

PROJECT "FIRE" PRE SEMINAR EVALUATION

DATE \_\_\_\_\_

HOME HEALTH SEMINAR SS\_\_ \_ \_ \_ DB \_\_ \_ \_ \_

(1) HAVE YOU ATTENDED A HOME HEALTH SEMINAR BEFORE TODAY?

YES \_\_\_\_\_ NO \_\_\_\_\_

(2) HOW IMPORTANT IS SAFER SEX TO YOU ?

- A. NOT VERY IMPORTANT
- B. NOT IMPORTANT
- C. SOMEWHAT IMPORTANT
- D. VERY IMPORTANT

(3) WHAT BEHAVIORS WOULD PUT YOU AT RISK FOR HIV/AIDS ?

SELECT ALL THAT APPLY

- A. HAVING MANY SEXUAL PARTNERS
- B. SOMETIMES USING CONDOMS /DENTAL DAMS/LATEX BARRIERS
- C. HAVING SAFER SEX ALL THE TIME/EVERY TIME
- D. SHARING CLEAN NEEDLES WITH STRANGERS
- E. HAVING SEX MEN AND WOMEN
- F. OTHERS (SPECIFY)

(4) HOW DO YOU GET INFORMATION ON HIV/AIDS ?

SELECT ALL THAT APPLY

- |                       |                   |
|-----------------------|-------------------|
| A. TELEVISION         | G. MEDICAL OFFICE |
| B. RADIO              | H. CHURCH         |
| C. NEWSPAPER          | I. STREETS        |
| D. FRIENDS            | J. HIV + PEOPLE.  |
| E. AIDS HOT LINE      | K. LITERATURE     |
| F. NEWARK COMM HEALTH | M. PROJECT FIRE   |

(5) HOW HELPFUL DO YOU THINK THIS HOME HEALTH SEMINAR WILL BE ?

- A. NOT HELPFUL
- B. SOME WHAT HELPFUL
- C. MODERATELY HELPFUL
- D. EXTREMELY HELPFUL
- E. OTHER (SPECIFY ) \_\_\_\_\_