Mobilizing Demand for PrEP: A Training Curriculum for Gay and Bisexual Advocates

By MPact Global Action for Gay Men's Health and Rights

2021
MPact Global Action for Gay Men’s Health and Rights was founded in 2006 as The Global Forum on MSM & HIV (MSMGF) by an international group of activists who were concerned about the disproportionate HIV burden being shouldered by gay and bisexual men. We have since expanded our work to focus on the broader sexual health and human rights needs of all men who have sex with men.

VISION STATEMENT
MPact envisions a world where the health and human rights of all men who have sex with men are actively recognized, realized, and respected.

MISSION STATEMENT
To advocate for equitable access to effective HIV prevention, care, treatment, and support services for gay men and bisexual men, including those living with HIV, while promoting their health and human rights worldwide.

VALUES
In all of our work, MPact foregrounds the values of human rights, self-determination, and working in coalition. We employ community-led approaches, strengths-based, sex-positive, critically reflexive, evidence-informed, and results-oriented.
ACKNOWLEDGEMENTS

The Mobilizing Demand for PrEP: A Training Curriculum for Gay and Bisexual Advocates was developed to facilitate regional and in-country PrEP Demand Generation trainings in Africa and Southeast Asia in 2019 and 2020.

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The purpose of the Mobilizing Demand for PrEP: A Training Curriculum for Gay and Bisexual Advocates is to give experienced trainers the ability to provide the training in their communities and to adapt it as they see fit. The training aims to equip people with the tools necessary to develop a campaign or project, which will increase access to life-saving drugs that prevent HIV transmission in key populations, including gay and bisexual men and other men who have sex with men.

Presenters will guide participants through a comprehensive 5-day workshop to create a culturally inclusive social marketing campaign and advocacy breakthrough initiatives to respond to community PrEP needs. Building on the organic, indigenous information of community attendees, one of the main goals of this training is to increase skills, knowledge, and competency that will enable attendees to roll out community-led demand mobilization strategies and advocacy campaigns. Trainees will learn to deliver a successful campaign/project to increase PrEP usage because the campaign/project will be rooted in community needs and experiences.

This manual is organized so that each day's presentation builds towards the next day's content, providing participants a solid base to advance. It should be noted that trainers can also use this curriculum to meet the audience's needs and prioritize sessions to be delivered.

Attendees will have a basic knowledge of PrEP and gay and bisexual men's sexual health. Attendees should also have community roots and a general operating idea of how to gather community opinions. The manual uses effective and proven research to create a practical, constructive product in a social marketing campaign, an advocacy campaign, and other PrEP related implementation activities. The training is mapped out to be an intensive, interactive experience that is also informative, stirs creative thoughts, and is enjoyable. Presenters and attendees will be able to engage in a genuine team effort. The presenters will bring skills-building expertise to the training table, and the participants will bring their knowledge of cultural norms and local standards.
Training methodology
This training is based on principles of adult education and employs a combination of presentation, small- and large-group discussion, activities, and guided practice/role plays. Facilitators introduce key concepts and skills via PowerPoint (or hand-written slides/note-cards), demonstration, role-plays, and discussion.

Attendees will participate in or watch demonstrations of exemplary interpersonal communication skills before practicing and providing feedback to one another to improve performance. Ideally, facilitators should introduce a guided practice.

This training curriculum includes the following tools:

• PowerPoint presentation slides to help introduce concepts and provide written instructions for activities.
• Handouts and templates to implement interactive exercises and encourage participation.

The curriculum provides the estimated time for each session, materials required, and intended objectives. Each session includes a training plan, trainer’s notes, and follow-up questions to guide the discussion. The manual content and sessions are organized by day. However, facilitators should pick and choose the sessions and activities that best meet the needs of the participants. Facilitators should use this manual and the sessions as a menu to pick and choose to have the best experience.
Day One

**Session 01**
- Goals and Objectives
- Introductions
- Learning Principles
- Ice Breaker Activity

**Session 02**
- Framing PrEP
- Sex-Positivity
- Sexual Health
- Combination Prevention
- Normative Guidance
- Community Empowerment
- Engagement of HIV+ Individuals

**Session 03**
- STIs and Other PrEP-Related Issues/Topics (optional)

**Session 04**
- PrEP Truth or Myth
- How to Bust a PrEP Myth

**Session 05**
- Barriers to PrEP (Availability, Acceptability, Accessibility, Affordability, Solutions to Barriers)
- Fact vs Opinion
- Ethics
- Integrity
- Daily Conclusion

Day Two

begins the challenging work of identifying community needs and translating those needs into an effective call to action message. Sample case studies are used to demonstrate how relevant data and key takeaways may be extracted and utilized.

**Session 06**
- Case Studies
- Key Takeaways

**Session 07**
- PrEP Start Up, Roll Out, and Scale Up
- Four Step Process (Assess, Accessibility, Trial, Pilot, Scale Up)

**Session 08**
- Getting Gay Men Jazzed About PrEP
- What Excites You About This Work
- Selling the Message

**Session 09**
- Self-Care (Emotional, Financial, Social, Spiritual, Occupational, Physical, Intellectual, Environmental)
- Other Self Care (Diet, Sleep, Exercise)
- Daily Conclusion
Day Three

is designed to introduce proven strategies/tools to create a successful campaign or project that responds to community needs.

Section 10

- Social Marketing vs Social Media Marketing
- The Four P’s of Social Marketing
- Focus on Benefiting Society
  - Success and the Social Media Marketing Campaign
  - Tools for a Successful Social Marketing Campaign
  - Lawful, Legitimate, and Fair Use
  - Purpose Specification, Use Limitation, and Purpose Compatibility
  - Risk Mitigation and Risks Harms and Benefits Assessment
- Sensitive Data and Sensitive Contexts

Section 11

- PrEP Pricing
- Factors That Influence Pricing
- What is a Patent?
- Daily Conclusion

Day Four

provides skills building tools to develop and design a social media campaign/project.

Section 12

- Review of Principles and Concepts of a Social Media Campaign (Assessment, Planning, Implementation, Evaluation)
- Creating a Social Media Campaign
  - Review of Key Elements (Tell a story, Keep it simple, Be organic)
  - Looking at analytics, clicks, likes, community engagement

Section 13

- Practice Using Principles and Concepts
- Putting What’s on the page into Practice
- Review of Community Resources

Section 14

- Identify one personal and agency resource
- Discuss how the resource plays a role in outcome of campaign
- Presenting the Diagram

Section 15

- From Ideas to Action
- Opportunity to Prepare for Day Five Presentation of Campaign/Project Idea
- Daily Conclusion
allows participants to present their social marketing campaign/project and receive feedback from their peers.

**Session 16**
- From Ideas to Action Presentation
- Workshop ideas for PrEP demand mobilization and advocacy
- How To Present Feedback Worksheet
- Closing Activity

**Session 17**
- Conclusion and wrap up
- State an overall training goal and objective achieved during the training
- Complete the training evaluation
- Complete a closing exercise
Mobilizing Demand for PrEP: A Training Curriculum for Gay and Bisexual Advocates

GOALS

To strengthen knowledge of comprehensive sexual health, combination prevention, and pre-exposure prophylaxis.

To increase skills, knowledge, and competency in the roll-out of community-led demand mobilization strategies.

To facilitate peer-exchange and collaboration to support PrEP demand-mobilization at country and/or regional levels.

OBJECTIVES

By the end of the training participants will be able to:

• Implement PrEP demand generation campaigns
• Define what a PrEP program is and the components of an action plan.
• Develop a PrEP demand generation breakthrough initiative.
• Discuss barriers to PrEP for the community.
• Identify means of overcoming the barriers.
• Create an effective social marketing campaign.
• Use the tools of an effective social marketing campaign.
• Describe how PrEP pricing is developed.
• Identify how to work with peer educators and healthcare providers.
Day One

Introduce the training and increase participants’ comfort level with the training materials, the presenters, and fellow attendees.
At the scheduled start time, presenters will welcome the participants and thank them for attending the 5-day training. Each presenter will take two minutes to introduce themselves, their experience, the areas they will be presenting, and what they hope to accomplish in the five days. Facilitators should seek to put participants at ease by using a friendly tone.

Presenters will then review the overall goal and training objectives. Participants will be asked if they understand the goal and objectives. If participants are unsure of a particular objective, presenters will promise to go more in-depth on the objective before the following unit.

For the 5-day training, the participants are the experts because no one knows their communities better.

What does respect look like? Being mindful of tone and choosing a nice selection of words. Ask more active talkers to keep points concise. For those more on the quiet side, challenge yourself to ask questions and make comments. Reassure participants that presenters would like to hear from everyone. Instead of saying ‘I disagree,’ which may make people defensive, say ‘I would like to offer another point of view.’ It is essential for participants to model acceptance, meaning you may disagree with a decision but once it is made, you will move on and not continue to restate the same thought or opinion.

It is important to practice active listening. One way to demonstrate active listening is to take a moment to digest what was said and repeat something important you heard while listening before making your comment.

If there is anything presenters may do to increase participants’ enjoyment, please let one of them know during a break, at lunch, or at the conclusion of the day. Training materials will be distributed to participants.
MODULE TWO

Ice Breaker Activity

Handout

45 minutes

MPACT

PrEP Training on Sexual Health Advocacy for Gay and Bisexual Men

Presenters will divide the participants into groups of 4-6, depending on the total number of attendees. Each participant will be given a folded piece of paper.

Step 1.
The facilitator will ask participants to unfold the paper, which will reveal the name of an animal. The facilitator will ask participants to loudly make the sound of the animal to find fellow team members. Once they have found each other, facilitators will direct the teams to an area of the room to work as a small group. Each member of the team will answer the following questions (these should be displayed on PowerPoint for participants during the exercise):

1. Your name and pronouns
2. Where you come from?
3. One thing you hope to gain from this training?
4. One thing you are good at in your professional or personal life?

Teams will be asked to create a short story, poem, or song based on responses. One team member will be requested to be the notetaker.

Step 2.
Facilitators will have the participants remain with their team members and ask each group to take turns sharing their stories.

Facilitators will ask the following questions of the large group:

1. How was the exercise for you? (If someone answers ‘good,’ probe what was good/what worked well and if someone answers ‘not so good,’ probe what was challenging.)
2. What was something interesting you may have learned from one or more of your team members?
3. Were there any similarities/differences among team members?

Presenters will inform the participants that this exercise aims to provide a fun/interactive way to meet each other. It is essential to create a positive outlook of the program by engaging in fun but meaningful activities. Noting similarities among program participants can help establish common goals and outcomes. Differences among program participants can be used to educate them about cultural and community diversity.

Presenter Tip: Facilitators should seek initial reactions from participants during each exercise to encourage participation. This will create participant ownership of the training. When responding to participants engagement in exercises or comments, facilitators should always be polite and encouraging them and not cause an attendee to shut down.

15 MINUTE BREAK
MODULE ONE

Sex Positivity

Presenters will lead a discussion on how to frame PrEP through a sex-positive lens, covering the following areas:

- **Sexual Health**
  - Taking care of yourself sexually, including physically, mentally, and emotionally.
  - Knowing how to make sex fun and interesting.
  - Emphasize the importance of preventive healthcare rather than only responding to sickness

- **Combination Prevention**
  - There is no one size fits all HIV prevention model.
  - It is important to know several ways of practicing prevention so it doesn't become boring.
  - Prevention does not happen in a vacuum, there are peripheral activities to primary prevention.

- **Normative Guidance**
  - Designing and implementing evidence-based programs for key populations.
  - Developing advocacy tools and resources.
  - Designing training programs that leverage critical enablers (For example, the Community Partnership Resources – Online Learning Platform by MPact)

Create groups for each topic. Ask participants to answer the guiding questions and write the answers on flip charts. Give groups 30 minutes to discuss and write down main points. Ask each group to share their answers with all the training participants.

Presenters will discuss the importance of viewing PrEP using a sex positive lens and they will emphasize that sex can be a natural and enjoyable act. One of the best ways to have a happy life is to have a happy sex life. In some communities there may be a negative view about sex, especially same sex behavior. Community members may have to relearn their attitudes about sex to decrease shame. PrEP is a way for community members to feel in control of their sexual health, thus reinforcing individual and community empowerment. Presenters will ask participants for positive and negative messages about sex in their communities and seek to reframe negative messages and amplify positive messages.
MODULE ONE

The ABC of STIs

Presenters will use a PowerPoint presentation to discuss three bacterial STIs (chlamydia, gonorrhea, and syphilis) and three viral STIs (hepatitis B, herpes, and the human papillomavirus or HPV).

Information regarding Hepatitis A and C will also be presented. The information presented is meant to assist participants in responding to questions about the link between PrEP and STIs.

Key facts from the World Health Organization (WHO)

- More than 1 million sexually transmitted infections (STIs) are acquired every day worldwide.
- Each year, there are an estimated 376 million new infections with one of these four STIs: chlamydia, gonorrhea, syphilis, and trichomoniasis.
- More than 500 million people are estimated to have genital infections with the herpes simplex virus (HSV).
- More than 290 million women have a human papillomavirus (HPV) infection.
- The majority of STIs have no symptoms or only mild symptoms that may not be recognized as an STI.
- STIs such as HSV type 2 and syphilis can increase the risk of HIV transmission.
- 988,000 pregnant women were infected with syphilis in 2016, resulting in over 350,000 adverse birth outcomes, including 200,000 stillbirths and newborn deaths.
- In some cases, STIs can have serious reproductive health consequences beyond the immediate impact of the infection itself (e.g., infertility or mother-to-child transmission).
- The Gonococcal Antimicrobial Resistance Surveillance Program has shown high rates of quinolone resistance, increasing azithromycin resistance, and emerging resistance to extended-spectrum cephalosporins. Drug resistance, especially for gonorrhea, is a significant threat to reducing the impact of STIs worldwide.
- A French study concluded that because the behaviors and risks are the same, gay men on PrEP have the same rate of HCV as their HIV+ counterparts.

Presenters will briefly discuss the misconception among some gay men that PrEP prevents STIs. It is important to dispel this misconception without judgment. Just like the old saying that there is no shame in getting an STI, the shame would be in not doing anything about this myth.
MODULE ONE

Queer Family Feud Activity

Handouts

1 hour

Presenters will divide participants into two groups to play a Family Feud type game. Teams will discuss among themselves the response to the question or statement.

The team that feels they have the best response to each statement or scenario will signal they would like to answer. Presenters will follow the answers listed on the handout to add to or provide the best possible response to the statement given by the team. Using the handout, presenters will explain to the participants the reasoning behind the listed response on the handout. If possible, provide a gift to the winning team. The activity will use the following statements.

1. A community member at your organization states PrEP only promotes promiscuity.
   MYTH: People’s sex lives and sexual lifestyles are formed well before they start taking PrEP. Clients mustn’t feel someone is passing judgment on their sex life but aims to make their sexual life both physically and mentally more healthy.

2. In a counseling session, a client states, “I am currently taking a herbal tea that works like PrEP; I do not need PrEP.”
   MYTH: It is beneficial to engage the client in a conversation and tell them that tea will not replace the scientifically proven protection PrEP provides. But if tea is something the client enjoys, perhaps as a cultural tradition, they should continue to enjoy the tea while also using PrEP.

3. In a counseling session, a client states, “I’m afraid people will think I have AIDS if they see me taking PrEP.”
   It does provide an opportunity if someone does think that you have AIDS to provide them with information about what PrEP does. Some people may make that assumption, but that is their poor judgment. It is your life, and you get to decide who you tell you are taking PrEP.

4. Your best friend says: “But PrEP does not protect you against STIs?”
   TRUE: PrEP does not protect against other STIs, especially bacteria-based diseases.

5. A colleague tells you in training, “I heard PEP is just as effective as PrEP.”
   PEP is also a very effective treatment, although PrEP is a more straightforward treatment protocol since you would not have to guess if a sexual activity exposed you to HIV.

6. An older client tells you, “I’ve tried never to have sex without a condom, but when I do, I feel guilty.”
   Whether you are or are not using a condom by accident or by choice, no one should be made to feel guilty. Providing people with access to PrEP and complete information regarding sexual activities assists them in making the best decisions about their sexual health.

7. In a counseling session, a client states, “If I use PrEP, does that mean I can swallow at sex parties?”
   PrEP would protect HIV transmission through oral sex (which is already low risk), but PrEP does not protect against transmission of other STIs you may get from oral sex. Once again, it is essential to empower people with information and let them decide what feels right for them, so they do not feel like they are being judged.

8. A transgender client comes to your office to inquire about PrEP, and she fears that it will interfere with the feminizing hormones she is currently taking.
   MYTH: It is important to converse with the client about why she has those feelings as it may help in understanding where people
are getting their information. The good news is that the iFACT study demonstrated that PrEP does not interfere with the effects of hormones. Feminizing hormones do reduce the level of PrEP drug in the body by about 13% but the level of PrEP remains high enough to provide effective protection from HIV transmission.

Based on UCLA PrEP clinical trials, there were very few cases in which PrEP may have caused some issues with kidney function. It is important to make sure that regular tests are being done to ensure all bodily functions are working well when taking any medication.

10. In a counseling session, a client states, “If I use PrEP, I’m afraid my housemates may find out and try to blackmail me.”
You get to decide who you tell about being on PrEP. The medications used for PrEP are legal and would not cause someone to perform an illegal act. This may provide an opportunity to inform the housemates about the benefits of being on PrEP.

11. Your boyfriend tells you, “The only reason you want to take PrEP is so that you can cheat on me.”
If someone believes you are on PrEP as a reason to cheat, that does point to some insecurity in the relationship, which you may want to explore and resolve. Some may say that means the boyfriend is possibly cheating. Hopefully, your boyfriend will understand that PrEP helps provide a feeling of security, which is good for your mental health and can contribute to a better relationship.

12. An older client tells you, “I don't think I've ever wanted to experience someone cum inside me due to higher risk of HIV transmission, that's why I've always topped (been the insertive partner) or stuck to oral sex.”
While HIV transmission risk is low for both insertive and oral sex, there is still some risk. PrEP can assist in preventing HIV, which does allow for more safety with sexual experimentation.

13. A colleague at a training tells you, “You only have to take PrEP twice a week, and you will be protected.”
There is limited protection when taking PrEP twice a week. The best and most complete protection happens when PrEP is taken every day at about the same time each day.

14. In a counseling session, a client states, “I've heard if you Party & Play (use meth, G, and/or ecstasy while having sex), PrEP does not work.”
MYTH: Research conducted in Thailand has demonstrated that PrEP is still effective when using party drugs. It is good to remember that taking party drugs may do some damage to the body and may affect your judgment in a way that could affect your health. For example, it may cause you to forget to take your PrEP medication. The CDC in 2013 recommended that gay men and bisexual men using party drugs use PrEP.

15. A younger client starting to take PrEP asks whether they should worry about STIs?
TRUE: When having unprotected sex, STI transmission may happen. You can get some bacteria-based diseases without even performing a sex act. Providing the client with information about STI’s will hopefully empower them to decide what is an acceptable risk for them and the steps to take if they suspect they may have contracted an STI.

16. You are advocating with a public health official who says that PrEP is a waste of money.
MYTH: PrEP is actually a very effective use of money and a great investment. It makes people go for regular health screenings, which can assist in treating diseases before they become too serious. It provides increased mental security. It cuts down on the number of HIV cases, which are very expensive to treat.

17. You are leading training for healthcare providers who say they shouldn’t have to discuss sex between men at their job.
MYTH: It is important that people feel it is okay to discuss their sex lives to decrease the feelings of shame around sex and sexuality. Increasing people’s comfort level about issues related to sex decreases more harmful activities that may put them at greater risk for HIV transmission. If your job is to decrease HIV transmission, then your job is to discuss the routes of HIV transmission. Knowledge is power.
**MODULE ONE**

**GOAL**
To increase participants' knowledge regarding barriers to PrEP services.

**OBJECTIVES**
By the end of the session, participants will be able to:
1. Identify two barriers to the delivery of PrEP services.
2. Suggest a means of overcoming the barrier.

**BARRIERS TO PrEP SERVICES**

**Availability**
- Lack of awareness on how to access PrEP and PrEP services
- Fear of HIV
- Not available
- Not included in the national HIV strategic plan and programs

**Acceptability**
- High levels of community stigma about using PrEP
- Lack of drug adherence, missing clinical appointments
- Going against cultural norms
- Misinformation

**Accessibility**
- Lack of mobility to access PrEP medication
- Life circumstances (living with family, partner, lacking income)

**Affordability**
- Lack of understanding of where to receive free or low-cost PrEP

**Solutions to Barriers**
- Social media campaign to increase awareness and reduce stigma
- Provide mass HIV testing
- Find and train peer educators to provide accurate information on accessibility and affordability of PrEP
- Counseling and involving community and family members as well as partners to encourage drug adherence and keep clinical appointments
- Using health educators at community events to provide information on how to get PrEP at no cost
- Participants will go into their groups to complete this exercise.

Handouts, Newsprint, markers, Power Point

1 hour 15 minutes
MODULE TWO

Plenary report back

Participants will remain in their assigned groups. Presenters will request certain groups do a report back on the barriers identified in the small group exercise. Facilitators will ask participants to respond to the following questions:

1. How was the exercise for you?
2. What was the tone/flavor of the discussion?
3. What were some of the barriers identified?
4. What past experiences, including research, helped you identify the barriers?
5. Were you able to use the grid to assist in resolving the barriers?
6. What were the solutions to the barriers?

Presenters should request participants separate fact from opinion as both are important in identifying barriers. The approach as to how to overcome the barrier may differ. Data and statistics should be used to present solutions to barriers that are based on facts. Community norms may be used to resolve barriers based on opinions.

Participants should also strive to use ethical decision making and integrity when seeking to resolve barriers.

ETHICS

Is a set of moral principles, which is concerned for the good of a society.

INTEGRITY

Adherence to a set moral and ethical codes.

FACT VS OPINION

(Adapted from the CARS CPI Prevention Professionals Training).

BONUS INFORMATION FOR FACILITAR ABOUT FACT VS OPINION. This information can help participants understand the difference between fact and opinion when doing an assessment or analysis like the one included in this activity.

A **fact** is a statement that can be proven true or false. An **opinion** is an expression of a person’s feelings that cannot be proven. Opinions can be based on facts or emotions, viewpoints, or judgement.

A **fact** can be verified objectively, or proven. In other words, a **fact** is true and correct, no matter what someone thinks. An **opinion**, however, is a statement that holds an element of belief and it represents how someone feels.
MO D U L E  T H R E E

Case Study Action Plan

Facilitators will inform participants the exercise is relevant to the upcoming Day 4 exercise.

Presenters will:

• Review Day 4 activity of putting together an Action Plan proposal.

• Distribute the case studies titled *7 Case Studies Featuring HIV Pre-Exposure Prophylaxis Initiatives Led by Gay Men in Australia, Kenya, Ukraine, Vietnam, and Zimbabwe*.

• Request participants to sign up to review case study. Make sure to distribute number of participants evenly between groups. For example, depending on the number of case studies to be reviewed, have a maximum number of participants per group to balance out the groups.

C O N C L U S I O N

Newsprint, markers

Presenters will thank participants for attending and note the highlights of the day. Facilitators will ask participants for their “pluses” or things they liked about the day and their “wishes” or things they hope to do different on Day Two. Items mentioned by participants will be listed on newsprint under the appropriate heading.

Facilitators will finish by letting participants know how much they are looking forward to Day Two, then dismiss the participants for the day.
NOTE
Day Two

Begins the challenging work of identifying community needs and translating those needs into an effective call to action message. Sample case studies are used to demonstrate how relevant data and key takeaways may be extracted and utilized.
OPENING

Power Point  15 minutes

Presenters will display the welcome message on PowerPoint as participants arrive.

At the scheduled start time, presenters will welcome participants and thank them for attending Day Two.

Facilitators will display the agenda from Day One on the PowerPoint and a brief verbal review of the day, including any highlights, will be provided. Presenters will ask participants if they have any questions regarding materials covered in Day One or need any clarification.
Session 06

Case study

GOAL
To support mobilizing community demand for PrEP programs serving gay and bisexual men in diverse contexts.

OBJECTIVES
By the end of the session participants will be able to:
1. Identify a way to gather input from gay men.
2. Select a community need that may be addressed to increase PrEP use.
3. Create messaging that is relatable to gay men to inspire learning more about PrEP.
4. Suggest a means of translating community needs into meaningful PrEP services.
5. Identify one lesson learned or case study that can be adapted/implemented in a different context.

MODULE ONE

Newsprint, Power Point, tape
1 hour and 15 minutes

Presenter will refer back to the case study sign-up sheet from Day One. Participants will be grouped together based on their case selection. Groups will review the case study and have a discussion about the important aspects that contributed to the success of the program. Every group will be given three sheets of newsprint, one for each of the guiding questions which will be written at the top of the newsprint. Facilitators will ask groups to respond to the questions on the newsprint and groups will be provided sheets of additional newsprint if needed. Based on the sign-up sheet, there should be four groups of nine participants. Make adjustments as necessary depending on number of participants.

GUIDING QUESTIONS

1. What are the issues that stand out?
2. What are the implications for the country context?
3. What are the key concepts and principles used in the approach?
4. What can be adapted in your context/country?

CASE STUDY #1

A Self-Financing Model for Community Based Delivery of PrEP in Vietnam

Key Takeaways
• PrEP is a powerful tool among many effective interventions for HIV and STI prevention and treatment for gay and bisexual men.
• Community-based delivery of PrEP can ensure friendly and sex-positive sexual health services reach gay and bisexual men.
• Sexual health programs must be designed and implemented with input from gay men.

CASE STUDY #2

Taking PrEP to Scale in Australia

Key Takeaways
• PrEP campaigns and delivery platforms must be properly vetted with gay men before implementation. A well-executed campaign can inspire gay and bisexual men to discuss PrEP, HIV, and sexual health with providers, partners, and friends.
• The use of multiple channels to mobilize gay men may be necessary to bring PrEP to scale in a community.
• Diffusion innovation theory can be an additional lens to enhance community-centered approaches to mobilize demand for PrEP.
CASE STUDY #3
Ensuring the involvement of gay men in government-led PrEP rollout in Zimbabwe

Key Takeaways
• Enabling policies and frameworks for PrEP implementation embedded in national HIV programs can facilitate PrEP access for gay men.
• Global advocacy targeting institutions such as the Global Fund and PEPFAR can influence PrEP financing and services at the country level.
• A systematic set of advocacy capacity strengthening actions, including initiatives that prepare advocates for engagement in national HIV planning processes, are central to an inclusive national response.

CASE STUDY #4
Using online peer-led models to shift the conversation about PrEP among gay men in Kenya

Key takeaways
• The use of peer educator models for mobilizing demand for PrEP among gay men is consistent with WHO recommendations for increasing service acceptability.
• Capacity building of online peer educators can ensure standardization and continuous improvement of PrEP-related information that is virtually delivered.
• Peer leaders can best serve the needs of target service users when their own realities and experiences are aligned with those of the community.

CASE STUDY #5
Developing sex positive imagery and messaging to enroll gay men on PrEP in Ukraine

Key takeaways
• Virtual platforms are an effective way to reach and enroll gay and bisexual men in both rural and urban settings on PrEP.
• Sex-positive messaging and non-stigmatizing engagement approaches can increase PrEP uptake.
• Different types of analytics can help PrEP programs make the best use of their data.

CASE STUDY #6
Addressing PrEP stigma at individual, community, and provider levels in Vietnam

Key takeaways
• Stigma and self-stigma related to PrEP among gay and bisexual men must be addressed as major barriers to PrEP uptake and retention.
• Communities will benefit from having a clear roadmap of what it takes to enroll and adhere to PrEP.
• With a roadmap, both healthcare providers and community members can be prepared to be more effective in interactions with each other.

CASE STUDY #7
Facilitating PrEP access for gay men thorough online HIV service booking platform in Kenya

Key takeaways
• Online service booking platforms are an effective and convenient method for providing a range of HIV services to gay and bisexual men including non-stigmatizing HIV risk self-assessments and PrEP demand generation campaigns.
• Pairing outreach workers with online users within virtual platforms can greatly increase service utilization and PrEP enrolment.
• Incentives for outreach workers must be equitable and commensurate with level of effort, not merely with achieving targets for PrEP.

BREAK
Presenters will send participants on a 15-minute break. Participants should be instructed to return to their case study group.
MODULE TWO

Case study report back

When participants return from break, presenters will ask each group to report on the following questions:

1. How was the exercise for you?
2. How was the discussion in your group?
3. What were your responses to the guiding questions?

Each group should select a spokesperson who will answer the first two questions. The spokesperson will give a brief summary of the case study and then review what is written on the newsprint sheets. Group members can assist as needed. Another group member should be selected to read the key takeaways and provide additional takeaways the group may have discussed based on their past experiences.

It is important that facilitators are supportive during the report back process. If participants have left something out from the key takeaways presenters should request to add it.

After the groups have completed their respective report backs, facilitators should highlight the common ground in the key takeaways.

- Each case study was a success because PrEP usage increased.
- The success of each case study was based on getting feedback from gay men.
- The programs listed in the study met gay men in the country where they were, meaning the program enhanced their life instead of requiring significant changes.
- The programs were rooted in community standards.
- The programs were based on the idea of empowerment.

1 HOUR LUNCH BREAK

After lunch, facilitators will welcome participants back and let them know they are moving into the next unit which is informed by the case studies.
Session 07

**PrEP Start up, roll out and scale up**

**GOAL**
To increase participants comfort level with designing PrEP campaigns/projects for gay men.

**OBJECTIVES**
By the end of the session participants will be able to:
1. Learn how to start up and roll out a PrEP program.
2. Discuss means of scaling up a PrEP program.

---

**MODULE ONE**

*The four-step process*

Using the PowerPoint slide, presenter will describe the four-step process for the start up, roll out, and scale up for designing PrEP programs. Participants will follow along with the handout.

1. **Assess**
   - Determine the facts
   - Identify the issues involved
   - Consider issues from different stakeholder’s perspective

2. **Accessibility Trial**
   - Accessibility
   - Utilization

3. **Pilot**
   - Monitoring
   - Evaluation to inform

4. **Scale Up**
   - Inform national policies

---

15 MINUTE BREAK
Session 08

Getting Gay Men Jazzed About PrEP

GOAL
To increase participants knowledge about means to increase gay men's interest in using PrEP

OBJECTIVES
By the end of the session participants will be able to:
1. Name a means to increase gay men's interest in using PrEP.
2. List a way to translate the interest in someone using PrEP.

MODULE ONE
What excites you about this work?  

Paper, pens  
30 minutes

LARGE GROUP EXERCISE:
Facilitators will ask all the participants to write down responses to the following questions:

1. What excited you about coming to this training?
2. What excites you about PrEP?
3. What excites you about working with gay and bisexual men?

Presenters will give the group five minutes to respond to the questions. Then allow each participant to share their answers in two minutes each. If the group is large, facilitators may consider breaking the group into two smaller groups to allow participants to share in the smaller groups. Presenters are looking to remind participants about why they began working in this field and why there is still much reason to be excited.

Burnout in the HIV field is common and reminding ourselves of why we do the work and what excites us about it is important. This activity will give participants the opportunity to think and voice this excitement and share that excitement with this community of global activists.

MODULE TWO
Selling the message

PowerPoint  
45 minutes

In a large group lecture format, facilitators will discuss how sex is the most used device to sell something to the public, both overtly and covertly. The idea that you will get more sex or have happier sex if you use a certain product is widely used by advertisers. Participants already own one or more products that they purchased because of its implied sexual value.

Facilitator will ask for three volunteers to briefly provide responses to the above questions. Presenters will refer to the key takeaways from the case studies to draw out examples about how to get gay men excited about using PrEP. Some of the issues include:

• Taking control
• Feeling of confidence
• Community Involvement
**Self-Care**

**GOAL**
To increase participation knowledge on how to administer self-care

**OBJECTIVES**
By the end of the session participants will be able to:
1. Define self-care.
2. Discuss the eight areas of self-care.
4. Describe two ways to increase self-care.
5. Identify how working as a team is important to self-care.

---

**Module One**

Please put on your mask before attempting to assist others with their mask.

Presenters will discuss the importance of self-care through the lens of airlines guidelines. This means emphasizing that you will not be able to take care of someone else if you are not taking care of yourself. Self-care is not selfish, it is essential.

**Self-care definition**

The practice of taking action to preserve or improve one’s own health.

Facilitators will review the areas of enhance self-care. When time and budget allow it is good and important to include a 45-minute self-care sample experience. The experience may include a yoga session led by a professional instructor, participants drawing or painting a favorite place of relaxation, a walk on the beach or around the corner while keeping an eye out for new things. Breathing and/or meditation exercise can also work. Participants can realize first-hand the positive effects of self-care and how self-care may take the form of a few small, simple steps.

Presenters will ask participants to name one self-care activity they are currently practicing such as reading, meditating, praying, playing on a sports team, spending time with family and loved ones, and so on. It is important for participants to celebrate what they are currently doing to take care of themselves so they may be of assistance to others.

**EMOTIONAL:**
Coping effectively with life and creating satisfying relationships.

**FINANCIAL:**
Satisfaction with current and future financial situations.

**SOCIAL:**
Developing a sense of connection, belonging and a well-developed support system.

**SPIRITUAL:**
Expanding our sense of purpose and meaning in life.

**OCCUPATIONAL:**
Personal satisfaction and enrichment derived from one’s professional work.

**PHYSICAL:**
Recognizing the need for adequate physical activity, proper diet, enough sleep, and balanced nutrition.

**INTELLECTUAL:**
Recognizing creative abilities and finding ways to expand knowledge and skills.

(Adapted from Swarbrick, M. 2006, A. Wellness Approach, Psychiatric Rehabilitation Journal)
OTHER AREAS

**Diet:** Making sure you are eating healthy foods in the right amounts (not too much but not too little), staying hydrated, and the importance of healthy snacking.

**Exercise:** Finding the right daily exercise program that is active but not strenuous. Walking can be just as beneficial as running but poses a lesser chance of injury.

**Sleep:** Find ways to increase sleep by getting enough exercise, eating well, reducing exposure to light as bedtime nears, ensuring a cool sleeping environment, and reducing stress.

**Give me a break:** Take small 5-10 minutes during the day as these can be very helpful for mental and physical well-being. Taking a short walk outside, meditating, and a quick connection with your spiritual higher power, are other activities that may be very beneficial.

Using the handout, facilitators will discuss examples of how to monitor self-care to ensure someone is increasing and maintaining healthy behaviors. Participants should be encouraged to find ways to increase healthy behaviors.
MODULE TWO
What am I going to do?

Participants will receive blank Post It notes. Facilitators will ask them to write down a question that arises when viewing a social media campaign in the evening. It may be questions such as how campaigns are selected, what the components of a campaign are, and so on. Presenters will let participants know that Day 3 will begin by reviewing the Post It notes questions.

Presenters will bring everyone back to a large a group and ask:

1. How was the exercise for you?
2. What were some of the major behavior changes that were mentioned?
3. What were some of the smaller behavior changes that were mentioned?
4. What were some of the means of monitoring the behavior changes that were discussed?
5. How did it feel to get some encouragement?

CONCLUSION

Participants will be given a blank Post It note. They will be asked to write down a question that arises when they are viewing a social media campaign in the evening. It may be questions such as how campaigns are selected, what the components of a campaign are, and so on. Presenters will let participants know that Day 3 will begin by reviewing the Post It note questions.

Presenters will thank participants for attending and mention any particular highlights of the day. They will ask participants for their “pluses” or things they liked about the day and their “wishes” or things they hope to do differently on Day Two. Items mentioned by participants will be listed on newsprint under the appropriate heading.
NOTE
Day Three

To introduce proven strategies/tools to create a successful campaign or project that responds to community needs.
OPENING

Power Point  15 minutes

At the scheduled start time, presenters will welcome participants and thank them for attending Day Two. Facilitators will display the agenda from Day Two on the PowerPoint and a brief verbal review will be provided to participants which will include highlights from the previous day. Presenters will ask participants if they have any questions regarding material covered in Day Two or need any clarification.
Using the PowerPoint presentation, facilitator will guide participants through a lecture regarding the aspects of a social marketing campaign. Presenters will review questions from the Day 2 Post It notes.

**Social Marketing**

Social marketing uses principles from commercial marketing and the social sciences to change people’s behavior for the social good and to benefit both individuals and wider society.

**The four ‘P’ s of social marketing**

- **Product**
- **Price**
- **Promotion**
- **Placement**

**Focus on benefitting society**

- Unlike other marketing efforts where the ultimate gainer is the marketer, social marketing efforts aim at benefitting the society at large. This is the most important characteristic of social marketing.
- Social marketing does more than sell a product or service; it sells the social benefit of owning and using the product or service.
MODULE TWO

Success and the social media marketing campaign

Using the PowerPoint presentation, the facilitator will guide participants through a lecture regarding the tools and aspects of a social media marketing campaign.

Recent surveys have shown that approximately:

- **70%** of the people in the United States use at least one social media platform
- **90%** of young people between the ages of 18 and 29 use social media
- **57%** of consumers say they are influenced to think more highly of a business after reading positive comments or praise online.

**Definition**

Social media marketing has the primary goal of achieving a social good. Traditional commercial marketing aims are primarily financial, though they can have positive social effects as well. In the context of public health, social media marketing can promote general health, raise awareness, and induce changes in behavior by using social media such as Instagram, Facebook, Twitter, TikTok, and Snapchat.
1. A Carefully Developed Plan

The best social media campaigns start with a carefully developed plan. This plan should be specific to your campaign, but it should also fit into your overall social media strategy — meaning that your goals should not conflict, and the campaign should be a continuation of your existing social voice and style.

2. Clearly Defined Goals

Before starting any marketing campaign, you need to clearly define your goals. Deciding on what you want to achieve at the beginning of a campaign makes it easier to measure and analyze your results.

Your social media campaign can have multiple goals, where each piece of your strategy serves a different objective. Each goal you select should be personalized for your needs.

3. Cross-Channel Promotion

The best social media campaigns are part of an integrated marketing campaign where your efforts on social media are supported on a number of other channels.

The benefits of promoting your social media campaign across additional channels are twofold: Those you reach via social media are reminded through other communications, and those who are not as active on social media are informed.

4. Thorough Analysis

So how did your campaign perform? Was your social media program successful in reaching the goals you set out to achieve? When it comes to analyzing the success of your campaign, you will be thankful you identified the key metrics associated with your goals ahead of time. It is easy to benchmark your progress against your initial starting point.

The tools for a successful social marketing campaign:

- **TELL A STORY**
  - Make it relatable
- **KEEP IT SIMPLE**
  - Less is more
- **BE ORGANIC**
  - It should come from the heart

---

15 MINUTE BREAK
MODULE THREE

Putting together an effective social media campaign

Using the Powerpoint presentation, the facilitator will continue to guide participants through a lecture regarding the tools and aspects of creating a social media marketing campaign.

Presenter will review the following information:

How can I ensure my safety and privacy?
SLIDE: Data privacy, ethics and protection, a guidance note on big data for achievement of the 2030 agenda.

Lawful, Legitimate, and Fair Use
Data should be obtained, collected, analyzed or otherwise used through lawful, legitimate, and fair means taking into account the interests of those individuals whose data is being used.

Purpose Specification, Use Limitation, and Purpose Compatibility
Any data use must be compatible or otherwise relevant, and not excessive in relation to the purpose for which it was obtained.

Rise Mitigation and Risks Harms and Benefits Assessment
A risks harms and benefits assessment that accounts for data protection and data privacy as well as ethics of data use should be conducted before a new or substantially changed use of data (including its purpose) is undertaken.

Sensitive Data and Sensitive Contexts
Stricter standards of data protection should be employed while obtaining, accessing, collecting, analyzing or otherwise using data on vulnerable populations, persons at risk, children, young people, or any other data used in sensitive contexts.

Data Security
Robust technical and organizational safeguards and procedures should be implemented to ensure data management throughout the data lifecycle and prevent any unauthorized use, disclosure, or breach of personal data.

Data Retention and Data Minimization
Data access, analysis, or other use should be kept to the minimum amount necessary to fulfill the purpose of the data use.

Data Quality
All data-related activities should be designed, carried out, reported, and documented with an adequate level of quality and transparency.

Open Data, Transparency, and Accountability
Appropriate governance and accountability mechanisms should be established to monitor compliance with relevant law, including privacy laws and the highest standards of confidentiality and ethical conduct with regard to data use.

Due Diligence for Third Party Collaborations
Their party collaborators engaging in data use should act in compliance with relevant laws, including privacy laws as well as the highest standards of confidentiality and moral and ethical conduct.
ETHICS: Moral principles that govern a person’s behavior or the conducting of an activity. Ethics is concerned with what is good for individuals and society. The term is derived from the Greek word ethos which can mean custom, habit, character, or disposition.

SLIDE: How do I ensure that people will not steal my content online?
Review the slide with Twitter terms of service.
• You retain your rights to any content you submit, post, or display.
• Include disclaimer that you own the right to the content.

SLIDE: How do I know if social media campaigns are effective?

Analytics
Track growth, followers, and most importantly engagement.
What content are people most engaged with?
• Do people like the post?
• More importantly are people commenting on the post?

What is not working (lacking engagement)?
Create a regular social media practice.
Measure
1. Link (are people clicking on the link)
2. Hashtag (is it trending)
3. Share (how many)
4. Contact (are people using the contact information provided)

SLIDE: How do I use advertising to expand my audience online?

From Social Media today
Hold contests (i.e. after 100 likes, a special video will be posted)
1. Include a visual with every post.
2. Share more video (interactive media increases online engagement)
3. Be proactive in listening to and responding to your online community.
4. Change your page profile photos and cover photos.
5. Give people a reason to follow you.
6. Encourage tagging.
7. Use hashtags to get found.
8. Be entertaining and use humor to engage with followers.

SLIDE: What are the best practices for creating content?

When using a social media post, it is important to consider the messaging and imagery. You want to ensure your post has:
✓ Creative content ✓ A clear message

What are the “next steps” you would like the users to do?

Presenters will ask participants to consider the following questions regarding a social media campaign:

1. What do you want them to do?
2. Where are they present and engaged online?
3. What are your key messages?
4. What content can we create?

Presenters will be asked to review the statements on slide #19.

Using the soft role play format, presenters will ask participants to develop a social media message campaign. The campaign should be based on the statement and should focus on how to enforce or to contradict the message. Each participant will be given a sheet of newsprint to write a brief description of the social media campaign they will develop.

The campaign description will be displayed on the training room wall.

Based on the responses from the soft role play, presenters will review the social media campaign questions:

1. What do you want them to do?
2. Where are they present and engaged online?
3. What are your key messages?
4. What content can we create?

Presenters will engage in a large group discussion to solicit responses from participants about what in the campaign they found most interesting.

1 HOUR LUNCH BREAK

At the designated return time, presenters will welcome participants back from lunch.
MODULE ONE
PrEP Pricing Conversation

Using the PowerPoint presentation, facilitators will guide participants through a discussion on the effect of patent and patent pricing. Please ensure that the information on pricing is up to date.

**What is a patent**

Form of intellectual property protection that gives its owner the legal right to exclude others from making, using, selling, and importing an invention for a limited number of years.

To be patentable, a product (such as a PrEP drug) needs to meet criteria such as novelty, inventiveness, and industrial application.

Governments have flexibility to protect public health and access to medicines, apply strict patentability criteria, and issue compulsory licenses.

**How patent can be abused**

- Increased prices
- Data exclusivity
- Not allowing generic brand to be produced
- Not allowing generic brands to be distributed

**Interest of monopolies**

- Price of the medication
- Timeline for generic registration
- Public opinion of the company
- Influence on government policies

**Factor that influence pricing**

- Is there a patent?
- How many suppliers/producers exist?
- Is there competition among the producers?
- Are medicines imported?
- Quality
- Procurement, reimbursement, and distribution
- Registration and regulatory issues
- Is there access to generic medication?

Access to generic information may be blocked by:

1. Patents
2. Exclusion from “Voluntary Licenses” including the absence of patents
3. Data exclusivity of clinical data results (blocking registration).

Facilitators will review the information presented on the slide that demonstrates the impact of competition and how it usually results in substantial price reductions. The chart notes the huge reduction in price once generic brand(s) are introduced, which is a lifeline for many people.

This is a crucial reason why advocates work so hard to reduce the cost of PrEP medications by accelerating the registration of generic brands.
How activists are trying to reduce medicine cost?

- Knowing the patent status of PrEP medicines
- Procuring the most affordable existing antiretroviral (ARV)
- Ensuring access to the next generation of PrEP, which are medications that:
  - Are less toxic
  - Have fewer side effects
  - Are longer acting (injection, implants)

Trends in patenting/licensing

- Companies are filing more patents in Africa
- Inclusion of Sub-Saharan African countries in voluntary licenses is justified by income status
- Several African countries are transitioning to middle income status
- Uncertain future about the inclusion in licenses.

Voluntary licence

- Agreements between originator companies and generic procedures (sometimes through the medicines patent pool)
- Include a territory of countries where export is possible or prohibited

Facilitators will review the slides on:

- Patents of interest for PrEP use
- Patent status of Tenofovir/emtricitabine (TDF/FTC) in eight countries
- Patent status of key pipeline PrEP ARV's
- Available prices of TDF/FTC
- Timeline

Conclusion

There are no major patent barriers in eight countries (most are in Africa) to access affordable generic versions of TDF/FTC.

Generics are already available in most countries for $50-60 per person for a year's dose.

There are no major intellectual property barriers to access tenofovir alafenamide (TAF) once approved for PrEP, thanks to Medicines Patent Pool (MPP) voluntary license.
GOAL
To increase knowledge on working with key stakeholders, communities and allies on PrEP Demand Generation

OBJECTIVES
By the end of this session, participants will be able to:
1. Identify strategies to work effectively with key stakeholders and allies.
2. How to engage different communities working with gay and bisexual men.
3. How to mobilize different civil society groups to provide PrEP services for gay men.

Session 12

MODULE ONE
Engaging different groups to promote the health and rights of gay and bisexual men

Round One
Participants will be directed to select a break group from the groups listed below:

Track 1: Working with peer educators and mobilizers
Track 2: Working with healthcare providers and health facilities
Track 3: Working with policymakers and national level processes
Track 4: Working with media
Track 5: Working with faith-based organizations

On a sheet of newprint, each group will answer the following questions:
1. What is the role that this target group plays in the context of gay men's health and PrEP?
2. How do we engage with this group?
3. How do we get this group to mobilize demand among gay men?

Once the groups have completed the task, participants will remain with their groups as presenters begin a discussion. Each group will select a spokesperson. The spokesperson, with any needed assistance from other team members, will review the group's responses to the guiding questions.

Facilitators will use the handouts with sample responses for each of the track groups to guide the conversation. Presenters should be encouraging and supportive.

Round Two
Participants will be directed to select a track from the groups listed below:

Track 1: Working with peer educators and mobilizers
Track 2: Working with healthcare providers and health facilities
Track 3: Working with policymakers and national level processes
Track 4: Working with media
Track 5: Working with faith-based organizations

On a sheet of newprint, each group will answer the following questions:
1. What is the role that this target group plays in the context of gay men's health and PrEP?
2. How do we engage with this group?
3. How do we get this group to mobilize demand among gay men?

Once the groups have completed the task, participants will remain with their groups as presenters begin a discussion. Each group will select a spokesperson. The spokesperson, with any needed assistance from other team members, will review the group's responses to the guiding questions.

Facilitators will use the handouts with sample responses for each of the track groups to guide the conversation. Presenters should be encouraging and supportive.

15 Minute Break

At the designated return time, facilitators will instruct participants that for Round Two they should select another track. Groups will follow the steps from Round One.
## TRACK

### COMMONALITY

<table>
<thead>
<tr>
<th>Role</th>
<th>Engagement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building connections</td>
<td>Communication</td>
</tr>
<tr>
<td>Disseminate information</td>
<td>Cross training</td>
</tr>
<tr>
<td>Establish/develop information, relationships, and conversations</td>
<td>Outreach</td>
</tr>
<tr>
<td>Seen as role models</td>
<td>Building networks</td>
</tr>
<tr>
<td>Sources of information</td>
<td>Embrace creative local approaches</td>
</tr>
</tbody>
</table>

### Mobilization

- Social media strategies
- Need room to be creative
- Involve and work with community

## NUANCES

### Peer Educators

- Have familiarity with community
- Use peer language
- Referrals
- Build networks
- Messengers

### Healthcare Providers

- Are trusted sources
- May or may not be from the community
- Have scientific data and evidence (indisputable)
- Usually part of healthcare networks

### Policy Makers

- In tune with public opinion
- Have defined roles and responsibilities
- Have great influence

### Media

- Know pulse of community
- Have good evaluation measurements
- Have links to various stakeholders
- Have substantial budgets

### Faith-based organizations

- Deep roots in the community
- Know tradition and customs
- Are well established and well known
CONCLUSION

Presenters will thank participants for attending and mention any particular highlights of the day. Facilitators will ask participants for their “pluses” or things they liked about the day and their “wishes” or things they hope to do differently on Day Four. Items mentioned by participants will be listed on newsprint under the appropriate heading.

Facilitators will finish by letting participants know how much they are looking forward to Day Four, then dismiss the participants for the day.

Presenters will distribute a Day Four worksheet diagram to participants. See page 55 for diagram. This will provide participants with time to review and complete the worksheet. The diagram worksheet is designed to help participants design their own campaigns to increase PrEP demand in key populations.
NOTE
Day Four

Provides skills building tools to develop and design a social media campaign/project.
OPEN IN G

Power Point  15 minutes

Presenters will display the welcome on the PowerPoint as participants arrive.

At the scheduled start time, presenters will welcome participants and thank them for attending Day Four.

Facilitators will display the agenda from Day Three on the PowerPoint and provide a brief verbal review of highlights from the previous day.
Session 13

MODULE ONE

Let’s review

Using the PowerPoint slides, presenters will review the highlights from Day 3 with participants to ensure understanding. Presenters will encourage questions and comments from attendees. During the review presenters will do a soft role play. For each point reviewed a different participant will be selected to identify a situation in their community regarding PrEP availability and ask to provide an example related to the point being reviewed.

For example, regarding assessment: “Ethan, what are some of the facts that you know about PrEP availability in your community? What are some the facts that may need clarification?”

For example, regarding Creating a social media campaign: “Roberto, how would you tell a story that would fit a social media message? How would you keep it simple? Make it organic?”

“Jamal what do you think is the best way to engage your community in a social media campaign? How would you evaluate the success and decide how the message may need to be modified?”

It is important that participants don’t feel they are being targeted by the presenter but that the participant’s valuable insights are being sought. Facilitators can chime in with assistance, if needed. If the participant would like, they may ask for assistance from fellow participants. Some participants may take a longer time, other participants should not be offered assistance until asked. Presenters must ensure it feels like a learning environment, meaning participants feel that they are learning from one another and it is NOT an opportunity for participants to compete for who has retained the most information.

Presenters should also strive to keep the atmosphere light, so participants are okay with acknowledging they may have provided an incorrect response or they are unsure of the answer. Most importantly they should feel okay asking for assistance.

GOAL
To provide a review of the principles and concepts in planning and design of a social media campaign.

OBJECTIVES
By the end of the session participants will be able to:
1. Name two principles related to creating a PrEP campaign/project.
2. Identify two concepts in the development of a PrEP campaign/project.

TOOLS
Power Point
TIME: 1 hour 15 minutes
ETHICAL DECISION-MAKING PROCESS

Assessment
What are the facts?
• Fact vs opinion
• What needs clarification?

Planning
• Consider various outcomes
• How are involved communities affected?
• What are ways to mitigate harm?
• What are the duties, rights and principles at stake?
• What are the cultural concerns?
• Design a clear plan of action

Implementation
• What is an appropriate timeline?
• What are some of the ways to prepare for evaluation of implementation?

Evaluation
• How are outcomes being monitored?
• Does the decision and implementation need to be changed based on community concerns?
• What has been learned for future use?

CREATING A SOCIAL MEDIA CAMPAIGN

Focus on benefitting society

The four “P”s of social marketing

• Product
• Price
• Placement
• Promotion

Key elements
• Tell a story
• Keep It Simple
• Be Organic

Develop a plan

1. A Carefully Developed Plan
The best social media campaigns start with a carefully developed plan that is specific.

2. Clearly Defined Goals
Before starting any marketing campaign, you need to clearly define your goals.

3. Cross-Channel Promotion
The best social media campaigns are part of an integrated marketing campaign where your efforts on social media are supported on a number of other channels.

4. Thorough Analysis
What is your social media program successful in reaching the goals you set out to achieve?
Things to consider:
• Creative Content
• Clear Message
• What type of social media?
• Next steps

ANALYTICS

Track growth of followers while looking at:

Engagement
• What content makes people most engaged?
• What is not working? (How do you know it’s not working?)
• Create a regular social media practice

Clicks
• What is grabbing people’s attention?

Likes
• What are people liking?

Community Engagements
• What do you want them to do?
• What are they present and engaged online?
• What content can we create?
**Session 14**

**Practice using principle and concepts**

**GOAL**
To increase participants comfort incorporating principles and concepts into practice.

**OBJECTIVES**
By the end of the session participants will be able to:
1. Identify one way of using ethical decision making in the creation of a community campaign.
2. Demonstrate how to apply social marketing principles and concepts when developing social media campaigns.

**MODULE ONE**

**Putting what’s on the page into practice**

Presenters will divide participants into groups of four. Based on their own experience, groups will be asked to discuss key populations PrEP availability and needs in their communities. Participants will then select a key population for which to design a social media campaign to create change and respond to the needs.

Groups will be asked to quickly outline a design for an appropriate social media campaign. The campaign does not have to be absolute or all encompassing. The exercise is a means of allowing participants a chance to practice creating a campaign using the principles and concepts they have learned to respond to community needs.

Groups will be given 10 minutes for discussion to identify the key population for the purpose of the exercise and then 30 minutes for a campaign creation discussion. The group will create the campaign using markers, flip charts, and images simulating the way they envison it.

One person in the group will be designated as the notetaker and will write a brief description of the campaign created by the group. Another person will be selected as the spokesperson for the group.

Each participant will be given a slip of paper to use as an anonymous ballot to vote for the most compelling campaign. Presenters will tabulate the votes and declare a winner.

After the allotted time has expired presenters will bring participants to a large group discussion.

Presenters will facilitate a large group discussion to discuss the winning campaign’s elements. Use the following questions to ask the group:

- What did you like about the campaign?
- Why did you like the campaign?

**Power Point, newsprint, markers, masking tape**

**1 hour 15 minutes**
MODULE ONE

Presenting the diagram

Using the PowerPoint slide, presenters will discuss and describe the components listed on the flow chart diagram to achieve campaign objectives.

WORKSHEET

Core Team: Who should be the members of the team? What are their roles?

Target Group: What are the characteristics of the target group?

Stakeholders: Outside of the target group, who has an investment in the outcome of the campaign?

PROJECT SUMMARY

Problems I see/want to change: What is the problem? Are you able to address the root causes of the problem? Why is the change important to you?

Risks: What are some of the known risks for the target group? For the stakeholders? How will you prepare to deal with some of the unforeseen risks?

Resources I have: What are some of tools available to you? (It is always good to seek the opinion of others, they may help you identify some resources of which you were not aware.)

Resources I need: What are some of the tools you will need to bring about the change?

Expected changes: You will need to clearly state what is the desired change. This way you will be able to measure the success of the campaign.

Ideas/Insights/Activities: List any ideas, insights, and activities you would like to explore and be able to implement to achieve the desired change.

Next steps: What are at least three next steps you are hoping to achieve? Both for the campaign and the members of the target group that respond to the campaign.

Timeline: When do you expect to see measurable outcomes and impact? What are some of the next steps?

Presenters will provide participants with road map to demonstrate how the pieces on the flow chart work together.
MODULE ONE

Let's get ready for tomorrow

Presenters will inform participants that on Day 5 there will be two rounds of the small group exercise “From Idea to Action”. Participants will be invited to think of one issue they would like to address with their project idea. Participants will select a key population within their community or country to focus on. Based on what is known about the PrEP needs of the population, participants will create an advocacy campaign/project to increase PrEP usage in the population. Encourage participants to think about the discussions they had during the training when talking about sexual health approaches, availability, accessibility, challenges and opportunities, myths and misconception about PrEP. Each participant will have an opportunity to write a description of the campaign/project they wish to create.

They will be instructed to use the diagram worksheet to help them organize their ideas. Participants will work independently and will be given an hour to complete the exercise. They will workshop their project/campaign during day five. They will receive detail feedback from their peers.

CONCLUSION

Presenters will thank participants for attending and mention any particular highlights of the day. Facilitators will ask participants for their “pluses” or things they liked about the day and their “wishes” or things they hope to do differently on Day Two. Items mentioned by participants will be listed on newsprint under the appropriate heading.

Facilitators will finish by letting participants how much they are looking forward to Day Five, then dismiss the participants for the day.
Day Five

Allows participants to present their social marketing campaign/project and receive feedback from their peers.
OPEN IN G

 Presenters will display the welcome message on PowerPoint as participants arrive. At the scheduled start time, presenters will welcome participants and thank them for attending Day Five.

 Facilitators will display the agenda from Day Four on the PowerPoint and provide a brief verbal overview of highlights from the previous day. Presenters will ask participants if they have any questions regarding materials covered in Day Four or need any clarification.
Session 17

From ideas to actions

GOAL
To provide participants the opportunity to practice creating a campaign or project to respond to the need of key populations in their community or country.

OBJECTIVES
By the end of the session, participants will be able to:
1. Identify a key population in their community or country.
2. Identify research needed to create a successful response to the needs of the key population.
3. Create a message to incorporate into a campaign.
4. Identify a means of evaluating the success of the campaign.

MODULE ONE
Time to create

Participants will be divided into groups of four. If there are 24 participants this would mean there will be six groups and so on. Within each group, one person will present their campaign or project idea from day four. Then for the next 30 minutes the other group members will provide constructive feedback. At the conclusion of the 30 minutes, the person that presented will remain in the same place while the other members rotate clockwise to another group. Facilitators will suggest the format listed below to provide feedback on the project idea:

Worksheet, newsprint, paper
2-3 hours, depends on number of participants

Within the newly formed group another person will present and the other group members will provide feedback for 30 minutes. Once the half hour has expired, the process for forming new groups will repeat until each person has an opportunity to present their idea with feedback for 30 minutes.

WORKSHEET QUESTIONS

1. What key population are you focusing on in your campaign? Why did you select this population?
2. What is some additional information you will need? What type of research will you conduct?
3. What message is important to convey to the population?
4. Describe in detail the campaign you will use to present the message to the population?
5. What will you be asking the population to do?
6. What are the next steps?
7. How will you evaluate the campaign?

Constructive feedback:

• Some of the highlights were . . .
• A couple of things you may want to consider changing . . .
• Here are a few suggestions . . .
• The strongest part of the idea was . . .

At the conclusion of the exercise each participant will have one minute to provide a soundbite pitch of their campaign/project idea to the large group.

Reminder: The outcome of this activity could be a blueprint for PrEP demand mobilization projects and activities. Encourage participant to keep and take with them their written material.
MODULE ONE
Final Question

Facilitators will seat the participants in a circle. Presenters will thank participants for attending the five day training and for their participation. They will answer any final questions participants may have.

MODULE TWO
Lightning Round

Presenters will display the Day One goal and objectives PowerPoint slide to review the overall goal and objectives and assure participants that both were achieved throughout the five days. Presenters will announce it is a time for the lightning round! The large group exercise should move quickly. Participants will be asked to name one thing that they learned during the five-day training. Attendees may also mention a comment or statement that had an impact, what they will take away with them, and why there was such an impact.

MODULE THREE
Leaving with a full plate (optional)

Each participant will be given a white paper plate and a marker. Participants will be requested to write their name in the center of the plate.

Facilitators will direct participants to pass their plates to the left. Each participant will write a word or phrase that relates to the owner of the plate. Each person should be allowed to about 30 seconds to write something on the plate.

When the plates are returned to the owner, facilitators will ask participants to review some of the comments. Attendees will be told they may keep the souvenir plates with the messages and that they are leaving with a full plate.
CONCLUSION

Newsprint, markers, evaluations  15 minutes

Presenters will thank participants for attending and mention any particular highlights of the final day. Facilitators will ask participants to complete the evaluations and turn in the evaluations before they leave. Facilitators will finish by letting participants how much they are looking forward to seeing their campaigns in action, then dismiss the participants.
NOTES
The curriculum was drafted by Omar Baños, Angel C. Fabian, MD MNA, and Mohan D. Sundararaj, MBBS MPH, and its development was supported by Consultant Shawn Griffin. It was edited by Saurav J. Thapa and designed by Tran Dang Vuong.

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MPACT
PrEP Training on Sexual Health Advocacy
for Gay and Bisexual Men