**PROYECTO COMPADRE**

**FACILITATOR INITIALS (INITIALS): \_\_\_ \_\_\_ \_\_\_**

**DATE OF FOCUS GROUPS (DATE): \_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_**

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**START TIME OF FOCUS GROUP (HR\_START): \_\_\_ \_\_\_: \_\_\_ \_\_\_**

**END TIME OF FOCUS GROUP (HR\_STOP): \_\_\_ \_\_\_: \_\_\_ \_\_\_**

**Introduction:** Hello, my name is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

* Welcome and thank you for taking time out of your busy day to participate in this online focus group.
* We invited you here today to follow-up on our findings from Phase 1 of Proyecto Compadre.
* In the Phase 1 focus groups (with SYHealth providers) and key informant interviews (with Latino men) we learned about the challenges that Latino men face in accessing HIV testing, PrEP, and HIV services; and of strategies to address those challenges.
* In the web-based survey, you had the opportunity rank those strategies in terms of importance, feasibility, and acceptability.
* In this focus group, we will discuss the strategies that you (and Latino men) ranked as most important, feasible, and acceptable to increase Latino men’s access to HIV testing and PrEP.
* This focus group will take approximately 90 minutes. We will take a short break about an hour in and you are welcome to request a break at any time.
* We are interested in your opinions; you are the experts. As such, we will not be sharing our own opinions but we may summarize what we hear or ask for clarification
* We are deeply appreciative of your time and participation.

**Anonymity**: The information you give us will be transcribed and anonymized. It is important for you to know that the information from this focus group should be kept completely confidential. Please respect that everything shared today stays here. It is also important for you to know that your participation is entirely voluntary. You can ask us to stop the recording at any time or ask that your responses not be shared. If there are any questions or discussions that you do not wish to participate in, you do not have to do so. If there is anything that you wish to share that is personal, please share it from the perspective of someone else (ex/”My co-worker once said that….”).

1. **FORMAL PEER NAVIGATION PROGRAM (~20 minutes)**

**According to the web survey with both SYH Staff and Latino men, the first most important, feasible and acceptable approach to increasing access to HIV testing and PrEP for Latino men included developing and implementing a Formal Peer Navigation Program.**

The sentiment has been that Peer Navigators are important in engaging Latinos in care, but maintaining a peer program requires additional support. We hope to gather ideas of how to best implement a Formal Peer Navigation Program.

A Formal Peer Navigation Program might include:

* A team (Supervisor and ~4 half-time Peer Navigators) who carry out recruitment of at-risk Latino men (in person and on social media/apps) to take an HIV test, screen for PrEP, and/or link to social or Ancillary services (e.g., mental health, addiction, etc).
* Peer Navigators might work with recruited peers for ~8 weeks to help link, retain, and support them in SYH care, as well as provide weekly check-in/support sessions.
* Peer Navigators might also disseminate HIV prevention information and SYH services marketing media.

**We would like to spend the next 20 minutes hearing from you about the training, skills, recruitment, activities and implementation supports that would make up a strong Peer Navigation Program. First, we will guide you through questions about activities for Peers.**

**PROMPTS:**

* What organized activities would make up a strong **Formal Peer Navigation Program**?
  + **Example activities**: Training; Peer referral; Structured sessions with peer recruit to assess and support needs; Group activities; Tech trainings; Peer Navigator support groups; Supervisor check-ins; Monitoring efficiency in referral)
* What training topics and formats should be required or available for the **Formal Peer Navigation Program** ?
  + Example training topics:
    - Structure of Formal Peer Navigation Program;
    - Peer Competency (communication, recruitment);
    - HIV risk and infection;
    - SYH Ancillary services (e.g., mental health, substance use );
    - SYH social services;
    - HIV testing and PrEP assessments;
    - HIPAA and Confidentiality
    - Warm hand off techniques;
    - Relationship building with SYH staff & peer recruits;
    - Technology;
    - Information dissemination?
  + Length of training? What activities for training? How often follow-up training?
  + What type of supervisory support would be needed to effectively run a Peer Navigation Program?
    - To ensure the Peer Navigators are following the protocol for the Formal Peer Navigation Program? To support Peer Navigators that need help with recruitment, linkage, support.
* How can Peer Navigators best provide referrals to HIV services (testing, PrEP)?
* What characteristics or skills would be important for Peer Navigators to offer for this program ?
* How can your teams best support Peer Navigators’ training (in terms of recruitment and referral efforts? Communication between Peer Navigators and SYH Staff?)
* What resources (time, personnel, fiscal) or supports would be needed to best incorporate a **Formal Peer Navigation Program** program into the HIV Department?
* How do you think a formal peer navigation program can be reasonably sustained?
  + Funding sources, partnerships with Peer or Community Health Worker organizations?

1. **HAVING PEER NAVIGATORS PROVIDE REFERRALS TO SOCIAL & ANCILLARY (MENTAL HEALTH, SUBSTANCE USE) SERVICES (~15 minutes)**

**The second most imporant, feasible and acceptable approach to increasing access to HIV testing and PrEP for Latino men included having peer navigators also provide referrals to social services (such as housing, legal, etc.) and ancillary services (such as mental health, substance use, etc).**

**For the next 15 minutes, we would like to discuss ways that Peer Navigators could support specific referrals to social and ancillary services.**

**PROMPTS:**

* How do you see Peer Navigators best providing referals to social services? Ancillary services?
* How should Peer Navigators be trained in providing these referrals?
  + In knowing what services are available?
  + In assessing their client’s need?
  + In providing risk reduction options to clients?
* How can we support providers at social services and ancillary services to refer Latino men to HIV testing? What role can the Peer Navigators have to support this linkage?

1. **CULTURALLY-TAILORED HIV PREVENTION MATERIAL (~20 minutes)**

**The third most important, feasible and acceptable approach to increasing access to HIV testing and PrEP for Latino men included increasing knowledge of HIV prevention by culturally-tailoring HIV prevention material.**

**We have only two more sections now. For this next 20 minutes we would like to discuss ways to design and tailor HIV prevention material at SYH to be more approachable and engaging for Latino men.**

**PROMPTS:**

* What have you included into your programs/care to culturally-tailor services for Latino men? Monolingual, Spanish-speakers?
* What have you included into your programs/care to culturally tailor services based on sexual identity, gender identity, age, SES, integrated services, MSM who identify as heterosexual?
* What type of culturally tailored topics should be included in prevention education material/media for Latino men? To market SYH HIV services?:
  + To address barriers like public charge? Insurance? Language? Stigma?
  + General HIV prevention education? HIV testing? PrEP?
  + In reference to Latino identity, sexual identity, gender identity
* What type of media do you think would be the most effective at reaching high HIV risk subgroups of Latino men?
  + Examples include pamphlets, posters, social media ads, alternative formats like comic/novela
* How could we enhance health literacy of Latino men with HIV prevention media broadly and/or within SYH services specifically?
  + Definition of Health Literacy: The degree to which an individual has the capacity to obtain, communicate, process, and understand basic health information and services to make appropriate health decisions.
  + So, this means we would want our Proyecto Compadre media to help Latino men:
    - Find information and services
    - Communicate their needs and preferences and respond to information and services
    - Process the meaning and usefulness of the information and services
    - Understand the choices, consequences and context of the information and services
    - Decide which information and services match their needs and preferences so they can act

1. **MARKETING AROUND SOUTH AND SOUTHEAST SAN DIEGO (~15 minutes)**

**The fourth most important, feasible and acceptable approach to increasing access to HIV testing and PrEP for Latino men included the general marketing of HIV awareness and SYH HIV services in the South Bay and Southeast San Diego.**

**For the last 15 minutes, we would like to discuss ways to more effectively conduct marketing on HIV prevention and care to raise awareness in the South Bay and Southeast San Diego.**

**PROMPTS:**

* What type of information should be included in the marketing material:
  + General HIV prevention education? HIV testing? PrEP?
  + To address barriers like public charge? Insurance? Language? Stigma?
* When and where should we conduct the marketing? (e.g., timed events during the year, health fairs, Target radio stations/newspapers, buses, clubs/bars, supermarkets, etc)
* What type of media do you think would be the most effective at sharing the marketing information? (e.g., pamphlets, posters, social media ads, alternative formats like comic/novela)
* How can SYH staff (and Peer Navigators) support this type of marketing?

**THANK YOU FOR PARTICIPATING. YOUR OPINIONS WILL MAKE A VALUABLE CONTRIBUTION TO THE STUDY.**