PrEP DEMAND GENERATION TOOLKIT

Resource Guide for Community Organizations to Generate Demand for Pre-Exposure Prophylaxis (PrEP) Among Key Population Communities
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1. **What is [GET. PrEP. DONE.] Toolkit?**

This toolkit was developed by APCOM with technical support from the World Health Organization (WHO) and UNAIDS.

Based on online demand generation activities implemented by APCOM and its country implementing partners since 2014, it includes good practices and lessons learned from the highly successful testXXX campaign series which has been implemented in several Asian countries. Parts of this toolkit are also derived from APCOM’s advocacy work on PrEP starting from the PrEParing Asia Consultation and subsequent in-country technical assistance activities.

While the toolkit has been designed with men who have sex with men (MSM) as the primary focus, but the principles are universal to be adapted and implemented for other key population communities and other targeted audience. Tips and examples provided based on APCOM’s experiences in Asia might also be applicable to other regions as well.

To learn more about APCOM’s work on PrEP, check out the following resources:

- CLICK HERE
- CLICK HERE

2. **Why did we develop this Toolkit?**

The aim of this toolkit is to support community organizations to increase awareness of and generate demand for PrEP for HIV prevention. With this toolkit, you may be able to:

- Design and implement sex-positive activities to promote and increase demand of PrEP at the country level among key population communities who are at substantial risk of acquiring HIV;
- Identify mainstream social media platforms, specific geo-social dating applications, and other online venues and areas to promote key messaging and implement sex-positive activities;
- Develop and promote key messages, information, education, and communication (IEC) materials, and other promotional materials to contribute to increasing knowledge about PrEP and other HIV prevention methods;
- Establish collaboration and engagements with healthcare providers, civil society organizations, private sectors and other stakeholders in developing sustainable online campaign which adequately respond to the needs of key population communities.

In this toolkit, we attach **ANNEX 1. PrEP FAQs** to give you a broader landscape about the use of oral PrEP for the MSM community. It contains several important pieces of information that you might find useful for references.
“Motivation is both personal and related to advocacy. I want to make use of an option for prevention and give myself an opportunity to talk about this new approach.”

Jonas Bagas, PrEP user, Philippines
3. What is Demand Generation?

Demand generation refers to a comprehensive targeted marketing program that generates interest for a product or service for long-term engagement. For this toolkit, demand generation refers to the set of online and initiatives that drives the awareness of key population communities about PrEP and generates and maintains their interest in the use of PrEP, HIV testing and other HIV-related services.

Adopted from corporate sales and marketing, demand generation provides a consistent and effective strategy for engaging with the target audience. Demand generation is becoming one of the most effective approaches in reaching "hard-to-reach" key population communities to increase uptake of HIV services and decrease the rates of new HIV infection or AIDS-related death.

However, demand generation programs may vary in each country. Each demand generation program should find and use platforms as points of engagement with the key population communities according to a country’s context, including in high burden areas or cities, legal environments, and the sub-population’s online behaviors.

Notes to remember:
Effective demand generation programs:
1. Narrow down, clearly identify, and understand the target audience;
2. Customize content and key messaging for the target audience;
3. Keep the target audience engaged in the HIV service cascade;
Developing an effective and successful demand generation strategy may follow various processes depending on the scale of targets and context. This toolkit presents strategies and examples based on APCOM’s documentation of good practices and lessons learned in implementing its demand generation strategy and corresponding activities in a range of countries.

Implementing a demand generation strategy for PrEP involves three (3) phases:

1. **Inception Phase** – setting scope and objectives, defining target audience, gathering strategic information, partnership building, develop messaging;
2. **Implementation Phase** – establish campaign presence, target audience engagement;
3. **Monitoring Phase** – tracking results and campaign evaluation.

### Inception Phase
- Setting Scope and Objectives
- Defining Target Audience
- Gathering Strategic Information
- Partnership Building
- Develop Messaging

### Implementation Phase
- Establish Campaign Presence
- Target Audience Engagement

### Monitoring Phase
- Tracking Results
- Campaign Evaluation
4.1. INCEPTION PHASE

4.1.1. SETTING SCOPE AND OBJECTIVES
The first step to any demand generation campaign is to determine the scope and objectives of your campaign. By setting your scope and objectives, you are taking a step towards identifying potential strategies that are available in generating demand for PrEP among key population communities. It will also help to set a clear vision and agreement on the outcome of your campaign. In defining objectives, it is important that they are results-oriented and adhere to the S.M.A.R.T. methodology:

**Specific** - What are you trying to change?
- What is the short-, medium- and long-term results of your campaign?
- Who will benefit?
- What information are you trying to collect?

**Measurable** - How many people are you trying to reach?

**Achievable** - How will you achieve your results in your given timeframe?

**Relevant** - Is what you are trying to change a key priority for the community?

**Time-bound** - How long will it take to achieve your results?

Below is an example of a broad set of objectives for demand generation:

### By the end of 1 year:
1. There is an increase of awareness of PrEP among MSM in Bangkok, Thailand;
2. Increase unique visitors to online demand generation campaigns has been generated;
3. Number of MSM made appointment reservations with partner clinics or service providers to access PrEP;
4. Number of MSM in Bangkok, Thailand, actually accessed PrEP from partner clinics or service providers.

4.1.2. DEFINING TARGET AUDIENCE
Once you’ve defined your campaigns scope and objectives, you need to define who will be the intended audience of your campaign. This will be driven by the aims and objectives of your campaign and who you aim to reach within your campaign.

Defining your audience is one of the crucial steps to help you reach better results for your activities. Finding the right audience would be beneficial to your campaigns’ efficiency as it would help you to create a tone of voice that really speaks to your potential audience. Bear in mind that the channels, language, and information you use to connect with your audience might not be as effective with one demographic as it is with another.

Basically, target audience is a group of people to whom you address your campaign and members of this group are usually share common traits. You can start by looking at different target audience demographics to define some of the most important factors you need to know about your would-be audience. They can be described by behavioral and demographic attributes, such as age, gender, income, education or geographical location.

For example, one campaign may wish to include all MSM in their country as their target audience, while it would be much more efficient to target MSM of a particular age range, geographical region or who use a particular website or social media applications. Here are some questions you can ask yourself to specify your target audience:

- What is the age range of your target audience?
- Do they engage in any specific activity that may increase the risk of acquiring HIV?
- Do they frequent a particular service provider or social venue?
- Are they users of a specific app or service?
- Geographical location?
4.1.3. GATHERING STRATEGIC INFORMATION

The most effective campaigns are those driven by data. Having existing and relevant data for your campaign will help refine your objectives and activities to further respond to the needs and challenges of your target population. It will also ensure that your campaign has a comprehensive understanding of the HIV epidemic in your country and can thus contribute to addressing broader issues. Therefore, data collection should be one of the first activities you must do prior to starting your campaign.

With almost every information accessible online these days, it is not rhetorical to say that you have all that you need at the end of your fingertips. You just need perseverance to look closer. If you can’t find what you’re looking for online, you could always ask around. Just make sure you don’t waste time chasing a dead end - ask the right people that could help you. Remember, knowledge is power. The more you know, the bigger chance you could think about what are the risks and challenges that lies ahead and be strategic to achieve your goal.

Having adequate information will serve as a strong foundation that will help you understand background and context. Hours of reading reports and literature review will be worth it as you start developing your carefully calculated plan. You are actually saving a lot of time, compared to the energy that you are going to spend if all hell breaks loose just because of the lack of preparation. Taking stock of existing strategic information will also help you define what new or additional information will need to be collected through your campaign activities. Depending on your country’s context, you may be able to find this information in national health databases, global HIV and AIDS statistics, or data from HIV service providers.

Strategic information may include, but not limited to:

- Estimated size populations of targeted audience;
- Epidemiological and behavioral data of targeted audience (this may be national data or city-specific);
- Barriers to accessing HIV prevention and treatment services;
- PrEP and HIV prevention interventions within the National HIV programs;
- Hot-spot mapping of targeted audience.

It is also important to gather strategic information from your targeted audience. This would allow you to understand them deeper and provide greater context in setting up your campaign strategies. Frankly speaking, there’s really nothing better than first hand point of views and representation really do matters. Below, we provided a comprehensive example of collecting information through community focus groups discussion. There are, however, multiple other ways to collect information for your campaign (e.g. key informant interviews, surveys, community consultations, etc.).
Focus Group Discussions (FGD)

FGD is one of the most common ways for community organization to gather data from their communities. It involves gathering your target audience to discuss a specific topic. We recommend a minimum of five up to a maximum of ten participants in order to ensure efficacy.

Different topics can be discussed through a set of pre-determined open-ended questions during an FGD, depending on your objectives. Specific to PrEP demand generation, you might want to identify their interest in PrEP and other HIV-related services and challenges in accessing those services. You might also want to know about their perception toward the campaign and its activities and generate suggestions for key visuals and messages to promote services, among others.

An FGD guide should be developed, which will include: FGD objectives, participants criteria, ground rules and, of course, the set of pre-determined questions. A moderator with great facilitation skills will lead the process, ensuring that perceptions, ideas, and experiences. You may also include a notetaker to capture information throughout the discussion. The information a notetaker should capture is not limited to what participants say but also include non-verbal cues, group dynamics, and participant behaviors. Participants should give their consent to participate in either signed consent form or verbal consent in case of virtual FGD.

This toolkit provides different templates that may give you an idea on what you can include in your own FGD. Your final FGD instrument for data collection can be based on one or a combination of FGD templates. Remember to adapt the template to your provided below with possible questions you can consider to gather information that may be relevant to developing effective demand generation activities.

As mentioned above, FGDs are not the only way to gather data. Surveys, key informant interviews, consultations, and desk reviews are also valid methods of data collection and should be considered if your organization’s capacity and resources allow.
INSTRUMENT 1.
FOCUS GROUP DISCUSSION TEMPLATE

This FGD discussion template was used for an FGD that was conducted under one of the testXXX campaigns, focusing on HIV and STIs testing. With MSM as the sole campaign target, there were three FGDs with three different groups to assess perspectives among participants from different group age. Participants came from a diverse background – a mix of MSM who live in different areas, working on different fields of expertise and variable personal income (from local minimum wage to high income). This is to ensure variability and representation.

Example FGD Template
1.1. Introduction

Participants:
There will be 3 different groups of participants which consist of a minimum of 5 and maximum of 10 MSM. The composition of the groups is as follows:
- First group – MSM aged 18 – 24 years old
- Second group – MSM aged 25 – 30 years old
- Third group – MSM aged 31 – 35 years old

Consent:
The participants will be informed of the purpose of the focus group discussion. They will be requested provide their consent to participate prior to the FGD by a signing consent form.

Confidentiality:
The identity of the participants is secured and will be dealt with utmost confidentiality.

Data:
The information gathered from this Focus Group Discussion will be stored privately within the organization's database.

Discussion ground rules:
- Everyone gets a chance to talk.
- Do not talk over each other.
- People might have different opinions, but everyone is entitled to their own ideas.
- If you don't want to share something, you don't have to say it in the group.
- Please use nicknames only, for yourself or when talking about other people.
- This is a safe place to share information, but there are certain things that should not be kept secret including information about serious self-harm. If this comes up, we will have a private conversation which will involve another trained counselor or professional.
Example FGD Template

1.2 Access to Key Demand Generation Activities

1. Which social media platform(s) do you use? Why?
2. What kind of content do you find most engaging in these social media platforms?
3. Which of the following contents interests you the most? Why?
   • texts
   • graphic arts
   • pictures
   • videos
4. Any dating applications you are familiar with? Why?
5. What kind of offline events do you think would best attract the MSM community? (e.g. sports, cultural events, exhibition, art performance, dance party, drag show, pageants, etc.)
6. What time would be best for these events? Who do you think would be best as speakers for these events and why (e.g., celebrity, doctors, someone from MSM, etc.)?

FGD Template

1.2. HIV-related Key Visuals and Messages

1. What formats do you recommend for the promotion of PrEP resources? (e.g., Single rectangular artwork/short comic)
2. What are your suggestions on the visuals for PrEP resources to make them relatable to you?
3. What are your suggestions on the messages for PrEP resources to make them relatable to you?
4. What are your suggestions on the visuals for HIV-testing to make them relatable to MSM?
5. What are your suggestions on the messages for HIV testing resources to make them relatable to MSM?
6. Which platforms do you think are most accessible for you to find HIV-related information?
FGD Template

1.3. Online Health Information Consumer Behaviors

1. What is the device you usually use to interact in social media platforms and dating applications?
2. How often do you search for key health information online?
3. What information about health do you usually look for online?
   HIV information? Testing?
4. When you are online or using any social media or dating applications, do advertisements pop up in the middle of your use?
   What is the advertisement about?
   Are there any messages about health?
5. How do you feel about these pop ups?
6. Where do you normally find your sexual partner(s) online?

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FGD Template

1.4. Access to key HIV-related information

1. Based on your observation, do young MSM like yourself have access to HIV-related information?
2. If yes, what are the usual HIV-related information accessed by a MSM like yourself?
3. Where/which platform do you usually access this information?
4. If no, what do you think are the reasons?
5. Do you think other MSM do not want to access HIV-related information? What do you think are the reasons?
6. What do you think are the HIV-related information MSM like yourself need the most?
7. Is the HIV-related information interesting for MSM? If yes, why? If no, why not?
8. How can we make HIV-related information more interesting for MSM?

Refer to these resources on how to conduct a focus group discussion:
4.1.4. PARTNERSHIP BUILDING FOR PROGRAM IMPLEMENTATION

In generating demand for PrEP, you are encouraged to establish partnerships with service providers which provide PrEP as one of its services, as well as other stakeholders that can develop and/or disseminate accurate HIV-related information, including on PrEP. These partnership arrangements will help you specifically on the monitoring part of the campaign, as you’d need reliable and updated data of your target audience’s access to PrEP.

Through the campaign, you will promote where community can access PrEP, and vice versa, service providers can refer their clients to your campaign for any update information related to PrEP. You could also make further arrangement for service providers to actively participate in your campaign activities, such as placement of printed campaign materials on the clinic, request for the doctor in the clinic to speak in a webinar promoting PrEP or make a dedicated content about the clinic to promote their services. More support from service providers and other stakeholders adds more credibility to your campaign.

Below are some of the questions you may consider when identifying partners:

- What kind of stakeholder do you want to partner with? Government, private sector, civil society organization, HIV service provider, community gatekeeper or influencer? Why?
- Are they proven to be trustworthy and credible to engage with or provide friendly services to your targeted audience?
- What can they contribute to your campaign? Technical or financial support? Advertising reach?
- How involved will they be in the campaign? Will they be interacting meaningfully with your targeted audience?
- Are they safe to engage and interact with your target audience? Will safety and confidentiality be compromised?
- Do they have community-friendly policies and/or practices?
- Do they provide HIV counseling, testing and treatment? Are their locations or distribution point frequently visited by your targeted audience? Are the services sensitive to your targeted audience needs?
- Will this partnership establish good relationships and lead to future collaboration or support?

These questions are by no means an exhaustive list but can give you an idea of what you need to consider when choosing partners. It is crucial that any stakeholder you partner with will make positive contributions to your campaign and ensure that your target audience are safe from harm.

For example, APCOM, and its testXXX campaigns, established partnerships with relevant institutions to assist in the implementation of demand generation program or campaigns. These partners were identified as being part of the government HIV program at country level or international agency who committed to provide support.

In order to keep track of your partners, you need to record relevant information about them. This information may be shared in your campaign messaging. The information you need about your partners are presented in the template below. This should be ready as you are developing your key messaging or content about PrEP.
## INSTRUMENT 2.
### PARTNER MAPPING TEMPLATE

**Example Partner Mapping Template**

### 2.1. PARTNER MAPPING TEMPLATE

<table>
<thead>
<tr>
<th>Clinic 1:</th>
<th>Operating Hours:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Social Media Page</td>
<td></td>
</tr>
<tr>
<td>Website</td>
<td></td>
</tr>
<tr>
<td>Clinic phone number</td>
<td></td>
</tr>
<tr>
<td>Messaging App</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinic 2:</th>
<th>Operating Hours:</th>
</tr>
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<tr>
<td>Name:</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Social Media Page</td>
<td></td>
</tr>
<tr>
<td>Website</td>
<td></td>
</tr>
<tr>
<td>Clinic phone number</td>
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<tr>
<td>Messaging App</td>
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</tbody>
</table>

<table>
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<tr>
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<th>Operating Hours:</th>
</tr>
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<tr>
<td>Name:</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Social Media Page</td>
<td></td>
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<tr>
<td>Website</td>
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<tr>
<td>Clinic phone number</td>
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<td>Messaging App</td>
<td></td>
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</table>

<table>
<thead>
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<th>Operating Hours:</th>
</tr>
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<td>Social Media Page</td>
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<td>Clinic phone number</td>
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<td>Messaging App</td>
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</table>

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4.1.5. DEVELOP MESSAGING

In implementing demand generation activities, you need to keep your target audience engaged with your messaging. This is a crucial part of driving awareness about PrEP.

As mentioned earlier, the best campaigns are driven by data, so use the data you have gathered to inform your messaging. If you conducted an FGD to understand the interests of your target audience, you may be able to develop messaging that responds directly to those interests. You can also analyze national statistics or behavioral research to better understand their behaviors on accessing HIV services and consumption of PrEP.

To help you develop your campaign’s messaging, some qualities of good content include:

- Short, simple, and easy to understand – Try to avoid long and complicated content, your audience is likely to not pay attention at all! Keep it short and sweet.
- Compelling and appealing – Does your content make your audience laugh? Cry? Maybe in the mood for fun? Pique your audience’s interest by appealing to emotions while giving sound and accurate information.
- Memorable – If your audience forgets your content the moment they look at something else, then you’ll never convince anyone to take PrEP. Make your content life-changing, literally!
- Innovative – Doing something new and different is sure to catch someone’s attention. Find out what has already been done, then avoid them and do something completely different.
- Relatable – Whether it’s the language, sounds, images, ideas or concepts, people like things they can relate to. Let your audience know how relatable taking PrEP can be!

For more information and guides on how to craft your messaging on PrEP, Annex 1 outlines the frequently asked questions of the MSM community about PrEP.

Once you have developed your specifically-tailored key messaging for PrEP, it is important to conduct a self-assessment within your team whether or not the formulated messaging will be effective in generating awareness and driving interest. This is part of monitoring your campaign. Please refer to the instrument below as a simple assessment measure for any developed contents.

It is also a good practice to keep your partners involved by checking for feedback and making sure they know your key messages and other content. If you have the capacity and resources, you may also run a pilot test with your community to see how effective your campaign messaging will be.
**INSTRUMENT 3.**

**EFFECTIVE MESSAGING CHECKLIST**

APCOM has compiled a checklist we use in assessing whether the messaging we put out through our campaigns are effective in generating awareness and driving interest. For the purposes of this toolkit, we will use the checklist below in facilitating a self-assessment where the messaging you formulated will be effective. You may add more questions or items into the checklist which will help tailor the messaging in the context of your country.

1. **Does the messaging offer anything different than previous or similar campaigns?**
   - Yes.
   - No.

2. **Are the messages simple and easy to understand?**
   - Yes.
   - No.
   - What is not easy to understand? How could they be improved?
     - ______________________________
     - ______________________________

3. **Do they say anything interesting?**
   - Yes.
   - What is it that makes the messaging interesting?
   - No.
   - How to make the messaging interesting?

4. **Do they resonate with the target audience?**
   - Yes.
   - The messaging reflects the motivations and behaviors.
   - No.
   - The messaging does not reflect the motivation and behaviors of targeted audience.

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**Notes to remember:**

Generate content that your target audience would want to engage with (read, watch, like, comment and share). Your key messages and other content on PrEP will get a response from your target audience if both the content and how you present the content are interesting and relatable. Remember, curated or tailored content are essential for promoting PrEP and generate demand for it.
Message Development Tips and Examples

These examples are derived from the lessons learned in implementing testXXX campaigns in four cities: Bangkok (Thailand), Manila (Philippines), Jakarta (Indonesia) and Saigon/Ho Chi Minh City (Vietnam). For more examples, you may visit this link:

1. testBKK used ‘lifestyle content’ with health messaging to drive engagement. An example is a blog about ‘How to Date an HIV-positive Guy’ where the content shared that HIV is not one of the variables that determine whether a gay man and his partner are an emotional and physical match. The content then connects the reader to www.hivequal.org, testBKK.org and other websites with useful content for people living with HIV.

   You may visit this link for specific examples.

2. testBKK used a web series to build online community and affecting positive behavior change in Bangkok. Strong campaign video production and distribution has the power to change knowledge, attitudes and behaviors surrounding HIV-related knowledge. Drama can help viewers develop a deeper understanding of an issue and how they should relate to it in everyday lives.

   Developing high quality video content is one of the key ways to drive online online engagement.

   Examples of the key messaging are below:

   • (First 15 seconds of Gay OK Season 2, Episode 2, delivered by main characters)
   The first step to protect yourself from HIV is to use condom every time you have sex. For extra confidence, you should consider taking PrEP. PrEP is now more widely available.
   For more information about PrEP, please visit www.testBKK.org

   • (First 15 seconds of Gay OK Season 2, Episode 3, delivered by main characters)
   One thing I learned from performing in this series is that an HIV test are not just about results but also about active health planning. Especially for new couple, an HIV test will help you plan your future together.

   Full episodes of the Gay OK web series can be accessed here.

3. testSGN created more effective Facebook ads by customizing copy of different demographics. Implementer of testSGN brought variety to its online advertising’s writing so that each online ad can make a connection with various characteristics of the audience.

   Examples of key messaging developed by testSGN can be accessed here.

4. testMNL made its campaign videos local and relatable, and used thumb-stopping to engage its audience. This convinced the audience to keep watching the videos by making the video local, funny and interesting.

   Examples of key messaging developed by testMNL can be accessed here.
4.2. IMPLEMENTATION PHASE

4.2.1. ESTABLISH CAMPAIGN PRESENCE

Campaign presence is strongly associated with branding – one of the most valuable marketing and promotional assets. This includes the development of campaign’s name and logo. Finding the right name or title for a campaign requires a rigorous process of thinking, as it should not only be simple and easy to remember, but also reflect the overall vision and mission of your campaign. Same modality applies for the development of logo where the actual challenge is to set up a tone through colors and shapes that are easily recognizable and associated to characteristic of your target audience.

Another important component under the branding sphere is key messages, which are created to help describe what the campaign is and/or what solutions it offers, both in words and images. Key messages are not intended to be used word-for-word. Instead, they are to serve as guides, and as the foundation for expressing the campaign's distinct personality. Developing consistent messages that resonate clear and memorable catchphrase for the target audience is undoubtedly an important process. In crafting the key messages, please refer to the principles stated in the 'Develop Messaging' section earlier.

Building the campaign’s branding awareness is corresponding and often intersectional with other campaign products and activities. Especially on the process to establish online campaign presence, where social media and other online platforms play a pivotal role in reaching new layers of audiences. A solid campaign presence will support the overall process of demand generation starting from engaging up until nurturing the targeted audience, which eventually will lead to a conversion.

Strong digital and online presence contributed to the success of APCOM’s testXXX campaigns. Digital and online tools also helped testXXX campaigns to connect with audiences who are less visible in everyday life, who may not be in spaces where offline activities are staged and who are considered “hard to reach”. These include MSM groups who do not identify themselves as gay men. To create awareness and generate demand, it is important to interact with target audiences in online spaces, particularly in mainstream social media platforms where they frequently log-in for both business and pleasure. For MSM, gay dating applications where they actively seek sexual partners has become an effective platform for interventions.

Online demand generation activities must be accompanied by a page or pages in social media platform/s. Facebook, Instagram, Twitter or TikTok are mediums for sharing campaign updates with the right audience. The trends in social media use will differ between different groups of targeted audiences, including from different geographic areas (countries, cities and regions), different ages and different backgrounds. Hence, you are expected to assess the opportunities and challenges posed by different social media platforms in amplifying the key messages of the campaign and generating awareness, and to decide whether to create different online approaches based on the assessment of the social media platforms.
4.2.2. TARGET AUDIENCE ENGAGEMENT

4.2.2a. Digital and Social Media Engagement
Ensuring that your communication tools and demand generating activities are targeted to your audience and cater to their needs and interests is critical in establishing audience engagement. To do this, you can optimize your digital or online activities to reach target groups. Optimizing your social media platforms can include:

- Ensuring your profile images and social media posts reflect your campaign;
- Ensuring your social media page provides complete information about your organization and link to your website.

If you have the resources, paid promotions of your content on social media is one of the best ways in boosting your content to reach the target audience. You can also consider partnering with a social media platform or online application that your target audience frequently use to help promote your content through advertisements.

Moreover, it is important to develop content that encourages your target audience to engage (like, comment, and share). You can do this by developing interesting, funny, and likable content, as well as by asking questions related to their interests and replying to their comments. This makes your online presence more personal and relatable, and helps you establish a community that actively and consistently engages with your content. Please refer back to ‘Develop Messaging’ section for more details.

Social Media Engagement Tips and Examples

We have listed below some tips and examples used by testBKK campaign that you may adapt in engaging with your target audience:

Example 1. Drive interest of the target audience by curating tailored polls that incite engagement and discussions, as well as to generate knowledge about their preference on the subject.

Annually in mid-April, Thailand celebrates Songkran, its most famous festival. Water fight is an important element of the festival, coupled with numerous parties for the general population and MSM alike. E.g.: “What do you prefer to do during Songkran celebration? A. Water fight, B. Clubbing/partying, C. Traditional celebration with family or loved ones.”

Example 2. Post content about a topic that is related to their behavior or preference and linkages to demand generation product or service. E.g.: “online public discourse about sexual behaviors of non-partnered or non-married individuals, including gay men, by a public figure recognizing the importance of providing sexual services to everyone.”
4.2.2b. Key Opinion Leaders or Influencers

Every demand generation activity or niche has its respective key influencers or key opinion leaders. The process for engagement with the right key opinion leaders, and building relationship with them, can dramatically promote your key messaging.

APCOM, and its testXXX campaigns, established partnerships with different influencers with various objectives. Some partnerships are established to maximize the visibility and gain access to audiences that would otherwise not be reached through our digital engagements.

Key opinion leaders may vary from one group to the other. They may be individual celebrities or personalities with influence over the lifestyle or behavior of MSM groups, or corporate brands who customize their messaging, products or services to drive the experience of the group.

For an effective social media engagement, you are encouraged to collaborate with social media influencers that will help the campaign reach out to the target audience who are difficult to reach. Partnering with a social media influencer will leverage ‘peer recommendation’ adding to that of community partners’ encouragement. However, as mentioned above, make sure that the influencers you are partnering with are trustworthy, credible, and respectable figures and do not engage in unbecoming behavior. You may also consider doing a background check to ensure that they do not hold prejudice and biases against other key population groups, and have not acted or expressed themselves in a way that discriminates and further stigmatizes other people. For example, an influencer that holds transphobic beliefs should be avoided, especially since transgender people also use PrEP and access other HIV-related information and services.

A good influencer does not merely rely on pretty face and sexy abs, they should be able to lead opinion to their followers, make them believe in the issue that they are advocating. Sky’s the limit for creativity and highly skilled influencers are expected to be familiar with making great content. Please choose carefully for better impact and investment. It is advisable that you always stay involved in all processes relating to partnership with influences. Make sure they consult with you before posting a content and stay alert in case their followers make inquiries about PrEP or other HIV-related services. You need them to share factual-based information that is accurate and reliable.
INSTRUMENT 4.
KEY OPINION LEADERS AND
INFLUENCERS MAPPING TEMPLATE

Example Key Opinion Leader Mapping Template 3.1

<table>
<thead>
<tr>
<th>No</th>
<th>Opinion Leader Name</th>
<th>Area of work</th>
<th>Characteristic</th>
<th>Social Media Account</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

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4.3. MONITORING PHASE

4.3.1 WHAT DO YOU NEED TO MONITOR?

As mentioned in Section 4.1, you will need to identify objectives that are specific, measurable, achievable, relevant, and timebound. This section will focus on ensuring you measure your objectives and monitor your campaign.

As you are developing your objectives, it is likely that you already have an idea of what it is that you are trying to measure, or in other words, an indicator. Indicators should directly link and map to objectives. For example, common indicators for awareness raising campaigns may include the number of people reached for services, social media analytics and number of enquiries received.

Listed here some indicators under testXXX campaigns for your reference:

- Number of MSM tested (and have collected results) at identified ‘MSM friendly’ services;
- Number of MSM tested negative and sign up for PrEP and ‘MSM friendly’ services;
- Number of MSM tested positive at identified ‘MSM friendly’ services;
- Number of MSM diagnosed with HIV and enrolled into the continuum of treatment, care and support services;
- Number of likes/followers on campaign Facebook page/Instagram profile;
- Number of contents posted on Facebook page/Instagram profile;
- Number of enquiries received on information related to PrEP;
- Number of partnerships established with stakeholders.

Once you have identified your indicators, you can think about your baselines and targets. A baseline is where your campaign starts and acts as a reference point from which you can measure your progress and achievements, while on the other hand, a target is what you hope to achieve at certain milestones of your campaign.

A baseline can be determined during the data collection phase, which may include the number of testing of targeted audience on a specific service provider in the last three or six months. You can use the data as benchmark and regularly monitor if there’s an increase. As your campaign progressing, you could note that it’s a contributing factor to that increase trend of testing.
Using the sample objectives in the first part of this toolkit, the indicators, baseline and target are presented as follows:

<table>
<thead>
<tr>
<th>Objective</th>
<th>Indicator</th>
<th>Baseline</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>By the end of 1 year, there are 5,000 MSM aged 15-24 in Bangkok, Thailand who are aware of PrEP;</td>
<td>Number MSM aged 15-24 who are aware of PrEP</td>
<td>0</td>
<td>5,000</td>
</tr>
<tr>
<td>By the end of 1 year, 3,000 MSM aged 15-24 engagements to campaigns' Facebook page has been generated;</td>
<td>Number MSM aged 15-24 who engaged with campaign's Facebook page</td>
<td>0</td>
<td>3,000</td>
</tr>
<tr>
<td>By the end of 1 year, 2,000 Bangkok-based MSM aged 15-24 made appointment or arranged reservations with partner clinics or service providers to talk or discuss PrEP;</td>
<td>Number MSM aged 15-24 who made appointments</td>
<td>0</td>
<td>2,000</td>
</tr>
<tr>
<td>By the end of 1 year, 500 MSM in Bangkok, Thailand, aged 15-24 actually accessed PrEP from partner clinics or service providers;</td>
<td>Number MSM aged 15-24 who actually accessed PrEP</td>
<td>0</td>
<td>500</td>
</tr>
</tbody>
</table>

In this example, your baseline is zero because your campaign has yet to start and thus has not reached or increased anyone's awareness on PrEP usage. Take note that depending on how you formulate your objectives, you may need to measure different indicators and have different baselines. For example, if you are trying to gauge MSM's overall awareness and usage of PrEP, you may need to conduct a baseline setting exercise to collect data on how many MSM are already aware of and use PrEP, which can be easily determined during the data collection phase when you are conducting FGDs, surveys, desk reviews or other data collection methods. This also means that you will have to work towards reaching MSM populations that are not yet aware of and do not use PrEP. Ideally, this is what you are encouraged to work towards since reaching MSM who already use PrEP has very little impact on spreading awareness, increasing PrEP uptake and lowering HIV infection rates.

For more information and guidelines on monitoring and evaluation for HIV programs, UNAIDS provides a helpful resource database available [here](#).
After identifying indicators, baselines and targets, you will then need to identify the means through which you can gather and verify this data. If you are partnering with service providers, you can integrate your campaign in their service delivery during client orientations and counseling over a certain period. Thus, you can include the registration forms used by your partner service providers as a measure. If you are using process and outcome measures, your partner service provider should also be able to provide you with necessary information.

For online activities, as mentioned in the list of indicators earlier, it could be through social media analytics and data that your social media platform is likely to provide. This may include the number of site-visits, clicks, likes, comments and shares. Most social media platforms came with in-app analytics feature that you could backtrack for a certain period of time. If you have the resources, you could use a third-party app, such as Iconosquare, that will give you a greater control to analyze the data.

Please remember that these data should be gathered regularly – we recommend you to gather these data at least once in every month. This process is very important to understand the trends among your audience, making adjustments and determining your campaign presence going forward. For example, you could see some of the highest performance rating contents of your campaign. The high engagement from your audience is proof that the contents are actually working and you should put more focus on those kinds of contents. You could also see the demographic (age group) that are mostly engaged to your social media channel and create more content that caters to that specific age group in a way that is most appealing to them, among others.

The same modality also applies to your other campaign activities. If you do some kind of promotion using physical campaign materials (such as merchandise) to increase PrEP uptake or series of webinars discussing PrEP – everything must be well documented for you to be able to analyze the impact. Even small details like estimate number of attendees on your activation events or other offline activities would be important information for your campaign improvements. Ideally, you need to know the impact of your activities, learn from the insights you have gained and implement them better next time around.

In addition to measuring data on your online campaign performance, the collected data on uptake of HIV-related services also needs to be periodically analyzed. Measuring this data against data on your communications activities can help you have a deeper and holistic understanding of how effective your campaign is. For example, you may want to measure how many times an MSM received information about PrEP through service providers, and how many MSM started to use PrEP after receiving information through service providers. Gathering this information will help you analyze your campaign vis-à-vis HIV service provision to identify gaps and understand why a client may not go through with using PrEP.
4.3.2 MONITORING AS AN ONGOING PROCESS

Keep in mind that monitoring your demand generation campaign and activities is an ongoing process. You will need to monitor data and adjust your campaign as you learn more about what works and what doesn’t. Demand generation should adopt a continuous quality improvement approach. This means you should be able to respond and adapt to the changes in your data and your environment (i.e. policy changes, increasing infection rates, social behavior changes, etc.) in order to ensure your campaign remains relevant and effective.

When your data calls for you to adjust your campaign, oftentimes this means changing your approach to achieve your objectives. For example, you may realize that your target audience is more accessible through TikTok, or that your online activities on Facebook do not generate enough attention and interest despite being creatively packaged. This means that you may need to focus more on the kind of content you produced for TikTok and other similar content that goes viral on the app and perhaps, change your approach to your Facebook audience with the way that works in TikTok.

Implementing a data-driven demand generation strategy or campaign will assist you in ensuring that the overall design of your campaign – from key messaging to digital and social media engagement – will produce the desired results.

Sometimes, albeit uncommon, you may need to reprogram and change your objectives. However, such changes are only ever necessary in extreme cases when an objective becomes difficult or even impossible to achieve – such as due to an unforeseen policy change that makes operating risky for service providers and deters clients. Ideally, you should already ensure that your objectives are achievable in the given timeframe and have accounted for risks during the planning phase.

Throughout campaign implementation and towards the end of your campaign, the results of your demand generation activities can be monitored through different methods. Remember that these measures will vary from one context to the other, and will depend on different variables (the target audience, the platforms used, the content generated, online or offline).

For example, testBKK measured the success of its campaigns by tracking the penetration of the campaigns and key messaging into the MSM communities and assessing the change in attitudes and uptake decisions through a series of assessments. It involves an online survey with a cohort of 200 MSM participants (number of participants may differ for each campaign implementation). The initial assessment would serve as a baseline information. Subsequent assessment with the same cohort should be conducted after every six months (or other period interval as deemed appropriate) as follow-up assessments to monitor and evaluate the online digital campaign implementation.

The survey questionnaires is structured based on the assessment objectives and covering questions on socio-demographic characteristics, sexual health awareness and behavior, and campaign awareness and engagement. The questions are modified accordingly for each phase of assessment. A report will be generated after each assessment process, which will include, but not limited to; successes, challenges, gaps, and best practices of the online digital campaigns. These reports will inform or allow testBKK to identify achievements and bottlenecks in implementation to determine adjustments to campaign implementation strategies that will help in building strong and sustainable campaigns in the future.

Below is an example template of what you can include when conducting baseline assessment to analyze the changes in your campaign data over time:
INSTRUMENT 5. BASELINE ASSESSMENT

Example Template
5.1. Baseline Assessment Tool

Objectives
The purpose of the evaluation is to assess the penetration of the demand generation campaign into the MSM community as well as to assess the change in attitudes and uptake decision within a period of time.

Recruitment
To ensure variability in the cohort, the recruitment will be purposive and conducted at specific venues and hotspots identified with MSM. Aside from these offline venues, participants should be recruited online through mainstream social media platforms and specific geo-social dating applications. Both these online and offline venues and areas where MSM congregate were mapped and chosen by the country partner organization after consulting with community members or CBOs working for key populations in Bangkok metropolitan area.

Specifically, the inclusion criteria for baseline assessment are as follows:
• Self-identified gay man or MSM aged between 18-30;
• Residing in metropolitan Bangkok, Thailand.

Baseline survey assessment:
I – Demographics
1. Please specify your age
2. How do you identify yourself?
   - Gay man / MSM
   - Bisexual man
   - Heterosexual man
3. Do you reside in Metropolitan Bangkok, Yes No
II – Baseline
4. Are you aware of Pre-Exposure Prophylaxis (PrEP)?
   - Yes
   - No
5. If yes, do you know where to access PrEP?
   - Yes (Please state _____)
   - No
6. Are you exposed to online campaigns about PrEP?
   - Yes
   - No
7. If yes, which components are you exposed to?
   - Facebook page
   - Online ads (social media ads and dating apps ads)
   - Shared by a friend
   - Shared by the clinic
   - All

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NOTE:
Annex 1: PrEPARING to Play Safe

Pre-Exposure Prophylaxis (PrEP) Frequently Asked Questions (FAQs) for Men Who Have Sex With Men
PrEP FAQs

We attach this PrEP FAQs to give you a broader landscape about the use of oral PrEP for the MSM community. It contains several important pieces of information that you might find useful for references, particularly when you develop messaging for your campaign. Understanding how PrEP works might also help you in setting up your campaign objectives and develop strategies for effective implementation. Information listed in this FAQs is up to date at the time when this document is published.

I. This material is for you!

This material is designed for gay men and other men who have sex with men (MSM).

If you identify as a gay man or MSM, and you are looking for more information about oral pre-exposure prophylaxis (PrEP), then this material is for you!

This material provides you with important information that you need to know about PrEP by answering the frequently asked questions about the pill. Below are range of information on how you can handle all the fun while still protecting your health and the people you play with.

II. What is Pre-Exposure Prophylaxis (PrEP)?

Pre-exposure prophylaxis or PrEP is a powerful HIV prevention strategy where an HIV-negative person can use anti-HIV medications to reduce their risk of becoming infected with HIV if they are exposed to the virus. Taking PrEP as directed by your healthcare provider is a highly effective way to protect yourself from HIV infection. The World Health Organization (WHO) recommends PrEP as additional prevention choice for people at substantial risk of HIV infection. It is an additional tool in the HIV prevention toolbox, alongside other tools like condoms and harm reduction, for people to consider.

WHO currently recommends two different ways that gay men and other MSM can take oral PrEP: daily PrEP and event-driven PrEP (ED-PrEP). For daily PrEP, you take one PrEP pill every day. For ED-PrEP, you take a double dose (2 PrEP pills) 2 to 24 hours prior to sex, followed by one dose at 24 and 48 hours after the first (“2+1+1”). If sex continues for more than a single day, continue taking one pill per day until two days after the last time you had sex.

Notes to remember:

- IMPORTANT! Oral PrEP may not be a right fit for everyone. But it can be useful for many who are at risk for HIV infection and comfortable with the idea of taking a pill to prevent HIV.
- IMPORTANT! Get an HIV test before starting PrEP or restarting PrEP after you have stopped. Regular HIV testing every three months is also recommended. This is because PrEP is effective at prevention but is not sufficient to treat an HIV infection.
- IMPORTANT! Daily oral PrEP is appropriate option for anyone at substantial risk. Based on the current evidence, oral ED-PrEP is only recommended for men who have sex with men.
Is PrEP right for me?

Consider the questions below. If you answer ‘Yes’ to any of the questions, then PrEP may be one HIV prevention strategy to consider.

This list is not exhaustive.

- Do you consider yourself to be at risk of HIV infection?
- Do you sometimes have sex without condoms?
- Did you have an STI in the last year?
- Have you taken post-exposure prophylaxis (PEP) at least once in the past year?
- Are you in an open relationship or having sex with multiple partners?
- Are you having sex with someone whose HIV status you do not know?
- Are you having sex with someone from a city or region where there are large numbers of people living with HIV?
- Are you in a serodiscordant relationship, where your sexual partner is HIV positive and not taking HIV treatment?

If I start PrEP, do I have to continue taking it for the rest of my life?

No, you don’t.

Many people have times in their lives when it makes sense to take PrEP (like if you are joining circuit parties) and there are other times where it does not. For example, if you start taking PrEP because you are sexually active with multiple partners, and you are unsure of their HIV status, you could choose PrEP to stay protected from HIV. Later, if you find yourself in a relationship where you and an HIV-negative partner are committed to having sex with only each other, then continuing to take PrEP might not be needed. You can start, stop and restart PrEP safely by following your healthcare provider’s advice.
Do I still have to use condoms if I take PrEP?

PrEP is not intended to replace condoms. So answering this question really depends on what you (and your partner) want or need.

Condoms are an effective strategy to reduce HIV risk. Condoms protect against other sexually transmitted infections (STIs) like gonorrhea, chlamydia, or syphilis. PrEP does not. PrEP is generally recommended as an additional option to consider for HIV prevention.

How soon does PrEP start working?

It takes time for PrEP to build up levels in your body that are considered protective against HIV. You should start with one pill per day and continue to use other prevention options, such as condoms, for the first 7 days after you start PrEP. You can stop daily PrEP by continuing to take one pill per day until two days after the last time you had sex. When taken consistently on a daily basis, PrEP could help to reduce the risk of HIV infection by up to 99%.

What should I do if I forget to take a PrEP dose?

If you happen to forget a dose, don’t freak out. In the beginning it can be hard to remember to take medication every day, but once you get into a routine, it’s easier. Take the missed pill as soon when you remember it but do not take more than two pills in a day. For example, if you routinely take PrEP at night and forget, you can take the pill next day morning with your breakfast. However, it’s important to stick with the same time every day. Try to do your best next time when you miss a dose. You can also talk to your prescriber/doctor or other PrEP users; they may have some helpful tips for you.

Depending on the time you take your dose, people suggest different ideas to help remember. For instance, if you decide to take your dose in the morning or evening perhaps leave your PrEP next to your toothbrush as you remember to take it at the same time as you brush your teeth. Another way people remember is to set a repeated alarm in their phone, reminding them it is time to take their dose.
**What is Event-Driven or ED-PrEP?**

Event-driven PrEP (ED-PrEP) for MSM consists of the use of double dose (2 pills) of PrEP between 2 and 24 hours in advance of sex; then a third pill 24 hours after the first 2 pills, and a fourth pill after the first 2 pills. To help this remember, you may consider event-driven PrEP as “2+1+1” dose of PrEP.

2+1+1 describes ED-PrEP where PrEP is taken for sex on a single day. If sex continues over two or more days, a single PrEP pill can be continued daily with a single daily pill taken for each of two days after the last sex act.

**Is ED-PrEP appropriate for me?**

Daily PrEP and ED-PrEP are two dosing options for MSM. The “best” dosing option will depend on the individual, and be influenced by your personal circumstances and preferences.

*Event-driven PrEP is appropriate for you if you are MSM:*
- Who has infrequent sex (for example, sex less than 2 times per week on average);
- Who is able to plan for sex at least 2 days in advance or who can delay sex for at least 2 hours;
- Who would find event-driven PrEP more effective and convenient.

**What about side effects? How will my body be affected?**

PrEP is very safe, with no side-effects for about 90% of users. Some people have minor side effects when taking PrEP, but these usually go away in a few days and almost always in less than one month. For the first few weeks of starting the medication used for PrEP, some people complain about nausea, vomiting, fatigue, and dizziness, with these minor symptoms eventually resolving themselves. This is often referred to as ‘start-up syndrome’.

A very small percentage of people will not be able to take or may need to stop PrEP because they have problems with their kidneys. With this particular side effect, there were no physical symptoms, so it’s important to remember that if you take PrEP, you need to get routinely checked by your doctor to make sure your kidneys are working properly.
III. More on Staying Safe

It does not matter if you are a top, or bottom, or both. Staying safe by correctly using condoms and water-based lubricants remains most effective way to protect yourself against HIV. Together, they will stop HIV-infected body fluids (cum or anal mucus of someone who may be HIV-positive) from coming into contact with mucus membranes in the anus, foreskin, urethra and head of the penis of your partner(s).

Sexually Transmitted Infections or STIs are pathogens that can be passed on from person to person during oral, vaginal or anal sex without using a condom. Having STIs significantly increases the risk of contracting HIV, and vice versa, but having an STI does not make PrEP less effective. Some STIs (hepatis B and human papillomavirus) can be prevented with vaccination.

What are the signs and symptoms of STIs?

STIs are extremely common, however often there are no signs or symptoms related to the infection.

Syphilis can cause serious problems if it is not treated. Depending on the phases of the infection, the symptoms change and may not be noticed. Early on, a person can have sores at the original sites of infection, such as the penis, anus, in the rectum, in or around the mouth. You can get infected by having a direct contact with a syphilis sore (without condom). Often the sore is painless, round and firm. Syphilis can be easily treated with a single injection of penicillin.

Gonorrhea is also a very common STI. When infected, some persons can have a burning sensation when urinating, discharge from the penis, and others less frequent symptoms. Infection can occur in genitals, rectum, and throat depending on the sexual practices without condoms A major problem of having gonorrhea is that it is becoming untreatable as the bacteria that cause this disease is becoming more and more resistant to antibiotics.

Many people with STIs do not have symptoms, so try to get tested if you has had sex without condom with more than one person in the past 6 months, if you think that the persons(s) with whom you had sex may have an STI.

For MSM, STIs symptoms may include:

1. Discharge or pus from the tip of the penis or anus or mouth;
2. Pain or a burning feeling when peeing;
3. Itchiness, soreness or redness around the penis under the foreskin;
4. Blisters, ulcers or warts around the genital area;
5. Cold sores or other mouth lesions.
What should I do if I think I might have been exposed to STI?

It is important to get tested if you think you may have been exposed to STI. Many people with STIs do not have symptoms. It is worth getting tested even if you feel healthy. If you think you have an infection, you should not have sex until you have had a check-up. Additionally, if you have been treated for an STI, you should get tested for HIV and take hepatitis B vaccine, if you have not yet taken it. You should also consider using PrEP.

Most STIs are easy to treat. Treatment for each infection is different. It is often as simple as taking tablets, applying lotions or an injection. You should follow any advice given by the doctor about not having sex during treatment. This is to prevent re-infection of the same STI or passing it on to other people before you are cured.

Why does having STIs increase the risk of contracting HIV?

Some STIs cause ulcers or sores in the genital area or mouth. These sores create an opening in the skin, making it easier for HIV and other STIs to enter the body, if exposed.

How do I protect myself from STIs?

The most effective way to protect yourself is by using condoms correctly and water-based lubricant every time you engage in oral and anal sex.

You can also get vaccinated against hepatitis B and the human papillomavirus (HPV), which are other two STIs. You can check with a healthcare provider whether this is an option for you.
We are united in advocating for issues around HIV and those that advance the rights, health and well being of people of diverse sexual orientation, gender identity, gender expression and sex characteristics.