OHZDP | Facilitator Train | ing:     |                   |
|  | Strongly Agree    | Agree         | Neutral           | Disagree | Strongly Disagree |
| My technical knowledge of a One Health<br>approach including to address zoonotic<br>diseases improved with this training<br>* must provide value | 0                 | 0             | 0                 | 0        | O                 |
| I have a solid understanding of the OHZDP methodology and process that was used in the training * must provide value                             | 0                 | 0             | 0                 | 0        | reset             |
| What I learned will be useful to strengthen<br>One Health work within my<br>ministry/organization<br>* must provide value                        | 0                 | 0             | 0                 | 0        | 0                 |
| What I learned will be useful to strengthen<br>One Health work <b>across</b> One Health<br>partners in my <b>country</b><br>* must provide value | 0                 | 0             | 0                 | 0        | reset             |
| What I learned will be useful to strengthen<br>One Health work across One Health<br>partners in my region<br>* must provide value                | 0                 | 0             | 0                 | 0        | reset             |
| I am interested in being involved in future<br>One Health activities in my <b>country</b><br>* must provide value                                | 0                 | 0             | 0                 | 0        | 0                 |
| I am interested in being involved in future<br>One Health activities in my <b>region</b><br>* must provide value                                 | 0                 | 0             | 0                 | 0        | reset             |

## Language choices, Sector choices, Country Choices

| en, English es, Español fr, Français po, Portuguese uk, українська мова en, English 1, Public Health 2, Agriculture/Livestock Health gr, Français po, Portuguese uk, українська мова 1, Public Health BZ, Belize KH, Cambodia LA, Laos HN, Honduras BZ, Belize LA, Laos HN, Honduras LA, Laos | Choices (one choice per line)                                | Choices (one choice per line)  | Choices (one choice per line)   | Choices (one choice per line)   | Choices (one choice per line) PH, Philippines   |
|---|--|--|---|---|---|
|   | en, English<br>es, Español<br>fr, Français<br>po, Portuguese | Public Health     Agriculture/Livestock Health     Wildlife Health     Environment     Food Safety/Systems | AR, Argentina<br>BZ, Belize<br>KH, Cambodia<br>CL, Chile<br>CO, Colombia<br>EC, Ecuador | HN, Honduras ID, Indonesia LA, Laos MX, Mexico PG, Papa New Guinea PY, Paraguay | SG, Singapore<br>SL, Sierra Leone<br>TH, Thailand<br>UA, Ukraine<br>VN, Vietnam<br>ZA, Zambia |

Public reporting burden of this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB Control Number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30333; ATTN: PRA 0920-1154

| I feel prepared to use what I learned today<br>to facilitate future OHZDP workshops<br>* must provide value                              | 0 | 0 | 0 | 0 | reset |
|--|---|---|---|---|-------|
| I made professional connections during the training that will support One Health collaboration in my <b>country</b> * must provide value | 0 | 0 | 0 | 0 | reset |
| I made professional connections during the training that will support One Health collaboration in my <b>region</b> * must provide value  | 0 | 0 | 0 | 0 | reset |
| I plan to keep in touch with to new One<br>Health partners that I met during the<br>training<br>* must provide value                     | 0 | 0 | 0 | 0 | reset |
| I gained an increased understanding of the role of different sectors during this training *must provide value                            | 0 | 0 | 0 | 0 | reset |
| I think the trainers did a good job of leading the training * must provide value   | 0 | 0 | 0 | 0 | reset |
| I feel that I had enough instruction<br>throughout the training<br>* must provide value  | 0 | 0 | 0 | 0 | reset |
| The length of the training was sufficient and appropriate *must provide value  | 0 | 0 | 0 | 0 | reset |
| The training was well-formatted and engaging * must provide value  | 0 | 0 | 0 | 0 | reset |
| Distributed printed materials were appropriate and informative * must provide value  | 0 | 0 | 0 | 0 | reset |
| The venue was conducive for conducting a professional training * must provide value  | 0 | 0 | 0 | 0 | reset |
|  |   |   |   |   |       |

| I made a professional connection with a co<br>following sector(s)<br>(Select all responses that apply)  Have you worked with the represented mi<br>from your country before the training? |                    | Health Agricultu Wildlife Environr Other {f |                           |          | reset      |
|---|--------------------|---|---------------------------|----------|------------|
| In what ways, if at all, do you hope to work with your colleagues from other ministries/sectors in the future?  |                    |   |                           |          | Everand    |
|   |                    | no personal info                            | ormation should be entere | d here   | Expand     |
| Did you know your colleagues from the other represented ministries/sectors from your country before the training?   |                    | ○ Yes<br>○ No                               |                           |          | reset      |
| How prepared do you feel to facilitate each   | h of the following | aspects of an                               | OHZDP workshop            | :        |            |
|   | Extremely          | Very  | Moderately                | Slightly | Not at All |
| Identify core planning team members,<br>necessary resources, and logistics of the<br>workshop   | 0                  | 0   | 0                         | 0        | reset      |
| Generate an initial list of zoonotic diseases of greatest concern to focus on during the OHZDP workshop   | 0                  | 0   | 0                         | 0        | reset      |
| Develop a literature review of zoonotic diseases of greatest concern  | 0                  | 0   | 0                         | 0        | reset      |
| Identify the right workshop participants from human, animal, and environmental health sectors and other relevant partners   | 0                  | 0   | 0                         | 0        | reset      |
| Develop five criteria and matching categorical questions  | 0                  | 0   | 0                         | 0        | reset      |
| Prioritize zoonotic diseases  | 0                  | 0   | 0                         | 0        | 0          |
| Develop next steps and action plans for One<br>Health engagement  | 0                  | 0   | 0                         | 0        | reset      |

| I made a professional connection with a co<br>following sector(s)<br>(Select all responses that apply)  Have you worked with the represented mi<br>from your country before the training? |                    | Health Agricultu Wildlife Environr Other {f |                           |          | reset      |
|---|--------------------|---|---------------------------|----------|------------|
| In what ways, if at all, do you hope to work with your colleagues from other ministries/sectors in the future?  |                    |   |                           |          | Everand    |
|   |                    | no personal info                            | ormation should be entere | d here   | Expand     |
| Did you know your colleagues from the other represented ministries/sectors from your country before the training?   |                    | ○ Yes<br>○ No                               |                           |          | reset      |
| How prepared do you feel to facilitate each   | h of the following | aspects of an                               | OHZDP workshop            | :        |            |
|   | Extremely          | Very  | Moderately                | Slightly | Not at All |
| Identify core planning team members,<br>necessary resources, and logistics of the<br>workshop   | 0                  | 0   | 0                         | 0        | reset      |
| Generate an initial list of zoonotic diseases of greatest concern to focus on during the OHZDP workshop   | 0                  | 0   | 0                         | 0        | reset      |
| Develop a literature review of zoonotic diseases of greatest concern  | 0                  | 0   | 0                         | 0        | reset      |
| Identify the right workshop participants from human, animal, and environmental health sectors and other relevant partners   | 0                  | 0   | 0                         | 0        | reset      |
| Develop five criteria and matching categorical questions  | 0                  | 0   | 0                         | 0        | reset      |
| Prioritize zoonotic diseases  | 0                  | 0   | 0                         | 0        | 0          |
| Develop next steps and action plans for One<br>Health engagement  | 0                  | 0   | 0                         | 0        | reset      |