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Public Health England HIV Prevention Innovation Fund

Cohort 4 Evaluation Report









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1 Executive Summary

The HIV Prevention Innovation Fund was set up by Public Health England (PHE) to support voluntary and community sector (VCS) organisations reduce the impact of HIV through innovative interventions targeting groups most affected by HIV. Four cohorts have been funded since 2015 and a fifth cohort of funding was announced in late 2019, with a broadened scope to include projects offering innovative ways of improving reproductive and sexual health.

PHE commissioned Ipsos MORI to undertake an evaluation of the Innovation Fund and its projects. This report provides a summary of the activities and achievements of the 14 projects funded in Cohort 4 – assessing the extent to which the projects met their intended outputs and outcomes, looking at what helped or hindered them to do so, and concluding with lessons learnt for both projects and PHE.

This evaluation report is based upon the following activities:

- a review of evaluation reports and supporting documentation;
- in-depth interviews with project leads; and,
- follow up interviews with Cohort 3 projects.

Overview of Cohort 4 projects

A brief overview of each of the funded projects is provided below:

Catwalk for Power (Positively UK): Holding catwalk performances where women living with HIV performed, aiming to reduce stigma, improve HIV prevention knowledge and encourage regular testing.

Development of community testing toolkits (National AIDS Trust): Developing two toolkits for providers and commissioners of HIV services, outlining what makes an effective community-based HIV testing intervention and how to evaluate such an intervention.

Echoes (Prison Radio Association): Developing and delivering a drama based on real-life experiences of people with HIV to counter misinformation and stigma in prisons around HIV and promote testing.

e-PrEP programme (METRO): Production of an online video series about PrEP designed for Latin Americans aiming to improve knowledge and uptake of PrEP; community engagement face-to-face and online.

Guys into Guys Online Chatroom (METRO): Establishing a 'virtual youth centre' via an online chatroom for young guys into guys to discuss HIV, aiming to increase knowledge of HIV and sexual health, empower participants and connect young guys into guys with peers.

Mindfulness-Based Chemsex Recovery (Spectra): A mindfulness-based course for MSM to provide support to those struggling with chemsex addiction.

MobPrESH (PrEPster): Establishing volunteer peer community mobilisers to raise awareness of PrEP and related sexual health issues among women in Black African Communities (BAC).

PrEPared (BHA Leeds Skyline): Training peer champions in BAC to disseminate positive messages and HIV information (specifically the availability of PrEP).

PrEP & Prejudice (Africa Advocacy Foundation): A campaign promoting PrEP among BAC; training PrEP champions to share campaign messages in the community; producing resources to guide clinicians on working with BAC.

Preventing HIV in women affected by female genital mutilation (FGM) (Thames Valley Positive Support): Training relevant organisations and volunteers about HIV; offering HIV testing at venues other than sexual health clinics; developing a care pathway with FGM organisations to integrate HIV prevention; signposting Black, Asian and minority ethnic women to the PrEP trial.

Raising Awareness of HIV in the over 50s (Age UK Wiltshire): A campaign raising awareness of the risks of HIV among the over 50s; upskilling healthcare professionals to discuss HIV with older people.

Soul Sisters (NAZ): Training violence against women organisations and their service users on the link between violence and HIV to increase knowledge of sexual health and HIV.

Talking Together (Positive East): Developing spoken word pieces and showcasing these through social media and festival performances (alongside HIV testing) to challenge stigma, increase knowledge of PrEP and HIV, and promote testing.

The Grass is Always Grindr Season 2 (CW+ and 56 Dean Street): Producing episodes of a drama covering themes relating to HIV and sexual health, focusing on issues faced by MSM and promoting sexual health through pop-up messaging.

In total, PHE awarded £603,418 across the 14 projects, with funds ranging from £28,416 to £75,000, and an average grant of £43,101.

Key achievements of Cohort 4

- Projects were able to engage over 10,000 individuals face-to-face and tens of thousands remotely, with many projects meeting or exceeding their targets for numbers of people reached. Training was delivered to around 400 individuals, including PrEP champions, volunteers, and healthcare professionals.
- Projects produced over a variety of lasting information tools or materials (over 60 in total), including films, spoken word pieces, information leaflets, posters, radio jingles, radio dramas, plays, toolkits and webpages.
- Over 76 organisations were involved with the projects as partners, beneficiaries, and advisors.
- 26 people were signposted to the PrEP IMPACT trial, and 17 were directly signposted to other health services.

Key learning

• Involving representatives from the target community in the delivery of the project has been effective in ensuring the intervention remains relevant to the target audience in question. The ways in which communities were involved include: the development of materials or content (e.g. through co-production), or using volunteers to engage with a wider audience. However, projects advised against an overreliance on volunteers or participation from the target community – who should not be expected to give up extensive time for free, particularly given competing schedules of home and work.

- Formal and informal **partnerships** were pivotal in bringing new learning and expertise to projects, as well as helping them to reach target audiences and disseminate materials. This worked well when partnerships were established from the outset (i.e. before the application stage).
- Barriers faced by the projects often related to timescales. As a consequence, some of the projects had a much lower level of uptake (or reach) than they were expecting. This was often due to unforeseen elements of implementing the intervention, such as ethical considerations that had not been anticipated at the outset. Engaging the target community in the development of the interventions (e.g. to design materials or to establish peer champions) often took much longer to do effectively and robustly than originally expected. Furthermore, the nature of the innovation projects meant that new skills or knowledge about a target community or specific intervention often needed to be learnt, which took time. Projects worked well when they were realistic about what could be achieved within their timeframes, built in contingencies, remained flexible, and/or worked with partners to supplement their knowledge and skills.
- Linked to this, as with previous cohorts, there was some doubt that a year timeframe is sufficient to test and evidence the effectiveness of a new intervention. Furthermore, organisations can find it hard to secure further funding to continue their projects once the initial funding period runs out. As with previous years, questions were raised around sustainability of the projects. Projects mentioned they would like to see a two-year funding cycle (at least) to aid sustainability and to provide more time to test innovations.
- A consistent finding across cohorts is a desire for learning from these projects to be shared more widely. Related to this, it was noted that the Fund provides a good opportunity to network with other organisations, though this was not universal: some projects would have valued more opportunities to get together and share experiences and ideas.

Next steps for projects

All projects said that they intended to continue their activities beyond the funding year, generally funded using their own resources. Two projects reported that they had already secured further funding.

2 Introduction

2.1 The HIV Prevention Innovation Fund

The HIV Prevention Innovation Fund was set up by Public Health England (PHE) to support voluntary and community sector (VCS) organisations reduce the impact of HIV through innovative interventions targeting groups most affected by HIV. To date, there have been four cohorts funded between 2015 and 2019, with a total of 45 projects receiving funding. Overarching evaluation reports have been published for the first three cohorts and are available online¹. The focus of this report is the fourth cohort of 14 projects funded in early 2019.

As with the first three cohorts of the Fund, for the fourth cohort, PHE sought to fund projects which could be replicated and scaled-up; strengthen local partnership working; have impact on national and local prevention practice; and which were considered feasible, achievable and offered value for money.

This year, as stated in their Cohort 4 guidance document, PHE were particularly looking to fund projects that:

- Promote third-sector led support for combination prevention² and harm reduction throughout the continuum of care (the delivery of care for individuals over a length of time).
- Promote prompt diagnosis, especially through frequent testing, of both HIV and other sexually transmitted infections.
- Address stigma associated with HIV.
- Address the wider determinants of high-risk sexual behaviour, such as mental health and drug and alcohol misuse.
- Support the integration of HIV prevention into health promotion and service delivery in other health areas.
- Support increased knowledge, awareness and understanding of Pre-exposure Prophylaxis (PrEP), especially in currently underserved populations (e.g. higher-risk heterosexuals, women, black and other ethnic minorities, men who have sex with men and transsexual communities). The focus on women and black and other ethnic minorities, rather than just black, Asian and minority ethnic men who have sex with men (BAME MSM), was new for this cohort.

Wider context

A rapid decline in new HIV diagnoses has been observed in the UK since 2014, particularly among gay and bisexual men; a 47% drop in diagnoses among gay men and an 18% drop in bisexual men has been observed between 2014 and 2019³. Diagnoses among heterosexuals have also fallen, with the steepest declines being observed among gay and bisexual men of white ethnicity, those born in the UK, London residents, and those aged 15 to 24. The UK met the UNAIDS 90:90:90 targets in 2017⁴; these are three ambitions set by the United Nations body to effectively end the global AIDS epidemic by 2020: 90% of all people living with HIV will know their HIV status; 90% of all people with diagnosed HIV infection will

¹ Cohort 1 report: https://www.ipsos.com/ipsos-mori/en-uk/public-health-england-hiv-prevention-innovation-fund

Cohort 2 report: https://www.ipsos.com/ipsos-mori/en-uk/public-health-england-hiv-prevention-innovation-fund-cohort-2-evaluation-report Cohort 3 report: https://www.ipsos.com/ipsos-mori/en-uk/public-health-england-hiv-prevention-innovation-fund-cohort-3-evaluation-report

² Defined as a mix of biomedical, behavioural and structural interventions prioritised to meet the current HIV prevention needs of particular individuals and communities, so as to have the greatest sustained impact on reducing new infections.

 $^{^{3}\ \}underline{\text{https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/939478/hpr2020_hiv19.pdf}$

⁴ https://www.unaids.org/en/resources/909090

receive sustained antiretroviral therapy; and 90% of all people receiving antiretroviral therapy will have viral suppression.

In this time, there have also been developments in the treatment and prevention of HIV. Notably, availability of HIV PrEP has increased. PrEP is a medicine proven to reduce the risk of contracting HIV when taken correctly. In 2017 the PrEP Impact trial was set up, a national clinical trial allowing people at high-risk of contracting HIV to access PrEP in the hope of understanding the extent of the need for PrEP among these groups. PrEP access continues to be scaled up in the UK, with the Department for Health and Social Care announcing funding for Local Authorities in March 2020 to make PrEP routinely available in England⁵. This rollout was delayed due to the COVID-19 pandemic but the drug became available through specialist sexual health services from October 2020 onwards.

Other developments in the treatment of HIV include an increase in the number of HIV tests being undertaken, with PHE reporting a 6% increase in the number of tests being undertaken by sexual health services in 2019 compared with the previous year³. National campaigns by HIV Prevention England (the national HIV prevention programme for England) such as *It Starts With Me*⁶ have also been conducted with the aims of increasing awareness and knowledge about HIV and prevention approaches, and encouraging testing. There is evidence that the *It Starts With Me* campaign has been effective in increasing knowledge and normalising testing⁷.

Nevertheless, ambitions to decrease HIV incidence in the populations most at risk of new infection, and reduce rates of late and undiagnosed HIV remains. In January 2020, the UK government announced an ambition to reduce HIV transmissions in England to zero by 20308. There currently remains, however, around 100,000 people with HIV in the UK and an estimated 7,300 of these remain undiagnosed, with geographic disparities in proportions of those without a diagnosis.

2.2 The evaluation

PHE commissioned Ipsos MORI to undertake a process and impact evaluation of the Innovation Fund and its projects. This report provides a summary of the activities and achievements of Cohort 4 – assessing the extent to which the projects met their intended outputs and outcomes, looking at what helped or hindered them to do so; concluding with lessons learnt for both projects and PHE.

The evaluation objectives are to:

- assess how individual projects have been implemented and how well they have met their outcomes and delivered on the overall objectives of the Innovation Fund;
- provide recommendations on areas for improvement within the application and decision-making process to ensure the Fund is able to select projects that deliver against its aims and objectives;
- understand any barriers to implementation and to improve future delivery of the Fund;
- capture any associated benefits or disbenefits of the Fund;
- assess how well the Fund has stimulated innovation;

⁵ https://www.nat.org.uk/press-release/statement-response-department-health-and-social-care-fully-funding-roll-out-prep

⁶ https://www.startswithme.org.uk/

https://www.tns-bmrb.co.uk/sites/tns-bmrb/files/ISWM-Evaluation-Report.pdf

https://www.gov.uk/government/news/hiv-in-the-uk-towards-zero-hiv-transmissions-by-2030

- assess how well the Fund has supported projects that can be scaled-up and implemented more widely;
- assess how well projects have contributed to developing local partnerships; and,
- compare the effectiveness of projects in targeting and engaging their relevant population groups.

2.3 Methodology

With the evaluation objectives in mind, the following evaluation activities have been completed to generate the evidence for this report:

- Review of evaluation reports and supporting documentation: Each project has been tasked with compiling their own evaluation report, providing detail on their activities and achievements.
 Where available⁹, these individual evaluation reports have been reviewed to feed into this overarching report. Some of the projects produced toolkits or other materials as part of their project where this is the case, these materials have also been reviewed by the project team.
- In-depth interviews with project leads: Each project lead was interviewed as part of the evaluation to provide an understanding of the implementation process, the extent to which projects achieved what they set out to do, the reasons why they may/may not have met their stated goals, and provide learning about what has made their project more or less successful.
- Follow up interviews with Cohort 3 projects: Interviews were carried out with the project leads of Cohort 3 projects that had possibly continued beyond the 2017/18 funding year, to explore how projects had continued or adapted. Projects were chosen on the basis of showing the greatest potential of continuing beyond the initial funding period.

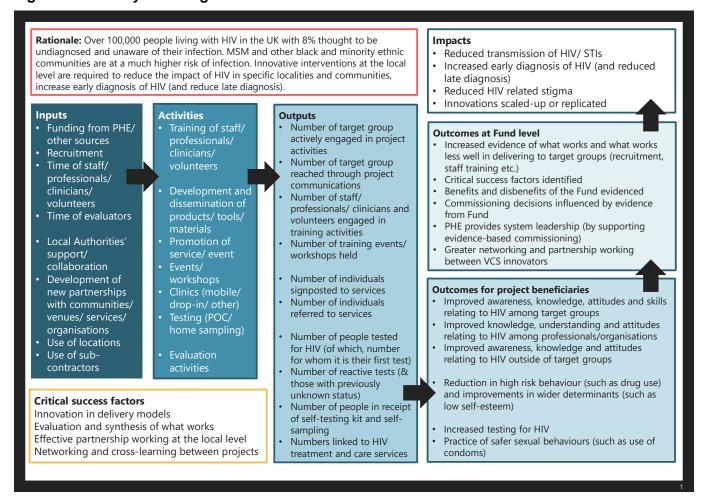
In total 18 interviews were completed, including 4 with project leads of Cohort 3 projects. Interviews were conducted between April and May 2020.

2.4 Theory of Change

The Fund's Theory of Change below depicts what the Fund and its projects are anticipated to deliver and the processes by which this is expected to happen. The theory is a means to communicate a shared understanding of what success looks like, in a way that can be measured, and it forms the basis of the overarching evaluation. Both Cohorts 1 and 2 were involved in shaping the Theory of Change and thus it reflects projects' own experiences.

⁹ For 9 of the 14 Cohort 4 projects.

Figure 2.1: Theory of Change



2.5 Structure of this report

Section 1: The first section of this report provides an overview of experiences and lessons learnt across all projects. This is structured as follows:

- Chapter 3 outlines the aims of projects funded at this cohort;
- Chapter 4 details experiences implementing the projects including project inputs and activities, project reach and enables and barriers faced;
- Chapter 5 discusses the outcomes and impacts evidenced by projects (for project beneficiaries, VCS organisations, and PHE itself);
- Chapter 6 outlines the next steps for projects and includes a discussion of the legacy of Cohort 3 projects; and,
- Chapter 7 looks at the lessons learnt both at the project level and for PHE.

Section 2: The second section provides specific information about each project. These comprise individual project profiles giving more detailed information about each of the Cohort 4 projects, including their rationale, activities, outcomes and impacts, and next steps. Short summaries of the follow-up interviews with Cohort 3 projects are provided at the end of this section.

2.6 Next steps for the Fund/evaluation

In late 2019, PHE announced funding for a fifth cohort of projects, this time broadening the scope of the funding to include projects offering innovative ways of improving reproductive and sexual health. PHE then announced a sixth cohort of funding in August 2020.

3 Aims of the innovation projects

This chapter provides an overview of the projects undertaken by Cohort 4, outlining the key aspects and aims of each project.

Across the 14 projects, some commonalties exist with regards to the project intervention, target audience and aims.

- Intervention: Six projects this year utilised volunteers and peers to deliver their intervention in the
 community. Six projects delivered training including to volunteers, partner organisations and
 members of the healthcare workforce. Five projects shared messages through creative
 interventions, including spoken word performances at festivals, catwalk events, and online dramas
 or videos. Three projects developed awareness campaigns.
- Target audience: The Cohort 4 guidance particularly welcomed innovative proposals that support
 underserved populations (including black, Asian, and minority ethnic (BAME) communities,
 women, and men who have sex with men (MSM)). Five projects targeted BAME communities, four
 projects targeted women with increased risk of HIV or those living with HIV, and three projects
 targeted MSM.
- Aims: Projects this year had a particular focus on raising awareness of HIV within their target audience; specifically, eight projects focussed on raising awareness of PrEP. Though previous cohorts of the fund had a greater focus on HIV testing, seven Cohort 4 projects included an aim to promote HIV testing. Of these seven projects, two projects provided tests to their target communities as part of the intervention.

The table below outlines the key details and aims of projects funded as part of Cohort 4.

Table 3.1: Summary and aims of Cohort 4 projects

Project name	Lead organisation	Intervention	Target audience	Location	Aims
Catwalk for Power	Positively UK	A series of workshops with women living with HIV to confront HIV stigma; holding catwalk performances where women living with HIV (WLHIV) performed	Women living with HIV	London, Brighton, Manchester	Reduce stigma, improve HIV prevention knowledge and encourage regular testing for women
Development of community testing toolkits	National AIDS Trust (NAT)	Developing two toolkits for providers and commissioners outlining what makes an effective community- based HIV testing intervention, and how to evaluate an intervention	Providers and commissioners of community-based HIV testing services	National	Highlight policy, evidence and good practice on community testing to enable providers and commissioners to provide high-quality interventions; support providers to evaluate their interventions; enable cross-sector learning

Echoes	Prison Radio	Developing and	People in prison	National	Counter misinformation and
	Association	delivering a drama based on real-life experiences of people with HIV		(throughout prisons)	stigma around HIV; promote the benefits of early testing and treatment
e-PrEP programme	METRO	Production of videos about PrEP for METRO's website, YouTube and social media; community engagement face-to- face and online	Latin American community	Online	Increase awareness, understanding and uptake of PrEP; increase HIV testing and reduce late diagnosis
Guys into Guys Online Chatroom	METRO	Establishing a 'virtual youth centre', via an online chatroom, for young guys into guys, to discuss HIV	Young men and boys aged 11 – 19	Kent and Medway	Increase knowledge of HIV and sexual health; empower participants to feel more comfortable and confident about their sexuality; connect young guys into guys with peers
Mindfulness- Based Chemsex Recovery	Spectra	Mindfulness-based training sessions with groups of men who have sex with men (MSM) conducted face-to-face, followed up by refresher sessions and one-to-one aftercare sessions	MSM	London	Support MSM struggling with chemsex addiction
MobPrESH	PrEPster	Establishing volunteer peer community mobilisers to raise awareness of PrEP	Women in Black African communities (BACs)	London, Bristol, Yorkshire	Raise awareness and understanding of PrEP and related sexual health issues
PrEPared	BHA Leeds Skyline	Training peer champions in African communities to disseminate positive messages and HIV information (specifically the availability of PrEP)	BACs	Leeds	Raise awareness of PrEP, and open up conversations on HIV and how PrEP might be used
PrEP & Prejudice	Africa Advocacy Foundation (AAF)	A campaign promoting PrEP through the use of African messaging; training PrEP champions to share campaign messages in the community; producing resources to guide clinicians on working with BACs.	Black African Heterosexuals and MSM	England	Increase PrEP awareness and uptake

Preventing HIV in women affected by female genital mutilation (FGM)	Thames Valley Positive Support (TVPS)	Training relevant organisations and volunteers on HIV; offering HIV testing at venues other than sexual health clinics; developing a care pathway with FGM organisations to integrate HIV prevention; signposting Black, Asian and minority ethnic (BAME) women to the PrEP trial	BAME women; women affected by FGM	Berkshire	Reduce HIV stigma, raise HIV awareness; encourage testing and uptake of the PrEP trial
Raising Awareness of HIV in the over 50s	Age UK Wiltshire	Upskilling the workforce to discuss HIV among the over 50s; a media campaign targeted at the over 50s	People over 50	Wiltshire, Bath & North East Somerset	Raise awareness of the risks of HIV among the over 50s
Soul Sisters	NAZ	Training violence against women (VAW) organisations and their service users on the link between violence and HIV	VAW organisations and their service users	East and South London	Increase knowledge of sexual health and HIV, particularly the link between VAW and HIV
Talking Together	Positive East	Developing spoken word pieces through workshops with Black Africans in mixed status relationships, and showcasing these pieces through a social media campaign and festival performances (alongside HIV testing)	Black Africans	London	Challenge HIV stigma, increase knowledge of PrEP and HIV, and increase HIV testing and prompt diagnosis
The Grass is Always Grindr (Season 2)	CW+ and 56 Dean Street	Producing 10 YouTube episodes of a drama covering themes relating to HIV and sexual health, focusing on issues faced by MSM	MSM	Online	Increase HIV testing; promote condom use; promote PrEP use; raise awareness of STIs; reduce HIV-related stigma

4 Implementation of projects

This chapter provides an overview of the implementation of Cohort 4 projects, including the inputs required, outputs produced, and the project reach. The chapter concludes with a summary of the challenges and enablers projects faced in implementation.

More detail on the implementation of each of the projects can be found in the second section of this report, where detailed project profiles are provided.

4.1 Project inputs

In total, PHE awarded £603,418 across the 14 projects, with funds ranging from £28,416 to £75,000, and an average grant of £43,101.

As of July 2020, 11 of the 14 projects were able to provide information about their actual spending.

- **Delivering to budget:** Seven projects were able to deliver to budget (or within 1% of their original budget), and one project spent 7% less than budgeted. Three projects exceeded their overall budget; one by 2%, one by 21% and one by 22%.
- **Direct vs. staff costs:** The proportion of funding spent on direct costs compared with staff costs varied depending on the project, ranging from 58%:35% to 24%:64%. There was less variation for Cohort 4 projects compared with Cohort 3 where the proportion of direct costs vs. staff costs ranged from 79%:16% to 2%:93%. Looking at the difference between budgeted spend and actual spend, on average, there was slightly higher variation for direct costs than staff costs. Generally, where projects had over-spent on direct costs, they had underspent on staff costs, and vice versa.
- Monitoring and evaluation: On average, 7% of the funding was allocated to monitoring and evaluation at the bidding stage. All projects budgeted some funding for this, ranging from 1% to 10%. 11 projects were able to provide their actual spend on monitoring and evaluation, and these projects spent on average 4% of their total budget (ranging from 0% to 13%). Seven projects delivered their monitoring and evaluation within budget (or within 1% of their original budget), three projects underspent, and one project overspent.

Three projects mentioned that alternative funding was used to in addition to the PHE funding, such as The National Lottery Community Fund (*Catwalk for Power*), Elton John AIDS Foundation (*MobPrESH*) and MAC AIDS Fund/MAD Trust (*The Grass is Always Grindr*). As such, the budget associated with the projects might not be a true reflection of spending.

Six projects utilised volunteers to deliver their intervention in the community (*Preventing HIV in women affected by FGM, PrEP & Prejudice, Catwalk for Power, PrEPared, e-PrEP programme* and *MobPrESH*). This additional input was sometimes considerable, and it was noted that this should be taken into account when assessing the viability of replicating some of these interventions.

Two organisations mentioned free input from other organisations, for example, *The Grass is Always Grindr* received clothing from ASOS and marketing from Grindr, and *Catwalk for Power* were provided with event spaces free of charge.

4.2 Project outputs

The outputs are the quantification of the activities – for example, the people trained through a project, or the number of information resources developed. Chapter 5 goes on to examine the outcomes and impacts achieved by each project, taking a more qualitative view on issues such as the extent to which project beneficiaries demonstrated increased knowledge of HIV.

Overall, the following outputs were reported across Cohort 4 projects:

- Approximately 10,200 individuals were engaged face-to-face, for example through training sessions, focus groups, or performances. The majority of this engagement (around 90%) was from community outreach carried out by *Preventing HIV in women affected by FGM* and *PrEP* & *Prejudice*.
- Individuals were also engaged remotely by several projects. For example, five projects developed a campaign or materials which were shared online and via social media (*Talking Together, Raising Awareness of HIV in the over 50s, PrEP & Prejudice, e-PrEP programme and The Grass is Always Grindr*). The Grass is Always Grindr achieved 10 million views on YouTube, and other projects engaged with over 90,000 remotely. It is difficult to track online engagement, and not all projects were able to measure this, so these figures should be treated with caution.
- Over 76 organisations were involved to some extent with the projects. Some organisations provided support such as venues for performances or workshops, and clothing or makeup for films. Other organisations had greater involvement in projects' implementation, such as collaborating on the project design, inputting into the development of materials or toolkits, assisting with recruitment of target audiences, or disseminating materials produced.
- Training was delivered to approximately 400 individuals. The majority of this was through the PrEP & Prejudice project which trained 32 PrEP champions, 68 frontline workers and 235 healthcare workers/volunteers.
- Around 180 events were held by the projects. This included live performances (such as *Echoes, Catwalks for Power* or *Talking Together*), workshops and outreach events in the community.
- 151 HIV tests were conducted by the two projects that had a focus on testing (*Talking Together* and *Preventing HIV in women with FGM*).
- Individuals were referred to health services for further support: 17,000 individuals clicked-through to sexual health service websites after viewing *The Grass is Always Grindr*. Three projects reported signposting individuals to the PrEP trial (26 participants in total). Two projects reported that 17 individuals were signposted to other health services, including the 56 Dean Street Clinic in London, the Terrence Higgins Trust "I Want PrEP Now" service, or HIV testing services.
- Over 60 forms of information or materials were developed, including films, spoken word pieces, information leaflets, posters, radio jingle, radio dramas, plays, toolkits and webpages.
- 12 publications or presentations at conferences were reported.

4.3 Project reach

Regarding reach, projects in this cohort had greater emphasis on **outreach and awareness raising with target audiences** than more quantifiable targets such as the number of HIV tests (though some organisations measured this with Positive East reporting 107 HIV tests and TVPS reporting 44 HIV tests).

While some of the projects aimed to reach thousands of people (such as the *Echoes* radio drama and *The Grass Is Always Grindr* series), others focused on engaging with smaller numbers in more depth (such as the *MobPrESH* peer champion project and the *Mindfulness-Based Chemsex Recovery* project).

Several projects met or exceeded their targets of the number of people they engaged. Catwalks for Power attracted interest outside its initial scope and held events at various conferences that were not originally intended. Regarding community engagement, this was often achieved via the input of volunteers, for example Preventing HIV in women affected by FGM reported that their volunteers reached 3,120 women through community outreach. Reach was also exceeded by working with other organisations. For example, Age UK's campaign (Raising Awareness of HIV in the over 50s) attracted interest outside of the Wiltshire area, and resources were shared with other regional Age UK organisations – and they noted that it had been important to design campaign materials that were not region-specific. The digital campaign for this project was distributed through magazines, radio and TV, meaning Age UK exceeding their expected reach and engaged thousands. Some projects, including Age UK, attributed their success to online reach. For example, the YouTube series The Grass is Always Grindr had extensive online reach as the series attracted support and attention from a range of organisations, including Grindr who provided free advertising. METRO's e-PrEP programme managed to exceed its targets in reaching members of Latin American communities online.

Where projects were unable to reach their target audience in full, this was commonly attributed to setting overly ambitious targets at the outset of the project. In practice, barriers with engaging partners or communities, recruiting and training volunteers, and developing information resources or campaign materials takes time, and nine projects noted that timelines were a barrier to meeting their full targets. For example, *Soul Sisters* experienced barriers to delivering training to 10 different violence against women organisations, as the organisations were concerned about capacity to hold the sessions and the sensitivity of the topic; *Soul Sisters* reflected that building trust with these organisations was challenging within the timescales. *MobPrESH* underestimated the time needed to recruit, train and support volunteers, which meant they were only able to recruit half their intended number of peer mobilisers.

Some projects found it difficult to quantify the number of people reached. Although outreach work was considered effective, it was often difficult to measure this wider reach with precision. For example, the project *Preventing HIV in women affected by FGM* asked volunteers for feedback on the number of women reached at each community event but this figure was an estimate based on the number of attendees and it wasn't possible to confirm whether all attendees were affected by FGM. Similarly, where interventions were delivered online, the exact reach and demographics of those engaged with was not always known. For example, in relation to the *e-PrEP programme*, METRO was unable to measure how many people outside of their target demographic of Latin Americans have viewed their videos, and *Echoes* weren't able to monitor the exact number of listeners to their radio broadcast.

Projects this year had **less emphasis on offering HIV testing** than previous cohorts, with two of the 14 projects having targets around completing HIV tests. *Preventing HIV in women with FGM* tested 44

women for HIV (slightly lower than the target of 48). Though causality cannot be confirmed, Thames Valley Positive Support also reported a 15% increase in the number of women testing with them as part of their usual testing services over the project period. Similarly, *Talking Together* administered 107 HIV tests at festivals (exceeding their target of 100) and also reported a 33% increase in the number of HIV tests they provided as part of their normal services, over the project period.

4.4 Enablers and barriers to implementation

Across the projects there were some common factors that acted as enablers or barriers to implementation; these are discussed below. For additional detail on the key learnings from Cohort 4's experience of the Fund, please see Chapter 7.

Working with other organisations

As with previous Cohorts of the Fund, projects often reflected that building strong partnerships and making use of networks enabled the intervention's success. These partnerships were utilised in all stages of the project implementation, as follows:

- Collaborating on the design of the innovative project. For example, the PrEP & Prejudice
 campaign idea was developed by a consortium of six grassroots organisations, who were able to
 provide their expertise on working with Black African and Caribbean communities. The idea for the
 campaign Raising Awareness of HIV in the over 50s was borne through a collaboration between
 Age UK Wiltshire and Swindon Local Authority.
- Developing project materials or toolkits to ensure outputs were suitable for target audiences. For example, during the *Development of community testing toolkits* project, National AIDS Trust (NAT) staff formed an advisory group that provided expertise on community testing interventions and experience evaluating these, and reviewed drafts of the toolkits. The advisory group was formed from contacts made at the Innovation Fund Cohort 4 launch event. For the project *Soul Sisters*, NAZ held a focus group with violence against women partner organisations to develop a suitable training package and materials.
- Partnerships to support reaching target audiences. For example, Spectra worked with three referral organisations in order to recruit MSM for the programme *Mindfulness-Based Chemsex Recovery*, and BHA Leeds Skyline utilised their existing contacts in black African communities to recruit community champions for the *PrEPared* project. Linked to this, some partnerships allowed projects to implement their intervention in other areas of England. For example, *Catwalks for Power* relied on partnerships with other organisations and volunteers to deliver events in Brighton and Manchester, as the lead organisation Positively UK is based in London.
- **Dissemination of materials.** For example, the series *The Grass is Always Grindr* attracted support from a range of organisations upon its release and was promoted by a number of media outlets and VCS organisations in the HIV and LGBTQ+ spaces.

On the other hand, several projects reported challenges establishing or working with partners, which created a barrier to implementation. For example, the project *Preventing HIV in women with FGM* initially planned to work with local organisations who had links with women who have undergone FGM. During the project, it became clear that the dissemination of HIV information would be challenging for partner organisations and for the project to reach its target audience, as there were perceived barriers around embedding messages about HIV into their existing work. The project approach was adjusted to mobilise volunteers working directly with the community. Age UK were also disappointed that local organisations,

such as those in the leisure industry, or local breweries, did not choose to support their campaign (the project team reflected that the sensitive nature of the topic made it difficult to engage with these organisations), and they were only able to get traction from NHS and local authority organisations.

Involvement of volunteers and the community

Where projects involved community outreach, the involvement of volunteers and the goodwill of the community were enablers to implementation.

- Involving target communities in designing the intervention to develop something that was appealing and met their needs. For example, *PrEP & Prejudice* held focus groups in the community to develop a campaign that resonated with Black Africans, and *Echoes* undertook interviews with people with experience of being in prison and living with HIV to develop a drama based on real experiences. Age UK also conducted focus groups with older people to test and co-produce messages for their campaign.
- Volunteers were critical in engaging target communities. As described above, volunteers were considered effective in meeting targets of the number of people reached. PrEP & Prejudice trained and deployed 32 PrEP Champions in the community, three of whom were Black African PrEP users. This was key for gaining trust in a community with some scepticism of PrEP. MobPrESH emphasised recruiting peers who shared similar characteristics of women more likely to have HIV, which allowed peers to connect with women in the community. PrEPared recruited champions from the different African communities they wished to serve, allowing them to reach communities from diverse African backgrounds, and discuss PrEP and HIV in a culturally acceptable way.

There were also risks to relying on volunteers, who often have busy home and work schedules and sometimes found it challenging to commit time to the project. Both *MobPrESH* and *PrEPared*, both projects which were aiming to establish volunteer peer mobilisers/champions, reported this as an issue and recommended that the work of volunteers needs to be recognised and appropriately remunerated.

Timescales

As described above, nine projects reported that the one-year timescale was challenging. Some projects reflected that they were too ambitious in what they planned to implement within the year, such as developing two toolkits (*Development of community testing toolkits*), delivering workshops and catwalks in three locations (*Catwalk for Power*) or recruiting and training a diverse group of volunteers (*MobPrESH*).

Specifically, it took time for **projects to build up knowledge and new skills** in order to implement their projects. This was often related to the innovative nature of projects, as organisations reported that they needed to go out of their 'comfort zone' to implement the project. For example:

- The *Echoes* script took longer to develop than anticipated as the Prison Radio Association does not typically develop dramas.
- The project manager for NAT's *Development of community testing toolkits* was new to the HIV sector and had to quickly understand the context and evidence around community testing services.

The need to build up new knowledge also applied to target communities, where projects didn't anticipate that levels of HIV knowledge would be as low as they found. This typically related to projects that were

aiming to raise awareness of a specific area of HIV prevention – for example, PrEP. Projects found that the people they were engaging needed a baseline knowledge of sexual health and/or HIV before engaging in these topics. For example, *MobPreSH* found the mobiliser model was an effective means of engaging with women on PrEP who already had knowledge of sexual health, but lack of knowledge created a barrier to being able to go straight into these conversations with everyone. Knowledge of PrEP was also lower than Africa Advocacy Foundation anticipated through their PrEP & Prejudice project, so they changed their approach to train participants about HIV in general before covering PrEP.

It also takes time to **engage target communities, volunteers or partners** in the design and delivery of interventions – particularly on sensitive topics, such as HIV prevention/safe sex, and with vulnerable communities (e.g. chemsex users, or people affected by FGM). For example, TVPS reflected that the timescales were challenging for the project *Preventing HIV in women affected by FGM,* as they were working with a community of women where it takes time to build trust and develop relationships. *MobPrESH*'s rigorous approach to recruiting peer mobilisers took time but they are confident that they needed this involved approach to break the mould from the typical volunteer profile they engage with (the 'aunty network' of women with HIV) and recruit the right kind of volunteers (young, networked, articulate women).

5 Outcomes and impacts

This chapter focuses on the outcomes and impacts achieved by the Cohort 4 projects, for project beneficiaries, VCS organisations, and PHE/the Fund itself.

More detail on the outcomes and impacts of each of the projects can be found in the second section of this report, where detailed project profiles are provided.

5.1 For project beneficiaries

The following outcomes and impacts have been reported by Cohort 4 projects:

5.1.1 Improved awareness and knowledge of HIV

Many of this year's projects aimed to improve awareness and knowledge of HIV, usually among specific groups – such as black Africans (*PrEP & Prejudice, Talking Together*), women (*Catwalk for Power, MobPrESH, Soul Sisters*), people in prison (*Echoes*), young males (METRO's *Guys into Guys* online chatroom), and older people (Age UK's *Raising Awareness of HIV in the over 50s* project).

There is some evidence that projects were able to increase awareness and knowledge about HIV among their target groups, which was typically evidenced through survey data from project beneficiaries. For example:

- In surveys of viewers of Talking Together's live performances and films, 93% (of 87 respondents to the survey) said their knowledge of U=U increased and 89% stated the pieces increased knowledge of mixed HIV status relationships.
- Of the people in prison that had heard the Prison Radio Association's radio drama, 73% (of 158) said their knowledge about HIV had increased as a result of hearing the *Echoes*.
- Questionnaires and feedback forms given to 55 audience members for the Catwalk for Power
 project also suggest some increases in knowledge about HIV prevention (50% of them reported
 increased knowledge on HIV prevention).

"People explained to us that listening to the drama had given them a much better understanding of HIV and having heard the drama people understood how it's transmitted." Echoes project lead

There is also qualitative evidence from projects around improving knowledge of HIV. For example, feedback from participants in the *Guys into Guys* online chatroom suggests that the sessions improved their knowledge around HIV and sexual health. In focus groups held with people in prison following performances of *Echoes*, discussions took place around how HIV can and cannot be contracted (although the project team found there is still some way to go in tackling misperceptions among this population).

Some projects aimed to increase awareness among professionals working with specific groups. Verbal feedback from the organisations engaged with TVPS' project suggests that the training sessions were effective in improving knowledge about HIV among support staff and community volunteers. Similarly, NAZ conducted training sessions with professionals working in VAW organisations as part of their *Soul Sisters* project. Survey data from the trainees suggests that this training improved knowledge about sexual health, HIV and how HIV links with violence.

The impact of some of this awareness raising activity can be difficult to measure. For example, Age UK are aware of potentially thousands of people who have engaged with their campaign materials but are not able to evidence the extent to which this has increased knowledge of HIV among their target group.

Several projects this year focused on improving awareness of PrEP, specifically. This includes raising awareness of PrEP among Latin Americans (METRO's e-PrEP programme) and black Africans (PrEP & Prejudice, MobPrESH, PrEPared).

These projects have collected evidence suggesting there has been an increase in awareness among the groups they engaged, for example:

- For Africa Advocacy's *PrEP & Prejudice* project, 32% of 235 trainees knew what PrEP stands for before training, increasing to 95% after training, and 97% knew where to access PrEP (compared with 30% before the training).
- Members of Latin American communities surveyed after engagement in the e-PrEP programme
 reported higher knowledge of PrEP, the Impact trial, the checks required when taking PrEP, and
 about HIV prevention approaches more generally.
- Following BHA Leeds Skyline's PrEPared project, 96% of 127 members of African communities engaged by community champions stated they would recommend PrEP to be taken if they knew someone who was at risk of contracting HIV. The PrEPared team also received enquiries about the PrEP trial and where they could access PrEP. While the MobPrESH project did not formally measure the impact their peer mobilisers' work had on people's knowledge and awareness of PrEP, their 20 trainees will continue to educate their peers around PrEP.

"After the project we did get one or two phone calls – one or two people asking about the PrEP trial. Where they can get hold of PrEP." PrEPared project lead

5.1.2 Behaviour change

Monitoring behaviour change can be challenging, particularly because projects had no ongoing contact with project beneficiaries, or no contact with all potential beneficiaries. For example, it is not possible to fully understand the extent of behaviour change among thousands of viewers of *The Grass Is Always Grindr* series across the world. Furthermore, behaviour change is likely to be a long-term impact that extends beyond the timeframes of the project (one year).

The ways in which projects aimed to change behaviour, and evidence on what outcomes they have achieved, is detailed below:

• Increase use of PrEP: Evidence of this can be seen in the number of people now taking PrEP or attempting to use PrEP following the intervention. *PrEP & Prejudice* reported signposting 11 individuals to the IMPACT trial, 12 people were referred from the *e-PrEP programme* (and 4 are known to be now taking PrEP), and TVPS signposted 3 women to the IMPACT trial, one of which is now taking PrEP.

"We had people that because of our content and because of our videos, actually got themselves on PrEP." e-PrEP programme project lead

Increase condom use: Increases in condom use were harder to measure for projects which had
this as an aim. CW+ and 56 Dean Street aimed to promote condom and PrEP use through their

drama series and received thousands of click-throughs on their sexual health messaging placed throughout the episodes; the project team is confident that the series will have a beneficial impact on healthy sexual behaviours but are unable to accurately measure this.

- Encourage HIV testing: As described above, two projects conducted HIV testing as part of their activities, conducting a total of 151). Although testing was not part of the Prison Radio Association *Echoes* project, seven in ten people in prison surveyed (71%) said that listening to the drama had encouraged them to get tested; HIV tests are available on request to people in prison.
- Reduce risk-taking behaviours: Spectra's Mindfulness-Based Chemsex Recovery project aimed to reduce risk-taking behaviours among MSM experiencing chemsex addiction. Following the intervention, participants reported greater confidence in being able to negotiate safer sex after taking part in the course. However, there was a very slight increase in reported sexual risk-taking in the post-intervention questionnaire. It is not clear why this may have been, and it should be noted these findings are based on a very small sample size of 14, so causality cannot be established.
- Improved wellbeing: Some projects aimed to improve wellbeing more widely and there is some evidence of this being achieved. The Mindfulness-Based Chemsex Recovery project gathered some evidence through pre-and-post surveys that participants developed a less judgemental attitude to unwanted thoughts, a greater ability to describe what was happening in their bodies and a less reactive relationship to difficult situations. METRO's Guys into Guys project aimed to empower and improve confidence among the young men involved, not just increase their knowledge of HIV, and were reportedly successful in providing an environment where participants could share their thoughts and feelings openly.

5.1.3 Changing attitudes to HIV

Projects also aimed to change how people think about HIV. Age UK intended to tackle how over 50s view themselves and the risk of catching the virus. It is difficult for Age UK to accurately state the extent to which this was successful, as changes in attitudes were not formally measured, although their media campaign was well received, and thousands of people were reached.

There was also a focus on reducing stigma associated with HIV. Being able to fully understand the impact on stigma is something that projects have struggled to measure, although some attempted to capture this using questionnaires or qualitative work with project beneficiaries. There was some indication of tackling stigma reflected in the survey responses of workshop participants in the *Talking Together* project and in feedback forms of audience members – 96% (of 87 respondents) felt the pieces shown addressed HIV stigma. Qualitative evidence suggests that the *Catwalk for Power* project was successful in helping women deal with their own self-stigma around HIV, as well as the stigma of their family members and friends.

"There were women who got up and performed who never would have before. They talked really honestly about their experience." Catwalk for Power project lead

5.2 For VCS organisations

Running these projects has also had an impact on the organisations themselves in the following ways:

• **Learning new skills:** The projects have used PHE's funding to try something new and reach their target audiences in a different way. For example, this could be through live performances

(Catwalk for Power, Echoes, Talking Together), drama (The Grass Is Always Grindr, Echoes), or communicating online (e-PrEP programme, Guys into Guys). The VCS organisations reported that this experience has given them the skills and confidence to run these types of interventions again. Projects also now have evidence in the form of their own evaluation reports, that they have already started using to discuss further funding opportunities.

"I think a lot of the learnings that we got from this is going to help us in the future when we model programmes similar to this." e-PrEP programme project lead

- Working with new audiences: The Fund has allowed some projects to do something new with
 groups they do not typically work with. For Age UK, their Cohort 4 project was the first time they
 had done any work around sexual health among older people, and for the Love Tank and
 PrEPster the MobPrESH project was the first project developed specifically for women. Both
 teams reported that this had opened up new areas of work for them.
- Improving knowledge of staff: VCS organisations learnt a lot about their target audiences and in some cases about HIV / PrEP. For example, NAT have developed knowledge about community-based testing and intend to share this learning throughout the sector. Both Age UK and the Prison Radio Association do not traditionally work in the HIV space, and these organisations report having learnt a lot about HIV from participating in the Fund. Many projects involved training staff and/or partnering with other organisations in order to deliver their interventions, both of which have been key in improving staff knowledge (*PrEP & Prejudice*, *Preventing HIV in women affected by FGM, Soul Sisters, Development of community testing toolkits*).

"I think it's given our entire team a better understanding of the issues that exist around HIV, the experience of living with HIV." Echoes project lead

• Changing relationships with other organisations: For many projects, participating in this cohort has resulted in new networks or partnerships being forged. For example, as a result of the *e-PrEP programme*, METRO has now been invited to become a member of the Latin American Providers Forum supporting Latin American communities. NAZ have developed relationships with VAW and faith organisations. Through the establishment of an expert advisory group which reviewed their toolkits, NAT have developed relationships across the sector.

"It's been good for our relationships with some key organisations and some organisations that maybe we hadn't spoken to before, and our credibility with them." Development of community testing toolkits project lead

• Existing relationships have been strengthened. For example, developing *Echoes* has strengthened the Prison Radio Association's relationship with theatre company Crowded Room, and *Catwalk for Power* has built on existing relationships for Positively UK. Project leads also report having improved the visibility or perceived credibility of their organisations within the sector as a result of participating in the Fund (NAT, TVPS, Spectra).

"There are some referrers who didn't really know much about Spectra, so it's definitely put us on their radar." Mindfulness-Based Chemsex Recovery project lead

5.3 For the Fund/PHE

As in previous cohorts, there was positivity towards the Fund among the projects. There was recognition among participants that funding available for the HIV prevention sector in general is limited, so this Fund is welcome and helps to sustain the work of VCS organisations. Projects see value in PHE investing in innovation, and the Fund is seen as giving VCS organisations the ability to 'take a risk' and run a project they would not have been able to do otherwise.

However, positivity towards the Fund was not unanimous. Questions were raised about the value in funding innovative projects for one year (a tight timeline for many projects) and then stopping this funding. Project leads recognised that in theory they would be able to bid for funding elsewhere off the back of their projects, however, they felt in practice this was not always possible as suitable funding can be difficult to find. More detail about this is included in the Chapter 7 of this report.

"These are yearly projects and then that's it. What happens to this project? Is there a way to further support these projects?" Project lead

6 Next steps for projects

This section considers the future plans for the projects. As for the first three cohorts, a pre-requisite for securing funding from the Fund was the potential for projects to be scaled-up or replicated elsewhere if shown to be effective.

In order for projects to continue, they would need to secure additional funding beyond the PHE HIV Prevention Innovation Fund. This would be required to cover staff activities, ongoing software licensing/development/ maintenance, marketing, and testing equipment among other expenses. All projects said that they intended to continue their activities beyond the funding year, generally funded using their own resources. Two projects reported that, as of April 2020, that they had secured further funding for expansions of their work.

The ways projects plan to continue their projects are outlined below.

There are examples where projects will be expanded, or work on the project has inspired new areas of work for the organisation. For example:

- The Grass is always Grindr episodes have inspired a new campaign from CW+ and 56 Dean Street called 'Generation Zero', targeted at MSM under the age of 25.
- PrEPster have been funded by the MAC AIDs Fund to roll out *MobPrESH* to a new group: queer men of colour (QMOC) primarily in London. Learning from *MobPrESH* is also being used to inform wider work around PrEP and sexual health for women.
- Spectra have secured funding to develop an online version of their mindfulness-based approach to chemsex which is currently being developed and is due to commence in August 2020.
- METRO reported that as online methods of engagement have become more important during the 2020 coronavirus pandemic, the project team are especially keen to expand their online chatroom work, including options to develop an app, and make it available to a wider audience.
- HIV Voices and Positive East have begun discussions about a second *Talking Together* workshop programme and potential ways of adapting the spoken word pieces into a podcast.
- Thames Valley Positive Support (TVPS) have submitted funding bids for two other projects based on their work on raising awareness of HIV among women affected by female genital mutilation (FGM). This is for work that builds on their innovation project, using a similar model (training and volunteering) to promote HIV awareness, sexual health, and reducing HIV stigma among BAME women.

A number of projects have **developed resources as part of their projects that will continue to be used** in organisations' ongoing activities. For example, *PrEP & Prejudice* information materials, Age UK's *Raising Awareness of HIV in the over 50s* campaign materials, *e-PrEP programme* videos and resources, and the *Talking Together* films, will continue to be distributed and used by projects. There are plans for *The Grass is Always Grindr* films to be shown at film festivals, and to make the series available on streaming platforms, and the Prison Radio Association plans to broadcast the play *Echoes* on prison radios again.

Projects have also **invested time into recruiting and training volunteers**. For example, PrEP champions in *PrEPared* and *MobPrESH*, and volunteers recruited to promote sexual health and risks of HIV to women affected by female genital mutilation (FGM). These projects reported that the volunteers had expressed a willingness to continue their work.

Projects also reported opportunities to **continue or extend their work via partners and other organisations**. For example:

- Positively UK's partners on *Catwalk for Power* in Brighton and Manchester have both requested that they conduct more workshops on different topics, such as sexual health and pleasure.
- There was some interest in Spectra's *Mindfulness-based Chemsex Recovery* course from the probation service, who contacted Spectra about the possibility of including some offenders on the programme.
- Age UK materials to promote HIV awareness among the over 50s have been picked up by other regional Age UK offices around the country.
- NAT plans to undertake some follow-up work in 2021 to understand if and how their toolkits have been used.

Follow up interviews with some of the projects from Cohort 3 demonstrate that it has been possible for projects to continue with their work beyond the funding year. This has largely been achieved through incorporating pilots into existing work, funded through the organisations' existing budgets. There are also examples where partners within the UK and globally have picked up the innovation work (e.g. vending machines being used in other countries; click-and-collect testing approaches being picked up by European partners).

7 Key learning

This chapter discusses the lessons which can be drawn from Cohort 4's experiences of the Fund. The lessons are looked at from the perspective of projects themselves and from the perspective of PHE and its role in administering the Fund. The discussion below looks to draw upon lessons that apply across multiple projects or cover likely challenges for future projects.

Learning relating to specific projects can be found in the second section of this report, where detailed project profiles are provided.

7.1 Learning for projects

Building on the implementation enablers and barriers discussed in chapter 4, there are some key learning for projects when implementing these kinds of innovative pilots:

Knowledge of target communities: In many cases projects had pre-existing knowledge and expertise of working with their target audiences, which helped them to reach their target groups.

Community engagement: Some of the projects relied on members of their target communities to help in the design and delivery of their interventions, often as volunteers. This meant that the projects were able to be designed with the target audience in mind – using relevant experiences, languages, personalities, and cultural norms that were appropriate for different groups.

"If you're working with a specific group, it has to be a community-led project." e-PrEP programme project lead

Partnership working: Many projects found value in establishing partnerships (sometimes formally and other times informally), which were vital in enabling the intervention to happen. Partners played a range of roles including as delivery partners (e.g. *PrEP & Prejudice*), designing the projects (e.g. Age UK), and recruiting participants (e.g. TVPS and Spectra). For some projects, partnerships were pivotal in disseminating materials (sharing METRO's *e-PrEP programme* videos online, and the dissemination of *The Grass Is Always Grindr* and NAT's toolkits).

In some cases, partners were willing to give in-kind support that helped the projects succeed, including to develop materials, engage participants, and participate in expert advisory groups. Partner organisations were also crucial in upskilling lead organisations where they had gaps in their knowledge.

"The Fund creates partnerships and avenues for working with different people that we have never worked with before." Soul Sisters project lead

Tight timeframes: Many projects commented that they felt one year was a relatively short amount of time to develop and implement a project. Careful time planning is essential when running these kinds of projects and it could be helpful to build contingencies into timetables. It's also important for projects to try and be realistic about what they can achieve over a one-year period.

"A lot of our issues are really practical, time-based pressures." Development of community testing toolkits project lead

Limited capacity: Linked with the above point about timeframes, capacity within teams could also be a challenge for projects. Organisations sometimes had to deliver these projects on tight budgets and with

small teams. Some projects received help in-kind from project staff, volunteers, and other organisations (e.g. *The Grass Is Always Grindr, PrEP & Prejudice*) which helped to overcome these issues.

Flexibility: Some of the projects found that when something wasn't working, it was necessary to adapt for the project to succeed. For example, when METRO realised that the web-chat platform they had developed as part of their *e-PrEP programme* was not being used by many people, they switched to communicating with Latin Americans using existing social media platforms like WhatsApp and Facebook, which proved to be more successful. Positive East and HIV Voices had to remain flexible in putting on their *Talking Together* performances, adapting to the festival protocols and being open to changes.

"Be open to new opportunities and new openings and don't be too stuck on one way of learning." Talking Together project lead

7.2 Learning for PHE

In addition to learning for projects, there is also learning for PHE from this cohort:

Sharing learning: The Fund is intended to provide evidence within the sector of what interventions work and with whom. A consistent finding across cohorts is a desire for learning from these projects to be shared more widely. The overarching evaluations are published online and are shared with projects when they begin. This year, projects mentioned they had found it valuable to read the previous overarching evaluation reports for Cohorts 1-3. Nevertheless, questions remain about whether more could be done to share learning from the Fund.

"I can't remember being part of any structured coordinated way of sharing learning. I know there are reports – but there are a lot of reports that come across our desk." Project lead

Networking: Related to the above point about sharing learning, some of the projects used the Fund as an opportunity to network, which they found beneficial. These projects valued the launch session as a way of meeting other organisations working in this space. NAT set up an expert advisory group who were consulted throughout the development of their toolkits – this group was based on contacts the project lead had made at the Cohort 4 launch event. CW+ and 56 Dean Street linked in with METRO as part of their *The Grass Is Always Grindr* project, and METRO helped by promoting the episodes and translating some of them into Spanish and Portuguese.

"It was really great to meet the other recipients of the PHE funding as well [at the launch event] because we met the guys from METRO which went really well." Project lead

However, while some used the Fund as an opportunity for networking, this did not happen for all projects. For example, this year similar projects were set up around training PrEP champions, or training professionals (such as training organisations that support vulnerable women) and there is no evidence that knowledge was shared between these projects. It should be noted that networking would not suit everybody, however, some projects would have valued more opportunities to get together and share experiences and ideas.

"I think there are people in the sector disappointed in the lack of investment in things to bring us together." Project lead

Positivity about the application and monitoring process: Projects liked the fact that the application form was succinct. Those who had taken part in previous cohorts of the Fund appreciated the consistency of the process.

"The process was very similar to previous years...to be going through a process that's familiar and seems to be pretty solid and doesn't change over a long period of time, I think that's a real benefit." Project lead

Each project was required to complete a quarterly monitoring report providing an update about their project and send this to PHE. Generally, projects found these easy enough to complete. Two projects said they would have valued more acknowledgement and feedback from PHE on their reports to reassure them that changes in their plans were acceptable.

Contact with PHE: Few projects reported requiring support from PHE during the funding year, however, where it was needed, they found conversations with PHE and support from them helpful. For example, members of the PHE team attending project events such as the *e-PrEP programme* launch, was really valued. Projects liked the 'hands off' nature of the Fund which gave them space to deliver their interventions, but there was also a desire for more responsiveness or acknowledgement, such as around submitting their quarterly monitoring reports (as described above).

Sustainability of projects (and timelines for delivery): A finding from previous cohorts that also emerged this year is that organisations can find it hard to secure further funding to continue their projects. Given limited funding in the sector, some project leads were doubtful that they would be able to secure funding from local commissioners, especially for national or online projects. Furthermore, as with previous years, questions were raised about whether it is worth funding a project for one year if there is no chance for it to be sustained and could lead to unintended consequences for beneficiaries (e.g. services or support networks being removed).

Many projects struggled to design and deliver their projects within the one-year funding period. A number of projects would like to see a two-year funding cycle (at least). This would also afford them more time to test their innovations and test what works.

"Two years might be a more realistic timeframe and perhaps give a more accurate sense as to whether these things [projects] are useful." Project lead

Future of the Fund: There were questions over what will happen now that the Fund is moving away from being HIV specific in Cohort 5; its scope has now broadened out to cover sexual and reproductive health. One project lead was apprehensive about this change, stating it could result in less available funding for the HIV sector.

"I think it's a really important Fund, and it's already been diluted...they've broadened its scope now it's not just HIV, and have reduced the amount of funding available for it." Project lead

Project profiles

A summary of each Cohort 4 project

Catwalk for Power (Positively UK)

Overview of project

This project profile draws on an interview with the project lead conducted in April 2020, and the toolkit produced by Positively UK.

Aims of the project: The project aimed to share messages about women living with HIV (WLHIV) through a performance-based approach, specifically aiming to:

- Reduce stigma, improve knowledge of HIV prevention and encourage regular testing for WLHIV.
- Contribute to the inclusion of women in the HIV prevention narrative in the long-term.

Intervention: The project put WLHIV at the centre of an anti-stigma campaign through two main activities:

- A series of workshops with WLHIV to explore the roots of stigma, develop skills and strategies to confront it and raise awareness of HIV prevention.
- Catwalk performances, developed through the workshops, creating a space where WLHIV could embody and physically manifest how to be in the world without stigma, performing in front of an invited audience.

Main location	Target Audience	Delivery organisations
London, Brighton,	Women living with HIV	Lead organisation: Positively UK
Manchester	(WLHIV)	Partners: Act Up London, George House Trust, Brighton and Hove Community Support Group.

Figure 7.1: An example of a catwalk performance



Background to the project

Public Health England data indicated that 48% of women diagnosed with HIV in 2016 were diagnosed late¹⁰ and women experience obstacles accessing HIV information because of stigma, gender imbalances and the misconception that HIV doesn't affect UK women. Positively UK reported a paucity of anti-stigma and prevention campaigns to address women's concerns, prevention, testing and care, and began the *Catwalk for Power* project with the aim to create "actions" to address the silence around women and HIV.

Catwalk for Power was initially piloted in London in 2017 with a group of WLHIV from Positively UK collaborating with women activists and artists who were part of Act Up London. Following the success of the pilot, PHE Innovation Funding was awarded for a continuation of the programme in other UK regions (London, Brighton, Manchester). This project aimed to replicate the most successful pilot activities.

"As Women with HIV we feel that not enough has been done to actively include women from all backgrounds in policy and research that affect us." CEO of Positively UK¹¹

Implementation of the project

Positively UK delivered a series of workshops in London, Brighton and Manchester to prepare participants for the catwalk performances, working with established community groups to invite WLHIV to take part. Each workshop was several hours in length and centred around a different activity, for example creating costume accessories, banners and props with personal or political messages, or developing leadership skills and confidence.

Following these workshops, catwalks were held and involved a "strutting runway" where workshop participants could walk or strut wearing outfits they had made or styled. The events also included short speeches, poetry and storytelling by WLHIV. Volunteer 'allies' collaborated with Positively UK to support with implementing the catwalk events in London, Brighton and Manchester. This support involved advising on creative skills, providing technical support, contributing to fundraising efforts and assisting with the logistics of holding an event (including sourcing venues and setting up). The project particularly relied on these relationships outside of its London base. For example, in Brighton a collaboration with Brighton and Hove HIV community support groups assisted Positively UK in delivering the workshops, and a collaboration with George House Trust (an African Women's Group) was felt to be invaluable in delivering the Manchester catwalk event.

Overall, the project met or exceeded a range of targets set. It delivered:

- **Training to 8 volunteers** from London, Brighton and Manchester who supported to lead workshops and events.
- 15 workshop sessions with women living with HIV. 45 women attended workshops in London, 10 women in Brighton and 18 women in Manchester, exceeding the total target of 48 workshop participants.
- Leaflets with women-specific information on PrEP.

¹⁰ HIV in the UK, 2016 report, Public Health England

https://actuplondon.wordpress.com/2018/02/27/the-catwalk-for-power-resistance-and-hope/comment-page-1/#comment-657

- Three catwalk events with 27 women performing in London, 17 in Brighton and 21 in Manchester. 500 audience members attended the events: 200 in London, 120 in Brighton and 180 in Manchester.
- Five market stalls to disseminate information and raise awareness through women-specific HIV resources. The project held one at each catwalk event, with additional public market stalls at Greenwich Market and Brighton Pride.
- Three steering committees held throughout the project.
- **Four media publications,** including two abstracts for the International AIDS Conference 2020, two radio interviews, three 'zines' and one film.

Positively UK also launched a *Catwalk for Power* toolkit as an online resource to women HIV and activism. The toolkit outlines a series of steps used to create catwalks: https://c4ptoolkit.positivelyuk.org/. The soft launch of the toolkit took place in London and was attended by 40 people, including women who had participated in catwalks.

Outcomes and impacts

The project received a positive reception and attracted interest outside its initial scope, with the project team being invited to hold Catwalk for Power events at the BHIVA World Aids Day event, the AIDS Impact conference and the Fast Track Cities conference. Regarding measuring the project aims to reduce stigma, improve knowledge of HIV prevention and encourage regular testing for WLHIV, the project collected feedback in the following ways:

- A questionnaire at catwalk events and market stalls for the public to complete (to measure any knowledge acquired or self-reported change in perceptions of WLHIV).
- Anonymous feedback forms for workshop attendees (to measure any self-reported changes in attitudes or stigma).
- Informal feedback from partners and volunteers that Positively UK worked with.
- Feedback through their regular database of service users.

The questionnaire at catwalk events and market stalls was completed by 55 women: 50% of them self-reported increased knowledge on HIV prevention and 10% reported intentions to take actions to HIV test.

Anecdotally, it was reported that the project was effective in reducing self-stigma for WLHIV who took part, reducing stigma for their friends and families, and raising awareness with local organisations. However, it was noted that the project did not reach the general public, as events were by invitation only with the exception of the Manchester event which was advertised through Eventbrite.

"It was amazing how women told their stories - the performance made them feel comfortable, nobody wanted to wear masks. I think the project was really powerful and stigma towards women and self-stigma has definitely improved." Project lead

Lessons from delivering the project

When reflecting on the delivery of the project, a number of lessons were identified:

The project has demonstrated that a performance approach is a powerful means of conveying messages and reducing stigma. Previously the organisation often held workshops for people living with HIV, but having a performance-based approach is something they've learnt is very effective.

"We have learnt that different approaches are required for different people, and that performance is really powerful way of sharing messages – people listen to it in a way that they wouldn't through a leaflet, or a message on a billboard." Project lead

There was a great passion and appetite for this type of project in the community. For example, the catwalk events were well attended, and the workshop attendees and volunteers were keen to continue expanding the project and organising further catwalks.

"The project took up a life of its own – there was so much enthusiasm for it and people wanted to continue doing more catworks." Proejct Lead

Partnerships with other organisations and volunteers, particularly in Brighton and Manchester, enabled the projects' success. However, this also presented a challenge in that there were multiple relationships to manage, and these relationships were being developed at the same time as workshop delivery.

The project faced a number of challenges through its decision to focus on an area wider than its London base. For example, the coordinators needed to build relationships with organisations in Brighton and Manchester, which was valuable but time consuming. It also resulted in a lot of travelling for coordinators and volunteers, which was tiring and incurred additional expense for the project. In some instances, it was possible to recruit volunteers in Brighton and Manchester. Overall, the project exceeded its budget as a result of these challenges.

The project experienced some barriers in recruiting women to take part in workshops and events due to concerns about confidentiality and self-stigma. The project particularly experienced barriers in Brighton, where women came from a wide geographical area and workshops were not held at the weekend. In comparison, in Manchester two volunteer peer groups merged to provide support and encouragement for women taking part.

Next steps for the project

The Catwalk for Power resources remain available through the toolkit developed. Both partners in Brighton and Manchester have requested that Positively UK return to do more workshops, for example 'Between the Sheets' on sexual health and pleasure. Following completion of this project, Positively UK also got involved with other performance-based concepts, such as holding Catwalk for Power workshops each week to continue with creative projects. Though it will be difficult to continue with these activities as a result of COVID-19, the team are keen to continue building on the project and may explore other funding opportunities such as the National Lottery Community Fund.

In addition, Positively UK are looking at opportunities to develop other creative projects, for men and women, based on the success and feedback from participants and have made this a part of the organisational strategy.

Development of community testing toolkits (National AIDS Trust)

This project profile draws on an interview with the project lead conducted in April 2020 and supporting documentation from National AIDS Trust (NAT).

Overview of project

Aims of the project: This project aimed to create new resources for organisations providing and commissioning community-based HIV testing services. The specific aims were to:

- Highlight policy, evidence and good practice behind effective community testing to enable
 providers to develop effective services and commissioners to commission high-quality, evidencebased interventions.
- Support providers to evaluate their community-based testing interventions in a high-quality, standardised, and evidence-based way.
- Enable cross-sector shared learning about 'what works' in terms of community-based testing interventions.

Intervention: This project involved an evidence review and qualitative research to develop two toolkits (documents providing evidence and guidance) to be shared with providers and commissioners of community-based HIV testing. The two toolkits covered the following:

- Community testing intervention design toolkit: outlining what makes an effective community-based HIV testing intervention.
- Community testing evaluation toolkit: containing key standardised metrics and guidance on how to evaluate community-based HIV testing interventions and how best to demonstrate impact.

Main location	Target Audience	Delivery organisations
National	Providers and commissioners of community-based HIV testing services	National AIDS Trust (NAT)

Background to the project

Providers and commissioners of HIV testing services agree on the value of 'community testing', but this is a broad umbrella term comprising a variety of different testing initiatives. NAT recognised a need in the sector for guidance on what constitutes an effective community testing intervention, and how to evaluate such interventions in a standardised way. Without this guidance, the NAT hypothesised that it would be difficult for providers to develop and evidence effective testing interventions and for commissioners to commission effective services.

Implementation of the project

Responsibility for leading the development of the two toolkits sat with one main member of NAT staff, with oversight from a senior member of staff. As the project manager was new to the HIV sector at the time the project began, they had to quickly understand the context and evidence around community

testing services. This began in part at the PHE HIV Prevention Innovation Fund Cohort 4 launch event, which would prove to be a useful networking opportunity and built relationships that were useful throughout the project.

"That was a really effective way of meeting the right people...it was a really good way of starting to build those networks up." Project lead

The contacts made at the launch event were followed up by the project team after the event and formed the basis of an expert advisory group. Interviews were undertaken with members of this group to provide knowledge and expertise about community testing interventions and experience of evaluating these.

A substantial proportion of this project consisted of desk research. The project team undertook a literature review on community testing interventions, including peer-reviewed articles and relevant policy documents. This review process included looking at European-wide HIV testing initiatives to see if anything useful could be applied to a UK context.

NAT compiled the learning from the desk research and interviews to develop the two toolkits. Members of the expert advisory group reviewed drafts of these toolkits and provided comments which were incorporated into the next version. They also participated in workshops to discuss the toolkits and provide additional learning.

The first toolkit, on community testing intervention design, includes evidence-based guidance on how to design an effective community-based HIV testing intervention. Learnings about this from the toolkit were shared via a presentation at a Terrence Higgins Trust (THT) conference. The second toolkit, on community testing evaluation, contains evidence-based guidance about evaluating community testing interventions and includes key standardised metrics that can be used to do this. Finalising and publishing these toolkits was delayed largely due to the coronavirus outbreak, as key members of the project team were furloughed. Both toolkits were published in August 2020¹².

NAT shared the toolkits with their existing network of organisations in the VCS sector, through the HIV Prevention England (HPE) network, and PHE disseminated the documents to Local Authority commissioners across the country. When ready, they also hope to secure some media coverage on the publication of the toolkits to promote them further.

Outcomes and impacts

NAT will be undertaking an analysis of the impact of the toolkits a year following launch, to understand if and how they are being used in the sector. It is hoped that these resources will have a lasting impact on the quality of community testing interventions and the evaluation of these.

Prior to their publication, the project lead reported that the toolkits had started to have an impact in influencing the thinking of people who have seen them. At the time of writing (July 2020), one provider organisation had reported to NAT that they had incorporated learning from the toolkits into a funding bid for their Local Authority commissioner.

¹² https://www.nat.org.uk/nat-topic/community-testing

"The people who have discussed the evaluation toolkit have said that they have taken a lot from it and they are already making changes to the way that they do data collection." Project lead

Lessons from delivering the project

When reflecting on the delivery of of the project, these lessons were identified:

From the outset of this project the **expert advisory group has proven to be pivotal in the development of the toolkits**. They provided learning for the content of the toolkits, reviewed drafts, and will likely be helpful in disseminating the findings from the toolkits.

"I think this has been the best it's ever worked [the expert advisory group]. The enthusiasm from group members has been really interesting and really beneficial." Project lead

The project took more time than anticipated: The project lead reported that most of the challenges faced were time-based pressures, partly because it took longer than expected to collate feedback on drafts of the report. On reflection, they reported it was perhaps over-ambitious to try and develop the toolkits in less than a year.

Next steps for the project

Now that the toolkits have been published, NAT will be using their networks to disseminate the toolkits as widely as possible to providers and commissioners across the country. One year following their launch, NAT will undertake some follow-up work to understand if and how the toolkits have been used. NAT may then wish to update or edit the toolkits, which might require them to bid for further funding. It may also be possible at that stage to include case studies on the NAT website of where and how the toolkits have been used in testing projects.

Echoes (Prison Radio Association)

This project profile draws on an interview with the project lead conducted in May 2020, and the evaluation report produced by the Prison Radio Association.

Overview of project

Aims of the project: The primary goal of this project was to counter misinformation and stigma around HIV within prisons, through the use of drama. It also aimed to promote the benefits of early testing and treatment for HIV among people in prison.

Intervention: The project involved the development and delivery of a drama, *Echoes*, based on real-life experiences of people with HIV, some of whom had experience of being in prison. *Echoes* was designed with an audience of people in prison in mind.

Main location	Target Audience	Delivery organisations
National (throughout prisons)	People in prison	Lead organisation: Prison
		Radio Association
		Partners: Crowded Room

Background to the project

Rates of HIV in prison are higher than average and the Prison Radio Association knew from their own work that there can be a lack of understanding among people in prison about HIV, how it is transmitted, and a widespread belief that HIV is a 'death sentence'. People in prison can also find it difficult to access information in prison as there is no internet access. Having successfully run two radio-based projects as part of the Innovation Fund previously (*Sex Week* and *Sex Talk*), the Prison Radio Association decided to try a different medium of information provision by using drama to tackle this. They contracted Crowded Room to help develop the drama, a theatre company specialising in writing drama about social issues. Both organisations had previously created a radio drama about restorative justice which had been broadcast on BBC Radio 4 and wanted to apply this method to provide information about HIV. *Echoes* was written based on real experiences of people living with HIV who were interviewed at the start of the project, in the hopes of eliciting empathy among its audience in a way that previous information-based radio shows might not have.

Implementation of the project

The Prison Radio Association worked with theatre company Crowded Room to write and perform the drama. The script was based on interviews conducted by Crowded Room with people living with HIV, some of whom had experienced imprisonment. The actors performing the drama listened to recordings of these interviews and repeated the words they were hearing.

"People understand that they're listening to real, true stories." Project Lead

Using these interviews, the *Echoes* drama was written to provide information about HIV and encourage people in prison to get tested. The finished drama was delivered to audiences in three ways:

Radio drama: Echoes has been broadcast three times on National Prison Radio, the world's first
national radio station for people in prison. The radio service is broadcast in over 100 prisons
throughout England and Wales. It has a national reach of around 80,000 people in prison in total;
there is, therefore, the potential for Echoes to reach thousands of people in prison across the

country. A survey within three prisons of 200 people in prison in total found 79% had heard *Echoes*.

- Live performances: Live performances of *Echoes* took place within three prisons (Brixton, Styal and Grendon; one performance per prison). A total of three live performances took place to a total of 60 people in prison. A fourth performance was planned at another prison, but unfortunately it was cancelled shortly before it was due to take place, due to security restrictions within the prison.
- **Filmed version:** A filmed version of *Echoes* is available for the general public and can be viewed on YouTube¹³. As of March 2021, the filmed version had been viewed 151 times since its publication on the 29th May 2020. This filmed version is also available on the Digital Hub, an internal internet platform within two prisons in Wayland and Berwyn, and as of July 2020 had been viewed 559 times since being published on this platform.

Outcomes and impacts

The Prison Radio Association conducted an evaluation of the *Echoes* drama project, involving surveys with 200 people in prison across three prisons and group discussions held with audience members of the live performances in three of the prisons.

Of the people in prison surveyed who had heard *Echoes* on the radio (79% of 200 people in prison), nearly three-quarters (73%) reported that hearing the drama had given them a better understanding about HIV, suggesting the project was generally successful in its aim of tackling misinformation. The evaluation also found that there is still some way to go to reduce misinformation about HIV within prisons. Some people in prison thought it was possible to contract HIV through exchange of saliva such as by kissing or sharing a toothbrush.

"You can even get HIV or AIDS if someone with it just coughs. It will be in the air and will travel to everyone else." Participant in one of the focus groups with people in prison

A second aim of this project was to encourage people in prison to get tested for HIV¹⁴, and there is some evidence that the project was successful in this aim. Of those who had heard *Echoes* on the radio, over seven in ten (71%) said that listening to the drama had encouraged them to get tested either in prison or after their release. Findings from the focus groups also suggested that the drama encouraged its audience to get tested, with one participant reflecting that the programme acted as a good reminder to get tested.

"It gives you reminder to always get tested, doesn't matter if you're in prison." Participant in one of the focus groups with people in prison

The project has also impacted the Prison Radio Association and strengthened their relationship with Crowded Room. It has improved staff understanding of issues surrounding HIV and what living with HIV is like for people in prison. The success of *Echoes* has also encouraged the Prison Radio Association to develop more radio dramas and equipped the team with the skills necessary to create these. Off the back of this project, the Prison Radio Association has been commissioned to develop a radio drama for BBC Radio 4.

¹³ The film version of *Echoes* can be viewed here: https://www.youtube.com/watch?v=1XbfV_96QX0

¹⁴ People in prison are supposed to be able to access healthcare provision the same way as those in the community outside of prison, so a prisoner should be able to request an HIV test at any time.

"We've not done much drama before, and approaching these difficult subjects in this way, I think we've become emboldened by the experience." Project lead

Lessons from delivering the project

When reflecting on the delivery of of the project, a number of lessons were identified:

Timelines for implementation were longer than anticipated: The script development phase of the project took longer than originally anticipated. This had an impact on the overall project, cutting down the time for the recording and performances of the project. The project eventually over-ran its original timings.

Unpredictability of the prison environment: Prison staff could be extremely busy and there were unpredictable practical issues which caused disruption to a live performance of *Echoes*. These included lack of availability of performances space, a lack of prison staff to supervise the audiences, and being able to recruit enough audience members. Security issues within one prison meant that one performance was cancelled at short notice and it was not possible to rearrange. The occasionally chaotic nature of prison regimes and the concentration of audience members with mental health conditions within one prison audience impacted the performance there – although it was noted that the performance in this prison was still welcomed by the audience.

Willingness to engage in the project: One of the key enablers of the project was the willingness of the people in prison to share their experiences and stories, which formed the basis of the script. Prisoners were recruited from existing activity groups within prisons and project staff found these participants to be very open about their experiences and happy to cooperate. The project also found in some cases prison staff went above and beyond what was expected in helping to organise and run the performances smoothly.

Basing the drama on the real experiences of people in prison: The intention of using drama was to present the experiences of people in prison living with HIV in an engaging and empathetic way. The project lead reflects that basing the drama on true stories of people in prison made the content more relatable and realistic.

Next steps for the project

Echoes now exists a resource that can continue to be heard and seen by people in prison and the public. The Prison Radio Association has broadcast *Echoes* three times so far and plans to broadcast the drama on the radio again, which will continue its reach. It is also now available for people in prison in two prisons via the Digital Hub, a restricted online platform. The filmed version of the drama has recently become available outside of prisons and can be viewed on YouTube¹⁵. Further live performances of *Echoes* may happen in the future, either in public or within prisons – although none are currently planned.

Further information about the project can be found here: https://prison.radio/a-new-virus-grips-the-world/

¹⁵ https://www.youtube.com/watch?v=1XbfV_96QX0

e-PrEP programme (METRO)

This project profile draws on an interview with the project lead conducted in April 2020, and the evaluation report produced by METRO.

Overview of project

Aims of the project: This project aimed to use videos to educate members of the Latin American community living in the UK about PrEP. The primary target audience was heterosexual Latin Americans, with a secondary target audience of Latin American MSM. Specifically, the project aimed to:

- Increase awareness, understanding and uptake of PrEP among Latin Americans.
- Increase HIV testing among the Latin American community and reduce late diagnosis.
- Increase PrEP use through signposting to other services.

Intervention: The *e-PrEP programme* involved the production of videos about PrEP, which were shared online on METRO's website, on YouTube, and via social media. These videos are available in Spanish and Portuguese.

The programme also involved engaging with Latin Americans about PrEP face-to-face and online, via a chat mechanism developed on the METRO website, as well as existing platforms such as Facebook. Through these conversations, METRO staff were able to answer questions and provide guidance about PrEP, as well as refer people to different services.

Main location	Target Audience	Delivery organisations
Online	Latin American Community	METRO

Figure 1: Example of one of METRO's e-PrEP videos



Background to the project

METRO has previously conducted work with Latin American communities and through this work realised that there was a need to address HIV in these communities to try and reduce transmissions, and that one of the best ways of doing this is to increase use of PrEP. There is a higher prevalence of HIV and late diagnosis among Latin American communities, with 1 in 8 new diagnosis in the UK being among

Latin American communities, and evidence suggests that there is lower awareness and uptake of PrEP among these groups.

"We learned that while incidences of HIV were going down in general, when you look at the data a bit closer, it wasn't really going down for particular groups like Latin Americans." Project lead

METRO developed the *e-PrEP programme* to fill the gap of there not being migrant-specific online PrEP approaches. METRO knew that as many PrEP programmes focus on MSM communities, other communities such as Latin Americans were at risk of being 'left behind'. The *e-PrEP programme* was designed to be for Latin American communities and also designed with input from the communities it was targeting. The project involved volunteers assisting in the design and delivery of the programme, to ensure that content was language and culturally specific.

Implementation of the project

The project involved writing, filming and promoting video content about PrEP in Spanish and Portuguese. This work was conducted entirely in-house by METRO with the help of a team of volunteers from Latin American communities.

METRO engaged Latin Americans face-to-face in London to recruit participants willing to participate in the videos, and to have conversations about PrEP. The conversations about PrEP were called 'orientation conversations' and aimed to raise knowledge and awareness about PrEP. The initial engagement with Latin American communities provided ideas for the content of the videos. The METRO team were visible at events attended by Latin Americans where they could promote the programme and engage with people directly; these included Latin American festivals, Black Pride and Salsa evenings.

A series of videos was produced about PrEP, with one new video being released per week on METRO's website, YouTube channel, and social media platforms. The videos consisted of featured interviews and presenters talking about PrEP and covered key issues to raise awareness, such as what PrEP is, where you can get PrEP from, what the national Impact trial is, and how to take PrEP. METRO also developed an online webchat function on their website to allow Latin Americans to ask questions about PrEP.

The project reported overall meeting or exceeding its targets and delivered:

- 24 online videos about PrEP, 12 of which were in Spanish and 12 in Portuguese. These videos were shared online by METRO and by other VCS organisations that METRO reached out to, such as PrEPster and BHA for Equality. Originally, METRO planned to travel across the country filming these videos but due to timing and budgetary constraints most of the videos were filmed in London, and two filmed in Manchester.
- A new webchat function, which is now in use on the METRO website, though through the course of the project it became apparent that the webchat function was not being used as much as the project team had initially expected. This was because Latin Americans were preferring to contact METRO through existing platforms, such as WhatsApp and Facebook. METRO decided to keep the webchat function active but also continue talking to Latin Americans through these alternative platforms.
- 195 orientation conversations both online and face-to-face with Latin Americans to provide information about PrEP, answer any questions, and refer people on to other HIV and sexual health services.

Outcomes and impacts

METRO formally evaluated the *e-PrEP programme* through the use of surveys and qualitative case studies. The six volunteers involved in the programme were positive in their surveys about the programme, reporting feeling empowered through their involvement in the programme and that it had been a positive experience for them. Qualitative data from the volunteers supported these findings, with participants finding the programme to be a good way of learning about PrEP and sexual health issues.

METRO gave pre and post surveys to Latin Americans, who they had conversations with face-to-face, and received 21 responses. Although the sample size is small, responses are indicative that the conversations they had with the project team improved their awareness and knowledge around PrEP. Data from the post survey shows that following the conversation:

- more participants knew what PrEP was (21 compared with 14 at the initial survey),
- more participants knew where to get PrEP (19 compared with 3 at the initial survey),
- there was greater awareness of the PrEP Impact trial (21 compared with 2 at the initial survey were aware of this),
- participants knew about the checks required when taking PrEP (20 compared with 1 in the initial survey), and,
- participants knew more about HIV prevention approaches such as condom use, testing and treatment (20 participants felt knowledgeable about this at the post survey compared with 15 who felt knowledgeable at the initial survey).

Of these 21 participants 15 were signposted to another service, most commonly the Terrence Higgins Trust 'I Want PrEP Now' service (15 participants), followed by HIV testing services (13 participants) and the PrEP Impact Trial (12 participants).

Some participants contacted METRO later on to inform the project team that following contact with the programme, either through a conversation or seeing one of the videos created, they had started taking PrEP. The project lead reported knowing of four people who had begun taking PrEP following contact with the *e-PrEP programme*.

"We had people that because of our content and because of our videos, actually got themselves on PrEP." Project lead

The *e-PrEP programme* videos have had 2,700 views, and the programme's content has had a reach of around 59,000 people on social media (including sponsored content). What is unclear is the extent of the impact on viewers who have not contacted METRO. As the videos are publicly available, it is possible that other people, including Latin Americans, have seen them and decided to start using PrEP without METRO's knowledge.

Lessons from delivering the project

When reflecting on the delivery of of the project, a number of lessons were identified:

Engaging with the target community to design the programme: The project team found it vital to have help from volunteers in the Latin American community when developing this programme. Having

help from these volunteers ensured that the content and messaging were appropriate for the target audience, something that would not have been possible without this input.

"The fact that these videos were created using Spanish and Portuguese and using native speakers, I think that was a big win for us." Project lead

Video is an effective mechanism for conveying information: Through this project, METRO have created engaging content using video to educate Latin Americans about PrEP. The project team have learnt the value of high-quality video content as a powerful tool in HIV prevention approaches.

"I think what also works is video, I think video is a very effective method for circulating information...it touches people slightly differently and makes things more memorable." Project lead

Use platforms that the target audience are already engaged with: Fewer people used the webchat function than METRO anticipated. The project lead stated that from this, they had learned the importance of using platforms that people already feel comfortable with.

Sex and sexual health is an important entry point into conversations about HIV: METRO learned that there are unmet sexual health needs within the Latin American communities they were engaging with, and re-focused their orientation conversations to include talking to people about sex and sexual health more broadly. This project has provided METRO with insight into how best to engage with these communities about sex and HIV.

Presence at key community events: Being present at events attended by Latin American communities such as Latin American festivals and Black Pride helped to make the project visible and helped the project team engage with their target audience. Engaging with community gatekeepers (such as respected members of Latin American communities) was also helpful in engaging with the target group.

Next steps for the project

The *e-PrEP programme* videos and resources continue to be available online on the METRO website and on YouTube. Likewise, the webchat is still functional and METRO report continuing to receive messages through it. The project lead sees an opportunity to update the videos to reflect recent changes in the availability of PrEP, as the UK government announced in March 2020 that PrEP will be made available in England through the NHS. However, they recognise that additional funding would be required in order to update these videos – METRO report they will be seeking funding to do this work.

Further information about the project can be found here: https://metrocharity.org.uk/hiv/e-prep-programme

Guys into Guys (GiG) Online Chatroom (METRO)

This project profile draws on an interview with the project lead conducted in April 2020, and the evaluation report prepared by METRO.

Overview of project

Aims of the project: The aims of the project were to create a safe online space for young guys into guys (GiG) to come together discuss relationships and sexual health. Within this, the aims were to:

- Increase participant knowledge about HIV
- Increase participant knowledge about good sexual health
- Empower participants to feel more comfortable and confident about their sexuality
- · Connect young guys into guys with their peers

While there was an aim to raise knowledge of HIV and good sexual health, the project also had a strong emphasis on the wider holistic needs of the target group, including a focus on wellbeing. To this end, the aim was also to help young men and boys build support networks, as well as their self-esteem, to allow them to build behaviours and attitudes that reduce risk of HIV.

Intervention: Set up a 'virtual youth centre' for young GiG to chat together. This took for the form of facilitated text-based chatrooms. The groups were designed to discuss key HIV facts, but also sexual attraction and relationships.

Main location	Target Audience	Delivery organisations
Kent and Medway	Young men and boys aged 11-	Lead organisation: METRO
	19	

Background to the project

The project was developed in recognition that sexually active young GiG are over-represented in rates of HIV and sexually acquired infections, and young men are among the group most likely to end their own life. This was coupled with concerns around inconsistencies in the provision of LGBT-inclusive education in secondary school, and an absence of safe and supportive spaces for young men to explore their sexuality. METRO already runs nine youth groups, and recognised an opportunity to utilise online platforms to connect young people across wide geographies, in an anonymous way.

Implementation of the project

In the set-up of the project, a strict and secure safeguarding protocol was set up, that maintained the safety of all those taking part. This included:

- Identifying a secure online platform to host the discussions.
- Meeting all participants to verify their identity and to assess their individual circumstances ahead
 of participating online.

• Participants aged 13 years were assessed using Fraser Guidelines¹⁶ to judge their suitability to take part without the consent of a parent or carer.

The team also needed to promote the programme to young men and boys. They did this using their existing links they had established through youth face-to-face groups in the area. They also distributed flyers and posters in schools, colleges and youth centres, promoted the service at public events such as Pride festivals, provided briefing for staff at sexual health clinics, attended council-led networking meetings, presented information at conferences, attended youth group meetings, and posted on Facebook and Twitter. The project was open to boys and young men across Kent, Medway and south London boroughs, in line with METRO's geographical reach.

Once accepted onto the programme, participants took part in three online chatroom sessions, with up to five people, on three main topics: sexuality, relationships and sex. Each session lasted about an hour and a half, and was facilitated by a team of two METRO youth worker staff. Groups were separated by age (11 to 12 year olds, 13 to 15 year olds and 16 to 19 year olds). After completing the programme, participants are rewarded with a £15 shopping voucher, a list of information and resources discussed in the programme, and a certificate of achievement. METRO also set up a fortnightly 'drop-in' chatroom session for those that have completed the programme.

In total, eleven young people completed the sessions, against a target of delivering 15 sessions to a total of 90 people. The need to incorporate safeguarding protocols into the recruitment of participants (meeting them face-to-face) meant the reach of the project was limited. The project was more successful in recruiting people who were already out and confident discussing their sexuality. However, METRO also received referrals from other organisations into the programme, and this included a referral from a Police Officer working in child protection. This meant they were able to reach someone who had been involved in unlawful sex; giving this person the opportunity to chat and learn with peers their own age.

Outcomes and impacts

Participants described their experience as enjoyable and interesting. Feedback from the eleven participants suggests the chatrooms were both informative, and successful in generating a safe environment in which participants could talk about 'a taboo topic', and share things openly, such as reluctance to use condoms.

There was also one disclosure of a young man who had been abused while under age, and METRO were able to support him to report this to the Police.

"This service will have helped him to reassess something that had happened to him, and allow him to recognise he could get support, and recognising that its not his fault. He blamed himself." Project lead

Staff and professionals involved were keen to support a programme that offered a means to connect with a vulnerable group of young people.

The project has also had a lasting impact on METRO, by helping them make a step into online support services. It was reported that this will be particularly important following the emphasis on online services with the COVID-19 pandemic.

¹⁶ https://learning.nspcc.org.uk/child-protection-system/gillick-competence-fraser-guidelines

At the end of the year event, METRO convened a conference for commissioners, partner agencies and potential funders, in order to present the project's findings, invite feedback and help formulate recommendations for next steps. The project was well received by the Local Authorities, youth services, HIV support and prevention services, and other charities in attendance (18 in total).

Lessons from delivering the project

When reflecting on the delivery of of the project, a number of lessons were identified particularly around the recruitment (and reach) of these kinds of online projects. They noted that engagement with a larger and broader group of participants would require resources targeted to raise the project profile, gain trust among potential participants and ensure wrap-around information and support for those taking part is maintained.

There has also been a key learning around **balancing the need for security, with the desire to reach high numbers of participants.** Early on, METRO identified the need to verify people accessing the online space. They did this by meeting everyone in person before the online group to verify their identify, assess individual circumstances, and give them a password and log-in. The team noted that this registration process could be quite off putting to some people, and detracted from the accessibility of the online method. As a result, they achieved significantly lower numbers of uptake than anticipated. However, the project team reflected that their rigorous recruitment approach was a necessary step to ensure that the online environment was safe for those who participated. This was also important to allow potential participants to build some trust in METRO and its staff (who may be new to them), before registering and taking part. The project lead reflected that in order to deliver something securely, the reach is likely to be compromised.

METRO was reliant on their own networks to recruit participants. Coupled with the highly involved registration process, this meant the programme was only able to attract young men who were more engaged in existing services, and more confident about enrolling into a new programme. A solution to this would be to **work more closely with mainstream schools and colleges to publicise the work**, but also have a trusted partner to support with the verification of participants, and refer pupils into the programme.

Next steps for the project

The first year of this programme has established resources, protocols and a model that works well to improve knowledge, grow confidence and link peers together on an online platform. The project lead noted that this has been particularly important given the changes brought about by the COVID-19 pandemic and the need to look at online alternatives.

"In a post-COVID world increasingly online services will be more necessary – this is an example of where this has worked...and could potentially be replicated." Project Lead

METRO have also started to think about ways to develop the programme, including re-launching it as an app, offering a single go-to point for information, sign-posting and testimonials, alongside the chat space. They are also keen to continue running the chat space and build wider participation (and potentially expanding to the wider LGBTQ community). They have not yet agreed how this would be funded, and it may be funded through METRO core funds.

The team is planning to submit a journal article to 'AIDS Education and Prevention' (https://guilfordjournals.com/loi/aeap) on their work.

Mindfulness-Based Chemsex Recovery (Spectra)

This project profile draws on an interview with two members of the project team conducted in May 2020, and the project evaluation report produced by Spectra.

Overview of project

Aims of the project: The primary goal of this project was to support men who have sex with men (MSM) struggling with chemsex addiction though a mindfulness-based programme: *Mindfulness-Based Chemsex Recovery (MBCR)*. The intention of the programme was to help these men to maintain their ongoing recovery from addiction and to support their wellbeing.

Intervention: This intervention centred around mindfulness-based training sessions with groups of MSM, that were conducted face-to-face in Soho, London. The programme also involved elements prior to these sessions including assessment interviews with potential participants, taster sessions with potential participants, and orientation sessions with referrer organisations, as well as follow-up refresher sessions and one-to-one aftercare sessions.

Main location	Target Audience	Delivery organisations
London (Soho)	MSM	Spectra

Background to the project

Chemsex (sexual activity while under the influence of stimulant drugs) is linked with increased risk of HIV among MSM because of the prevalence of condomless sex, having multiple sexual partners, needle-sharing, and poor mental health which can reinforce risk-taking behaviour¹⁷. In recent years there have been calls to make chemsex use an area of focus for public health, as well as for new interventions to be developed to meet the challenges associated with its use¹.

Spectra's *MBCR* programme was based on an existing mindfulness programme designed to help people with substance abuse addictions (Mindfulness-Based Relapse Prevention for Addictive Behaviours¹⁸). There is evidence that mindfulness-based approaches are associated with superior substance abuse treatment outcomes, including reductions in frequency and severity of substance abuse and intensity of cravings¹. Spectra adapted the original programme to support the recovery of MSM involved in the sexualised use of chemsex (use of methamphetamine, mephedrone and GHB/GBL). Mindfulness practice was placed at the heart of the programme to enable participants to identify triggers for chemsex use, observe their cravings and have greater self-control over their chemsex use.

Implementation of the project

Spectra began the project by setting up referral pathways for participants onto the programme – this was done through conversations with organisations who work with MSM chemsex users, and as part of their wider outreach work. Three orientation sessions were held with referral organisations (London Friend, 56 Dean Street and the Club Drug Clinic) to provide an overview of the programme and guidance on suitable participants and methods for recruiting them. Spectra also conducted work to promote the upcoming programme by giving interviews about it with popular gay magazines, and by promoting it on

¹⁷ Spectra MBCR evaluation report

¹⁸ https://psycnet.apa.org/record/2011-01707-000

social media. Finally, taster sessions were run with MSM so these people were able to decide whether they wanted to participate in the full programme.

Project staff undertook one-to-one assessment interviews with MSM interested in participating in order to understand whether the programme was suitable for them. A prerequisite for participants was that they had not engaged in chemsex in the month prior to the programme, as it was felt for this group one-to-one support would be a more appropriate intervention. Several potential participants were signposted to more appropriate services.

The programme itself was adapted and delivered by Spectra project staff who had a personal history of practising and teaching mindfulness. Face-to-face group sessions were held in a venue in Soho, London. Each cohort of participants was invited to take part in four half-day sessions. Over this time, participants were also asked to set aside 20-30 minutes per day at home for mindfulness practice, which involved formal meditations, bringing mindfulness to daily activities, recording mindfulness practice in a log book, and worksheets to help participants identify triggers, patterns of using, and relapse cycles. Following the course, participants were invited to participate in a follow-up session and a one-to-one aftercare session with the project lead.

Overall, the project delivered:

- Three orientation sessions for referral organisations.
- Four taster sessions with 40 MSM in total.
- Twenty-six half-hour assessment interviews with potential participants.
- Three cohorts of four half-day sessions of the MBCR programme 26 MSM attended in total, with 14 completing the programme. This was a lower number of participants than had originally been hoped for, due to a high attrition rate.
- Three follow-up refresher sessions 10 participants took part in the follow-up sessions in total.
- Three aftercare one-to-one sessions three participants took up the offer of a one-to-one aftercare session.

Outcomes and impacts

Spectra measured the impact of the *MBCR* programme on project beneficiaries through the use of a Mindfulness Measurement questionnaire, which was administered to participants at three points in time; at the start of the first session, at the end of the last session, and finally three months later. All of the 14 participants responded to the first two tools, and all but one responded to the follow-up. The programme was highly rated by its participants, with 13 of the 14 participants rating the quality of the group facilitation as 'good' or 'very good'.

Though the sample size of participants is small (and should be interpreted therefore with caution), responses from the questionnaires indicated some possible changes in participants' thinking following the intervention. Questions were based on a scaled scoring system with responses ranging from a score of 1 ('Not at all') to 5 ('Most or all of the time'). Data from these questionnaires suggests that as a result of participating in the groups participants had:

 a greater awareness of the impact of emotions on thoughts and behaviours (an average score increase of 0.5 between the first and second questionnaires)¹⁹;

¹⁹ Statement from questionnaire: 'I pay attention to how my emotions affect my thoughts and behaviour'

- a less judgemental attitude to unwanted thoughts (an average score decrease of 0.8 between the first and second questionnaires)²⁰;
- a greater ability to describe what was happening in their bodies (an average score increase of 0.6 between the first and second questionnaires)²¹; and,
- a less reactive relationship to difficult situations (an average score increase of 0.7 between the first and second questionnaires)²². increased in confidence in negotiating safer sex (an average score increase of 0.5 between the first and second questionnaires²³), however, there was also an increase in reported sexual risk taking (also an average score increase of 0.5 between the first and second questionnaires²⁴).

There is some evidence that the programme will have a lasting impact on its participants. Most said that they are likely to continue with regular mindfulness practice, for example through meditation, either formally (9 said they were likely or very likely to do so) or informally (10 said they were likely or very likely to do so).

Overall, project staff feel that this has been a successful intervention for the small number of people completing the programme. They are keen to run more sessions and collect more evidence of its effects. Having run the programme once, there are areas which the project staff intend to change going forward which may improve it – for example, including part of the course addressing psychosexual issues such as re-engaging in sober sex.

"Although the sample size is small and because of that it's difficult to draw any firm conclusions on a quantitative level, when you look at the individual case studies, and participant evaluation, you can see that for most people it's made a big difference to their recovery." Project lead

Lessons from delivering the project

When reflecting on the delivery of of the project, a number of lessons were identified:

Attrition is to be expected in this group: The project reported a 46% dropout rate, which is broadly in line with what should be expected in this type of intervention with this target group; people undertaking chemsex can suffer from mental health and substance abuse problems that may make adherence to a programme such as this difficult. When designing similar programmes, this high level of attrition should be anticipated so that possible mitigation methods can be included in the programme design.

The initial assessment is important: The project lead reported finding it particularly helpful to conduct the one-to-one assessment interviews prior to the commencement of the programme, in order to work out whether the course was right for someone. In some cases, they felt as though other services were more appropriate and signposted participants where relevant. This ensured that the right people took part in the programme and avoided potential disruption.

There is not a one-size-fits-all approach to chemsex recovery: Group-based interventions such as this may present cost-benefits for commissioners over one-to-one approaches because many people can benefit from the intervention simultaneously. However, having completed this project, the project

²⁰ Statement from questionnaire: 'I believe some of my thoughts are abnormal or bad and I shouldn't think that way'

²¹ Statement from questionnaire: 'I'm able to find words to describe what's happening in my body'

²² Statement from questionnaire: 'In difficult situations I pause without immediately reacting'

²³ Statement from questionnaire: 'I feel confident in negotiating safer sex'

²⁴ Statement from questionnaire: 'I've engaged in sex without a condom or without PrEP' [over the last week]

lead believes that (related to the point above), multiple approaches to helping people deal with chemsex issues are required. For some people and in certain contexts, a one-to-one approach or a different method, such as an online course, might be more effective.

More data is needed: The project team has found some evidence that a mindfulness based chemsex intervention can be beneficial for the target group of MSM, but this evidence is limited as only a small number of participants completed the programme. There is a need to further develop and test this type of intervention to better understand its utility.

Next steps for the project

The project team are eager to continue running the programme to collect more data about the intervention and have secured funding both internally and externally to be able to run more sessions. At the time of writing (July 2020) an online version of the programme was being developed, involving a weekly programme of 8 sessions, and it is hoped the online format will make the programme accessible to more people. The project lead is considering adapting the content of the course to include a session about re-engaging in sober sex. Additionally, there was some interest in the original course from the probation service, who contacted Spectra about the possibility of including some people being supervised through probation on the programme (though the decision was made not to do so as the project team were cautious about the potential implications of mixing this group with the MSM already signed up to the programme). Going forwards, Spectra would consider designing a version of this course specifically tailored to this audience.

Further information about the project can be found here: https://spectra-london.org.uk/2019/03/27/mindfulness-based-chemsex-recovery-mbcr-programme/

MobPrESH (PrEPster)

This project profile draws on an interview with the project lead conducted in April 2020, and the evaluation report prepared by an external consultancy.

Overview of project

Aims of the project: MobPrESH (Mobilising for PrEP and sexual health) aimed to raise awareness and understanding of PrEP, alongside related sexual health issues, among women – with a particular emphasis on women in the Black African Community (BAC). In so doing, the team sought to build capacity for community responses to HIV, and improve equality of access to information about PrEP as a prevention strategy, mitigating wider HIV-related inequalities.

Intervention: Establishing volunteer peer community mobilisers to raise awareness of PrEP.

Main location	Target Audience	Delivery organisations
London, Bristol, Yorkshire	Women (BAC)	Lead organisation: PrEPster
		Partners: Brigstowe and
		Yorkshire MESMAC

Figure 1: Images from MobPrESH's work in Bristol, Yorkshire and London



Background to the project

Emerging evidence from Europe indicates that few women have access to PrEP and related information, or see it as relevant to them²⁵. Furthermore, peer-led interventions have been shown to be an acceptable means of improving awareness of, and access to, PrEP²⁶. However, though PrEPster was already doing some informal work with women to raise awareness of PrEP, they were aware that women have rarely been involved in peer-led interventions on the topic. Furthermore, they noted that HIV prevention work successfully attracts volunteers from older age groups, typically HIV positive women, that might create barriers to disseminating messages to younger age groups. They wanted to use innovation funds to focus time and resource on testing a more diverse peer mobiliser model for women.

²⁵ https://prepster.info/wp-content/uploads/2020/04/MobPrESH-report-MARCH-2020.pdf

²⁶ https://pubmed.ncbi.nlm.nih.gov/30138482/

"We wanted to break mould of the 'aunty network' (older HIV positive women they typically recruit as volunteers) – don't want to talk to mum, auntie or an older woman. We were hearing that people wanted to talk people their own age or 'people who are like me'". Project lead

Implementation of the project

Activities for the project focussed on the recruitment, training and support for the peer mobilisers. PrEPster, Brigstowe and Yorkshire MESMAC used a combination of social media (Twitter, Facebook and Instagram), community outreach and word-of-mouth to recruit peer mobilisers and promote *MobPrESH*. Across these sites, project staff also reached out to and visited specific organisations (e.g. a local learning centre, university, trans, sex worker and women's groups, networks of women of colour and LGBT people).

Between January and December 2019, PrEPster worked in Bristol, Yorkshire and London, training and supporting peer mobilisers for PrEP in their communities. The training consisted of a two-day peer-led programme discussing HIV, PrEP and PrEPster, sexual health, and ideas to embed learning within communities. Each group of mobilisers were provided with resources to develop PrEP and sexual health interventions in their own communities. This included videos, web pages and blogs; articles, fanzines, presentations, and workshops; outreach, group-work, art projects and designing educational material.

The project recruited and trained 20 peer mobilisers (10 in London, five in Bristol, five in Yorkshire), against a target of 48-72.

PrEPster have estimated that the peer mobilisers were able to engage over 1,500 people face to face or remotely (e.g. through social media or magazines). They engaged with people they were connected to socially, religiously and/or professionally, via diverse formats, audiences and settings. This included organised events and spontaneous discussions, running workshops, informal one-to-one and small-group discussions, with friends, co-workers, family members and strangers, sometimes organised in advanced but often spontaneously.

Outcomes and impacts

MobPrESH offers an example of a grassroots, peer-led project that has worked successfully with diverse communities of women across three distinct UK sites, primarily Black and other women of colour. The project has trained 20 people who will continue to educate their peers around PrEP.

The project did not formally measure the impact the peer mobilisers' work had on people's knowledge and awareness of PrEP. The project lead reported that the focus on *MobPrESH* was on building deeprooted, and sustainable means of building capacity in the community and raising awareness of HIV prevention strategies. They noted that this takes longer to mature, and the longer-term impact of the project will not be known for some time.

In terms of the project's impact on the delivery organisation, to date PrEPster's focus has been largely on gay and bisexual men. Having this project targeting women has helped refocus of PrEPster's work on a greater diversity of things including feminism, reproductive health as well as sexual health and PrEP.

Lessons from delivering the project

When reflecting on the delivery of of the project, a number of lessons were identified:

Knowledge gaps around PrEP can be a barrier: The mobiliser model focusses on people opening up conversations within their existing networks. It was reported that this model was an effective means of

engaging with women who already knew something about sexual health, or had the capacity to talk about it. It was harder to engage people who did not know much about sexual health, or did not feel comfortable discussing it.

"MobPrESH was able to reach some of those women who were contemplating PrEP – we weren't able to reach the top of the tree (i.e. people who don't even know about PrEP)." Project lead

Furthermore, by implementing the project, PrEPster and its partners found that a lot of women they engaged had not even begun to think about HIV or even sexual health, and had not heard of PrEP. This meant intensive work was required to explain the relevance of the project to both peers and then to the communities they went on to engage.

The importance of a defining what it means to be a peer: *MobPrESH* set up a robust volunteer recruitment system, based around a desire to move away from the volunteer profile they typically work with (described as an 'aunty network' of older African HIV-positive women). Instead they wanted to attract women in their 20s, 30s and 40s who have similar or shared characteristics as women most likely to have HIV, but also have the characteristics that would allow them to take on the role of a peer: for example, articulate, and confident talking about sex and reproductive health.

These specific criteria made recruitment challenging – but the project lead is confident it was the right balance to strike in order to invest in the right people, who would be able to have an impact within their communities. A key challenge at the beginning of the project was stipulating who they wanted to recruit, and this meant saying no to some people who were keen to be involved. In Yorkshire they had to become more flexible with the recruitment criteria and open it up to their more typical volunteer profile of older African HIV-positive women.

Competing schedules and responsibilities limited peer mobiliser recruitment and participation; this was something the project understimated at the outset. For example, some of the most engaged and effective volunteers had limited time because they had a family to look after. Competing priorities also meant that potential volunteers could not attend training. The health and social care needs of peer mobilisers also required time, resources and expertise and ultimately limited some peer mobilisers' capacity. The project lead reflected that they were ambitious in their target to engage volunteers from a range of demographic backgrounds.

Need for extended timeline for future projects: The time and resources allocated to the project was not enough to recruit, train and support a diverse group of volunteers. This also limited the time for mobilisers to forge links with communities and ultimately engage in *MobPrESH* activities. It was recommended that an extended period to prepare and promote the project, including more intensive outreach to identify peer mobilisers from the groups who needed it most, and more funded time for project coordinators to train and support them would have been worthwhile.

Next steps for the project

The learning from the pilot, are being used to develop future work around PrEP and sexual health for women. On the basis of early learning from *MobPrESH*, PrEPster have been funded by the MAC AIDs Fund to roll out *MobPrESH* to a new group: queer men of colour (QMOC) primarily in London. They are building learning from the women's model into this project. More widely, PrEPster are thinking about the potential for a multi-agency project around PrEP and women's sexual health.

Further information about the project can be found here: https://prepster.info/mobpresh/

PrEPared (BHA Leeds Skyline)

This project profile draws on an interview with the project lead conducted in April 2020, and the evaluation report produced by the University of Leeds.

Overview of project

Aims of the project: *PrEPared* aimed to raise awareness about the existence of PrEP to African communities in Leeds, where knowledge of PrEP continues to be very low. Specifically, the project aimed to open up general conversations about how PrEP might be used, for whom it might be particularly valuable and to get communities talking about PrEP and HIV more generally. The project aimed to ensure ongoing sustainability of PrEP awareness in African communities in Leeds.

Intervention: Community champions: dedicated members of various African communities in Leeds were trained and supported to disseminate positive messages and information about HIV and specifically the availability of PrEP to their wider communities and networks.

Main location	Target Audience	Delivery organisations
Leeds	Black African Community	Lead organisation: BHA Leeds Skyline
		Partners: Leeds Sexual Health (LSH),
		University of Leeds (evaluators)

Background to the project

Through BHA Leeds Skyline's existing outreach work with African communities (in collaboration with LSH), they became aware of a lack of knowledge and understanding of the benefits and uses of PrEP among this group. In 2017, in partnership with LSH, BHA surveyed 75 people at a local African football tournament to assess knowledge about PrEP. The results showed that knowledge levels were very low (81% did not know about PrEP). LSH presented the findings at the 2018 BASHH/BHIVA conference, where it won the best oral presentation. BHA and LSH wanted to do more to raise awareness of PrEP, but neither had the capacity to sustain any long-term promotion of it. The team adopted the model of peer mentor as it had been used successfully to promote messages around HIV in previous work. BHA and LSH also hypothesised that investing in peers would be an effective and sustainable means of embedding messages around PrEP among African communities.

Implementation of the project

The project started with activities to raise awareness of the project in order to recruit community champions. The *PrEPared* team wanted to find champions who had good links within their communities, and initially planned to do this through holding three large community awareness raising events. However, in practice this was not feasible as it would have taken too much time to organise and deliver. Instead, they decided to go through their existing contacts, as well as hold an open day.

The *PrEPared* team planned to train a minimum of 12 champions, and were able to train 13 from Zimbabwe, Cameroon, South Sudan, Kenya and Nigeria. Six of these champions were already involved in existing projects. They carried out two training sessions with them to provide up-to-date information on PrEP.

The plan was for each community champion to hold at least 10 sessions on PrEP awareness through a combination of small group sessions or one to one discussions, engaging at least 300 people across the project. In practice, the champions reached 326 Africans across Leeds in face to face sessions. A far

larger number of Africans across the UK and in the champions' countries of origin were reached through online/social media innovations by the champions.

Outcomes and impacts

The community champions model offers people the opportunity to talk about PrEP, HIV and related issues in a culturally adaptable and appropriate way – including in local languages used by those communities. It was reported that a key strength of *PrEPared* was that each distinct community had its own champion.

127 surveys were returned from sessions carried out by the champions. This data indicates that only 15% of those attending discussions facilitated by the champions had heard of PrEP. 44% stated that they would take PrEP without any qualifications, rising to 61% if their sexual risk changed and PrEP was freely available. 96% of respondents stated that they would recommend PrEP to be taken if they knew someone who was at risk of contracting HIV. After the project, the *PrEPared* team also received some inquiries about the PrEP trial and where they could access PrEP.

The project lead also reported that the project had empowered the champions, who themselves had started with a low knowledge of PrEP. Champions reported that the project had raised their awareness levels, their communication skills, and networks. The project lead reflected that this knowledge has remained in community and will be sustained.

Lessons from delivering the project

When reflecting on the delivery of of the project, a number of lessons were identified:

Suitability of the champion model to meet the needs of diverse communities: *PrEPared* focused on moving away from seeing 'Black Africans' as a homogeneous group, with a 'one size fits all' approach to health promotion. The strength of the community champion model was that it allows each community to be recognised and communicated with on its own terms, and in its own languages. These are arguably vital to understanding the nature and needs of these communities.

"The strength of the champions model is that it enables an understanding of the distinctiveness of these communities and their attitudes towards PrEP and HIV." PrEPared evaluation report

There were a number of challenges around communicating and engaging groups around the topic of PrEP. The *PrEPared* team reported that they were met with suspicion and apprehension when they first engaged communities about the champion role. People they engaged also expressed concern around the risk of being seen to be promoting promiscuity – particularly from faith leaders. Language also created some barriers: one of the African communities they hoped to engaged predominantly use French, which made it difficult to communicate the aims of the project and they were not able to generate interest from this group.

The champions themselves also found it challenging to gain interest in some group sessions, as people were being invited to discuss topics about subjects that were unknown or they were uncomfortable discussing. They got around this by building discussions into existing events.

Making time for volunteering around other commitments: many of the volunteer champions were working full time, some of them seven days a week. They therefore struggled to find time to fit in PrEP sessions. It was also noted in the University of Leeds evaluation report that considerable time, labour, transport, time away from work and business opportunities was committed to the project by volunteers,

which would ideally be properly recognised and reimbursed by agencies or funders seeking to engage this kind of model for outreach.

Short timeframes for the project: It was reported that because of official timeframes for the funding period, it felt to those involved that the project had to end prematurely, when momentum was building. All involved said they would have liked more time to embed the project within local communities.

Challenges evaluating the project: The University of Leeds evaluation report also notes that disseminating the survey forms to community groups in PrEP sessions unhelpfully changed the nature of the conversations that were ensuing. Many forms were also not fully completed or returned at all.

Next steps for the project

BHA Leeds Skyline have not yet explored funding options for continuing the project. However, the champions have expressed a willingness to continue to discuss and raise awareness of PrEP.

PrEP & Prejudice (Africa Advocacy Foundation)

This project profile draws on an interview with the Programme Director and Project Lead conducted in April 2020, and the evaluation report produced by Africa Advocacy Foundation and partners.

Overview of project

Aims of the project: The *PrEP & Prejudice* campaign aimed to increase PrEP awareness and uptake amongst heterosexuals and men who have sex with men (MSM) in Black African Communities (BACs) in England through the use of unique messaging.

Intervention: A campaign was developed by a consortium of six grassroots organisations, PrEP Champions were trained and deployed in the community, and resources were produced to guide clinicians on working with BACs and accessing PrEP.

Main location	Target Audience	Delivery organisations
England	Heterosexuals and MSM in Black African communities	Lead organisation : Africa Advocacy Foundation
		Partners: Addington Afro-Ethnic Health Promotion Group (AAEGRO), African Health Policy Network, House of Rainbow,
		Embrace UK and French African Welfare Association.

Figure 7.2: Example of campaign materials



Background to the project

The *PrEP & Prejudice* campaign was developed by Africa Advocacy Foundation, in partnership with five other organisations with expertise working with diverse Black African and Caribbean communities:

AAEGRO, African Health Policy Network, House of Rainbow, Embrace UK and French African Welfare Association.

Although the rates of HIV infection have declined in the UK, BAME individuals are disproportionately at increased risk of HIV. Furthermore, HIV Pre-Exposure Prophylaxis (PrEP) is still poorly accessed by BACs despite increased availability^{27,28}. In addition, the project team reported there have been limited campaigns focussing specifically on PrEP effectiveness or how to access PrEP within BACs.

As a result, the partnership wanted to influence how these communities engage in HIV prevention, specifically with the use of PrEP as a HIV prevention strategy. This campaign aimed to create promotional PrEP resources tailored to BACs through the use of unique African messaging.

Implementation of the project

The campaign was developed by a consortium of six grassroots organisations. Initially, workshops were held with BACs to develop the campaign, including common phrases the community could identify with and embrace. The content included leaflets, posters, a video, a jingle and social media campaign. The project also trained and deployed PrEP Champions to reinforce the campaign messages through community outreach and delivered training to enhance the capacity of frontline healthcare workers. In addition, the project team produced resources to aid clinicians with communicating PrEP messages effectively to BACs.

Overall, the project met or exceeded a range of targets that were set. It delivered the following outputs:

- **Organised four focus groups** to gauge baseline PrEP knowledge, with both BAME MSM and heterosexual participants.
- Organised three co-production focus groups to develop the *PrEP & Prejudice* campaign.
- Produced BAME focused resources that included posters, leaflets, one video jingle and one video animation.
- Launched the campaign on social media, including three radio interviews on BAC radios and five Facebook live interviews.
- Recruited and trained 32 community PrEP champions to lead outreach conversations and share *PrEP & Prejudice* resources, including three Black African PrEP users as champions.
- 30 outreach events for BACs, including three Black MSM events, attended by PrEP champions.
- Produced a training manual and guidelines for community workers, a manual for clinicians and a referral pathway for patients/community members. These provided information on PrEP and how it can be of benefit, including guidance for clinicians on working with BACs and information for patients on accessing PrEP via the Impact Trial.
- Delivered training to 68 BAC frontline healthcare workers on the use of PrEP in HIV prevention.
- Delivered 10 PrEP awareness workshops to a total of 235 healthcare workers and volunteers.

²⁷ Devitt E Dean Street Model of Testing. Round Table: Models of HIV Testing and Delivery of PrEP. 16th European AIDS Conference, 25-27 Oct, Milan, 2017.

²⁸ Witzel TC et al. What are the motivations and barriers to pre-exposure prophylaxis (PrEP) use among black men who have sex with men aged 18–45 in London? *Results from a qualitative study*. Sexually Transmitted Infections, online first, March 4 2019.

Through these activities, the project reached over 66,000 people in England: 6,118 directly and 60,493 through social media. The demographic profile of those reached through social media is unknown, however the social media platforms targeted were used mostly by Black Africans, and the project engaged directly with Black Africans in the community.

Outcomes and impacts

The evaluation of this campaign drew upon qualitative data gathered from observations, case study interviews and interviews with professionals. PrEP champions also administered questionnaires to participants at outreach events (before and after the event), and participants completed a follow-up PrEP attitude questionnaire after attending outreach events. Africa Advocacy Foundation and partners outlined three outcomes for the project: to develop a clear understanding of perceptions and attitudes on PrEP among BACs, to open discourse on PrEP among BACs within a cultural context, and to increase knowledge and uptake of PrEP by BACs.

The project team has been able to develop their understanding of perceptions and attitudes on PrEP within the community. For example, before outreach events, a pre-event questionnaire asked participants questions on awareness of PrEP: 33% had basic knowledge about PrEP, 68.8% reported that they lacked knowledge on where to access PrEP in England, and greater proportions were not aware that PrEP was free to eligible Black African and Caribbean communities through the PrEP Impact Trial. Project participants noted that an obstacle to PrEP knowledge was the absence of culturally appropriate information.

The second outcome, to open discourse on PrEP among BACs, was measured through the training of 32 PrEP champions. The project reports that all champions were upskilled to deliver essential information on PrEP and build accessibility within BACs – all champions reported that they felt empowered to share accurate information with their community.

"The project coordinator helped me in increasing my knowledge about PrEP. I have a lot of confidence now and I'm now able to talk about PrEP in clubs and other places." PrEP Champion

The campaign also aimed to increase knowledge and uptake of PrEP by BACs, and reported a total of 235 healthcare workers and volunteers working with BACs who attended PrEP awareness workshops. Participants attending these workshops showed an increased knowledge of PrEP through completing a pre and post training questionnaire, for example, 32% knew what PrEP stands for before training compared with 95% after training, and 30% knew where to access PrEP compared with 97% after. This was also measured informally through discussions with project participants during training. The impact of this on awareness of PrEP in the wider community was measured through a follow-up PrEP attitude questionnaire completed by 450 participants: 68% reported they would use PrEP when needed, 25% that might consider PrEP if needed, and 7% that they would not use PrEP. Anecdotally, the project reflected that participants at outreach events reported increased knowledge, and PrEP champions reported sharing their knowledge with the community. With regards to uptake, the project reported 11 referrals to the Impact Trial. Two Black Africans were also referred to the 56 Dean Street Clinic in London.

"For me being here made me feel free to talk about HIV and PrEP. Its news for me to know that there is such tool that can prevent HIV infections. I have learnt a lot about PrEP today." Outreach participant

"I feel more empowered to take this message across to my colleagues. In fact, we have been, on several occasions asked to share our knowledge of PrEP at the church. It feels great to know I am making a difference." PrEP Champion

Lessons from delivering the project

Knowledge of PrEP was lower than anticipated and stigma within the community was high. The organisation had to remain flexible during training and go "back to basics" to cover HIV knowledge before approaching the topic of PrEP. Some people within the BAC are sceptical about PrEP and trying to overcome these misconceptions was a challenge – using established gatekeepers in the community to gain trust was key.

The training and deployment of PrEP Champions, most of whom were from the target communities, was considered essential in the projects' success. The project reflected that they were able to train their existing outreach workers in the community in some instances, which was particularly effective.

"[PrEP champions] have been particularly instrumental with referring BAC people to the project, initiating conversations and organising events, outreach sessions, interpreting, as well as distributing project leaflets and other information to target communities." Project Lead

Similarly, the goodwill of partners was key. Although the funding available to partner organisations was small, they showed willingness and positive energy, which enabled the project to attract the target audiences. The partners also brought their experiences and knowledge of working with the target group.

The project timeframes were challenging, particularly as the project was being developed and implemented for the first time, and time was needed to build relationships with this community and develop messaging that resonated with them.

Next steps for the project

The project intends to continue using the *PrEP & Prejudice* materials as part of campaigning going forwards. This includes the website developed which can be found at: https://www.prepandprejudice.org.uk/

Preventing HIV in women affected by FGM (TVPS)

This project profile draws on an interview with the CEO of Thames Valley Positive Support conducted in April 2020, and the evaluation report produced by the project team.

Overview of project

Aims of the project: The project aimed to reduce HIV stigma, raise awareness and encourage testing amongst women affected by female genital mutilation (FGM).

Intervention: The project focused on four main elements –

- Training organisations that support those affected by FGM to deliver HIV training and initiate conversations with their service users about HIV.
- Promoting prompt diagnosis through frequent testing by offering HIV testing at venues other than the sexual health clinic.
- Integrating HIV prevention with FGM support by implementing a robust care pathway with FGM partner organisations.
- Increasing knowledge of PrEP by raising awareness of the PrEP Impact trial and encouraging participation for women who fit the criteria.

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sitive Support

Background to the project

Thames Valley Positive Support (TVPS) is an HIV charity that has provided emotional and practical support to people affected by HIV across Berkshire and Hampshire for 35 years, more recently offering rapid HIV testing. Two of Berkshire's main towns, Reading and Slough, have a higher than average prevalence of HIV (in 2016, Reading was 7th in England, Slough 8th for HIV prevalence per 1,000 of population). In addition, Reading and Slough have a high incidence of women who have undergone FGM²⁹. Women and girls with FGM are especially vulnerable to HIV; cultural barriers, stigma or lack of awareness can prevent them from accessing mainstream sexual health services to be tested for HIV or to discuss preventative methods. TVPS developed this project, working with agencies that support women with FGM, to ensure that the HIV information they deliver helps to break down stigma, and that women can access HIV testing discreetly.

Implementation of the project

TVPS intended to work with four established local organisations who already had links with women who have undergone FGM, including refugee support groups, BAME community groups, domestic violence agencies and FGM support groups. The intention was to deliver training to these agencies on initiating conversations about HIV and how it can be related to FGM, the importance of testing and the PrEP trial

²⁹ Macfarlane A, Morison L, Dorkenoo E (2015). A statistical study to estimate the prevalence of female genital mutilation in England and Wales. Accessed at: https://openaccess.city.ac.uk/id/eprint/13117/1/PREVALENCE-STUDY_FINAL.pdf

and care pathways. These organisations could then work with their service users to initiate these conversations and offer HIV testing at TVPS venues.

While delivering the training, it became clear to TVPS that the dissemination of HIV information would be challenging for these partner organisations, who did not feel confident raising the subject of HIV with their service users. At this point, the project approach was adjusted and the organisation recruited women volunteers, some of whom had experienced FGM, to work directly with the community and reduce the burden on partner organisations.

TVPS delivered training to these volunteers and worked with them to identify an effective community outreach approach. Volunteers attended informal gatherings within their own community, local events and conferences and health days, and initiated one to one conversations with women regarding HIV. Through working with community leaders, TVPS and the volunteers were able to identify relevant events, e.g. those focused on FGM. TVPS also continued to work with partner organisations and maintained established links, with volunteers attending partner health days.

Overall, the project met a range of targets set:

- Working with nine organisations in total, including the four partners initially identified, and five
 additional organisations that support those affected by FGM, including domestic violence charities
 and BAME women support groups.
- Delivering 24 training sessions to these organisations, and additional training sessions to community volunteers.
- Reached 3,120 women through volunteer networking (e.g. attending women's health days and
 informal community events). TVPS aimed to reach 480 women affected by FGM, and though the
 actual number is higher it's not possible to ascertain whether every woman reached was affected
 by FGM (though each formal event attended was focused on FGM).
- **Tested 44 women for HIV**, slightly lower than the 48 tests aimed for. TVPS counted any tests they conducted which were referred by community volunteers.
- Referred three women to the PrEP trial, one of whom is now on the trial.

Outcomes and impacts

TVPS used pre and post training questionnaires with partner organisations to measure whether knowledge had increased. In addition, verbal feedback from partner organisations suggested HIV knowledge had increased.

"The groups were really glad that they were trained and we had perhaps busted those myths and educated them. Their knowledge has increased through the training – perhaps not to the extent we would have wanted but definitely better than it was." Project Lead

The project also aimed to increase knowledge of HIV and its relationship with FGM. Volunteers were asked to monitor this by noting which events they attended, the number of women they engaged with, and their views on whether their attendance at the event had increased awareness of HIV, the relationship between HIV and FGM and the PrEP trial. Through this evidence, TVPS report that knowledge has increased in the local community.

"In terms of the local community, knowledge has definitely increased. We now know that stigma around HIV is far greater than the stigma around FGM based on feedback from the community influencers, the women and volunteers spoken to in the community." Project Lead

In addition to the 44 HIV tests recorded, the number of women who tested with TVPS overall increased by 15% over the 12 months of the project. This may be a result of women meeting volunteers at events, though it's not possible to conclude whether this is a direct result of the project.

The initial target of 50% of remaining places on the local PrEP scheme to be taken by women who have undergone FGM was not met. This was due to barriers in the community as women were not open to the idea of joining the trial, for example **seventeen women were interested in the trial** but did not pursue the opportunity as they did not want to liaise with a sexual health clinic.

Lessons from delivering the project

The input from community volunteers was vital to the success of the project. The volunteers were effective in identifying events within the community relevant to the project aims, attending the events, and working with community influencers and partner organisations. Though working with partner organisations was successful in raising awareness, TVPS reported the volunteers were invaluable in reaching far more women than initially planned. In addition, working directly with the community enabled a direct understanding of women's perceptions on HIV and FGM, rather than relying on perceptions of the partner organisations.

"We reached far more people than initially planned for this project, as volunteers were out there networking, attending community events, introducing us to community influencers." Project Lead

It was reported that TVPS have a much greater understanding of the barriers to accessing sexual health services in this community and an understanding of FGM, as a result of this project. For example, FGM was not always viewed negatively by the women affected by it, and TVPS built their knowledge of the complex subject of FGM and how to have discussions about this sensitively. In addition, for many women the idea of PrEP appealed as they couldn't use condoms, but the mechanisms to join a trial (involving attendance at a clinic) was not something they would consider. TVPS want to do more work engaging with different communities to understand these barriers to accessing services in more depth. TVPS reflected that the current service provision around sexual health doesn't encourage engagement with women who have experienced FGM; learnings from the project have been shared with local public health teams to encourage a better awareness among practitioners.

Sharing messaging through one-to-one conversations is an effective way to raise awareness with this group. TVPS reported cultural barriers around both HIV and FGM – both complex subjects which required sensitivity. Though group settings and events were used to raise awareness, a "one size fits all" approach was found to be less successful than private one-to-one conversations with women.

There were a number of challenges in tackling the two sensitive issues of HIV and FGM together. Primarily, there were perceived barriers within partner organisations to embedding messages about HIV into their work, including the cultural accessibility of sharing these messages with women affected by FGM. TVPS understood and respected this resistance and reflected that many of these organisations face challenges due to workload and diminishing funds, which resulted in limited resources and time to engage with the aims of the project.

"Whilst we are able to work with the staff and volunteers [at partner organisations] to raise awareness about HIV it was difficult to encourage them to disseminate that information to their service users in a manner that they felt would be culturally acceptable." Project Lead

The length of the project was challenging, particularly for a community project with women where it takes time to build trust and develop relationships.

Next steps for the project

TVPS have submitted funding applications to other sources and are continuing to fund the work using their own reserves in the meantime. Some volunteers recruited for this project are willing to continue engaging with the community, though community work is currently on hold due to COVID-19.

The project has also led TVPS to submit funding bids for two other projects built using a similar model, relating to:

- Broader sexual health issues faced by BAME women
- Reducing HIV stigma

Raising Awareness of HIV in the over 50s (Age UK Wiltshire)

This project profile draws on an interview with the project lead conducted in April 2020, and the evaluation report produced by Age UK Wiltshire.

Overview of project

Aims of the project: The primary goal of the project was to raise awareness of the risks of HIV amongst the over 50s. Specifically the aims were to:

- Encourage older people to think about their sexual health.
- Increase awareness of HIV amongst older people and reduce associated stigma.
- Increase healthcare staff knowledge, skills, and confidence relating to HIV and equip them with the best techniques to support people.
- Raise awareness of the increase of HIV amongst over 50s to medical practitioners who care for this age group.

Intervention: The project comprised a campaign designed over two distinct workstreams:

- **Workforce Development**: training and up-skilling healthcare professionals and volunteers to empower them to discuss what sexual health and HIV among the over 50s.
- Media campaign: designing content and supplementary resources that would be used to deliver a targeted media campaign to the over 50s.

Main location	Target Audience	Delivery organisations
Wiltshire, Bath & North East	People aged over 50	Lead organisation: Age UK
Somerset(BANES)		Wiltshire
		Partners: Age UK BANES

Figure 1: Example of campaign materials



Background to the project

The idea for the campaign was borne through a collaboration between Age UK Wiltshire and Swindon Local Authority. The latter had identified that rates of HIV infection were increasing in the over 50s and approached Age UK Wiltshire with an idea for a campaign. Within Wiltshire itself, 38% of new diagnosis are among the over 50s, with the average age of 60.5, and the number of diagnoses in the over 50s has increased by 2.1% per year³⁰. People over 50 can also experience unique risks and misconceptions about HIV. This includes symptoms being mistaken for old age, resulting in delays to diagnosis and treatment; a lack of sex education afforded to older generations so they are not aware of the risks or developments in living well with HIV; and divorce and bereavement leading to new sexual relationships among this age group. However, to date, no campaign has been designed specifically to target this demographic.

Implementation of the project

To deliver training on HIV awareness for healthcare professionals and volunteers, Age UK Wiltshire partnered with Brigstowe, a local charity whose mission is to enhance the quality of life for people living with HIV. Training was also delivered (in-house) on Make Every Contact Count to enable professionals and volunteers to better support difficult conversations.

The campaign was designed in collaboration with older people, through a series of focus groups and iterative testing and design. Age UK devised profiles of older people during this design phase, as well identifying the most effective platforms to target these proles (e.g. local radio, social media, posters). The aim was to devise a simple message; 'Age is no protection' with the strapline 'Think, Test, Treat' featured on all materials that were developed.

Overall the project met or exceeded a range of targets that were set in terms of distribution and training, and delivered:

- **Two training sessions** to healthcare professionals and volunteers; achieving their target of 50 staff members at each.
- **A film** called 'Risky Business'³¹, which was distributed to health care professionals, third sector organisations and older peoples' groups.
- A series of posters and leaflets were designed with the message: Think, Test, Treat. 5,750 posters and leaflets were distributed in a wide variety of venues including GP surgeries, pharmacies and libraries.
- A series of press releases at the launch of the campaign and throughout, featured in local newspapers and magazines with an estimated readership of up to 400,000.
- **Two local radio features** (each with a combined approximate audience of over 60,000)
- **Two television appearances** on the BBC: on BBC West Inside Out and the Victoria Derbyshire Programme on BBC2. Approximate audience for both shows: one million.
- Twitter cards & Facebook posts. Over 61,000 engagements with tweets were recorded, and Age UK Wiltshire saw an increase in their following from 900 to over 1,100 followers.
- **Developing a webpage**, which had a total of 1,620 page views throughout the period of the campaign.

The campaign has also attracted interest outside the Wiltshire & BANES area. Enquiries and requests for resources were received from Somerset, East Midlands, North East England, Torbay and Chelsea. Age UK National were also able to support the project by reposting social media messages and sending

³⁰ Age UK evaluation report

³¹ https://www.youtube.com/watch?time_continue=4&v=Xh2BMgE82RM&feature=emb_logo

details of the campaign to all local Age UKs across the country. The National Aids Trust also shared the campaign on social media.

Outcomes and impacts

Through this work, Age UK Wiltshire has developed a lasting resource to raise awareness of HIV among an older population. The campaign received a positive reception and was praised for treating older people 'like grown ups'.

The project did not formally measure the impact the campaign had on how older people think about their sexual health and awareness of HIV. However, Age UK Wiltshire has gathered valuable anecdotal evidence of older people's lack of awareness around HIV, and openness to learn. The project lead reflected that the older people they had engaged were prepared to talk about their sexual health, recognised that HIV was not a risk they considered for themselves, and were open to getting an HIV test in future ('they're tested for everything else').

"When they are presented with the campaign messages – older people just don't realise they're at risk of HIV. Being able to deliver this made them think. That's a powerful thing that our campaign has achieved." Project lead

The project also found that the healthcare practitioners they engaged often did not think of older people being at risk of HIV. 94.7% of the delegates attending training sessions said they were now more confident to talk about HIV and challenge HIV related stigma.

This project has given the project team the confidence to successfully deliver projects that are outside the perceived remit of what a local Age UK would normally undertake. The project lead reflected that this had been important for the organisation's profile, allowing it to become more associated with hard hitting issues.

Lessons from delivering the project

When reflecting on the delivery of of the project, a number of lessons were identified:

Timelines for implementation were longer than expected: The project took longer to deliver than anticipated. Specifically, the consultation process of involving people in the design, and shaping the materials iteratively took time. However, this meant the team was able to launch the campaign over three main events: Sexual Health Awareness Month, World Aids day, and HIV Testing Week, and it was reported that this raised the profile of the campaign.

An effective media campaign meant thousands of people were reached: Distribution of digital campaign materials through magazines and radio and TV exceeded expectations and meant they were able to reach people in their thousands. The team drew on the expertise of Admedia to help them target their campaign to a specific demographic; through this method they were able to target over a 100,000 people who fitted their main personas via smartphones. However, the team did not have enough dedicated resource to focus on the distribution of hard copies of the posters and leaflets, so had to rely on organic growth to get them distributed widely.

Face-to-face discussions are important to embed messages: Age UK Wiltshire reported that the discussions they held with older people through the design and delivery of the campaign were an effective way of embedding messages. They reflected that they could have built in more of these face-to-face discussions to land their campaign messages and have an impact.

"On reflection – talking to older people that's when you see the light bulb go on – and you don't get that on social media." Project lead

Designing wide-reaching resources has been effective in gaining broader appeal: All resources were designed to be used nationally, rather than developing materials that were region-specific. This meant the team had the capacity to distribute the campaign messages more widely than Wiltshire and BANES. For example, they were asked to do a radio interview with BBC Somerset which wasn't something they had planned but there was recognition this was an issue that affected people more broadly.

Engagement from corporate organisations has been challenging: Despite wide interest in the campaign, there was some disappointment that certain organisations did not choose to support it. The team originally hoped that companies in the leisure industry, or local breweries, would support the campaign as part of their commitment to corporate social responsibility. However, they found it difficult to distribute campaign material in places other than local authority or NHS venues. The team reflected that the sensitive nature of the subject matter made it difficult to collaborate with organisations that were not already engaged with this subject matter.

Next steps for the project

The campaign has officially finished, however, the resources remain on Age UK Wiltshire's website. The team are keen to build on the campaign and develop something more far reaching but have not pursued any funding opportunities for this.

Further information about the project can be found here: https://www.ageuk.org.uk/wiltshire/about-us/hiv-awareness/

Soul Sisters (NAZ)

This project profile draws on an interview with the project lead conducted in June 2020, and the project monitoring reports produced by NAZ.

Overview of project

Aims of the project: The project aimed to increase knowledge of sexual health and HIV, particularly highlighting the link between violence against women (VAW) and HIV, with VAW organisations and with their service users.

Intervention: The project focused on two main elements –

- Training 10 VAW organisations across London: providing information on sexual health, the link between VAW and HIV, and referral pathways for HIV testing.
- Holding workshops with service users of VAW organisations: NAZ planned to hold workshops with service users in partnership with these organisations. A training package and promotional materials were also developed to be distributed in VAW organisations.

Main location	Target Audience	Delivery organisations
East and South London	Violence against women (VAW)	Lead organisation: NAZ
	organisations	Partners include: Barts Health NHS Trust

Background to the project

The idea for this project was borne through a collaboration between NAZ (a sexual health agency working to address sexual health inequalities) and a HIV consultant at Barts Health NHS Trust. Research conducted internationally demonstrates a significant association between intimate partner violence (IPV) and HIV among women³², and additional research has shown that women living with HIV are twice as likely to have experienced IPV³³. The relationship between IPV and HIV is thought to exist as a result of non-consensual sex, difficulties negotiating condom use, and that perpetrators may be more likely to carry STIs due to concurrent partners and sex without condoms³⁴.

NICE, BHIVA, BASHH and the FSRH have recommended IPV training for staff and IPV screening in sexual health and HIV services. However, NAZ were not aware of any national recommendations or guidance on sexual health and HIV awareness training for VAW organisations. As a result, NAZ planned to create and deliver a training package on sexual health and HIV for staff working at VAW organisations in East and South London. The aim of this training was to enable staff to signpost women for testing, and provide advice on HIV, PrEP and contraception. The training would be combined with referral pathways for STI/HIV testing at NAZ, Barts Health NHS Trust, and signposting to other sexual health clinics and home testing.

³² Li Y et al. IPV and HIV infection amongst women: a systemic review and meta-analysis. J Int AIDS Soc 2014; 17:18845

³³ Dhairyawan R, Tariq S, Scourse R, et al. Intimate partner violence in women living with HIV attending an inner city clinic in the UK: prevalence and associated factors. HIV Med. 2013;14:303–10.

³⁴ Dunkle KL, Decker MR. Gender-based violence and HIV: Reviewing the evidence for links and causal pathways in the general population and high-risk groups. *Am J Reprod Immunol* 2013; 69: 20-6.

Implementation of the project

To develop the training content, NAZ initially mapped out VAW organisations across London, and contacted 35 organisations to introduce the *Soul Sisters* programme. NAZ held a focus group with women working in three VAW organisations (Hestia, Latin American Women's Rights Service, Bede House Starfish) and held a steering committee with five key stakeholders³⁵. This helped NAZ understand the level of knowledge within VAW organisations and allowed them to create a training package and materials with input from the groups.

Following this, the project delivered three training sessions to more than 36 women. This included one trial session to faith groups; through this NAZ realised faith groups were interested in the training, and that there was scope to approach a wider group of organisations other than VAW organisations. NAZ then delivered two training sessions to VAW organisations with a total of 36 women in attendance for both events. The training included information on STIs and HIV, the link between VAW and HIV, screening and prevention tools such as PrEP, and information on referral pathways for HIV/STI testing.

As part of the project, promotional materials were developed to be distributed in VAW agencies, and NAZ distributed 41 information packs at training sessions. One organisation that NAZ worked with shared information with 60 men and women who had experienced abuse and reported that some expressed an interest in the workshop and HIV testing. NAZ also held one workshop with six service users, using a participatory methodology to allow service users to share their views on sexual health and HIV.

The project experienced barriers to delivering training to 10 different VAW organisations and therefore to reaching service users. They reported that this was due to capacity issues in being able to deliver the sessions, and sensitivities around engaging on the topic of HIV and VAW. As the project and evaluation were not completed, the findings from the project have not yet been presented at a "round table event" with national VAW organisations as intended.

The project had some additional reach in that *Soul Sisters* was presented at the 2019 Domestic Violence Conference (a session attended by 19 people) and at the 2019 European AIDS Conference (attended by over 300 people).

Outcomes and impacts

Through this work, NAZ has developed a training package suitable for VAW organisations, which has been coproduced alongside VAW organisations and other key stakeholders.

NAZ measured the impact of delivering training to VAW organisations through administering pre and post training questionnaires; 28 participants completed the questionnaires in total. The questionnaires explored how knowledge and attitudes to sexual health and HIV and links with violence had been improved. The results indicate that the training was successful in improving HIV knowledge and increasing confidence in talking about sexual health among attendees. For example, 13 attendees reported they were confident talking to service users before training, and 25 attendees reported confidence after training. Attendees also provided qualitative feedback after the training sessions, and

³⁵ The stakeholders in attendance at the committee included Dr Loraine J. Bacchus (London School of Hygiene & Tropical Medicine), Sophie Strachan (Sophia Forum), Monique Monrowe (Black Femme Film), Dr Sue Mann (Consultant in Sexual and Reproductive Health, Homerton Hospital) and Marai Larasi (Imkaan).

the project lead reported that they felt better equipped to talk to their clients about sexual health after attending.

"The group discussion gave me the insight as to what to do and how to approach our service users about their sexual health." VAW organisation staff member at training session

The project aimed for these VAW organisations to share HIV knowledge with their service users and refer women for HIV tests. This outcome was not formally measured, though it is likely that this has been lower than anticipated given challenges in reaching 10 VAW organisations and holding workshops with service users.

Lessons from delivering the project

Involving VAW organisations and key stakeholders in the project delivery was key. NAZ reflected that the input of these people meant they were successful in creating a comprehensive and suitable training package.

There were challenges in engaging VAW organisations and women who had experienced violence. This was partly due to resource challenges faced by the organisations, for example some had small teams and did not have the capacity to attend training sessions or organise workshops. NAZ tried to overcome this challenge by holding training sessions with multiple organisations, so that those with smaller teams could participate in the project. However, the organisations remained hesitant and were cautious about discussing sexual health and HIV with women who had experienced violence, due to concerns about sensitivities and appropriateness.

"The aim was for VAW organisations to attend training and then run a workshop with women to talk about sexual health. But they said it was sensitive and women were already going through enough." Project Lead

The timescales for the project were challenging. Firstly, the funding was confirmed in late November which created challenges, as both NAZ and the VAW organisations were working at reduced capacity over December and January (due to the holidays). Secondly, NAZ reflected that building relationships with VAW organisations and developing a comprehensive training package took time, and as a result delivering 10 workshops within the funding year was not possible.

Next steps for the project

There were plans in progress to deliver further training to VAW organisations and hold workshops with service users but unfortunately some of these were postponed due to COVID-19 and funding has now run out. The project reflected that the training materials are now developed, a steering committee with expertise exists, and relationships with VAW organisations have been developed. They hope to obtain additional funding to continue this work in the future.

Talking Together (Positive East and HIV Voices)

This project profile draws on an interview with Positive East and HIV Voices conducted in April 2020, and the project monitoring reports produced by Positive East.

Overview of project

Aims of the project: The project aimed to integrate Black African communities in London within the wider HIV prevention and support strategies through the use of spoken word and film, with the specific aims to:

- Challenge HIV stigma
- Increase knowledge of PrEP and general HIV knowledge
- Increase HIV testing and prompt diagnosis

Intervention: The project developed spoken word pieces through workshops with Black Africans in mixed status relationships. These pieces were showcased through social media and performances at festivals (alongside HIV testing).

Main location	Target Audience	Delivery organisations
London	Black Africans	Lead organisation: Positive East
		Partner: HIV Voices

Background to the project

The project was borne through a collaboration between two organisations: Positive East (a provider of HIV services and care for nearly 30 years) and HIV Voices (a HIV organisation with performance and storytelling at its heart). The organisations have worked closely together as partners since 2014, and recently collaborated on a series of creative workshops exploring HIV issues titled "*Talking Progress*". *Talking Progress* demonstrated the impact of this type of storytelling work amongst Black Africans, and the PHE Innovation Fund allowed this to be developed further to "*Talking Together*".

African communities in London continue to be disproportionately affected by HIV. 23% of those living with HIV in London are Black African despite only making up 7% of London's population, and 58% and 53% of those diagnosed late in London last year were men and women of Black African descent respectively³⁶. *Talking Together* aimed to challenge HIV stigma, increase knowledge and increase testing amongst Black African communities in London via the use of spoken word and film. The project had particular focus on people in mixed status relationships, where one partner is living with HIV and the other is not. The messaging also focused on PrEP and the "Undetectable = Untransmittable" (U=U) campaign which explains that if a person is on effective HIV treatment with an undetectable viral load HIV cannot be passed on sexually.

Implementation of the project

Positive East collaborated closely with HIV Voices to deliver this project. The organisations held workshops with Black Africans in mixed status relationships, with the aim to create spoken word pieces. The workshops used different creative strategies such as creative writing, rap and poetry to explore

³⁶ Talking Together project application form to PHE Innovation Fund

individuals' experiences, and based on the workshop participants own individual autobiographical writing, five final spoken word pieces were developed. These spoken word pieces were then filmed and used in a social media campaign. In addition, the pieces were performed live at Black African festivals in London, with an HIV testing gazebo set-up next to the performances.

Positive East and HIV Voices partnered with several other organisations and individuals throughout the project, for example the African Advocacy Foundation to recruit participants for workshops, guest writers, rappers and drama practitioners within the HIV sector to deliver the workshops, and actors to create the films and perform at festivals.

Overall, the project exceeded a range of targets that were set in terms of workshop delivery, performances and testing. It delivered:

- **Eight workshops** with Black Africans in mixed status relationships to develop spoken word pieces, with an average of **12 participants per workshop** and a **core group of eight** who attended every session.
- Five final spoken word pieces based on participants' own individual autobiographical writing during the workshops. The organisations originally aimed to develop 20 spoken word pieces and select five for the performances, however a decision was made to develop five based on all voices.
- A launch event at Positive East's annual Faith Forum attended by 50 people, to debut the five pieces.
- Five films based on the spoken word pieces.
- Live performances of the pieces and film screenings at six Black African festivals, including UK Black Pride. An average of 30-40 people per festivals watched the films and live performances.
- 107 HIV tests performed alongside the spoken word marquee at festivals, exceeding the target of 100 tests.
- Information leaflets relating to U=U and PrEP which were distributed at festivals.
- A final project performance event with 50 people in attendance.
- A social media campaign with the five filmed pieces posted on Positive East and HIV Voices social media platforms (YouTube, Twitter and Facebook pages). In total, the project achieved 32,444 social media impressions of the films at the end of the projects final quarter. In addition, the films sit prominently on the Positive East website which has 5,000 website hits per month (on average).
- A booklet of the project publicising the pieces. 150 brochures had been printed at the end of the projects final quarter and dissemination was in progress.

The project had additional reach in that the organisations were invited to perform spoken word pieces at World AIDS Day Red Run (seen by the 2,500 people in attendance), screen films at University of East London (30 young people engaged) and at a Positively Mindful event at Positive East (25 people engaged). The texts of the pieces were also presented in Positive East's first annual magazine produced by the charity and distributed to 1,500 people.

The project also planned to **screen films in GP practices** through a partnership with Barts Health NHS Trust. This output was timetabled for March 2020 and Positive East plan to implement this after COVID-19 lockdown.

Outcomes and impacts

The project aimed to measure increased knowledge of PrEP and HIV and decreased HIV stigma through the use of a survey administered to audience members after seeing a performance or film at festivals, and on social media or Positive East's website after users had watched the films. 87 audience members completed the feedback form and the findings are summarised below. Of those who provided demographic information (42 people), 28 were BAME and 14 were White.

- 48% had not previously heard of U=U, 93% said their knowledge of U=U increased after seeing the pieces (knowledge increase of >3 on a scale of 1 to 5).
- 28% had no prior knowledge of PrEP, 83% said their knowledge of PrEP increased after seeing the pieces (knowledge increase of >3 on a scale of 1 to 5).
- 89% stated the pieces increased knowledge of mixed HIV status relationships.
- 96% felt the pieces addressed HIV stigma.

The organisations acknowledged that raising awareness of PrEP and reducing HIV stigma are complicated messages to convey, though anecdotally felt a direct impact on knowledge could be seen at the festivals. In addition, some of the festival performances had a comedy element to them, which was reported to effectively tackle HIV stigma. The project lead also reported that by attending festivals targeting Black Africans, not specifically LGBT+ focused festivals, they were able to reach a new audience.

The project also aimed for 95% of workshop participants to report an improvement in health and wellbeing and a decrease in self stigma, and this was evaluated through a survey at the end of workshops. The survey was completed by a small number of participants (8 in total), and findings showed that all participants agreed with the Self Stigma Scale statement of "on the whole I am satisfied with myself".

"I always seem to feel refreshed after, it's fun for me to be a participant and just relax and enjoy even if the subjects can be tough, I look forward to joining the others." Workshop participant

Positive East reported an increase of 33% in the number of HIV tests they provided during the project timeframe, compared with the previous year (though a direct link to the project cannot be confirmed). Of the 2,658 provided in 2019 (up from 1,991 in 2018) 51% were from BAME communities and 28% were first time testers.

Lessons from delivering the project

When reflecting on the delivery of of the project, a number of lessons were identified:

Presenting the creative outputs in multiple ways has been effective in disseminating the project messages through different channels. For example, at festivals the project set-up tents with the poems printed out, films on loop, displayed images and held live performances. The project felt that presenting the outputs using a mix of media reinforced messages effectively and increased impact.

"What was great about this project was that it had multiple components and different ways of presenting the work (...) This is why the impact was so strong – people heard and saw our messages in different ways." Project Lead

Ahead of funding being awarded, the project team started to lay foundations and build relationships, which allowed the project to begin quickly once funding was provided. For example, making contacts with workshop facilitators to begin planning workshop content, contacting the African Advocacy Foundation regarding recruitment, and putting together a detailed workshop plan.

Recruiting and maintaining engagement with workshop participants was challenging. A targeted recruitment strategy enabled the project to recruit participants for the workshops; this involved partnering with Africa Advocacy Foundation to recruit their service users and targeting Black African Positive East service users who are approximately 60% of their service base. Once recruited, the workshops retained a core group throughout, but some participants did drop off, which meant the organisations needed to be adaptable with workshop plans. In addition, ahead of the final performance, the project team struggled to get in touch with workshop participants and reflected that clearer lines of communication after the workshops would have been helpful.

"It was hard at first to get back in contact with the workshop group as it had been a while since we were last together. However, many did come back for the event and performance which was great to see." Project Lead

Flexibility with regards to festival performances was essential. Part of the project was contingent on working with other organisations overseeing the festivals. For each of these festivals, the organisations had to adapt to the festival protocols and remain open to changes, for example regarding the building of the stage and availability of audio-visual technology.

Next steps for the project

Although the project has ended Positive East intends to use the outputs to continue having impact, for example:

- Promoting the films around events such as National HIV Testing Week and World AIDS Day.
- Using films as an educational tool throughout the year.
- Presenting pieces alongside live performances at future Positive East events.
- Submitting the films for consideration at various film festivals such as BFI Flare and UK Film Festival.

In addition, the spoken word pieces were to be performed at the 2019 HIV Fast Track Cities event in London, which has been postponed to Autumn 2020.

HIV Voices and Positive East have also begun discussions about a second *Talking Together* workshop program and potential ways of adapting the pieces into a podcast, taking the pieces on tour around England or holding online workshops.

The Grass Is Always Grindr: Season 2 (56 Dean Street and CW+)

This project profile draws on an interview with the project lead conducted in May 2020 and additional information provided by the project team.

Overview of project

Aims of the project: This project aimed to engage with men who have sex with men (MSM) about HIV and sexual health issues through a video drama series, 'The Grass Is Always Grindr (Season 2)'. Specific aims among the target audience were to:

- increase HIV testing;
- promote condom use;
- promote PrEP use;
- raise awareness of STIs; and,
- reduce HIV-related stigma.

Intervention: The project involved the development and promotion of 10 new episodes of the series '*The Grass Is Always Grindr*', which formed the second season of the series. The series is a fictional character-driven drama covering a range of themes relating to HIV and sexual health, designed to focus on issues faced by MSM. The 10-minute episodes were released on 56 Dean Street's YouTube channel³⁷ and a film version was made of the compiled episodes which has been shown on TV and at film festivals. Throughout the online episodes, HIV prevention messages and links to sexual health services pop up that the audience can click on and receive additional information or be directed to another service.

Main location	Target Audience	Delivery organisations
Online	MSM	CW+
		56 Dean Street

³⁷ https://www.youtube.com/channel/UCsgCQ_CLRDk98ZjQy6HK6uQ

Figure 1: One of the episodes of 'The Grass Is Always Grindr'



Background to the project

Two sexual health professionals at 56 Dean Street, (whose clinics are part of Chelsea and Westminster Hospital NHS Foundation Trust sexual health and HIV services) initially developed the idea of creating a drama series depicting life of MSM in London. The target audience for this drama was MSM and the series would have a sexual health focus. They secured funding from Wandsworth Oasis, a charitable organisation providing support to people living with HIV, to make three 15-minute episodes of the drama which they called '*The Grass Is Always Grindr*'. These three episodes were released on YouTube and formed the first season of the drama, acting as a pilot for the longer second season.

The first season proved to be successful, garnering over 180,000 views on YouTube within 4 months of its release. Realising the potential reach of this method among its target audience, 56 Dean Street partnered with CW+, a charitable organisation forming part of Chelsea and Westminster NHS Foundation Trust, to bid for funding from PHE to make a second series.

The rationale behind *The Grass Is Always Grindr* was to try and raise awareness of HIV prevention among groups where HIV diagnoses are increasing – gay and bisexual men in BME groups, non-gay-identifying MSM, and chemsex users. CW+ and 56 Dean Street felt that these target groups would respond best to campaigns in which they saw themselves represented, and that by portraying characters in an empathetic way, they could help to tackle the stigma associated with HIV.

The second season of the series aimed to build on the first by incorporating pop-up health promotion messages throughout the videos, including links to sexual health services, which were not included in the first season. The aim of using the pop-ups was to convert viewers into actual service users through signposting to services provided by 56 Dean Street and other organisations.

Implementation of the project

The script for the drama was written by sexual health professionals working for 56 Dean Street, who wrote the first season. The project team held focus groups with clients of 56 Dean Street in order to fully understand the lives of and the issues faced by their target audiences and to ensure the film was based on real-life experiences.

The project team then organised the filming of the series, assembling a cast of 80 people and a crew of 25. As well as funding from PHE, the project team secured additional funding from MAC AIDS Fund, and MAD Trust. The team managed to secure support from 40 organisations and individuals, such as hiring venues like the gay clubs G-A-Y and Heaven for free or significantly reduced cost; Impulse London provided meals during shooting; CW+ provided admin and reporting support; and the team were offered free make-up services from MAC Cosmetics and costumes from ASOS. The project team had preexisting links with these organisations and because of this, they were able to reach out and ask for help with these services. The entire series was filmed in a short time period of around 10 days, which helped to successfully manage the budget.

10 new episodes of the new drama were created overall, and these were released on YouTube as well as being compiled into a film version, which was screened on the television channel London Live as well as being shown in Chelsea and Westminster Hospital, in Bristol and at a Fast-Track Cities event. Health promotion messaging and direct links to sexual health services were placed on each of the online episodes.

The series was well-received and attracted a lot of support and attention from a range of organisations upon its release. 56 Dean Street and CW+ received help to promote the series from a number of VCS organisations working in the HIV and LGBTQ+ spaces who shared the episodes online, namely London Friend, LGBT Foundation, Yorkshire MESMAC, Wandsworth Oasis, Addaction, Youth AIDS, Stonewall, MAD Trust and Brigstow. The charity METRO helped to support the project by translating some of the episodes of the drama into Spanish and Portuguese. Grindr, the social networking and dating app for gay, bisexual, trans and queer people and the namesake of the series, provided free advertising for the drama. The series also featured in media outlets such as press coverage for the project including a Boyz magazine, Vice magazine and the Health Service Journal.

The project team had hoped for the second season of '*The Grass Is Always Grindr*' to secure at least 50% more views than the previous season over the same time period (180,000 views in 4 months). The season has actually had a much wider reach than this, having currently almost hit 10 million views on YouTube internationally. Around 300,000 of these views come from the UK.

"To date we're nearly on 10 million views and I think it has been a real success. And I think it's a great vehicle to get across sometimes very difficult sexual health messaging." Project lead

Outcomes and impacts

The intention of the project was not only to receive views but also to promote sexual health messaging and signpost to sexual health services. The project team is confident they have achieved this goal, as they are able to monitor the numbers of people clicking on the links that pop up during the episodes of the drama. So far, the health promotion links have been clicked on over 17,000 times.

The project team also reported that the drama series has directly impacted the number of Dean Street PRIME users (56 Dean Street's enhanced sexual health service for MSM), with the number of PRIME users increasing from 8,000 at the start of the project to nearly 15,000 now. It is important to note this may also have been influenced by other factors.

Some of the wider impacts the project intended to achieve are more difficult to measure or to attribute directly to this project, such as reducing stigma and increased use of condoms and PrEP. The series received praise online, including positive responses to the sexual health messaging included throughout

the videos. For this reason, the project team feel that the series has likely had a positive influence on viewer's approaches to sexual behaviour.

As it is available online, the series has developed an international audience. Following its release, one of the clinical team from 56 Dean Street travelled to Indonesia with a translated film version of '*The Grass Is Always Grindr*' and has been promoting it among the MSM community there.

Lessons from delivering the project

When reflecting on the delivery of of the project, a number of lessons were identified:

Building stories around real-life experiences: The project team partially attribute the appeal of '*The Grass Is Always Grindr*' to the fact that it directly reflects the experiences of MSM. The script was written by professionals from 56 Dean Street who have regular contact with the groups the series was trying to reach, and the project team conducted work to understand the issues faced by these groups. This groundwork ensured that the series realistically depicted issues that the target audience could relate to.

Piloting the series provided key learning for the second season: The first season of 'The Grass Is Always Grindr' consisted of three episodes and acted as a pilot for the considerably longer second season. Project staff reflect that conducting this pilot was helpful in assessing whether a full series would work and acted as preparatory work for season 2.

Engaging with other organisations has been extremely beneficial: The project team report that although this series was created on a tight budget, financial constraints have been ameliorated by the generosity shown to the project by other organisations, such as the venues who provided space to film the project and the organisations that provided the make-up and costume services. Following the creation of the series, engagement with other VCS organisations proved to be very valuable in promoting the series.

The short online drama format works well: The number of views the series has received is testament to the popularity of this format, which has reached far more people across a wider geographical area than the project team expected.

Next steps for the project

The series is still available for the public to view on YouTube, and the project team intend to continue to screen the film version at film festivals including the BFI Flair LGBT Film Festival. There are also plans to make the series available on the Amazon Prime video streaming service.

The series has also inspired a new campaign from CW+ and 56 Dean Street called 'Generation Zero', which uses animated versions of the characters presented in '*The Grass Is Always Grindr*'. The target audience of '*Generation Zero*' is MSM under the age of 25, a group where 56 Dean Street are seeing the incidence of HIV increase. The project team bid for funding again from PHE to run this campaign but were unsuccessful. They are currently funding the work using donations to 56 Dean Street and may seek funding from other bodies to scale up the campaign.

There are currently no plans to create a third season of '*The Grass Is Always Grindr*' but the project team would be eager to do so in future if funding for this is available.

Further information about the project can be found on 56 Dean Street's YouTube channel: https://www.youtube.com/channel/UCsgCQ_CLRDk98ZjQy6HK6uQ

Cohort 3 follow up

An aim of the Fund is to support projects that have the potential to be replicated elsewhere or scaled up. Some of the projects from the third Cohort of the Fund were followed up around a year after their funding period had come to an end, to understand how projects had continued beyond the funding period. These projects were selected on the basis of having the most potential to continue beyond the funding period. These projects are outlined below.

Digital platforms to reduce HIV stigma and discrimination, Martin Fisher Foundation

The primary goal of this project was to develop a campaign to provide the population of Brighton & Hove with accurate and consistent information concerning recent advances in HIV medicine. The campaign, #Making HIV Stigma History was developed, and the 'HIV Stigmasaur' character was created. Five films and six podcasts were developed to provide up-to-date facts about HIV transmission and prognosis, and experiences of HIV-related stigma. A life-size Stigmasaur was also developed. A combination of physical and digital platforms were used to publicise the campaign over a period of six months. The campaign received a positive reception, and the Martin Fisher Foundation planned to continue to develop the Stigmasaur brand.

The project team's main activity since funding came to an end has been launching an 'HIV bus': a double decker bus wrapped in HIV prevention messages. For example, the exterior has the message "HIV isn't scary anymore"; on the inside, there are 17 panels on HIV, testing, and stigma. The Brighton & Hove bus company funded the bill for wrapping which was around £30k; the Martin Fisher Foundation paid for the artwork, using the same artist they used for the Stigmasaur campaign. The bus will be in circulation for two years. The project lead noted that as it is a reserve bus, it travels a range of different routes allowing it to be seen by lots of different people in different areas of Sussex.

The resources from the original campaign continue to be available, and have now been linked with Brighton & Hove's *Stigma Implementation Group* within the United Nations Fast-Track City Towards Zero HIV Taskforce. The team also presented at the Fast Track Cities conference in London in September 2019. However, funding is required to continue to publicise, promote and circulate these resources, which is not currently available. The project lead also noted that they have found that to maintain a social media presence, they need to regularly update materials.

This team were also responsible for the Cohort 2 project that developed a **vending machine to distribute HIV self-testing kits**. The project lead noted that people are buying this around the world and they are developing it into a wellness machine (vending STI kits as well as HIV testing kits). This has been fast tracked during the COVID-19 pandemic.

PrEP Champions, GMI partnership

In 2018, the GMI Partnership (METRO, Positive East, and Spectra, who acted as the lead agency) partnered with PrEPster to train members of target communities (MSM, BME communities, trans communities and women) to become PrEP Champions. The PrEP Champions ran engagement sessions in community settings with target communities to provide information about PrEP and administer a paper-based PrEP Assessment Tool to measure knowledge, awareness and acceptability of PrEP.

The partnership continues to use the Assessment Tool in its outreach work. This has not required further funding as the development and piloting work was all completed within the funding year. The tool continues to generate a wealth of information on the uses of PrEP for the partnership.

The partnership have spoken about their experiences delivering the project at the British HIV Association (BHIVA), HIV Prevention England and AIDS Impact conferences.

PrEP Online Assessment Tool, Terrence Higgins Trust

This project involved the development of an online tool to allow users to understand what PrEP is, whether it is right for them, where to access it, and support decisions on whether to continue or stop using PrEP for existing users. The tool generated a high degree of interest from users when it went live (10,000 within six weeks of the launch), suggesting there was appetite for this product.

The tool continues to be hosted on the *I Want PrEP Now*³⁸ website, funded through the Terrence Higgins Trust (THT), as part of its work on the national HIV prevention programme for England. They have also developed a new tool on the *It Starts with Me*³⁹ website. The tools are regularly updated to reflect policy changes around the availability of PrEP – for example it has recently been made available on the NHS.

The team initially thought about developing it into an app, but after gathering feedback on this, decided an online tool was more suitable, as users were likely to only use it once or twice.

Self-testing pilot, Terrence Higgins Trust

THT used the funding to promote the ordering of online HIV self-testing kits to Black African communities. THT funded the test kits themselves but used the funding from PHE to run a marketing campaign to reach the target group, which included running advertising through social media, a PR campaign through publications targeted at Black Africans and getting some well-known African personalities to promote the testing. THT offered the option for people to use 'click-and-collect', whereby the test kit was sent to a local collection point such as newsagents or a laundry service where it could be collected by the recipient.

The project demonstrated the efficacy of online ordering of self-test kits, and specifically the utility of a click-and-collect online ordering system. THT continues to offer the click-and-collect service as part of their standard offering, funded as part of their usual services. It is now open to anyone (not just BAC), and is an important aspect of providing the option for people to access HIV tests anonymously.

They have already discussed this work at the BHIVA 2019 conference, and plan to discuss their click-and-collect work, along with their broader testing work, at the International AIDS Conference later in 2020 (which is happening virtually).

³⁸ https://www.iwantprepnow.co.uk/

³⁹ https://www.startswithme.org.uk/

Appendix A: Project contact details

Table 7.1: Project contact details

Project name	Lead organisation	Contact details
Catwalk for Power	Positively UK	Website: https://positivelyuk.org/ Contact name: Sarah Fraser Email: info@positivelyuk.org
Development of community testing toolkits	National AIDS Trust	Website: https://www.nat.org.uk/ Email: info@nat.org.uk
Echoes	Prison Radio Association	Website: https://prison.radio/ Email: info@prison.radio
e-PrEP programme	METRO	Website: https://metrocharity.org.uk/ Contact name: José Tovar Email: jose.tovar@metrocharity.org.uk
Guys into Guys Online Chatroom	METRO	Website: https://metrocharity.org.uk/ Email: hiv@metrocharity.org.uk
Mindfulness-Based Chemsex Recovery	Spectra	Website: https://spectra-london.org.uk/ Contact name: Ben Hoff Email: ben@spectra-london.org.uk
MobPreSH	PrEPster	Website: https://prepster.info/ Contact name: Will Nutland Email: hello@prepster.info
PrEPared	BHA Leeds Skyline	Website: https://thebha.org.uk/ Contact name: Nyambe Mukelebai Email: nyambe@thebha.org.uk
PrEP & Prejudice	Africa Advocacy Foundation	Website: https://www.africadvocacy.org/ Contact name: Denis Onyango Email: denis@africadvocacy.org
Preventing HIV in women affected by female genital mutilation (FGM)	Thames Valley Positive Support	Website: http://www.tvps.org.uk/ Contact name: Sarah Macadam Email: s.macadam@tvps.org.uk
Raising Awareness of HIV in the over 50s	Age UK Wiltshire	Website: https://www.ageuk.org.uk/wiltshire/ Contact name: John Truss Email: john.truss@ageukwiltshire.org.uk
Soul Sisters	NAZ	Website: http://www.naz.org.uk/ Contact name: Parminder Sekhon Email: sekhon@naz.org.uk
Talking Together	Positive East	Website: https://www.positiveeast.org.uk/ Contact name: lan Montgomery Email: ian.montgomery@positiveeast.org.uk
The Grass is Always Grindr (Season 2)	CW+	Website: https://www.cwplus.org.uk/ Contact name: Fiona Muir Email: Fiona.Muir@cwplus.org.uk

Appendix B: Glossary of terms

Table 7.3: Glossary of terms used throughout this report

Term/phrase	Definition
AIDS (acquired immune deficiency syndrome)	The term used to describe a number of potentially life- threatening infections and illnesses that happen when the immune system has been severely damaged by the HIV virus.
BAME (black, Asian and minority ethnic)	All ethnic groups in the UK except white ethnic groups.
Combination prevention	A mix of biomedical, behavioural and structural interventions prioritised to meet the current HIV prevention needs of particular individuals and communities, so as to have the greatest sustained impact on reducing new infections.
FGM (Female Genital Mutilation)	The partial or total removal of external female genitalia or other injury to the female genital organs for non-medical reasons.
HIV (human immunodeficiency virus)	A virus that damages the cells in the immune system and weakens the ability to fight everyday infections and disease.
LGBTQ+ (lesbian, gay, bisexual, transgender, queer or questioning, and others)	An umbrella term referring to anyone who is anyone who is non-heterosexual or non-cisgender.
MSM (Men who have sex with men)	Males who engage in sexual activity with members of the same sex.
PHE (Public Health England)	Executive agency of the Department of Health and Social Care responsible for protecting and improving the nation's health and wellbeing and reducing health inequalities.
PrEP (Pre-exposure Prophylaxis)	A medicine taken before sex proven to reduce the risk of contracting HIV when taken correctly.
VAW (Violence Against Women organisations)	Organisations who work to prevent violence against women and girls.
VCS (Voluntary and Community Sector organisations)	Non-governmental and non-profit organisations.
WLHIV (women living with HIV)	Women who have been diagnosed with HIV.
U=U (undetectable = untransmittable)	When a person infected with HIV takes effective treatment, this lowers that person's viral load to a level where it is referred to as undetectable. At this stage, HIV cannot be sexually transmitted.

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