

1. Please fill in the boxes to give us your view of the Surviving Crying materials. All individual opinions will be kept anonymous.

Surviving Crying Materials	Which materials did you use? (please tick all materials used)	How useful were they: 3 = Very useful 2= A bit useful 1= No opinion 0= not useful	This material should be included routinely in the NHS: 3= Strongly agree 2 = Agree 1 = No opinion 0 = No
Website: accessed by computer or tablet			
Website: accessed on your phone			
Face to face sessions with the study practitioner			
Phone conversations with the study practitioner			
Internet discussions with the study practitioner			
Printed materials			

	Very Successful	Successful	Adequate	Unsuccessful	Very Unsuccessful
2. How successful were the Surviving Crying materials as a whole in meeting your needs?					

3. Please comment below to tell us how the materials did, or did not, meet your needs:

4. If you accessed the Surviving Crying website, please give us your opinion of it below:

1. HOW ATTRACTIVE DID YOU THINK THE WEBSITE WAS?

Very Attractive	Attractive	Adequate	Unattractive	Very Unattractive

2. HOW CLEAR WAS THE INFORMATION?

(Could you understand it? Was it well-presented?)

Very Clear	Clear	Adequate	Unclear	Very Unclear

3. WAS THE INFORMATION HELPFUL AND RELEVANT?

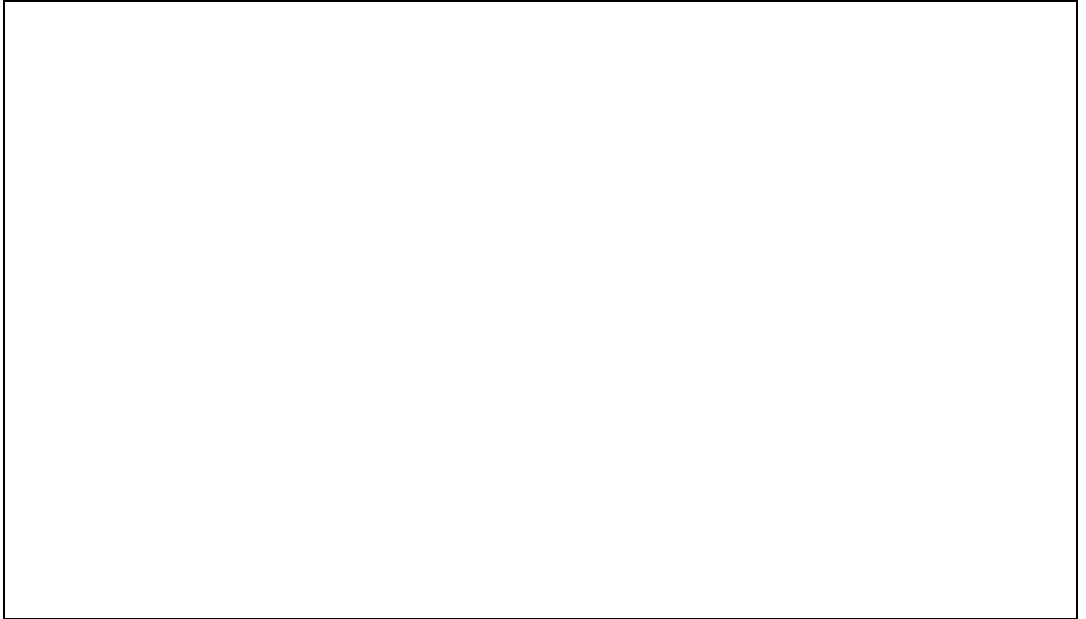
(Was this helpful when your baby was crying excessively?)

Very Helpful	Helpful	Adequate	Unhelpful	Very Unhelpful


4. WHAT WERE THE STRENGTHS AND WEAKNESSES OF THE WEBSITE?

	Very Strong	Strong	Adequate	Weak	Very Weak	n/a
It gave practical suggestions						
It gave reassurance						
I felt I could trust what it said						
It gave other parents' experiences and ideas						
It gave expert opinion and advice						
The information was aimed at both parents						
The use of videos						
The materials were easy to access when you needed them						
Other – please explain						

5. WAS THERE ANYTHING ELSE ABOUT THE WEBSITE YOU PARTICULARLY LIKED? (please describe what this was):



6. WAS THERE ANYTHING ABOUT THE WEBSITE THAT COULD BE IMPROVED?



5. If you took part in the practitioner-delivered sessions please give us your opinion of them below:

a. HOW CLEAR WAS THE INFORMATION PROVIDED IN THESE SESSIONS?

(Could you understand it? Was it well-presented?)

Very Clear	Clear	Adequate	Unclear	Very Unclear

b. WAS THE INFORMATION HELPFUL AND RELEVANT?

(Did you find this helpful when your baby was crying excessively?)

Very Helpful	Helpful	Adequate	Unhelpful	Very Unhelpful

c. WHAT WERE THE STRENGTHS AND WEAKNESSES OF THESE SESSIONS ?

	Very Strong	Strong	Adequate	Weak	Very Weak	n/a
They provided practical suggestions						
They provided reassurance						
They presented expert advice						
I felt I could trust what the practitioner said						
The information was helpful for both parents						
The sessions were held at convenient times						
The sessions were held in a convenient place						
Other – please explain						

d. WAS THERE ANYTHING ELSE ABOUT THE PRACTITIONER SESSIONS YOU PARTICULARLY LIKED? (please describe what this was):

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e. WAS THERE ANYTHING ABOUT THESE SESSIONS THAT COULD BE IMPROVED? (please tick boxes or write below to tell us what could be improved)

More 1-to-1 contact	
More small group sessions	
More telephone contact	
More internet (e-mail or social media) contact	
More sessions	
Sessions should be longer	
The sessions need additional materials (Please write what should be included)	
The session contents did not meet my needs (Please write what should be changed)	
Other (please write what needs to be changed)	

6. If you looked at the Surviving Crying booklet please give us your opinion of it below:

a. HOW ATTRACTIVE DID YOU THINK THE BOOKLET WAS?

Very Attractive	Attractive	Adequate	Unattractive	Very Unattractive

b. HOW CLEAR WAS THE INFORMATION IN THE BOOKLET?

(Could you understand it? Was it well-presented?)

Very Clear	Clear	Adequate	Unclear	Very Unclear

c. WAS THE INFORMATION HELPFUL AND RELEVANT?


(Was this helpful when your baby was crying excessively?)

Very Helpful	Helpful	Adequate	Unhelpful	Very Unhelpful

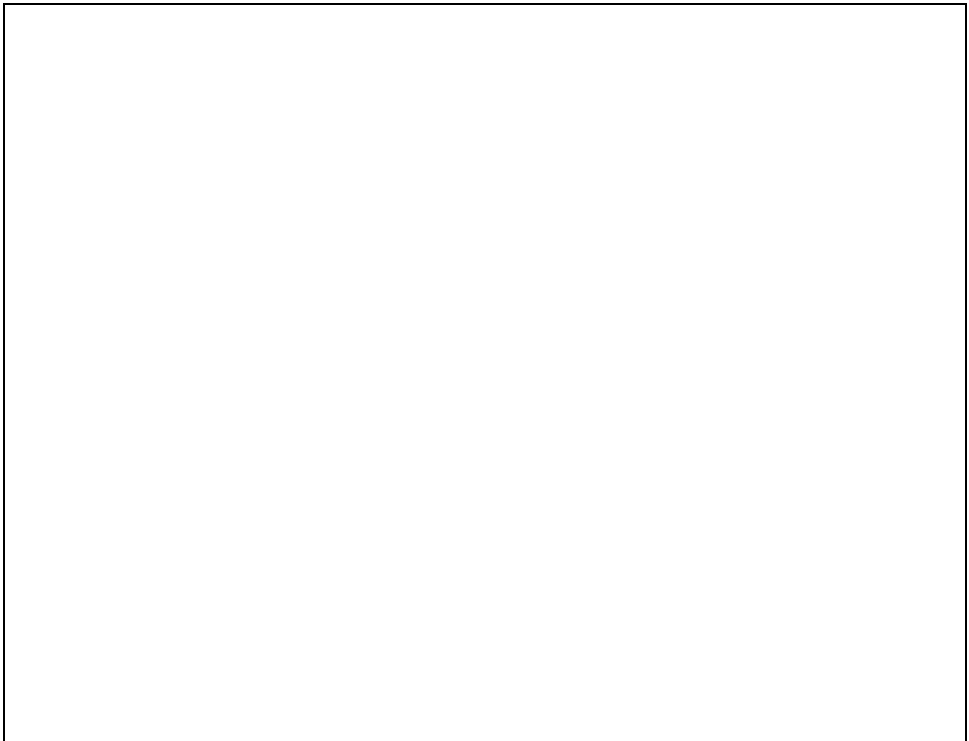
d. WHAT WERE THE STRENGTHS AND WEAKNESSES OF THE BOOKLET?

	Very Strong	Strong	Adequate	Weak	Very Weak	n/a
It gave practical suggestions						
It gave reassurance						
I felt I could trust what it said						
It gave other parents' experiences and ideas						
It gave expert opinion and advice						
The information was aimed at both parents						
The booklet materials were easy to access when you needed them						
Other – please explain						

7. WAS THERE ANYTHING ELSE ABOUT THE BOOKLET YOU PARTICULARLY LIKED? (please describe what this was):



8. WAS THERE ANYTHING ABOUT THE BOOKLET THAT COULD BE IMPROVED?



Thank you for providing this information!

2.2 How long did it take to travel to each session?

Sessions	Time taken to travel to the session (in minute)
1	
2	
3	
4	
5	

2.3. How far did you travel to the session, in miles (if unsure, please enter enough information to allow us to calculate this)?

Sessions	How far travelled to the session (in miles)
1	
2	
3	
4	
5	

2.4 If you used public transport or travelled by taxi, what was the cost of the one-way fare?

Sessions	Cost of a one-way fare (in £)
1	
2	
3	
4	
5	

2.5 If you came by private car, how much was paid in car park fees?

Sessions	Car park fees (in £)
1	
2	
3	
4	
5	

2.6. What would you have been doing as your main activity if you did not attend the sessions?
(researcher ticks one):

Looking after children	Paid employment	Housework	Looking after relatives	Study	Sport or Leisure activities	Other (please Describe)

2.7 If you are in paid employment, what arrangements did you make to take time off work?

Sessions	Not in paid employment	Paid absence from work	Unpaid absence from work	Will make the time up	Came to sessions outside work time	On maternity / paternity leave	Took holiday	Other arrangements (please describe)
1								
2								
3								
4								
5								

2.8. Did you pay someone to look after your baby, or any other children or dependents (please tick one)?

YES _____ NO _____ Not Applicable _____

If yes, how much did it cost in total across the sessions? £ _____

OR, did someone take time off work to look after them (please tick one)? YES _____ NO _____

3. FINAL QUESTION FOR ALL PARTICIPANTS:

3.1. At the end of the study, we will be preparing a summary of the findings. Would you like to receive this?

_____ Yes

_____ No.

NOTE TO RESEARCHER: please check contact details & add new e-mail address or any other contact changes below:

Thank you for answering these questions.