



625 O'FARRELL STREET
SAN FRANCISCO, CA 94109
415-749-6714 FAX 749-6706
P.O. BOX 811, OAKLAND, CA 94604



October 18, 1991

Ms. Patricia Jones, M.S.
HIV Health Educator
Health Education Department
The Permanent Medical Group
350 St Joseph's Street
San Francisco, CA 94115

Dear Ms. Jones:

On behalf of Shurland Aird, Michael Sullivan and myself, I would like to thank you for giving the BAHSES S.W.A.T. Team the opportunity to present its Safer Sex Playshop.

I hope the playshop proved to be informative for the participants and that they learned some new or different things about fun and safe sexual activities. The group's interaction and sharing was very good and the exchange of information proved that we all have something to offer in this forum.

I would like to work with you on developing an outreach plan that would encourage attendance of people of color and youth to this playshop. We at BAHSES view these sections of the population to be at the highest risk for HIV Transmission.

I am enclosing copies of the evaluation forms completed for the playshop for your review and information. If you have any questions or we can be of further service to you and your organization, please do not hesitate to contact me.

Sincerely

Lee Y. Woo
Executive Director

cc: Shuland Aird
Michael Sullivan

Atttch.

522080/522055/522045



A PROJECT OF BLACK & WHITE MEN TOGETHER / MEN OF ALL COLORS TOGETHER

BAHSES BWMT/MACT ACTIVITIES REPORT

ACTIVITIES: _____

DATE OF EVENT: 10-16-91

- ☐ WORKSHOPS (Type, Target Audience)
- ☐ TRAINING (What Kind: HHH, Facilitators, Survey, Other)
- ☐ SPEAKING ENGAGEMENT (For What Group)
- ☐ PANEL DISCUSSION (Sponsored by Who)
- ☐ INFORMATIONAL BOOTH (Event)
- ☐ PLANNING MEETING (For What Activity)
- ☐ PARTNERSHIP BUILDING (With What Groups)
- ☐ CHAPTER MEETING (With What Committee or Group)
- ☐ SUPPORT GROUP MEETING (Number)

SUMMARY: Questions on testing and its accuracy, mixed status relationships; Needed to check kit! needed dental dams, variety lubs, more non-lub condoms, exercise cards, more Safersex/SWAT packets. Successful!! Participation and knowledge exchange

POPULATION SERVED:

	Gay Men	Men	Lesbian	Women	TS/TV	Unknown	Total
Asian/Pacific Islanders	1						
African American							
Native American	1						
Latino	1						
European American	## III						
Other							
STAFF: Total							

STAFF:

Coordinator: Shurland Reviewer: _____

Facilitators: Shurland, Lee, Michael

Kaiser Permanente
EVENT: HHH

LOCATION: _____

SUBMITTED BY: _____

DATE: 10-16-91

SAFER SEX WORKSHOP - PARTICIPANT EVALUATION

We continually want to improve workshop content and/or presentation style in order to better serve you and our community. Therefore, please take a moment to evaluate the workshop just completed. Simply read each statement then circle the number on a sliding scale which describes your reaction to the statement. If you have any comments you wish to make, please record them on the back of this form. THANK YOU

Statement	Not at All		Somewhat			Definitely	
	1	2	3	4	5	6	
1. Workshop began on time	1	2	3	4	5	6	6
2. Facilitators told us workshop goals	1	2	3	4	5	6	
3. Workshop gave me new information	1	2	3	4	5	6	5
4. Exercises done during workshop were helpful	1	2	3	4	5	6	6
5. Goals of workshop were met	1	2	3	4	5	6	
6. Facilitators encouraged questions & participation	1	2	3	4	5	6	6
7. Facilitators presented information in a positive manner.	1	2	3	4	5	6	6
8. Facilitators avoided personal bias/judgements about opposing views.	1	2	3	4	5	6	5
9. I want to practice safe sex	1	2	3	4	5	6	5
10. Did workshop help you identify personal risk for HIV?	1	2	3	4	5	6	6
11. Has your denial been decreased by workshop?	1	2	3	4	5	6	5
12. Has your comfort level increased enough to discuss safer sex with a partner?	1	2	3	4	5	6	5
13. This workshop showed me how to reduce "risky" sexual behaviors	1	2	3	4	5	6	6

Please circle your ethnic/racial background:

Asian/Pacific Islander

African-American

Native American

Latino

European American

Other _____

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thank you!

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Asian/Pacific Islander African-American Native American Latino
 European American Other _____

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1. Workshop began on time	1	2	3	4	5	6	<i>I came late</i>
2. Facilitators told us workshop goals	1	2	3	4	5	6	
3. Workshop gave me new information	1	2	3	4	5	6	
4. Exercises done during workshop were helpful	1	2	3	4	5	6	+
5. Goals of workshop were met	1	2	3	4	5	6	
6. Facilitators encouraged questions & participation	1	2	3	4	5	6	+
7. Facilitators presented information in a positive manner.	1	2	3	4	5	6	
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1. Workshop began on time	1	2	3	4	(5)	6
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3. Workshop gave me new information	1	2	3	(4)	5	6
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11. Has your denial been decreased by workshop?	(1)	2	3	4	5	6
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