

# *Ready, Set, Recruit!*





## Enlisting Effective Recruiters for HIV Testing Services

Presented by:  and   
CAPACITY FOR HEALTH

•••● Please answer the questions on the right ●•••

# Netiquette

for successful web interaction

- ✔ Mute your line, press \*6
- ✔ Do NOT put us on hold
- ✔ Ask questions through chat
- ✔ Chat hosts privately
- ✔ Participate    
- ✔ Stay until the session ends



# VIRTUAL FACILITATORS

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**Arman Lorz**  
SNS Trainer and  
CBA Specialist



**Sam Stallworth**  
SNS Trainer and  
CBA Specialist



**Robin Pearce**  
SNS Trainer and  
CBA Specialist



**Jenn Awa**  
SNS Trainer and  
CBA Specialist





Arman

# TELL US

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Have you been through a formal training on the Social Network Strategy (SNS)?



Are you using this strategy to increase recruitment into your HIV testing services?

# OBJECTIVES:

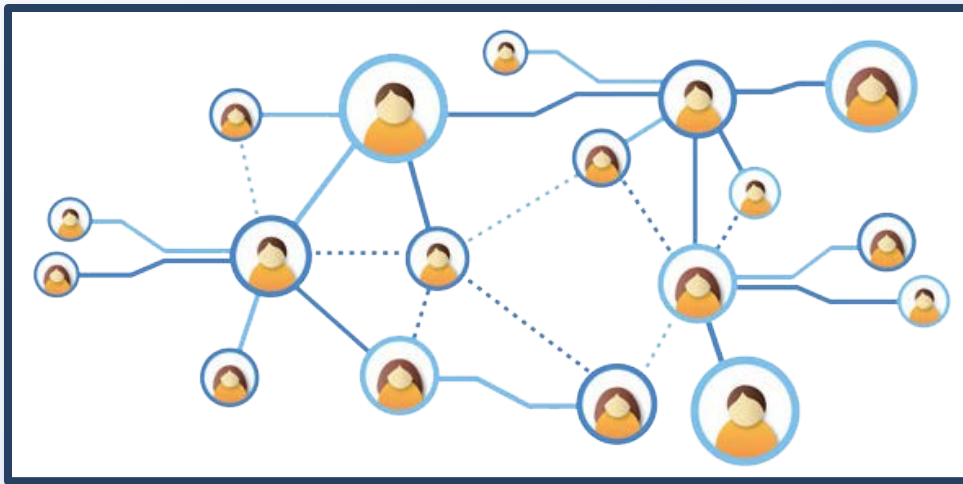
This virtual workshop will increase participants:

1. Ability to describe the enlistment process of SNS
2. Ability to identify enlistment challenges and solutions
3. Confidence to apply lessons learned to successful enlistment practices
4. Confidence to address enlistment-related SNS challenges



# A Social Network

“is a set of individuals linked by one or more specific types of relationships.”



Wasserman, 1999



# Social Network Strategy





# Social Network Strategy

a **recruitment** approach for reaching and providing HIV counseling, testing, and referral services to persons who are **unaware** of their HIV infection by using existing social connections.







# Social Network Strategy

- SNS staff enlist HIV-positive and high risk HIV-negative persons (**Recruiters**) to identify individuals from their social, sexual, and drug using networks who may be at risk for infection.



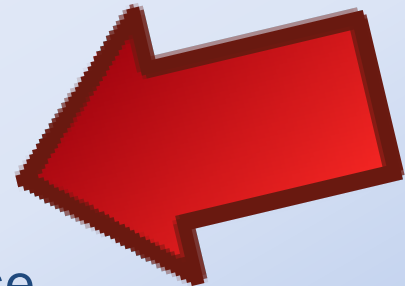
# Social Network Strategy

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- SNS is **not** Social Media, Outreach, Partner Services, Peer Education, or a Community/Group Level Intervention, and it is **not intended** to replace any of these.



**Ideal**

# Recruiter



Robin

Ideally someone who is, or has direct access to primary's target population.

- High Risk Negative
- HIV Positive
- In good standing relationship with your organization
- Has accessed your test site
- Comfortable with the HIV topic
- Reliable



# PHASE 1

# Enlisting a Recruiter

\*Effective recruiters understand strategy's goals, objectives, and believe in its benefits.

Recruiters must be able to:

- ✓ **Identify** people in their social, sexual, drug networks
- ✓ **Engage** their Network Associates
- ✓ **Discuss** and recommend CTR to Associates
- ✓ **Escort or refer** Associates to agency



## PHASE 2

# Coaching session

- 1: Introduce Session
- 2: Identify Network Associate
- 3: Develop a Plan
  - When to bring up the topic
  - Where to have the conversation
  - How to address HIV testing
    - Confidentiality
    - Testing options
    - Support
- 4: Summarize and Close Session





## PHASE 3

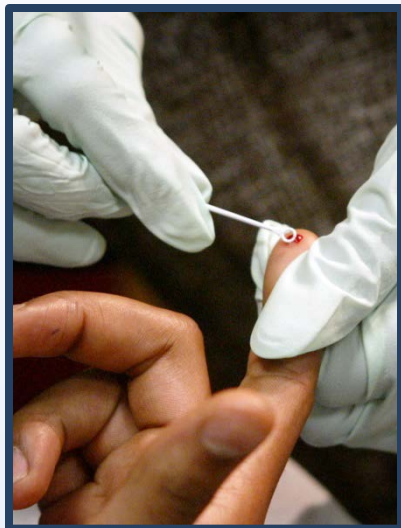
# recruitment

- ✓ Recruiter promotes HIV testing with a Network Associate:
  - a specific person
  - whom with an established relationship already exists
  - whose risk of contracting HIV is known and high
  - whose current HIV status is unknown
- ✓ Recruiter **refers** or **escorts** Associates to test site
- ✓ Staff **motivates**, **supports**, and **follows-up** with Recruiter



## PHASE 4

# Conducting HIV Testing Services

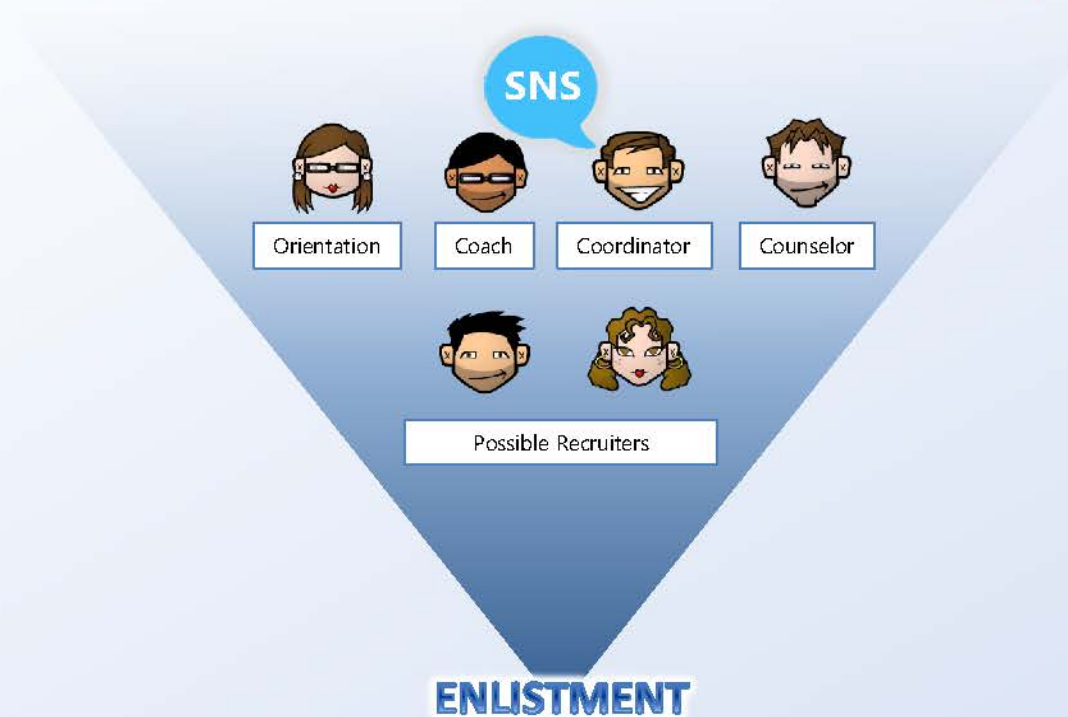


HIV testing protocols are performed as usual remembering that **each person who tests** is a **potential Recruiter**

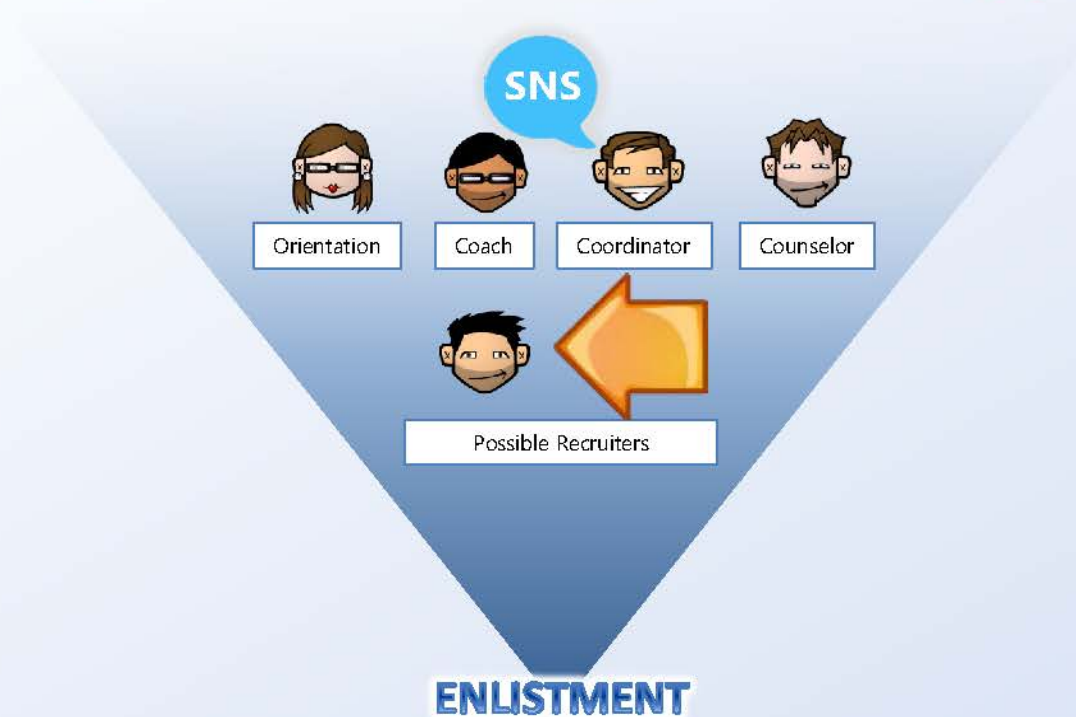
# Sequence of the Strategy



Jenn



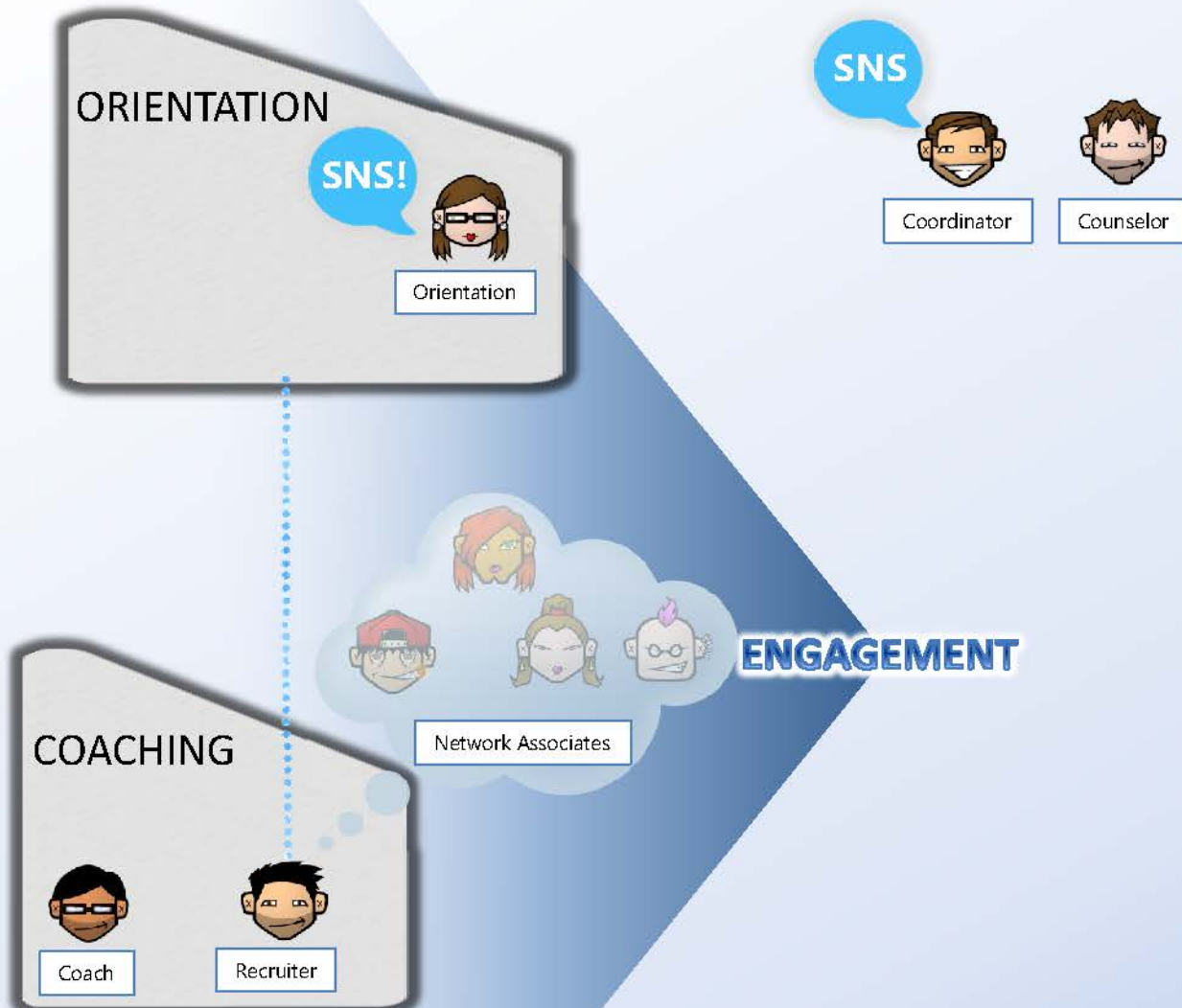
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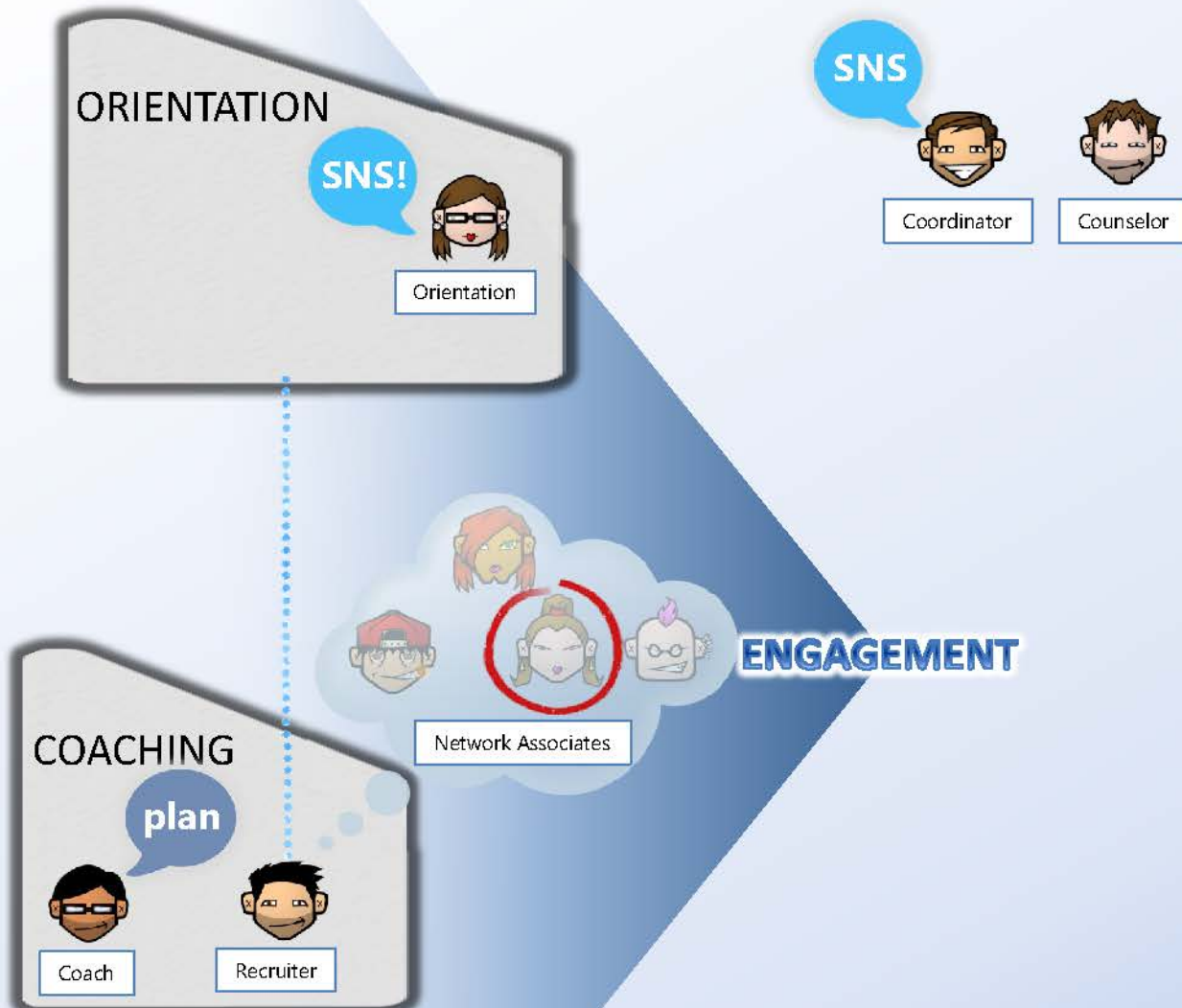


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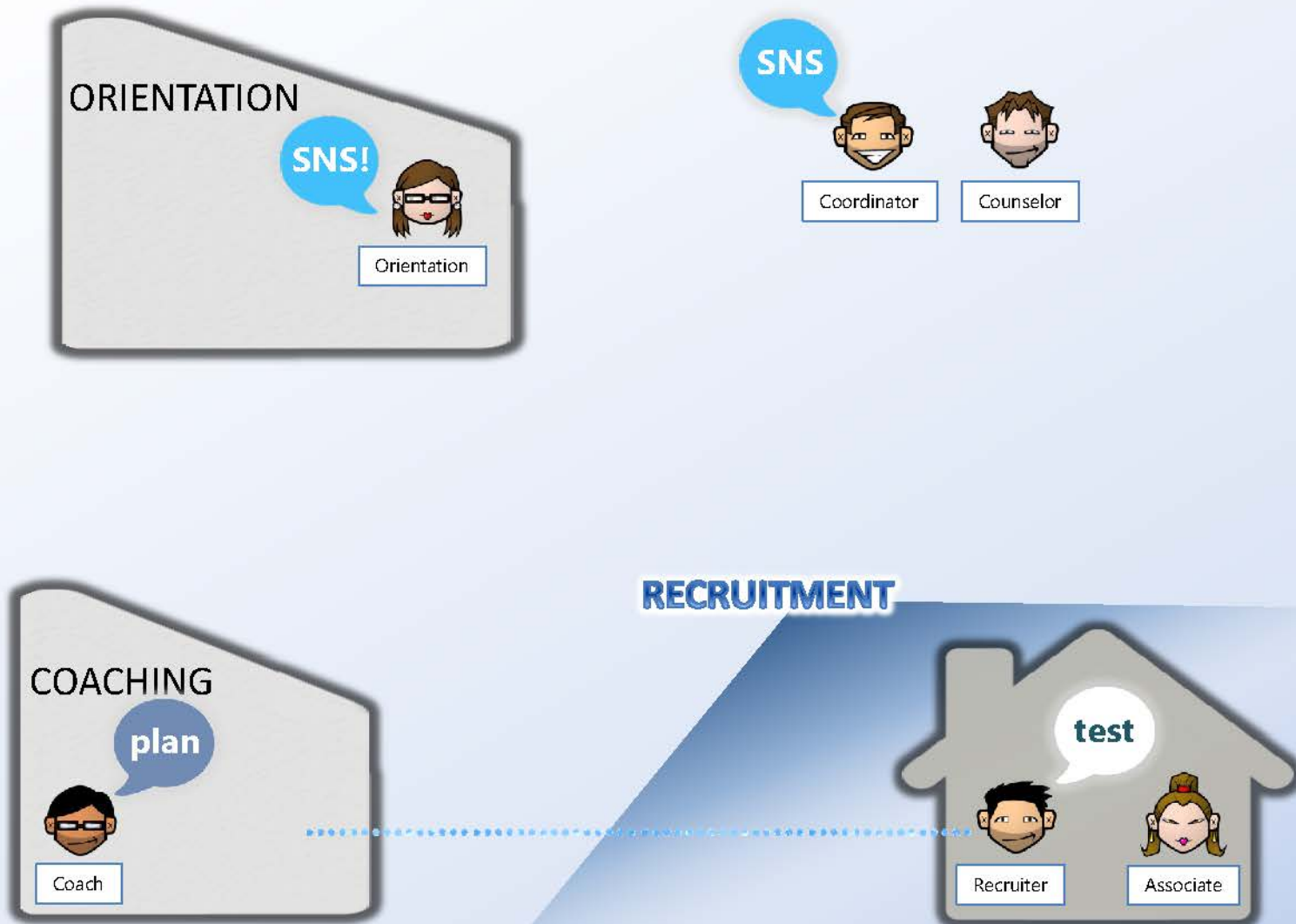




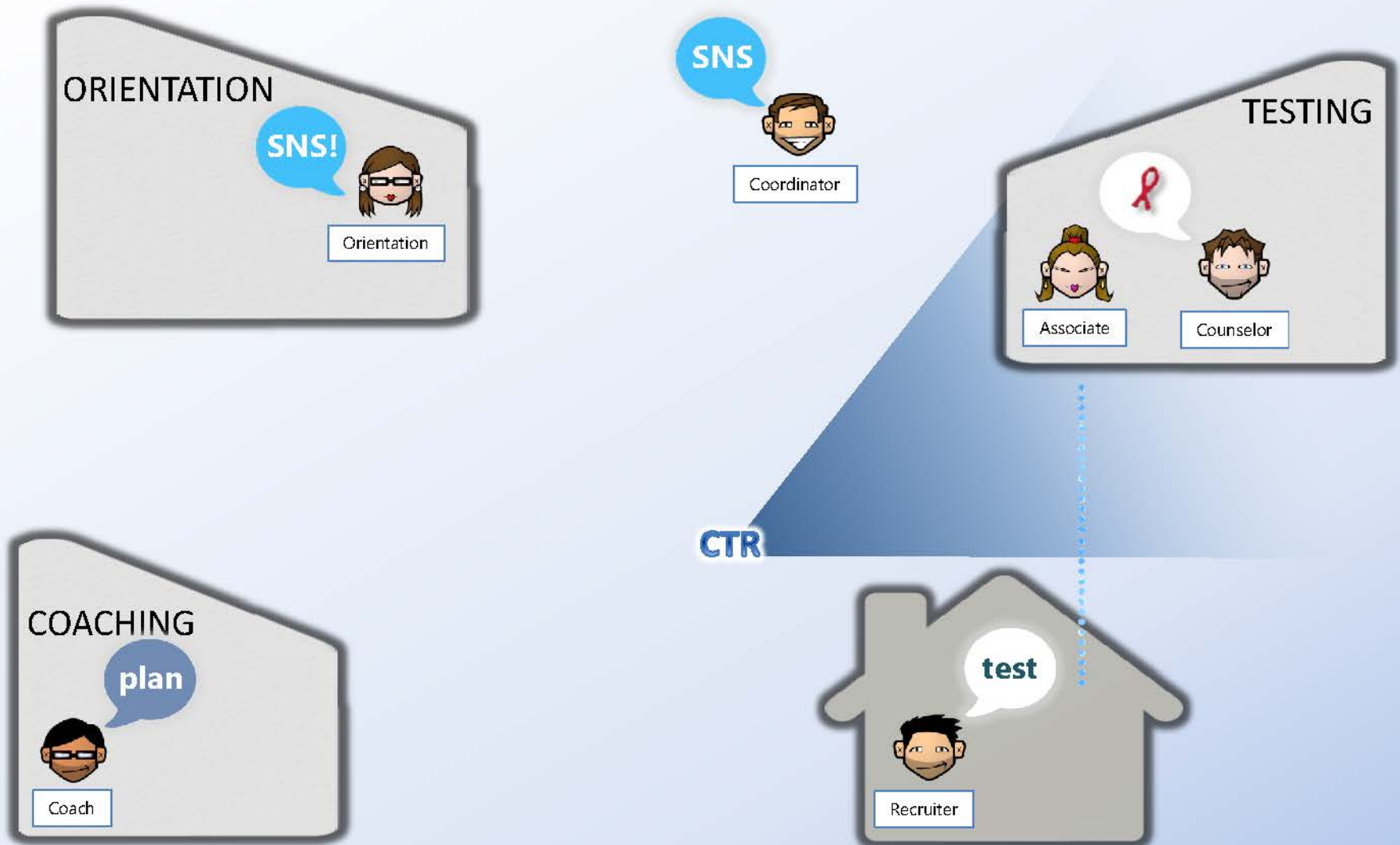
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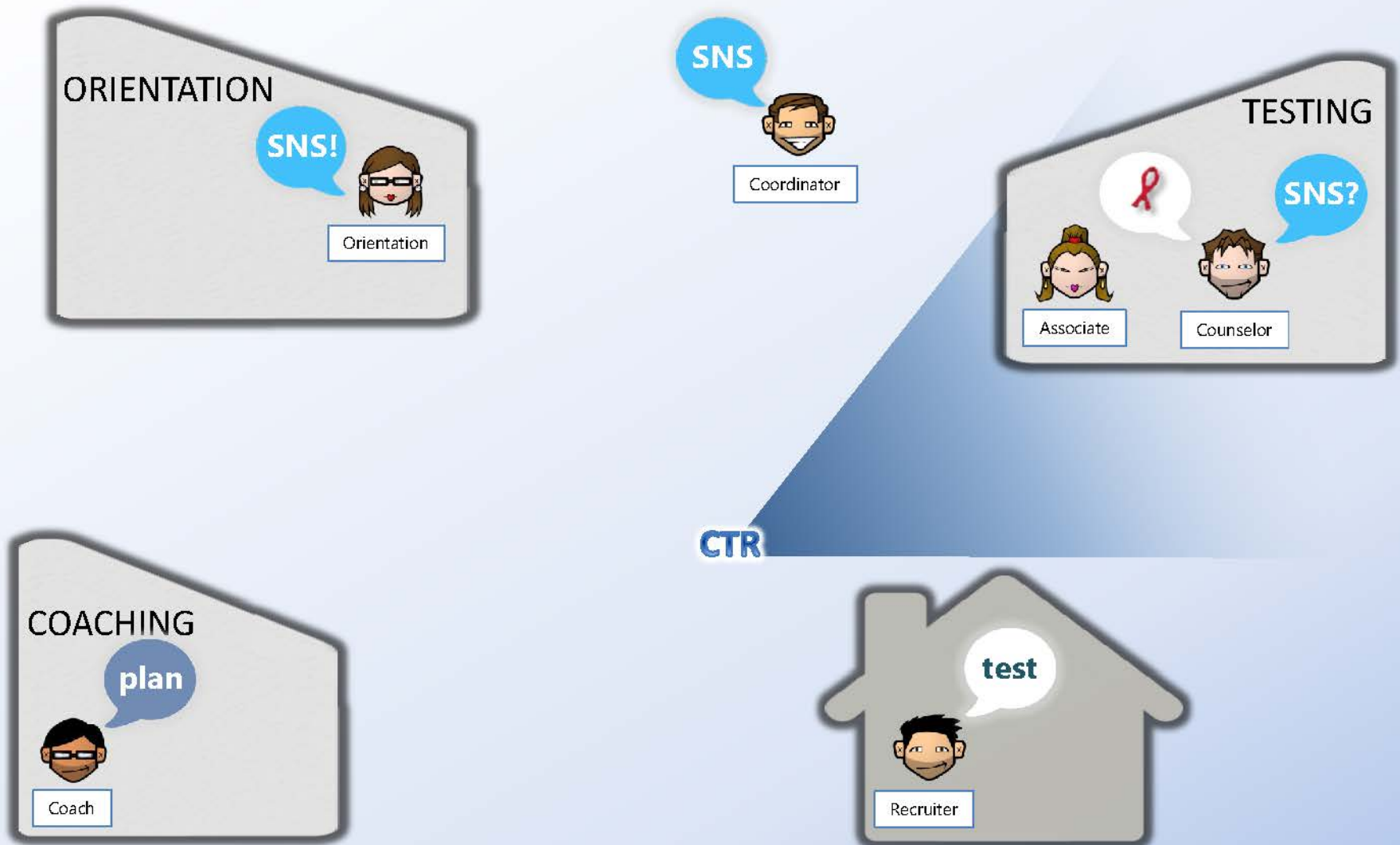
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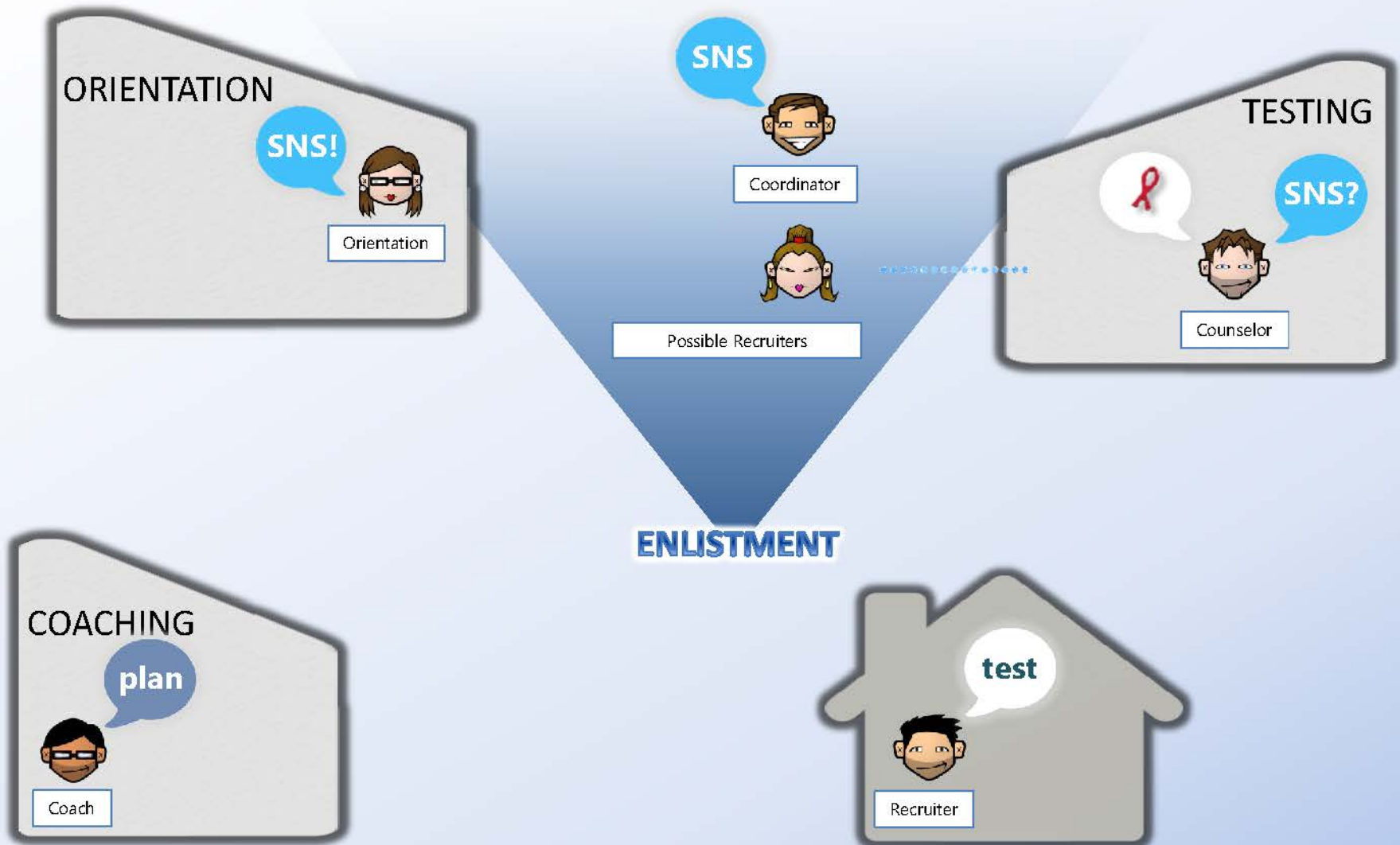
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# Selecting the Right Recruiter

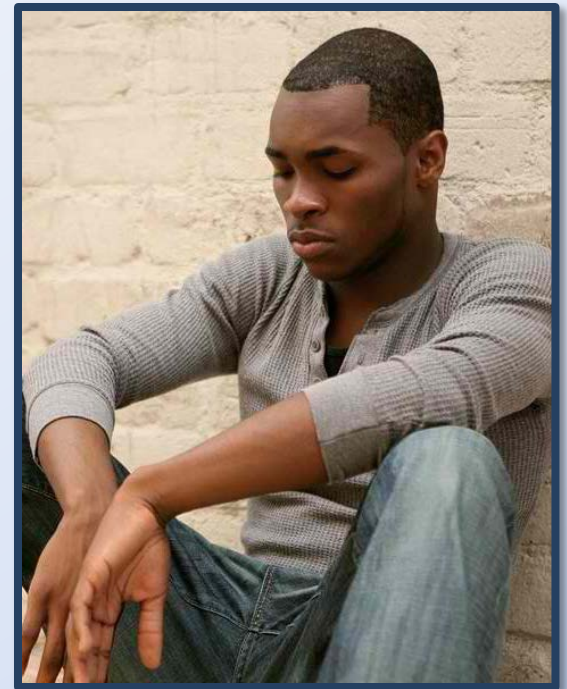


Rich is a 23 year old Latino MSM. He is HIV-negative, but comes to your clinic for routine testing every six months. Sometimes, he will even bring a partner with him to be tested through the clinic's "Couple's Counseling" program. Even though he tests regularly, Rich doesn't feel like he knows a lot about HIV, and hasn't talked about HIV with anyone except sexual partners outside of the clinic. He also does not fit the clinic's primary target population of Black MSM, even though he primarily dates Black men and has several Black friends who are also MSM.



# Selecting the Right Recruiter

Jack is a 26 year old Black MSM. He was diagnosed as HIV-positive nine months ago. Jack had not been a regular tester at your clinic, but decided to continue medical care services there because “it was convenient.” While Jack is actively engaged in care, adheres to his medical treatment, and is respectful to the primary physician, he is not pleasant to the clinic’s testing and support staff. He says that staff “gossip about clients’ business” and are “messy” in general. Jack fits into your agency’s primary target population and has several friends that fit into the target population as well.



# CHALLENGES

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What challenges have you encountered enlisting appropriate persons to become recruiters?



**Robin**



**Lauren Gauthier**

Project Coordinator  
New Orleans, LA

## **Lessons Learned**

- Staff find recruiters at club-based testing sites and through counseling and testing clients.
- Successful recruiters have a network and can provide transportation.
- Orientation is short. Key activities: Train the recruiter to describe the target population and understand how SNS differs from outreach.
- Gatekeepers support promotion, but aren't always good recruiters.
- SNS works naturally in a small community where most information travels through word of mouth.



Robin



**David Lopez**

Associate Vice  
President of  
Prevention  
New York, NY

## Lessons Learned

- SNS is a useful recruitment strategy for a variety of HIV prevention programs such as
- Use a tool to help staff screen each potential recruiter equally.
- A good recruiter can name their network associate. Saying “I have 20 NA’s” isn’t helpful if the recruiter can’t name all 20.
- Un-successful recruiters confuse SNS for Outreach and are not motivated to recruit network associates on a short (2 week) timeline.
- Use a contract with a clear timeline and goals in order to easily “graduate” each recruiter from SNS once the goals have been met.



**What questions  
would you  
like to ask  
Lauren and David  
at this time?**



## Activity

How would  
you address  
this challenge?





# Lessons Learned



Arman

## WHO

- Potential recruiters with many friends doesn't equal “best choice”
- Potential recruiters with few friends does not reflect a “bad option”
- Newly diagnosed clients might not feel comfortable at this time
- Focus on the quality of recruiters; especially of the initial recruiter

## WHERE

- Involve ALL staff in all programs to identify all potential recruiters
- Every client at your agency is a potential recruiter
- Develop a clear key criteria to identify potential recruiters

## HOW

- Design a well-thought screening tool
- Strive to develop and maintain strong ties with target population
- Organize valuable and concise orientation activities
- Motivate recruiters by emphasizing their qualities and not their risks



Arman



Sam



Robin



Jenn



**What questions  
do you have  
about  
Enlistment?**

# Thank you for your participation!

Do you need additional help with SNS?

- Visit our websites <http://cba.jsi.com> and <http://capacity4health.org>
- Submit a request for technical assistance through CRIS or your health department if not directly-funded by CDC



**Please complete the short evaluation.**

The Capacity Building Assistance Project of JSI (CBA@JSI) and of APIAHF (C4H) are funded by the Centers for Disease Control and Prevention (CDC) to deliver training, technical assistance, and improve the capacity of directly or indirectly funded HIV-serving agencies in the U.S.