**Themes* for Social Marketing Related to MP+**

Do you need ideas about what to say on materials or Facebook that will encourage young men living with HIV to engage in the HIV continuum of care? These are issues that can be addressed when encouraging men to stay in care, to take their medications every day, to return to care if they have left it, and to support friends to engage in care.

Rather than simply repeatedly reminding people “to engage in care” or “get tested”, it is helpful to address underlying issues for why people do not engage in care or get tested often enough.

Messages about the issues can be used on materials to distribute at venues where men congregate, on the project’s Facebook page, on Instagram, on texts that are sent out to everyone involved in the project, on posters in the space, and in brochures that people can pick up at the space.

For specific real world examples of publicity and other social marketing materials from MPs around the United States (and the world), check out our Flickr page here:

https://www.flickr.com/photos/130798922@N06/albums/with/72157666793509750

*Please note: this was developed with young Black MSM in mind, but when MP+ is used with others, mentioning other ethnic/racial groups is important.

**How to Give/Get Support**

- Social support can help keep you healthy both physically and mentally (research shows this).
- Social support is about you asking for what you need...taking control over your health.
- Social support from others you know and trust can help you handle many and different issues with your healthcare and increase your ability to cope with those issues.
- Support can come from a friend, a family member, a boyfriend, a health care provider or a person at an agency that is working with young men who are living with HIV. It’s important to think about whom you trust enough to talk about your issues and whom you want to rely on.
- It is an honor to have been chosen as a buddy to support one someone who is living with HIV. That choice shows the respect and trust that your friend has in you and your relationship. Buddies are people who are trusted, respected, and valued.

**HIV Literacy: Knowledge of HIV continuum, HIV Disease (HIV+ vs AIDS Diagnosis), Your Immune System (CD4 count, Viral Load, STIs impact)**

- The HIV continuum ranges from living with HIV to having an AIDS diagnosis.
- An HIV+ test result means you have been infected with HIV, the virus that causes your body to develop AIDS, but not that you have AIDS.
- Living with HIV is not the same as having an AIDS diagnosis.
- Untreated HIV infection will lead to having AIDS.
- Untreated HIV infection lowers your body’s system that fights germs, your immune system, from helping keep you healthy.
• If someone is living with HIV and has what is called an “undetectable viral load,” there is so little HIV in their blood that tests are unable to detect it.
• Having an undetectable viral load does NOT mean that the person is HIV negative. The only people who can be undetectable are those who are on meds and take them regularly. Being “undetectable” or having a low viral load can greatly reduce the risk of passing on HIV.
• It is possible to be on medications but still have a detectable viral load.

Knowledge of Disease Progression, Impact of HIV on Health, Getting into Care Early
• Once you know you are living with HIV, it’s important to keep your HIV in check so that you don’t get sick.
• Get in care early and stay in care.
• Be proactive about getting the care you need. It sometimes takes persistence and a stick-to-it attitude to get what you need!

Importance of Getting into Care and Staying on Antiretroviral Treatment (ART or ARV)
• The goal is to get into and stay and get on meds. Once on meds, keep taking them!
• The ultimate goal is to be “Undetectable”, but the only way you can be undetectable is if you get on and keep taking your meds consistently.

HIV Medications
• HIV meds are NOT TOXIC or POISONOUS.
• They work, and they are helping other black men like you HAVE a NORMAL LIFESPAN
• HIV damage to your body (such as the heart, brain) begins as soon as you are infected and it continues every day you are infected until you get on treatment, so the earlier you get on treatment the better.
• Make it a point to talk and keep talking to your doctor/provider about concerns you may have with your meds. If you are having problems with your meds, don’t give up because the PHYSICAL EFFECTS OF UNTREATED HIV ARE WORSE THAN THE PHYSICAL EFFECTS OF TREATED HIV
• You can take your meds effectively even if you want to drink
• And you can take your meds effectively if you are using drugs, such Weed, ecstasy, and cocaine. So continue to take your meds even if you take drugs or drink.
• BOTTOM LINE: ART today is generally very safe, effective, and has much less serious side effects. Newer meds do not have the harsh side effects that earlier meds had and young men on the older meds may show physical changes that young men do not show on the newer meds.

Medical Side Effects, Getting Doctor’s Advice, Discuss Strategies with Doctor
• If there are any medical side effects, as those with any other meds like antibiotics, talk to your doctor because your doctor can help you relieve the side effects or will know if you need to change your meds or not.
• Meds are much easier to take than they were and often involve a single pill a day.
• Most people have no long term side effects...some things, like bloating and diarrhea, go away after about a month. Atripla can cause dreams and nightmares, and those don’t go away...and some people (20%) get a rash...but they don’t come off the meds because of it.
• Your doctor is there to help you. Your care is a collaboration between you and your doctor. Try to speak up so that your doctor can be helpful to you. If your doctor does not hear your concerns, then (s)he cannot help you.
• It’s normal to feel shy or nervous about seeing a doctor, which many people feel is frightening. If you do, be assertive. Being afraid can be overcome.
• Working together, you and your doctor can collaborate to find the best treatment for any drug side effects.
• But, if you had bad experiences with your doctor (e.g., homophobia) and feel afraid to talk to a doctor about how the meds are affecting you, or fear taking your meds with your doctor, find someone to talk to about those fears. Maybe they can help you talk to your doctor or find ways to prepare you to talk to the doctor yourself.
• You have the right for your doctor to listen to you about your symptoms…that what you experience is valid and deserves attention
• You have the right for your doctor to work with you to find a combination you can tolerate well and that fits into your life
• Remember, if you have problems with your doctor, then your buddy can help you by going with you to the doctor, or helping you find a new provider, or talking through how to address the problem.
• Many side effects can be managed with simple techniques or as-needed meds for symptom relief
• It’s common, normal even, to not “get it right” on the first try. But keep trying until you get it right!

Medical Assistance, Cultural Beliefs/Norms, Doctor-Patient Experiences

• Your doctor is there to help you.
• It’s normal to feel shy or nervous about seeing your doctor.
• Remember, it’s a collaboration between you and your doctor, so (s)he needs you to tell them when you have a concern about your care.
• But, if you find that you cannot work well with your doctor/provider, make a conscious effort to tell him/her that. If problems persist, talk to your friends, reach out to your buddies, get referrals.
• If you had bad experiences with your doctor, such as homophobia or racism, and feel afraid to talk to a doctor about the way you feel treated, find someone to talk to about those fears, like your buddies or others close to you. Maybe they can help you talk to your doctor or find ways to help prepare you to talk to the doctor yourself.
• You should also feel that you can talk to others on staff about your concerns if you do not feel comfortable talking directly to your provider about it. They are there to help you.
• Don’t put this off. Do not give up on your care!
• Before you just give up your care, know that you can always find another doctor.
• Changing providers is always an option. Don’t give up on care.

Continuum of Care (Adherence Issues, Types of Non-adherers, Reasons for Missing Medical Doses)

• It’s really important to keep taking your meds and to keep your medical appointments. Get into the habit of taking your meds and making your appointment.
• When you miss doses of your meds it’s very important to address the reasons and remove them. Need to figure out how you can individually take action. Again…it’s really important to keep taking your
meds and to keep your medical appointments. Get into the habit of taking your meds and making your appointment.

- There are specific strategies you can use to help you overcome barriers that get in the way of being able to take your meds regularly, such as setting a recurring reminder on your phone, or posting a note on your bathroom mirror.
- Your buddies can help you to use these strategies.
- It might take trial and error to figure out how to best use those strategies but it can happen.

Re-engagement in Care, Barriers to Retaining HIV Care, Promotion of Retaining HIV Care, Reasons to Stay in Care

- There are ways to stay in care even if you change jobs or lose medical benefits…. the key is to find help (health navigator, support buddy, etc).
- If not in treatment why did you drop out of care? What beliefs about care are held? Negative perceptions or beliefs? Important to air those and if possible, correct those beliefs (e.g., mistrust of medical system, homophobia, etc).
- Emphasize how important it is to find someone to help support taking medicine and keeping doctor appointments.
- Emphasize how important it is to advocate for yourself...to include thinking out questions to ask before you go for an appointment and talking with a support buddy about any fears one may have about taking meds or seeing a doc.

Stigma about HIV and AIDS: Information Dissemination

- Did you know...
  - that many people became HIV-positive when they were committed and monogamous to their partners?
  - that most of us have made mistakes that could have resulted in being HIV-positive, if we’re not already?
  - someone who says they are HIV-negative may be positive and not even know it?

- It’s not “nasty.” It’s just numbers.
  - As many as 30% of Black gay men (Black MSM) are HIV-positive. All it takes is once.
  - Up to 60% of HIV-positive Black gay men between from 18 to 29 years old haven’t been tested and don’t know they have HIV.
  - Nearly 60% of HIV-positive Black gay men between the ages of 13 and 24 haven’t been tested and don’t know they have HIV.
  - Over 30% of HIV-positive Black gay men between the ages of 25 and 34 haven’t been tested and don’t know they have HIV.

- People who are living with HIV and stick to treatment are less infectious/safer than people who are living with HIV but don’t know it/haven’t been tested recently.

- How can you tell if someone has HIV? You can’t if they’re in treatment.

Messages About HIV Stigma (with Personal Appeals)
• Many Black gay men don’t get tested and treated because they are afraid of negative gossip or judgment. What are you saying about HIV around your friends and acquaintances?

• What happens when you talk badly about HIV around people who are living with HIV or have not been tested? How does this affect how they feel? How does this affect how they act? Might it stop someone from getting tested? Might that, then, stop someone from getting the treatment they need? Are you part of the problem or the solution?