



Webinar Transcript | March 16, 2017 Developing PROMISE RMS for PrEP - Booster Session

Chris: Seeing if some more people are going to join us. We're going to go ahead and get started. Good afternoon. Welcome to this booster session, hosted by CBA at JSI. My name's Chris Battelli. I'm a project associate at our CBA project at JSI. Today is March 16th, 2017. We're hosting this online event to review how to develop role model stories for PROMISE, with a focus on PrEP. We want to let you know that we're going to be recording this session for future access. Additionally, we appreciate you taking the time to respond to the questions we have posted. As you can see, there's a great range of interests in this topic, including see examples of how other stories have developed, reminder of what needs to go into a role model story, a refresher on the stages of change, and a better understanding of the expectations to writing an effective, I assume, that's role model story.

Before we start, let's review some guidelines to ensure a successful and productive virtual event. Please make sure your line is muted by pressing star 6 on your phones. Also, if you're listening in through your computer, please mute that by clicking the little sound button at the top of your screen. Just click it to the mute option. If you receive a call during this event, please don't put us on hold. Go ahead and hang up and then rejoin after you take care of your business. When you need clarification on any of the information presented today, type your questions in the chat pod below. That way we can direct them to the appropriate presenter and they'll be able to answer. If you have any technical difficulties, please right click on my name, Chris, and start a private chat with me. I'll be able to help you without it distracting the presenters.

Also, the presenters have prepared an interactive session. Please participate. It's the best way to learn. In the top of your screen, there's a little icon of a person putting their hand up. You can click that icon to raise your hand. The other options within that for Netiquette, so be sure to use that if you have any questions or need anything. Lastly, please stay connected until the end of the session. We will post files for you to download throughout.

In addition, we want to emphasize that this session focuses only on the development of role model stories, as part of PROMISE curricula, and that all examples will be about using PrEP. This event is intended for individuals who have attended a formal PROMISE training. It will build on the experience and knowledge you have on PROMISE and on PrEP. This session is not meant to replace a formal PROMISE training and does not provide an overview of PrEP. Never the less, if you need a formal PROMISE training, please visit effectiveinterventions.cdc.gov. If you need to learn more about available resources for PrEP, you can download these files from the pod on the right of the screen, labeled PrEP downloadable files. Click on the file and then click the download button. We'll make these files available again at the end of this session.

With that, let me introduce our facilitators for today. Arman Lorz and Juli Powers are PROMISE trainers and capacity building specialists at JSI and provide national technical assistance on PROMISE across the US and its territories.

Arman: Thank you very much, Chris and good afternoon everyone. The purpose of this session is to enhance your skills and your ability to develop PROMISE role model stories. Specifically, role model stories that promote awareness of and use of PrEP among the type of relations that you might be serving. Your engagement in this session will reinforce your understanding of the eight components of, and the relevant messages that are vital to developing effective role model stories for PROMISE. Your active participation will also strengthen your demonstration and your understanding of how to develop PROMISE role model stories using PrEP. You will increase your knowledge of available resources and tools and support services to assist in developing and distributing role model stories to support the high impact prevention, to try to use that access.

To help you achieve this objective, as Chris mentioned, we have included several discussions and some practice activities throughout this session. Before we move into any of these activities, let's hear from Juli about how PROMISE relates to the nation HIV AIDS strategy.

Juli: Thanks, Arman. I wanted to note, in response to the question that says, are there supplemental materials to download. We will be providing some links later on in the session. You will have access to those materials. As Chris noted, we're going to be sharing the Power Point, as well. More to come on those materials, don't worry.

Let's really dive in here. We're looking at the HIV care continuum and PROMISE today. You're probably all very familiar with the national HIV AIDS strategy. You're probably all very familiar with the care continuum, as well. In the national strategy, we are working together to one, reduce new infections. Two, our second goal, increase access to care and improve health outcomes for people living with HIV. Of course, our third goal, reduce HIV related health disparities and health inequities.

The care continuum guides our actions as we work toward those goals. As you probably remember from your PROMISE for high impact prevention training, the role model stories can be used to address the different stages of the continuum. That's going to be based on the community's needs. What we're doing today is looking at the first stage of the continuum, so the know your status stage, and talking about how role model stories for PrEP can keep people engaged.

Okay, testing in social media and really promoting the awareness of PrEP. We just recently and by recently, this week, had a workshop in South Carolina and it

was focused on PrEP so part of that was educating other staff and those who work in prevention. Again, in South Carolina, we give every client education and written materials on PrEP so really spreading that message and making sure people are aware of those options, social media and education and referrals. Great, so it sounds like you're already doing quite a bit and have many activities that are PrEP focused. What we're going to be talking about today will really build on these things that you are already doing.

Another strategy then to really promote PrEP is using the Promise Role Model Stories. That's kind of our impetus for today. Promise Role Model Stories can be used to promote PrEP, promote awareness of, promote interest in, promote uptake of. This is going to be for communities most at risk of infection. This is how we're going to focus the rest of our discussion. I'm going to turn it back over to Arman to tell us a little bit more about what this looks like.

Arman: Thank you Juli. One of the things that we want to review really quickly is what is the goal and the purpose of developing these role model stories as well as some of the key concepts that reinforce the message that we want to convey with the role model stories. Role model stories are based on actual members of the community that you are serving. Specifically, members of the segmented population. The segmented type of relation who have made a positive change in their lives. The stories are meant to show an honest reflection of the reality of that segmented population and they must illustrate progress or some sort of movement and motivation toward a behavior change.

It is important to note that role model stories don't necessarily show the perfect line. Rather, a positive behavior change illustrates someone's real life experience and the challenges that they're going to face or that they have faced when moving from one stage to the next. Whether we're talking about moving from free contemplation when we're not even thinking about it to contemplation, which is when we start thinking about it or from contemplation to preparation, which is taking some towards it or from preparation to action, which is when we are doing the behavior or from action to maintenance, which is we do the behavior for at least six months.

The community identification process provided with information about our population, the behaviors that we're trying to target. In the case, we're focusing on PrEP, we're going to use PrEP or the use of PrEP. The stage in which the population is for at that particular behavior. One of the things that I want to clarify is when we're talking about segmentation, we are referring to a specific population that we are addressing. For example, we may not just say that we are targeting men who have sex with men but rather we want to target Black MSM ages 18-24 who go to college in Columbia, South Carolina. We need to segment our population and work with them. Those are going to be the best role model stories to identify throughout the CID process.

The CID process is often helpful to identify also potential role models. Once we recruit the role models and we conduct the role model interviews that focus on the experience related to the goal behavior and remember, while their story may encompass multiple stages of change, we will write a story illustrating movement from one stage to the next stage of change. The final stage shown in the story should be one beyond where the community was staged for the behavior throughout the CID process.

After we conduct the interviews, we transcribe them, we draft the story, we edit it and edit it several times, and finally we turn it into a publication. Staff and the community advisory board and the materials review committee review it. That's the policy that we have developed and they make final revisions before we send it to production and dissemination. In theory, all these sound doable and very easy. That's what we have seen in all the training. But we know that organizations who have some difficulties developing some role model stories.

Juli: Thanks, Arman. I think listening to all that, there's a whole lot that goes into developing a role model story. Through the CID process and the interviews. We know that there are things that make it hard to do what Arman just described. In theory again, everybody has had this training. You all learn all about Promise and then you have to go back to your organization and start implementing. In reality what happens, is you get back to your organization and sometimes you're going to just come across some barriers that you didn't quite anticipate when you were sitting there in that training. Some of those barriers include the process of developing your role model stories. Here we have another question. We want to hear from you again and really hear what has been your experience, what has made it difficult to then go back to your organization after training and develop role model stories. What's been hard?

Take a few minutes and go ahead and enter your thoughts in the chat pod for us remembering all the information we need to include. Yeah, there's a whole lot that goes into those stories. We'll be talking more in greater detail today. You might have a great story but there are things that you need in order to make it a Promise Role Model Story. Finding people who are comfortable enough to share their story, not everyone is at a place where they want to have all their business out there and are even comfortable sharing that. Finding people to interview, finding the right people to interview. Finding people going through the CID process. Who do we interview first? Then from there who is going to become a role model?

Let's give it another few seconds. Anything else? Quite the process. Knowing how to stage our community. Yeah, I think that certainly has been one of the challenges because we're supposed to be drafting our stories based on where our community is so all of these ... Production, I like that one too. All of these

has certainly been challenges that we've heard from others as well. You're not alone in your challenges.

In fact, if we can go to the next slide, we'll see some other challenges that we've heard as we've done this work and have been supporting organizations. Thinking about the fact and someone mentioned all the components, everything that has to go into it to make it a Promise Role Model Story. Making sure that the situation and the accomplishments are realistic. Sometimes we try to put so much into the story and we're giving all kinds of details but it distracts from what the story is actually about. Making sure that we're creating the story in a way that is relevant but it's not too much that is distracting. It is ensuring that it also resonates with the audience. We mentioned the stage of change as an example and the challenge in our role model stories and we're going to talk more in a few minutes as well.

Remember, we're going just from one stage to the next. We don't want to jump through those stages of change. We don't want to be using stereotypes or have our role model story just be in advertisement for the agency instead of about the characters or about their stories. Arman is going to lead us through a discussion and look at those eight role model story components that are so essential.

Arman: That's right. I'm going to review those eight components really quick. These components are necessary to develop an effective role model story. I'm going to describe them really quick and for your convenience at the end, somebody asked this question at the beginning if all the materials are going to be available. You are going to be able to download the handout that you received at the training. Sometimes we get emails like, can I have the handout again? If you need that handout, you're going to be able to download it for more details.

Anyway, the first component is characterization. Characterization is a short description of the person and the circumstances of their life. Membership refers or shows a clear depiction of the character as a member of intervention population, the segmented population that you are serving. The risk behavior is addressed by including one or two phrases that highlight the particular behavior and some context around it that puts the character at risk. The behavioral goal is illustrated with an expression explaining what the character wishes to accomplish that is appropriate and achievable and that will move the character to another stage.

The stage of change movement is not just the stage of change, but we need to show that movement, are phrases that show the characters transition from stage to the next one. The determinants of risk are represented also by phrases because we're elaborating role model stories, these are all phrases. They are represented by phrases that show one or two factors that motivated the

character to change that behavior. The barriers to change and methods to overcome it are an account of a specific challenge that the character faces during their efforts to adopt a new behavior and how they were able to overcome that barrier. Lastly, the positive outcome is also a statement with the achieved results that reinforce the behavior change or intention to adopt a new behavior even when the behavioral goal was not attained.

It is important to remember that Promise and any other public health strategy and any behavioral interventions work in part by addressing social and behavioral determinants of risk. They influence how someone thinks about anything, about engaging in risk behaviors or healthier behaviors. In Promise, we identify the relevant behavioral and social determinants of risk through the intervention population interviews and then we use the role model stories to describe how the behavioral determinants of risk motivate individuals to make a change.

Really quick, here's a review of some of the behavioral and social determinants of risk that influence whether a person engages in a specific behavior. As a reminder, in Promise we are focused on one or two behavioral determinants of risk per role model story. We don't need to include all of them in one story, it's going to be too overwhelming. We really want to make it focus on one or two at the most of these determinants.

Some of you mentioned that you wanted to see some examples of role model stories. We're about to play a recording. Please let us know if we need to raise the volume or turn it down by selecting the louder or softer icons as Chris explained at the beginning of this session. Let's take a listen to a role model story and identify the eight components. This story was created or was developed to target Latino MSM who live close to Main Street who also use drugs and who are on PrEP but are taking it inconsistently. This is the story.

Alejandro: PNP? Yeah, man. I've partied and played with guys. Some are poz and others are neg. And my buddies here in the hood do it too, man. The thing is, when I've done drugs, I've done it bare too. I know I should use rubbers. It just ain't easy to think of it when I'm high.

Last year, one of bros told me about him being on PrEP and I thought it could work for me too. I went to the clinic on Main Street and started PrEP and started popping the pill every night to not get the bug. I felt I was taking care of myself and let my tricks know that by seeing it too, you know? It worked well until a few times when guys saw me taking the pill. The dudes just freaked out and left. I didn't know what to do. I even skipped PrEP a couple of times so guys wouldn't judge.

I'm smart, you know? I want to stay HIV free by not skipping a pill but I don't have to take the pill in front of anyone. So about three months ago I started to pop the pill before partying. It might seem like not a big deal now but even when I forgot to take PrEP before a trick, I'd just go to the bathroom, pop the pill in private, and I'm ready for the action.

I'm prepared and I don't have to prove it. I'm taking my pill every time. Even when I PNP, I call it Party and PrEP.

Arman: Excellent. Remember the intended audience for which this story was developed. The image and also the name, Alejandro appears to be Latino and he also explains that he has sex with men and he uses drugs and he also mentions that he is on PrEP, that he's popping the pill every night. That's what he mentions. That is the membership. That's what makes Alejandro in this case, a member of the population that we're trying to reach. The story also gives Alejandro some kind of character by using some language and specific locations that only the intended audience could recognize. It also provides some context to what is happening in the situation. Alejandro is somebody with substance use and HIV lingo and the area when he says that he went to the clinic on Main Street. The language that he uses is also very colloquial and very well known to that type of relation.

When it comes to the risk behavior, Alejandro mentions that he has condomless sex. He mentions that he does it bare but since we're focusing on PrEP, we must highlight that he is inconsistent taking PrEP, specifically those times when he does drug. The risk behavior is skipping PrEP. This is going to be one of the things that are going to be very common that I have on every training. Everyone wants to go to the condoms. We need to pay attention to what the risk behavior is. In this case, we want to focus on PrEP, it's going to be skipping PrEP. Therefore, the behavior goal for this role model story is for Alejandro to take PrEP as prescribed even when he is doing drugs. The behavioral is taking PrEP as prescribed and not skipping the pill and that's what he mentions.

To clearly identify the stage of change movement regarding the goal behavior, we have to look at where Alejandro started and where he was at then end of the story. Alejandro has been taking PrEP consistently for close to a year, over a year but he hasn't been taking it as he should. Since the goal behavior is taking it every day as prescribed and Alejandro missed some doses, he is starting to be in preparation. But we see that three months ago, he made some changes to stop skipping the pill and take PrEP every day as prescribed without missing any of the doses. This puts him in action. The stage of change movement starting preparation to action. We have to look at the time, three months is not maintenance yet so he is in action.

In the past, Alejandro missed doses because he struggled in between having a sexual encounter and taking his PrEP in front of others. At some point, he had to realize the risk that he was taking by skipping PrEP. He mentioned, I wanted to stay HIV free by not skipping the pill. The strongest determinant of risk is Alejandro's perceived risk of what would happen by skipping the pill. As a result, Alejandro started taking PrEP before doing drugs and also before meeting any of the guys.

The barrier to Alejandro to this change was that sometimes he forgot to take PrEP before a sexual encounter. Since he decided he was not going to skip PrEP and he was not going to take it in front of others, he overcame this by having a pill in the bathroom and taking it privately. As a result, Alejandro feels now that he is prepared and the positive outcome is that he is taking PrEP as prescribed for the last three months.

We wanted to highlight the components first in preparation to the next activity. What we are going to do now is we are going to give you the opportunity to identify the components of different role model story. We have several participants and we are going to divide into four small groups and each group will be assigned to identify a specific component. You'll have up to five minutes to conduct this activity. We're going to have small groups so I think this is going to be really, really fast. Again, the lines are going to remain muted and we're going to provide you with a new chat. It's not going to be the same chat, the same general chat but it's going to be a new chat in which you can write any of your comments or your findings. At the end of this activity, we'll reconvene all together and debrief all together. Please, please, please engage in your small group chat.

Before we split the group, let's take a listen to the new story developed to target HIV negative African-American MSM in the Capitol Hill area who could benefit from PrEP.

Dan: Lately I've notice more people talking about PrEP here in Capitol Hill. In fact, two of my friends take it. But I never actually sat and learned about it. I'm 25 and I thought PrEP was a pill to prevent HIV infection but only for when people are whoring around.

A while back I was online and I saw this YouTube video about PrEP. It made me think of this guy I really like. Things are going really well between us. He's poz and we use condoms most of the time but I'm thinking more about maybe how PrEP could help especially on those times when we are more intimate.

I wanted to ask my friends what to do but I didn't want them to judge me. I really wanted to know so I took one small step and asked them just what they thought of PrEP. One of them told me he also uses it with his partner who is

undetectable. It turns out it's for anyone who wants to add a new level of protection in or out of a relationship.

That was a good insight and the next time I get tested, I'll ask my HIV counselor more about PrEP. I don't know what to ask yet, but I want to explore all of my options to keep myself negative with the one I want.

Arman: Excellent. What is going to happen is that we are going to split everyone who is participating on this webinar and I'm trying to figure out. We're going to be focusing on only two of the components. We're going to be focusing on behavioral goals, which is going to be together with stage of change and determinant of risk. Before we go into that, we are to ... Juli, Chris, Liesl, and I will be in the rooms with you and after a few minutes, we'll come back together and debrief. You know what, let's just do it here. I think it's going to be so much easier. Let me just count really quick.

Ebony, Nikki, Omar, Rochelle and Tanya, if you could chat in the pod that says Small Discussion 2. Help us identify, hold on a second. You all should be in different groups, there you go. Let me know what you see. Can you all see Dan's story?

Rochelle: Yes, I can see it on my screen. This is Rochelle.

Arman: Thank you, Rochelle. You can see the story. I'm going to move people just to go into two breakout sessions. We need breakout two. Okay. Perfect. Look at the story and look at what Dan is saying and the phrases that he uses to describe the story and identify the components that you have been assigned on your story. You can see the story, Jan and you can see the chat room next to the story. On the chat box, identify some of the phrases he uses to describe what we're trying to identify.

Chris: Okay, everyone. Sorry for the confusion there, we just had a small number. But we're going to go ahead and give you just 30 more seconds so kind of finish up what you're talking about and we will reconvene.

Arman: Excellent. Everyone should be back and see the screen with the four chat boxes. On this activity, we were able to identify some of the components of the role model story. We skipped the first one, which is identify the characterization, which I think everyone gets that and also membership and risk behavior. It's easy to identify those risk behaviors. On the discussion for the second group, they were identifying the behavioral goal and stage of change movement. Liesl, could you please just share what the group was discussing as a summary, if you don't mind?

Liesl: Sure. Hi everyone, this is Liesl. In our group, we were talking about that Dan seemed interested in learning more about PrEP and he wanted to talk to his HIV counselor at this next visit, that he seemed very determined to take care of himself and get on PrEP.

Arman: Excellent. Thank you, very much. Then on group 3, you were discussing the determinants. Juli, could you please summarize what the group was chatting about?

Juli: Sure, we had a great discussion in our little chat. I think for me, determinant of risk is one of the harder components to address. We went through the story and we were talking about what is it that Dan says that is really going to influence him to move and change his behavior and of course our goal here of using PrEP. We noticed and identified that at the beginning he thought PrEP was just for those who were whoring around. We said, what made him change his mind and change his perception to move from that PrEP is just for whoring around to it being something else. The group identified that essentially in his social circle, he had friends who talked about the fact that they used PrEP and people who he knew were on PrEP and that gave them a different perspective.

We also talked about stigma and stigma kind of went along with the whoring around. But Dan really wanted to become more intimate and we were able to drill down and look at finding out that social norms and seeing people who were like him and part of his social circle were on PrEP and he didn't view them as just whoring around. That's where we landed was on social norms.

Arman: Excellent. That was a great discussion. We did not do the fourth group, which was focusing on identifying the barriers to change and the method to overcome these obstacles. What we're going to do right now is because [inaudible 00:34:20] but we want everyone to be on the same page. We want to review all the eight components, at least the ones that everyone needs a refresher on for Dan's story.

Let's talk about characterization. Dan is gay, he lives in Capitol Hill, he is 25 years old and he has an active social media life. He is also exploring the dating scene. He shows interest in one person. He tests regularly and he is familiar with some of the HIV lingo. When it comes to membership, Dan is African-American. The picture shows somebody who looks African-American and also he stated that he is HIV negative. He has a sexual partner who is HIV positive. He doesn't know much about PrEP and is curious about how it could benefit him and his partner.

Now we're talking about the risk behavior. The risk behavior, well Dan's sexual partner is HIV positive. They use condoms but they use it inconsistently. Since today we're focusing on PrEP again, Dan is also not on PrEP. The risk behavior is going to be condomless sex and not on PrEP.

The behavioral goal, Dan mentions that they don't use condoms all the time and he doesn't know about PrEP but he is thinking that maybe PrEP could help him. The ultimate goal for Dan is to start PrEP or to get more information about PrEP.

When it comes to the stage of change movement, we had some discussion right there in one of the groups that maybe he was in this phase moving to this phase, this is what is happening. Dan mentions at the end of the story that he has been thinking about PrEP for a while. That puts him in contemplation. Every time you hear the words, I've been thinking about this, that is contemplation and because he also mentions at the end that he plans on asking his HIV counselor about PrEP, that puts him in preparation. He's not in action yet. The movement is he moves from contemplation to preparation.

The determinants of risk. Dan also expresses that he has noticed more people talking about and using PrEP. He wanted to get information about it and also he found out that two of his friends are also taking PrEP and discovered that one of his friends is in a serodiscordant relationship where one of them is negative, the other is HIV positive and the partner who is negative is also taking PrEP. The most influential determinant of risk being addressed here is social norms. What expectations are happening with that population in Capitol Hill.

When it comes to barrier to change and method to overcome it, at the beginning of the story Dan had a preconceived attitude about who uses PrEP and it was mentioned under the group discussion. He wanted to find out more about it without feeling judged by another people. He says that he took a small step and he wanted to take a phase step, that's what the story tells me, by approaching and asking two of his close friends about PrEP. Dan found out the information that he received to be valuable and helpful.

Lastly, the positive outcome. The story ends by Dan stating that he does want to explore all his options. That he is not ready to take PrEP yet but he will learn more about it from his HIV counselor. The positive outcome of this story is that Dan is making plans to learn more about PrEP. We hope that you found this activity helpful. Remember, when you are implementing Promise, you are going to be developing the stories first and then you might want to revisit them to ensure that all the components are integrated into the story.

At this time, we would like to answer any of the questions that you might have at this moment about how to identify the eight components of role model stories and please feel free to use the chat pod to the left and ask any other questions. We'll answer two or three of them. There you go, I can see some people typing. Several people typing, thank you very much.

Ebony asks, any suggestions on how to fix a story that has multiple stages of change in them? Thank you, Ebony. Yes, if you want the quick fix ask for

capacity building assistance and we can come and tell you and help you identify how to do it. If you want something really quick, you can look at the handout that we are going to provide at the end and it presents the stages of change in a very simple manner and the movement, totally identifying some of the phrases that are going to identify where the person is. You know how I mentioned that when a person says, I've been thinking about, that puts them in contemplation, one of those phrases. Hopefully, that could help a lot. Again, if you're having issues and when you ask for capacity building assistance, that doesn't mean that you're doing a bad job, you just want to improve what you have. You can always ask any of us to do it.

Juli: I'm going to jump in, this is Juli. I'm going to jump in and add to what Arman just said. We have worked with an organization and they had exactly what you're talking about, Ebony in that they had a story and it was a great story but it jumped stages of change. It had more than one stage reflected in the story. What they were able to do then is really break it apart into two separate stories that built on each other. When they disseminated their stories, the first one represented the first stages of change and then the next story was the next stage of change.

This also gets what Omar is asking is that can we write a role model story in PrEP even if the person is not on PrEP. Remember that we are identifying where our community is and where your segmented population is for that particular behavior. If your goal behavior is to get on PrEP, but the community is in contemplation, then the stories that you're writing are one level above that. You're writing your story in preparation and at the preparation point, they haven't even started taking PrEP but again, we're trying to move through social norms and by disseminating these stories, move the community from one stage to the next. You absolutely could have a story about a behavior and they don't quite even get to that behavior yet. Arman talked about the fact that our stories don't represent the perfect client and that's exactly one example of that.

One, for those multiple stages of change, breaking it down into multiple stories and it might be a matter of later on that you disseminate the story in the later stage and then also really focusing on those earlier stages, especially if your community is not quite there yet for PrEP. We know that when you do a role model story interview, you might be able to interview someone who has actually moved through the stages of change so they're later in that process but you can multiple stories from that one interview. We just want to make sure we're breaking them down so you're not jumping through the stages as we've said.

Arman: Thank you, Juli for that useful information. Let's talk about the next activity and as we move to the next activity, Juli is going to walk us through it. First we

identified the eight components and now we're going to be how to develop those components with an interview. Juli.

Juli: Thanks, Arman. If there are more questions, I saw some typing that was happening so we'll have an opportunity to address more questions after this as well. The exercise we just went through as Arman said, is that we were able to look at a story that was already developed. Of course, the challenge is that we have to develop the story to begin with and that's why I think especially the multiple stages of changes can be a challenge. When you interview your potential role models to develop the story, you're going to have to be able to identify the eight components from what they say. Essentially, pulling out those different components from the raw information that your interview provides.

We're going to look at this together. We're not going to split out into groups as again but we're going to look at three of the eight components and we're going to use some raw information that we've gathered from an interview. Let's say we went through our CID process, we went through our community identification process and through that process we've identified the need to target sexually active, HIV negative, transgender women. These are HIV negative, transgender women who engage in condomless sex with HIV positive partners. During the same CID process we also found that this population was in contemplation for PrEP use. They're thinking about it, maybe talking about it, but really haven't taken any steps.

We've interviewed, we're going to call her Chastity as our role model. As a reminder, when you do your interviews, we encourage you to record those interviews. We encourage you to transcribe the interview so that you can use the actual language that your role model is, the things that they are actually saying during the interview. We don't have a transcription, we don't have the actual interview. What we have here are the main points from our interview with Chastity. We're going to be using these main points that came out of the interview to identify some of our components. Liesl, will you help us out and read through kind of our summary of our Chastity interview here?

Liesl: Sure. Chastity is a 27-year-old transgender woman who is knowledgeable about HIV. She has just one primary male partner who is HIV positive and her partner has been on treatment for one year and he misses his medication from time to time. They both like to party occasionally. She's heard from others in the community that HIV is not such a big deal now that treatment is available and people have stopped caring. Chastity and her partner have no intention of using condoms. She is concerned because he doesn't always take his medication and she believes that PrEP could protect her but she doesn't know how she would pay for PrEP.

Juli: Great, thank you. Again, based on our CID process, we identified starting PrEP as the goal behavior. That's going to be the goal behavior for the story that we're going to be creating. We learned that the community was in contemplation for starting PrEP. They're not quite there, they're not using it, they're thinking about. Knowing that we're going to write our story one stage above where the community is, what I want you to do is select the statements that reflects what our character might say to show the stage of change movement. We're going to see another box that's going to appear here. Go ahead and select a statement that you think reflects the stage of change movement that we would want to illustrate in this story. Again, we want to start one stage above contemplation or we want our story to be one stage above contemplation.

All right, okay. We've got a 50/50 split. The community is in contemplation. I never thought PrEP was for me, maybe I should consider it. That pretty much reflects that stage. However, what we're looking at for our story here with Chastity as our role model is writing our story so she ends one stage above contemplation. I've been thinking about PrEP for a while, contemplation. I will ask my HIV counselor how I can start PrEP. That would be from moving to contemplation, I've been thinking about moving to preparation, taking a step to think about how to move toward that. Again, this is language that you can incorporate within the story to show that one stage of change, moving from one stage to the next stage, moving from contemplation in this case to preparation.

As we're going through these, if something isn't clear, please go ahead and chat in our general chat box to ask your questions or ask for any clarification if it's not clear. We're going to look at now the determinant of risk and remember, the determinant of risk is what is going to influence someone to change their behavior. Based on what we see in our summary from our Chastity interview, which of the following sample statements would you use in developing the role model story? I had to learn how to get PrEP as well as how and when to take it. Everyone is taking PrEP so I thought why not me. I need to find out how I'm going to pay for PrEP and if the pharmacy close to my apartment will refill my prescription before making a decision. I realize that I could HIV from my partner because he doesn't take his meds every day. You might want to look at the last bullet as a hint in our summary of Chastity.

She thinks PrEP could protect her but she doesn't know how she's going to pay for it. What is going to influence whether Chastity is able to take steps and move forward. Let's go ahead and change the poll and I see some people have changed their votes. Excellent. Yes, the most influential determinant here is really going to be knowledge because what Chastity or our character that is based on Chastity needs in order to move forward and be able to consider PrEP is more information. She doesn't know how she's going to pay for it. Some language that could illustrate that determinant is, I need to find out how I'm

going to pay for PrEP and then if the pharmacy close to my apartment will refill my prescription before making a decision.

She knows, just because I know a lot of you had selected the last one, I realize I could get HIV from my partner because he doesn't take his meds every day. She knows that is true and she's concerned, it does say that. She's concerned because he doesn't always take his medication but the thing that's going to be standing in the way that's going to help her move from not being able to take PrEP to take steps to be able to take PrEP is being able to pay for it. In this story, we want to make sure that is the language we use and the examples we use are very clear that that is the determinant that will influence whether is he able to change her behavior.

These are tricky. The determinants, I said it when we were in the small group, that I find that one probably one of the more challenging components of all of them. We want to make sure that when we're developing our stories, it's very clear for our target population what it is we're trying to illustrate.

Okay, let's look at one more example. This one is going to reflect a barrier. This is going to be a barrier that's going to get in the way of our character's progress to her goal behavior of starting PrEP. Then again in our story, not only do we present a barrier but we also present a way to overcome that barrier. Here's some of our statements. I started taking PrEP before bed but with my busy schedule, I forgot to take it a couple of times so I decided to ask others what they do to remember. Remember where our character ends here, we end in preparation as a hint.

I didn't think I could take a vitamin every day much less PrEP so I got a pill box to help me remember. I started taking PrEP but I forgot to take it a couple of times so I decided to stop taking it. After all, everybody relapses, right? I don't have a regular doctor right now because I don't have insurance but a friend told me she sees a great LGBT friendly doctor at the community health center.

Since our story, I see that we've got some answers for the first one, some for the last one. Okay, let's go ahead and close the poll and take a look at what we have. Again as a reminder, in this story since we are one stage above where the community is, while our goal behavior is taking PrEP, she's not quite there yet. She ends in preparation at the end of the story. She ends in taking steps. That first one is a great example of a barrier and a method to overcome it if our story was focused on preparation to action and actually was able to move her to action. But since we're focused on contemplation of preparation and she's not actually taking the medication yet, the things that are going to get in the way is how she's going to pay for it and how she is going to get it. That last one about not having a regular doctor because I don't have insurance but a friend told me

that she's got a great doctor who can help me out. The correct answer for this would be the last one.

I think even as we went through this activity and these exercises to come up with these examples, it's easy to want to pick the one that talks about the challenges to taking PrEP because we're talking about PrEP. But remembering that within our story, we're only moving through one stage and we need to make sure that our challenges and our determinants reflect that movement and that stage. Thank you all.

When you draft your own stories, you're going to go through a similar process in that you're going to have to include phrases and include language from the perspective of your character that illustrates and addresses the eight components that we've talked about. You want to make sure they're clear. You want to make sure others can pick out the components. Once you draft that story, you should be going through the same thing that we did before where you look at the story overall and you go through and you pick out the eight components and you say, what language is in there that illustrates this component?

I'm going to turn it back over to Arman but I think as we're talking through this, this is quite the process. Certainly, coming out of, Arman already talked about technical assistance or capacity building assistance, coming out of training and then doing this can become overwhelming. There's a lot of support and help available for you. I'm going to stop talking and turn it back over to Arman.

Arman: Thank you, Juli. This activity helped with the questions that Ebony and Omar asked a little bit earlier. I think trying to pick several phrases, it could help you to make a good decision on what's going to be helpful and more related to the goals that we're trying to achieve with the role model stories. It was very useful when we developed this activity.

The other thing that I want to mention is that we have mentioned all the components but additionally to making sure that all the components are reflected in your role model stories, we also have identified some other important lessons to share with you. Remember that you may want to develop only one role model story at a time. Even if you are working with several stories, work on one at a time. That is going to ensure that your story holds all your efforts into one place.

Aim to cut short and concise stories. Stories with less than 400 words could lead to a more clear message. It could be very challenging when we have stories that are very long. When those are less than 400 words, it could lead to a more clear message. Similarly, look for simple artwork that is also motivating. That includes

any pictures, any colors that you choose. Make sure that everything has the same message that it's concise and simple and appealing to the eye.

Decide in advance what will be your platform for dissemination. For this, take into consideration where your population meets, where they socialize, where they gather. That could be a good start to the platform, trying to find the platform for dissemination for the stories. Decide on a layout that is easy to the eye and easy to read and appealing. A lot of the times, we're trying to produce beautiful pictures and beautiful, like a lot of information. It becomes a little bit overwhelming. Somebody reads the story and they go to the first paragraph and they're done. It's too much information. Try to keep it appealing and simple and easy to read.

Also, remember that checking your story before production is one important step that you can take. You can run it by your advisory board, using the distribution guidelines for peer advocates that you received during the training, or even better, you can pilot test the story with a small group of your target population and ask them questions about how real is the story for you about your type of relation? How does the language sound to you? Does that sound real to you? Ask them if the story generates any type of conversation? These steps will validate your story with your intended audience and they're going to tell you. If they don't connect with the story, they'll going to tell you. You may want to consider different language or a different picture. Whatever it is, they're going to tell you and welcome that feedback.

Lastly, create multiple stories from a single role model story interview. This goes along to what Juli was saying a little bit earlier. When you interview a person, a role model story, they're going to tell you from the beginning when they started going to your agency when they didn't know anything about HIV to I don't know how many years later and that's going to be the whole interview that you're talking. But when you're developing role model stories, just focus on one stage of change movement and ask them questions about, if you want to focus on that particular stage of change, ask questions about that and just move from one stage to the next.

Save all that information that the role model interviews are going to give you so you can be able to identify the stage movement, the determinants, the risk behavior, and outcomes to build on future or any other concurrent stories if you have more than one at the same time.

When we are talking about social media, this is something that we wanted to mention because a lot of people want to use social media and it is fine. We don't have anything against social media. You have to decide how and what format you will disseminate this story. Remember, just because your story uses social media, that doesn't mean that's it is a Promise role model story. But social

media can be useful to promote your role model stories. You must select the most conducive channels. Not all social media is appropriate nor does it replace the peer advocate and the crucial role of engaging others in discussions about the stories. If you're considering developing stories using social media, we as capacity building assistants can help you and provide you with some guidance. You have many resources available at your disposal. Juli is going to talk a little bit more about those resources that we have for Promise.

Juli: Great, thanks Arman. There are quite a few tools and resources available to help you implement your Promise role model stories. You see a couple of boxes now where we've got tools that are available, files you can download. The Promise downloadable files box has a number of documents for you to be able to download. All you have to do is click on the file and then click on the button that says download file and so you can save all of those to your computer. That includes the handout that Arman mentioned earlier about the eight key components and includes some additional resources for role model stories. Then you'll see below that there are a bunch of online resources available as well. We'll give it just a minute here if there's anything that you want to download. Arman, does this stay open when we move?

Arman: Yes, we can move it and it will stay open.

Juli: Perfect, because I think we also have some PrEP resources and it's the same process but they're in a separate box. We just want to make sure that, there we go. We have some PrEP resources, Promise resources and online resources. There are a whole bunch of things. Yeah, go ahead.

Arman: Sorry, I was just supporting what you were saying, lots of resources.

Juli: Then as Arman mentioned, certainly there is technical assistance though the capacity building assistance program so JSI and others. Oh, we're breaking up. Thanks, Omar. Hopefully, you can hear me now because I am on my phone, not on my computer, I don't know. Three boxes worth of resources and material. For any of those, go ahead and click on them and then click download file.

I think that's bringing us to the end, which means that if there are any additional questions, feel free to type in the box for us. If not, you can certainly contact us after this webinar and contact us directly. I think Chris, if you can go to the next, oh go back to the previous slide. A request for the previous slide. The PrEP one or the Promise one. All of these are the things that are in the box to the right. The general guidelines for PrEP use is in that PrEP downloadable files. The CDC fact sheet is there as well, clinical practice is there as well. To get any of these, you just have to click on the downloadable files box. No problem. The same thing applies for the Promise downloadable. The ones that were listed on the screen are what are in that box so everything is right there.

You can definitely request CBA, Ebony. We are here to help you. All right. I think if we can just go to that last slide. It has our contact information and online resources that links to our CBA website but you can also reach out to us directly. We'll turn it back over to Chris for final instructions.

Chris: Thanks, Juli. Thanks everyone for joining us. Thank you Arman and Juli for presenting and thank you everyone for your active participation. You can download today's presentation from the Promise downloadable files pod on your screen. Lastly, when you exit this event, please complete the brief survey about your participating experience. We would greatly appreciate your feedback. To exit this event, please click on the link named exit this event, which I know seems self-explanatory but we need that versus just an X. We will leave the meeting open for a few minutes. You can access the downloadable files and thank you all and have a great day.