

Pre-course survey

Do you live in Nigeria?

Yes

No

Do you currently work in a primary health facility in Kano or Ogun State that is part of the Nigeria Hypertension Control Initiative?

Yes

No

Do you currently work in a primary health facility in Abuja that is part of the Hypertension Treatment in Nigeria Program?

Yes

No

What is the highest level of school/education you have completed?

Primary

Secondary

Post-secondary certificate course

Ordinary national diploma

Higher national diploma

Bachelor's degree

Master's degree

Doctoral degree (Ph.D.)

Have you completed training for any of the following positions? (select all that apply)

Junior Community Health Extension Worker

Community Health Extension Worker

Community Health Officer

Nurse

Midwife

Doctor or Medical Officer

Degree (bachelor's or above) in microbiology or biomedical sciences

None of the above

Do you perform any of the following tasks? (select all that apply)

Measure blood pressure

Prescribe antihypertensive medications

Educate patients about lifestyle changes for hypertension

Supervise health workers who provide hypertension care

None of the above

What type of device are you using to access this training?

Smartphone or other mobile device

Laptop or desktop computer

Tablet computer

Did your supervisor or the leadership of your health facility ask you to take this course?

Yes

No

End-of-course survey

How likely is it that you would recommend this training to a friend or colleague?

10 – Extremely likely

9

8

7

6

5

4

3

2

1

0 – Not at all likely

I enjoyed this training.

Strongly agree

Agree

Neutral

Disagree

Strongly disagree

This training was relevant to my work.

Strongly agree

Agree

Neutral

Disagree

Strongly disagree

What was the **best** part of this training?

[Open response]

What is **one way** in which this training could be improved?

[Open response]