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ABSTRACT

This study, commissioned by the Lucas County (Ohio) Health Department, was designed to assess parental beliefs and attitudes related to HIV/AIDS prevention for youth, particularly in middle and high schools. In November 1996, 400 telephone interviews were completed with parents of middle/high school students in Lucas County. Names were randomly selected from a marketing list of households with at least one child aged 10-18 years. The results indicated that parents want more aggressive AIDS prevention efforts in schools even though they greatly underestimated the level of teen sexual activity. Most parents (63 percent) wanted schools to increase education on AIDS prevention while only 3 percent who thought AIDS education should be decreased. The great majority (81 percent) of parents favored discussing both abstinence and the use of condoms with students. Most (64 percent) of parents also favored schools providing information on where to get condoms. Making condoms available in high schools to sexually active students was supported by 53 percent of parents. Eighty-three percent of parents reported they would encourage condom use by their own sexually active children. However, most parents did not want information on talking with their children about AIDS prevention with only 28 percent desiring this information. (JLS)

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Survey of Parents of Middle/High School Students

Beliefs and Attitudes Regarding HIV/AIDS Prevention Education

Lucas County, Ohio
December, 1996

Report prepared by:

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Survey commissioned by Lucas County Health Department
and conducted by Stanford H. Odesky and Associates

This report was made possible through a grant from the
Ohio Department of Health to support HIV prevention community planning.

This study, commissioned by the Lucas County Health Department and conducted by Stanford H. Odesky and Associates, was designed to assess parental beliefs and attitudes related to HIV/AIDS prevention for youth, particularly in middle and high schools.

METHODOLOGY

In November, 1996, 400 telephone interviews were completed with parents of middle/high school students in Lucas County. Names were randomly selected from a marketing list of Lucas County households with at least one child aged 10-18 years. The sample error is +/- 4.9% at the 95% confidence level.

RESULTS¹

Demographics

Age of oldest student:

10	1%
11	2%
12	12%
13	13%
14	17%
15	14%
16	17%
17	19%
18	6%

School systems:

Lucas County public schools	39%
Toledo public schools	31%
Catholic schools	26%
Other private	4%

Parents' Level of Education:

Less than high school	2%
High school	33%
Some college	20%
College	34%
Post graduate	11%

Household Income:

¹ Percentages may not add up to 100% due to rounding.

Less the \$40,000	25%
\$40,000 or more	68%
Refused	8%

Race/ethnicity:

White, non-Hispanic	91%
Black, non-Hispanic	5%
Hispanic	2%
Other	2%

The demographic makeup of the respondents was not completely representative of Lucas County parents of middle/high school students. This likely reflects the limits of the marketing list used to identify households with children of this age. Most significantly, respondents were less likely to have children in the Toledo Public Schools (31%) than expected (about 48%), more likely to have children in Catholic schools (26%) than expected (about 14%), more likely to have a college degree or greater (45%) than expected (about 24%), more likely to have a household income over \$40,000 (68%) than expected (about 40%), and less likely to be Black (5%) than expected (15%). The direction and relative size of these sampling biases are listed in the results section for each survey item and their estimated impact on conclusions are addressed in the discussion section.

Belief and Attitude Results

Survey results were analyzed by the following variables:

- Age of oldest student (10-13, 14-15, 16-18)
- Gender of oldest student (male, female)
- School system (Toledo public, Lucas County public, Catholic)
- Parent's level of education (high school or less, College graduate or greater)
- Household income (Less than \$40,000, \$40,000 or more)
- Race/ethnicity (White, Black)
- Feel informed about education on AIDS prevention child receiving (Yes, No)
- Estimate of proportion of high school students who have had sexual intercourse (< 1/2, 1/2+)
- Likelihood their child has had sex (Definitely/Probably, Probably Not, Definitely Not)
- Want more information on how to talk to child about AIDS prevention (Yes, No)

Should schools provide education on AIDS prevention?

Yes	93%
No	4%
Not sure/other	3%

Respondents who were Black were most likely to support AIDS prevention in schools (100%). The overall level of support varied little between demographics and other variables of analysis.

Sampling bias likely led to a slight underestimate of support for schools providing education on AIDS prevention (93%) since under-represented respondents, those who were Black, were most likely (100%) to be supportive.

Do you feel adequately informed about the education your oldest child is receiving on AIDS prevention?

Yes	58%
No	39%
Don't know	4%

Respondents felt least informed if they believed it was likely that their child had had sexual intercourse (45%), had children in Toledo public schools (46%), a household income less than \$40,000 (48%), or had a high school education or less (51%).

Sampling bias likely led to a slight overestimate of the proportion of parents who felt adequately informed about their oldest child's education on AIDS prevention (58%), since over-represented respondents felt more informed: those with children in Catholic schools (64%) and respondents who were college graduates or greater (63%).

Do you think the amount of education in the schools on AIDS prevention should be increased, decreased, or stay the same?

Increased	56%
Decreased	3%
Stay the same	29%
Don't know	13%

Of those with an opinion, almost 2/3 (63%) think the amount of education in the schools on AIDS prevention should be increased; only 3% think that it should be decreased.

Respondents were more likely to support increasing education if they believed it was possible that their child had had sexual intercourse (67%), had a high school education or less (65%), a household income less than \$40,000 (62%), or had children in Toledo public schools (62%). Respondents were also more likely to support increasing education if they wanted more information on how to talk to their child about AIDS prevention (72%), or felt less informed about the education their child is receiving on AIDS prevention (69%).

Sampling bias likely led to an underestimate of the proportion of parents who think AIDS education in the schools should be increased (56%), since under-represented respondents were more likely to support increasing AIDS education: those with high school or less education (65%), with children in the Toledo Public Schools (62%) and those with household income less than \$40,000 (62%).

Should AIDS prevention education in schools discuss...

Only abstinence	18%
Only the use of condoms	1%
Both abstinence and the use of condoms	81%

Respondents were less likely to support both abstinence and the use of condoms if they were Black (62%). Respondents believing that it was likely that their child had had sexual intercourse were the most likely to support discussion of the use of condoms (94%). Respondents wanting more information to talk with their child about AIDS prevention wanted discussion of condom use (92%).

Sampling bias likely led to an overestimate of support for both abstinence and the use of condoms (81%) since under-represented respondents, those who were Black, were less likely (62%) to be supportive.

Would you object to having a poster in your child's school with the message, "**IF** you have sex, use a condom".

Yes	36%
No	59%
Not sure/other	5%

Respondents least likely to object were those who believed that it was likely that their child had had sexual intercourse (10%) and with a high school education or less (25%). Respondents most likely to object believed that their child had "definitely not" had sexual intercourse (47%) and had a child in Catholic schools (46%). With children aged 10-13, 44% of respondents would object. With children aged 14 and over, 33% of parents would object.

Would you object to having a picture of a rolled-up condom on this poster?

Yes	47%
No	48%
Not sure/other	5%

Respondents least likely to object were those who believed that it was likely that their child had had sexual intercourse (22%), and those with a high school education or less (40%). With children aged 10-13, 54% of parents would object. With children aged 14 and over, 44% of parents would object. Respondents most likely to object are those who believed that their child had "definitely not" had sexual intercourse (58%), had a child in Catholic schools (52%), and with a college degree or greater (52%).

Sampling bias likely led to an overestimate of the proportion of parents who would object to having a poster in their child's school with the message, "**IF** you have sex, use a condom" (36%), and would object to having a picture of a rolled-up condom on this poster (47%), since over-

represented respondents were more likely to object: those with children in Catholic schools (46% and 52%, respectively) and those who were college graduates or greater (42% and 52%, respectively).

Should schools provide information on where students can go in the community to get condoms?

Yes	64%
No	33%
Depends/other	4%

By a 2-to-1 margin (64% vs. 33%) parents believed that schools should provide information on where students can go in the community to get condoms. This increased to over a 4-to-1 margin (79% vs. 18%) among respondents who believed it was *possible* their child had had sexual intercourse. Further, this increased to a 6-to-1 (82% vs. 14%) margin among respondents who believed it was *likely* their child had had sexual intercourse.

Information on condom availability was more likely to be supported by respondents with a child in Toledo public schools (73%) and with a child 16 or older (71%). Information on condom availability was least supported by respondents who believed that their child had "definitely not" had sexual intercourse (55%), and had a child in Catholic schools (53%).

Sampling bias likely led to an underestimate of support for information on condom availability (64%) since under-represented respondents, those in Toledo public schools were more likely to be supportive (73%), and over-represented respondents, those with children in Catholic schools were less likely to be supportive (53%).

Should the health department make condoms available in high schools to students who are already sexually active?

Yes	53%	→ If yes:	With parental permission	26%
No	41%		Without permission	70%
Not sure	7%		Don't know	4%

Support for making condoms available in high schools to students who are already sexually active was greatest from respondents who were Black (67%), respondents who believed that it was *possible* that their child had had sexual intercourse (65%), and those with household incomes under \$40,000 (61%). Support was least from respondents who believed that their child had "definitely not" had sexual intercourse (47%), and those with household incomes over \$40,000 (51%).

Of those supporting condom availability, respondents who were most supportive of making condoms available *without* permission had a child in Lucas County public schools (81%), college education or greater (77%), household incomes \$40,000 or over (77%); those least supportive had household incomes less than \$40,000 (57%). Respondents were more likely to want condom availability *without* permission if their (oldest) child was female (73%) rather than male (68%).



Sampling bias likely led to an underestimate of support for condom availability in high schools (53%) since under-represented respondents, those who were Black, were more likely to be supportive (67%), and over-represented respondents, those with household incomes over \$40,000, were less likely to be supportive (51%).

Of those supporting condom availability, sampling bias likely led to an overestimate of support for condom availability in high schools *without* permission (70%), since over-represented respondents, with a child in Lucas County public schools (81%), college education or greater (77%), and household incomes \$40,000 or over (77%), were more supportive; and under-represented respondents, those with household incomes less than \$40,000, were less supportive (57%).

In our community, about what percentage of high school students do you think have had sexual intercourse?

1/4 or less	5%
Between 1/4 and 1/2	16%
About 1/2	28%
Between 1/2 and 3/4	30% [correct answer = 63%]
3/4 or more students	13%
Don't know	10%

Of respondents with an estimate, over 1/2 (53%) underestimated the proportion of high school students who had had sexual intercourse.

Respondents who believed that their child had “definitely not” had sexual intercourse were four times more likely (32%) to estimate that less than 1/2 of high school students have had sexual intercourse than respondents who believed that it was *possible* that their child had had sexual intercourse (8%).

It is unlikely that sampling bias affected results on this survey question.

How likely is it that your (oldest) child has had sexual intercourse?

Definitely	5%
Probably	8%
Probably not	21%
Definitely not	64%
No idea	2%

About 2/3 of respondents (64%) believed that their (oldest) child had “definitely not” had sexual intercourse. Those most likely to believe this were respondents with college or greater education (71%), or whose oldest child is female (68%).

One in 8 parents (13%) believed it was likely [“definitely” + “probably”] that their (oldest) child has had sexual intercourse. Those most likely to believe this were respondents with a child in

Toledo public schools (18%) or with a high school or less education (18%). Those least likely to believe this were respondents with a child in Catholic schools (7%), college or greater education (8%), and those with household incomes under \$40,000 (8%).

The following table shows the results of respondents perceived likelihood [likely = "definitely" + "probably", unlikely = "definitely not" + "probably not"] that their (oldest) child had had sexual intercourse, according to age of (oldest) child:

Age	Perceived Likelihood (Oldest) Child Had Had Sexual Intercourse	
	Likely	Unlikely
10-12	3%	97%
13-14	2%	98%
15-16	13%	87%
17-18	37%	63%

Sampling bias likely led to an overestimate of respondents who believed that their (oldest) child had "definitely not" had sexual intercourse (64%) since over-represented respondents, those with college or greater education, were more likely to believe this (71%). Sampling bias likely led to an underestimate of respondents who believed that it was likely that their (oldest) child has had sexual intercourse, since under-represented respondents, those with a child in Toledo public schools (18%) or with a high school or less education (18%), were more likely to believe this; and over-represented respondents, those with a child in Catholic schools (7%), college or greater education (8%), and those with household incomes under \$40,000 (8%), were least likely to believe this.

If you knew your (oldest) child was sexually active, would you encourage him or her to use condoms:

Yes	83%
No	11%
Not sure	7%

Respondents who believed that it was likely that their child had had sexual intercourse were most likely to consider encouraging condom use (94%).

It is unlikely that sampling bias affected results on this survey item.

Would you like more information on how to talk to your children about preventing AIDS?

Yes	28%
No	72%

The likelihood of wanting more information was greater among respondents who felt inadequately informed about the education their child was receiving on AIDS prevention (50%), those with

household incomes less than \$40,000 (42%), and those who believed that it was possible that their child had had sexual intercourse (38%). Respondents wanting more information were more likely to support discussion of condom use (92% vs. 78%), and information on where students can go to get condoms (79% vs. 58%).

Sampling bias likely led to an underestimate of wanting more information (28%), since under-represented respondents, those with household incomes less than \$40,000, were more likely to want more information (42%).

DISCUSSION

Parents Want More Aggressive AIDS Prevention Efforts In Schools Even Though They Greatly Underestimate The Level Of Teen Sexual Activity

There appears to be a solid foundation of support for more aggressive AIDS prevention efforts in schools. In fact, it is likely this support would be substantially greater if parents accurately assessed the sexual activity of their children. The most striking finding of this survey is that parents are largely unaware of how many teens, particularly their own, have had sexual intercourse. The single most important variable in predicting parents' responses to survey questions was the perception of their own children's likelihood of sexual intercourse. Given the fact that these perceptions are far from reality raises the issue of how much more support there would be for AIDS prevention efforts if parents accurately estimated the sexual activity of their children.

While parents did poorly estimating the occurrence of sexual intercourse among high school students in general, they did even worse when it came to estimating the likelihood that their own child had had sexual intercourse. As expected, the perceived likelihood that a child had had sexual intercourse depended on the child's age. However, when adjusting for the actual estimated proportion of students who had had sexual intercourse, about 1/3 of all respondents believed it unlikely that their (oldest) child had had sexual intercourse when in fact they had. The following table illustrates, for instance, of respondents with a child age 15-16, an estimated 45% believed it was unlikely that their child had had sexual intercourse when in fact they had. Or stated somewhat differently, of parents with a child age 15-16 who believed it was unlikely that their child had had sexual intercourse, they were more likely wrong than right!

Parental Perceived Likelihood of (Oldest) Child's Sexual Intercourse

vs.

Estimated Actual Proportion of Children's Sexual Intercourse*

AGE	PERCEIVED LIKELIHOOD		ESTIMATED ACTUAL *
	Likely	Unlikely	
10-12	3%	97%	10%
13-14	2%	98%	36%
15-16	13%	87%	58%
17-18	37%	63%	63%

* Estimated Actual proportion of sexual intercourse based on data from Lucas County HIV Prevention Needs Assessment, 1994

Parents Support Schools Increasing Education on AIDS Prevention

Given that, of those with an opinion, almost 2/3 (63%) think the amount of education in the schools on AIDS prevention should be increased, and only 3% think that it should be decreased, schools and communities should explore how AIDS prevention education can be increased. There seems to be strong general concern that AIDS prevention needs to be addressed more aggressively in schools. However, many parents (39%) do not feel adequately informed about the specific education their children are currently receiving on AIDS prevention. Feeling uninformed was most closely associated with believing it was likely that their child had had sexual intercourse. While this doesn't make a parent less informed, it likely increases feelings of need for AIDS prevention education and likely increases feelings of uncertainty about the adequacy of AIDS prevention education. Given whatever information parents know, these parents may adopt a higher standard of "need to know", thus responding as feeling less informed. Further, since many parents underestimate the actual likelihood that their child had had sexual intercourse, the need to better inform parents about AIDS prevention education is likely more important than even reflected by respondents. However, this survey does not directly address whether parents *want* to be informed about their children's AIDS prevention education. Schools and communities would likely benefit from pursuing additional ways to inform parents about their children's education on AIDS prevention and how this relates to the need for that education.

Parents Favor Discussing *Both* Abstinence and the Use of Condoms

Over 4 out of 5 parents (81%) favor discussing both abstinence *and* the use of condoms. This is in line with research that shows that discussing both abstinence *and* the use of condoms is the most effective in delaying onset of sexual intercourse and increasing safer sex practices among those who become sexually active.² Parents who believed that it was likely that their child had had sexual intercourse were the most supportive of discussing condom use (94%). Again, if parents accurately estimated the sexual activity of their children, then support for discussion of condom use would likely be even greater.

While there is strong support for discussion of condom use, this support lessened when it came to having a poster in their child's school with the message, "IF you have sex, use a condom" (59% vs. 36%), and even more so if a picture of a rolled-up condom accompanied such a message (48% vs. 47%). Parents may feel less comfortable with a condom message that may be in a setting that is less controlled (e.g., hallway) and/or may not have as much context (e.g., teacher instruction/dialogue). Only 1 in 10 (10%) parents objected to the poster condom message who believed it was likely that their child had had sexual intercourse (22% for condom picture). Thus, if parents accurately estimated the sexual activity of their children, then support for such a poster would likely be even greater. Also, some parents may be assuaged by research that shows that education in HIV/AIDS prevention (including safer sex) does not lead to earlier onset of sexual intercourse or more frequent sexual intercourse.³

² World Health Organization, 1996

³ World Health Organization, 1996

Parents Favor Schools Providing Information on Where to Get Condoms

By a 2-to-1 margin (64% vs. 33%) parents believed that schools should provide information on where students can go in the community to get condoms. Among respondents who believed it was *possible* their child had had sexual intercourse, this increased to over a 4-to-1 margin (79% vs. 18%). Again, if parents accurately estimated the sexual activity of their children, then support for providing information on where to get condoms would likely be even greater.

Majority Favor Making Condoms Available in High Schools to Sexually Active Students

While the level of support for condom availability is more divided, a majority of parents (53% vs. 41%) believed that the health department should make condoms available in high schools to students who are already sexually active. Parents who believed it was *possible* their child had had sexual intercourse were supportive by a 2-to-1 margin (65% vs. 31%). Again, if parents accurately estimated the sexual activity of their children, then support for making condoms available to sexually active students would likely be even greater. Of parents supporting condom availability, parents favor by well over a 2-to-1 margin (70% vs. 26%) making condoms available without parent's permission.

This level of support for condom availability in high schools warrants further exploration of this option as part of further education and dialogue between schools and communities.

Parents Would Encourage Condom Use in Own Sexually Active Children

Six out of 7 parents (83%) would encourage their child to use condoms if they were sexually active; only 1 in 9 parents (11%) would not. The *only* variable analyzed that was predictive of whether a parent would encourage their sexually active child to use a condom or not was the parents' perceived likelihood that their children were sexually active. The less likely parents thought it was that their children were sexually active, the less likely they would encourage them to use a condom *if* they were sexually active (likely = 94%, definitely not = 78%). This could indicate no experience, or even a reluctance, in dealing with the possibility of their child's sexual activity. In fact, parents believing that their children had "definitely not" had sexual intercourse were twice as likely than those believing it to be *possible* to be "unsure" (13%) about encouraging condom use if their child were sexually active. If parents more accurately estimated the sexual activity of their children, they would likely better prepare themselves to encourage condom use with a child who was sexually active.

Most Parents Don't Want Info on Talking With Their Children About AIDS Prevention

While most parents would encourage their child to use condoms if they were sexually active, only 28% of parents would like more information on how to talk to their children about preventing AIDS. It is not known whether this relates more to parents feeling comfortable with the information they have, whether they don't see it as relevant ("Not my kid") or whether parents simply don't want to deal with talking with their children about AIDS prevention. Parents feeling

uninformed about their child's AIDS prevention education were the most likely (50%) to want information on how to talk with their child, perhaps feeling that if their school may not be doing an adequate job then maybe they should pick up the slack. Parents who believed it was *possible* that their child had had sexual intercourse were more likely to want information than those who believed "definitely not" (38% vs. 23%). Nonetheless, most parents did not want such information.

Sampling Bias Leads to Understatement of Findings

Due to differences in the actual respondents versus what would be expected by a truly random selection, the results likely are not completely representative of all parents of middle/high school students in Lucas County. However, as a whole, the direction of this bias indicated that the findings reported are understated. A truly representative sample would have likely led to: greater support for providing AIDS prevention education in schools, and increasing education in schools on AIDS prevention; less parents feeling informed about their children's AIDS education; less parents wanting discussion of both abstinence and condom use; less parents objecting to a poster with a condom message and condom picture; more support for schools providing information on where to get condoms and condom availability in high schools; more parents believing it likely that their child had had sexual intercourse; and more parents wanting information on how to talk to their children about AIDS prevention. None of these biases are substantial enough to change the basic findings or implications of this study.

In all, these survey findings document parents' support for more aggressive AIDS prevention efforts in schools in Lucas County.

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