

***PrEP is for / PrEP te libera*
Evaluation Report**

October 2018



Report prepared by:

BETTER WORLD ADVERTISING

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Evaluation

Evaluation Objectives:

The purpose of the evaluation is to measure the impact of the campaign and answer the following questions:

- Did those who saw the campaign take action or intend to take action about PrEP (find more information, start taking PrEP, etc...)?
- What did the audience think about the campaign?
- What are the barriers to taking action on PrEP?

Methodology

The *PrEP is for* campaign's outcomes were evaluated through a survey that was administered in person in San Jose, California and through a web-based platform.

In-person intercept surveys were administered in several locations in the downtown San Jose area. Web-based surveys were collected through a cloud-based online survey platform called Survey Gizmo. The same survey was administered for the in-person and web-based surveys, but the web-based survey was adapted for online usability. It contained a screener that automatically determined eligibility.

Sampling

In-Person Intercept Surveys

A total of 88 evaluation surveys were conducted among eligible participants in San Jose from August 20th-September 17th, 2018. Recruitment goals were set to target Latino/Hispanic men who have sex with men (MSM), and include a mix of MSM from other racial/ethnic backgrounds. Fourteen of these surveys were conducted in Spanish, and 74 were conducted in English.

Web-based Surveys

The web-based surveys ran from August 31st - September 14th, 2018. The responses were monitored regularly by a Better World Advertising (BWA) staff member. A total of 14 surveys were completed during this time. All surveys were conducted in English.

Recruitment and Consent

In-Person Intercept Surveys

The downtown San Jose area was the primary location chosen for the evaluation as it includes a diversity of social spaces where the priority population was likely to frequent. Surveys were conducted at Silicon Valley Pride, Splash Nightclub, the Watergarden, as well as through community organizations Colectivo Acción Latina de Ambiente

(ALA) and Asian Americans for Community Involvement (AACI).

A \$10 gift card was given as incentive for in-person surveys. There was inclusion criteria required for survey participation. In order to complete a survey, participants had to be:

1. Male
2. 18 years of age or older
3. HIV-negative
4. Have had sex with men in the last 12 months
5. Familiar with the *PrEP is for* campaign
6. Living, working, or socializing in Santa Clara County

Prior to survey administration, respondents were advised that participation was entirely voluntary and that no identifying data was to be collected. Survey participants were given time to ask clarifying questions and address concerns before giving verbal consent to conduct the survey. Participants were asked about demographic information, exposure to the campaign, comprehension of the message and opinions and suggestions about the campaign. Respondents were also asked whether the campaign influenced their behavior.

All surveys were anonymous and no names or identifying information were collected.

Web-based Survey

Web-based survey participants were recruited through Facebook, Pornhub, Snapchat and Grindr ads. The eligibility criteria for online surveys included:

1. Male
2. 18-29 years of age
3. HIV-negative
4. Have had sex with men in the last 12 months
5. Latino/Hispanic
6. Familiar with the *PrEP is for* Campaign
7. Santa Clara County resident

All eligible participants who completed the online survey were given a \$10 Starbucks gift card. At the end of the online evaluation survey, participants were prompted to enter their email address to receive their gift card.

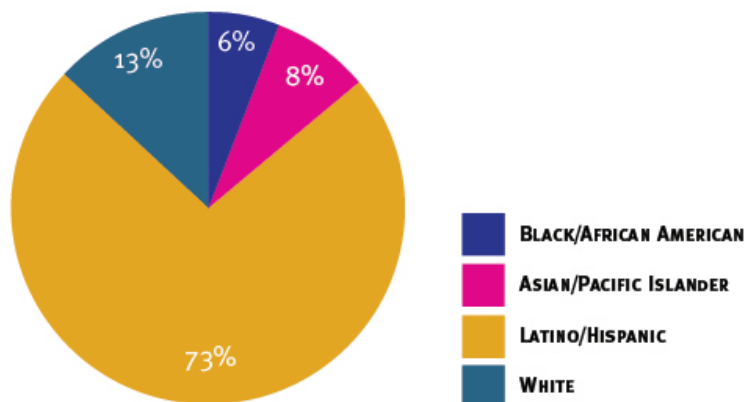
Analysis

All data from both survey methods were entered into and generated from Survey Gizmo. Once collection was complete, a BWA research staff member analyzed the data using Microsoft Excel. This report discusses completed data collected from the in-person intercept surveys and the web-based survey. The results of the two survey data sets were analyzed separately and are reported separately within this evaluation, as “In-Person” or “Online” survey data.

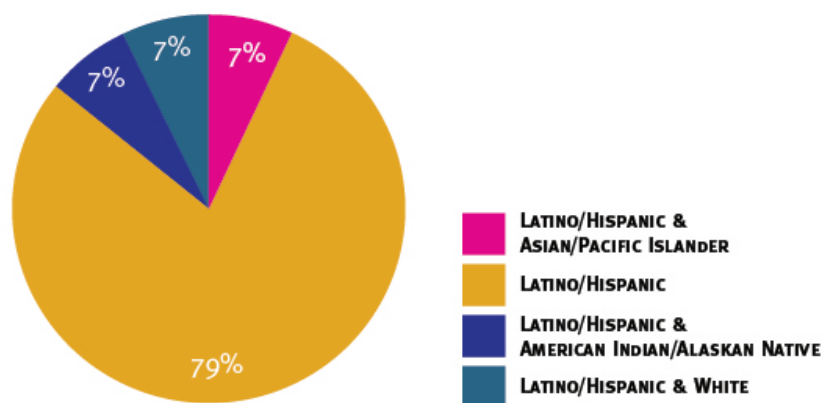
Data percentages presented may slightly exceed 100% due to rounding calculations and in some cases, participants were able to select from one or more answer choices.

Respondent Characteristics

Race (In-Person)* n=88



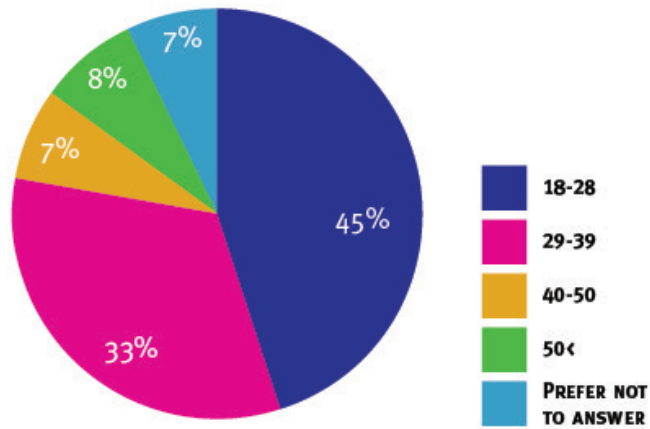
Race (Online)** n=14



*Participants selected all races/ethnicities that applied.

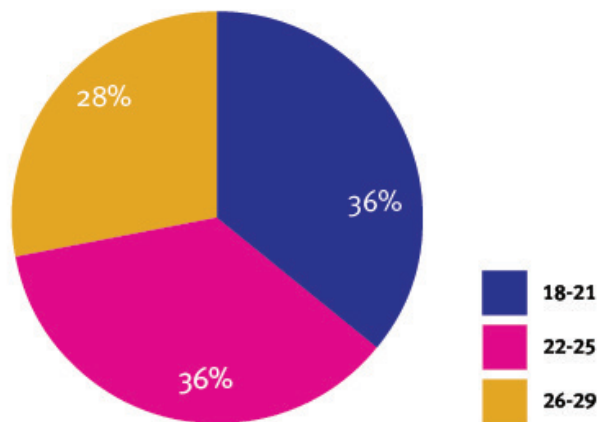
**Some participants identified as Latino or Hispanic and either Asian Pacific Islander, American Indian or Alaskan Native, or White.

Age (In-Person) n=88



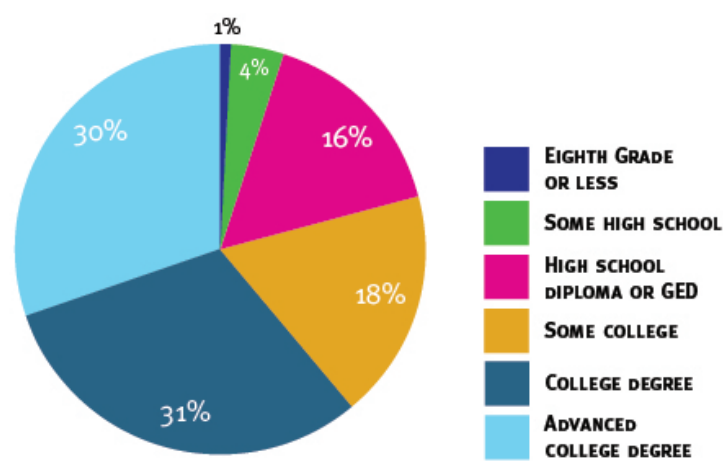
The average age was 32 and the median age was 30.

Age (Online) n=14

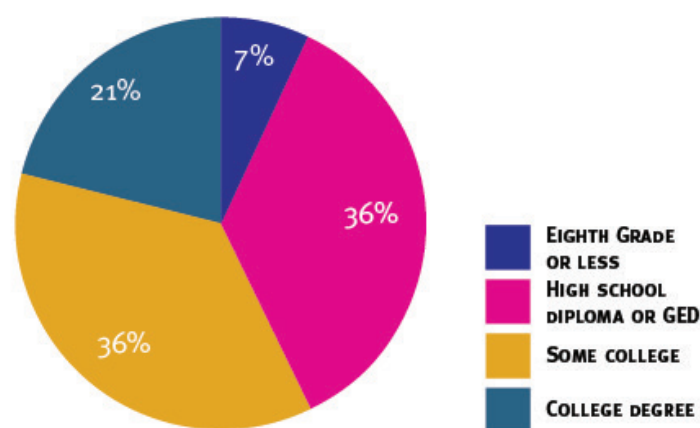


The average and median age for online survey participants was 23.

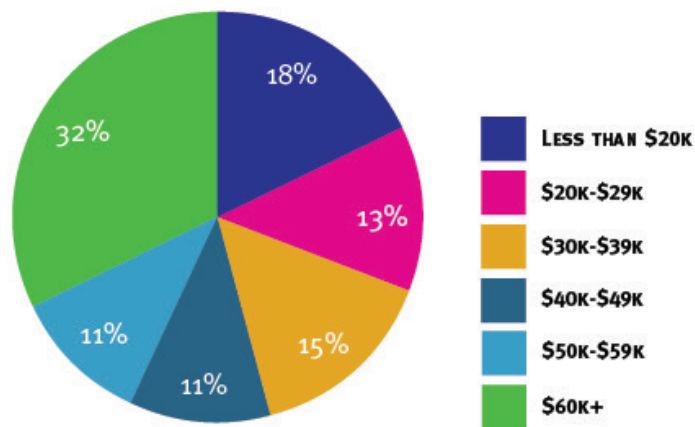
Education level (In-Person) n=88



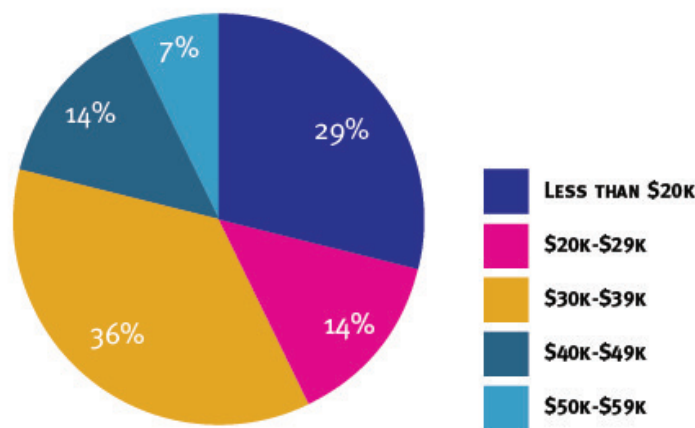
Education level (Online) n=14



Household income (In-Person) n=88



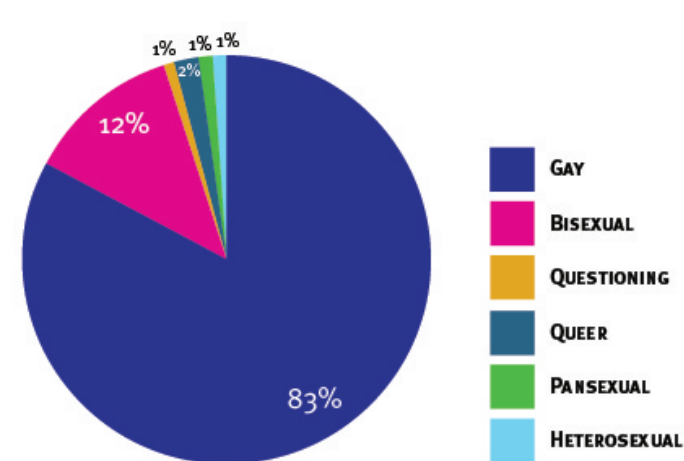
Household income (Online) n=14



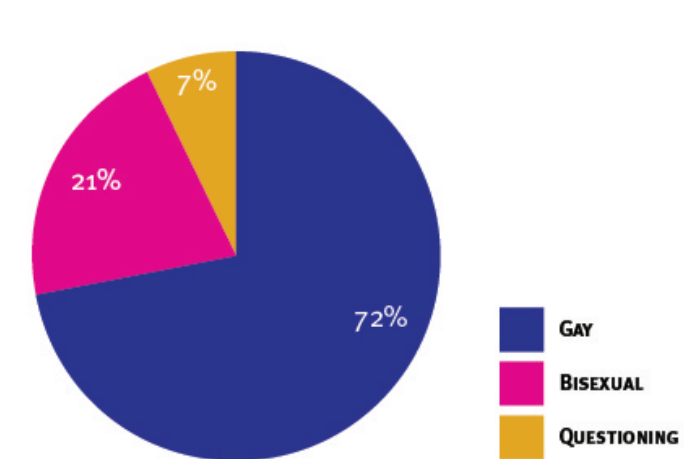
Survey Results

Sexual Background

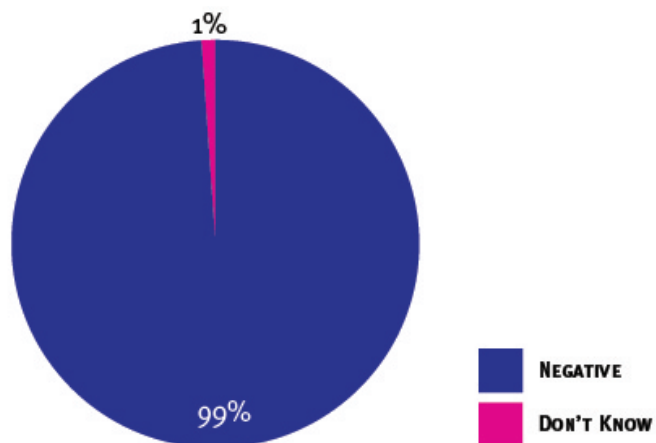
Sexual orientation (In-Person) n=88



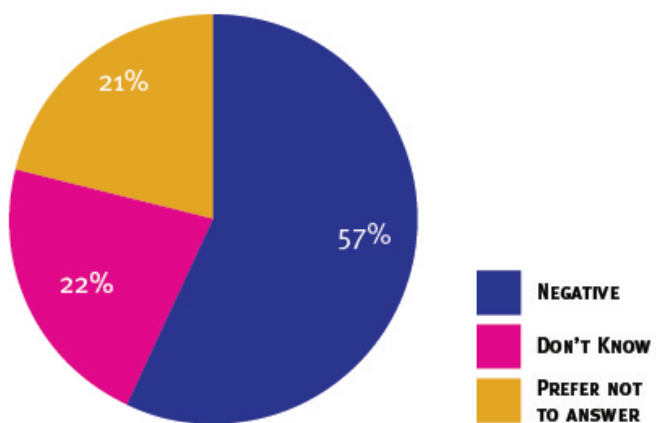
Sexual orientation (Online) n=14



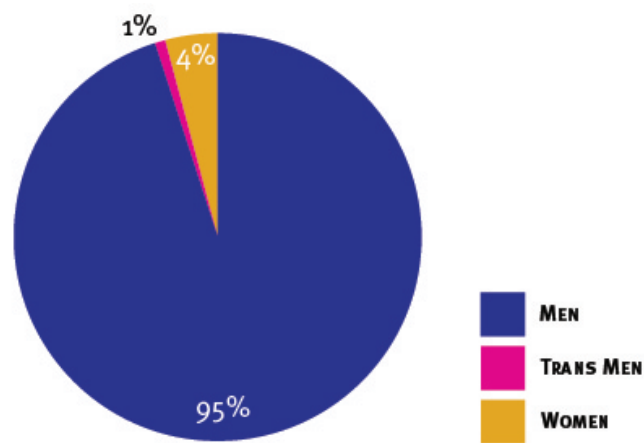
HIV status (In-Person) n=88



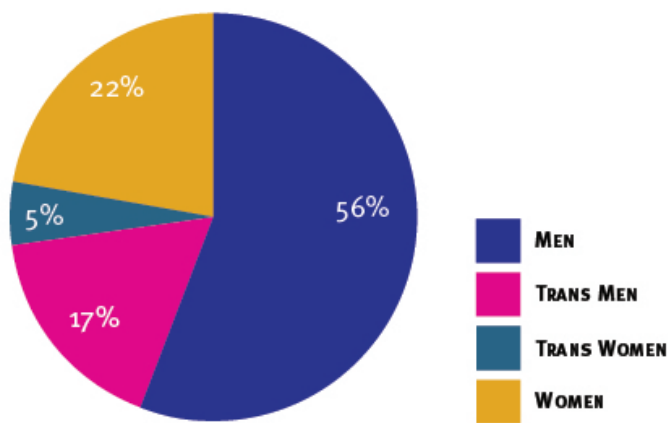
HIV status (Online) n=14



Gender of sexual partners in the past 12 months (In-Person)* n=88



Gender of sexual partners in the past 12 months (Online)* n=14



*Respondents for this question reported having had men as sexual partners in addition to women, trans women and/or trans men in the past 12 months.

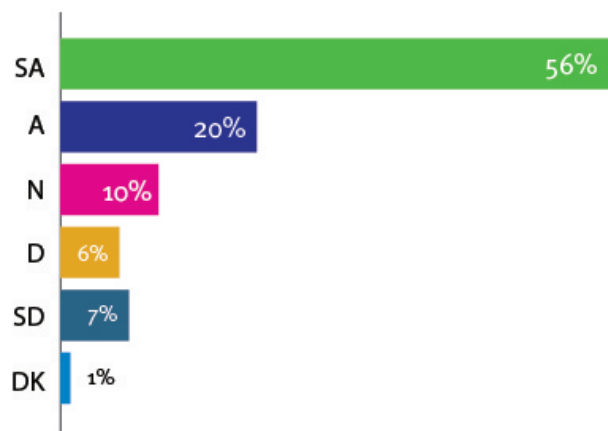
PrEP Related Behavior

Participants' perceived influence of the campaign on their intended behaviors regarding PrEP were measured. Participants indicated how strongly they agreed or disagreed with five statements about intended PrEP-related behavior, according to a Likert-scale.

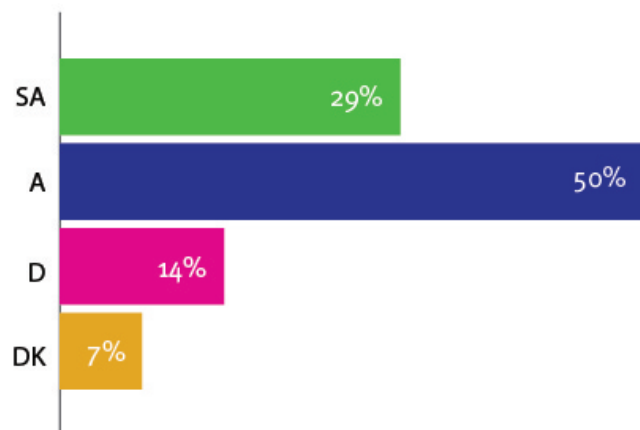
“As a result of the campaign, I am more likely to...”

(SA= Strongly Agree, A=Agree, N=Neither Agree or Disagree, D=Disagree, SD=Strongly Disagree, DK=Don't Know).

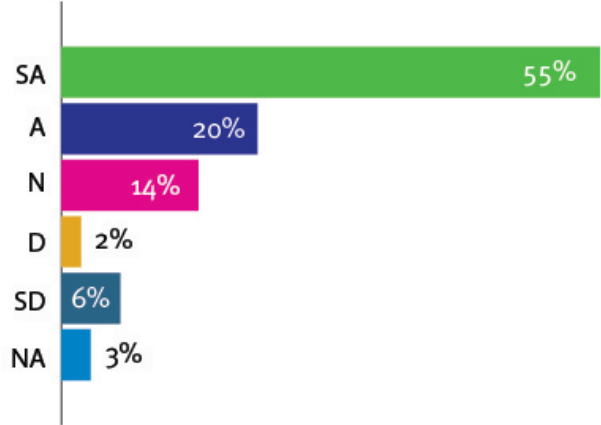
Talk to my doctor about PrEP (In-Person) n=88



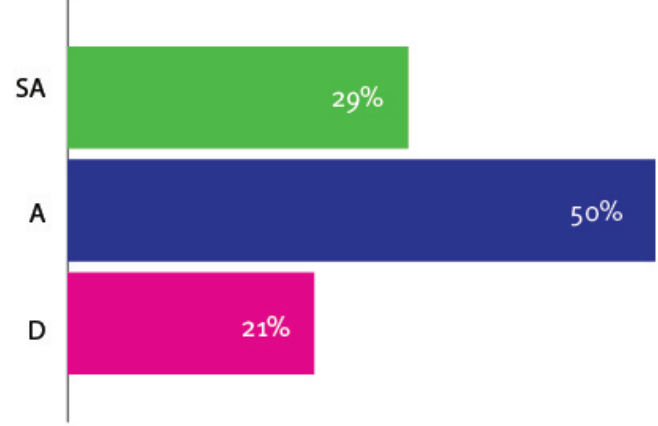
Talk to my doctor about PrEP (Online) n=14



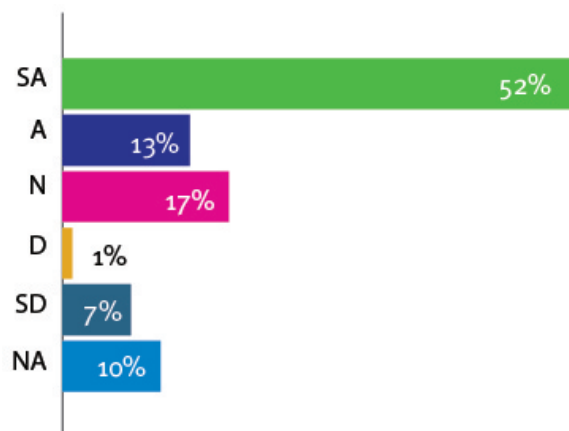
Seek more information about PrEP (In-Person) n=88



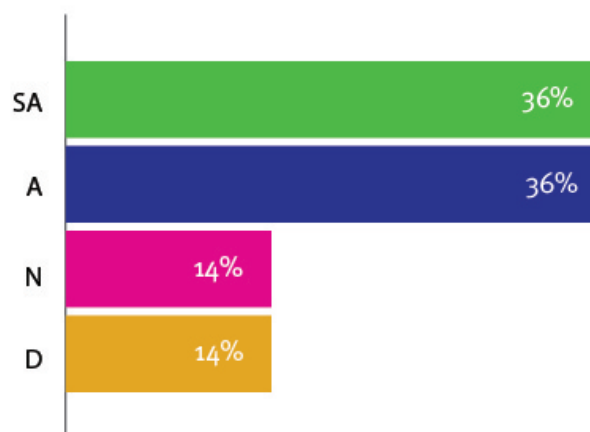
Seek more information about PrEP (Online) n=14



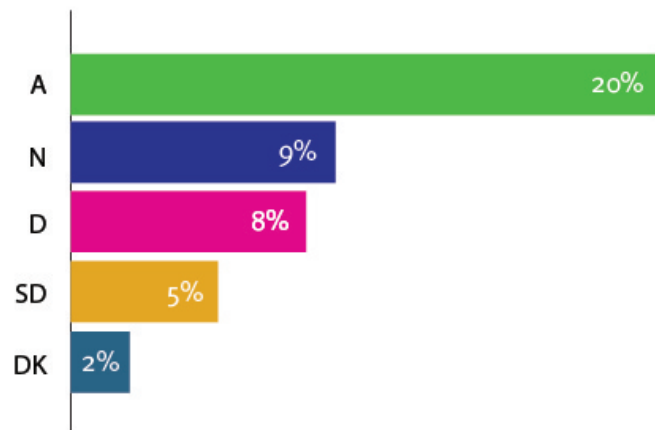
Talk with my partner about PrEP (In-Person) n=88



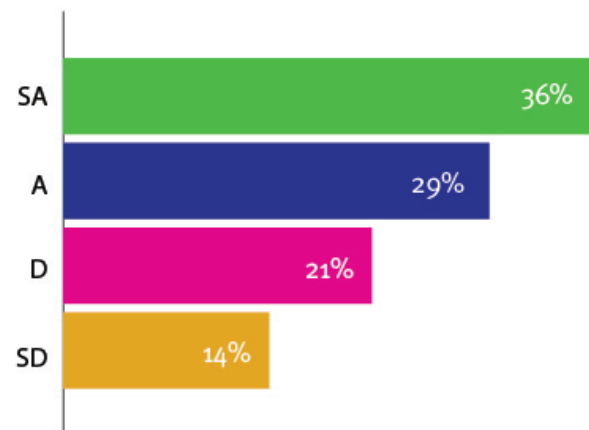
Talk with my partner about PrEP (Online) n=14



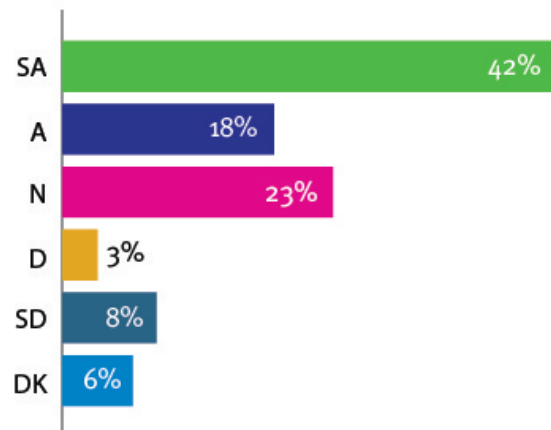
Tell my family and friends about PrEP (In-Person) n=88



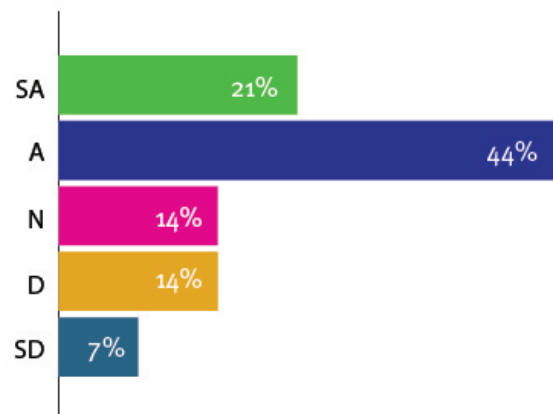
Tell my family and friends about PrEP (Online) n=14



Start taking PrEP (In-Person) n=88

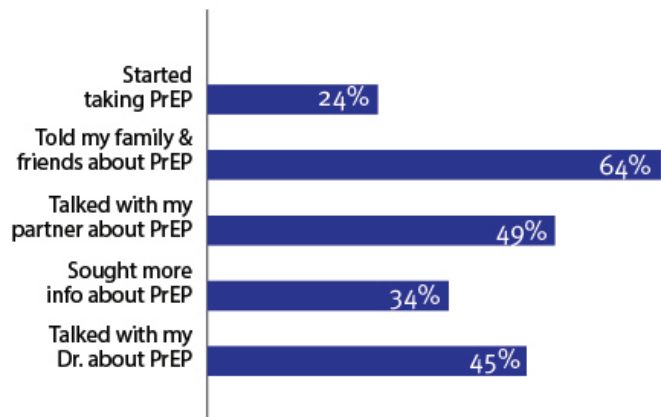


Start taking PrEP (Online) n=14

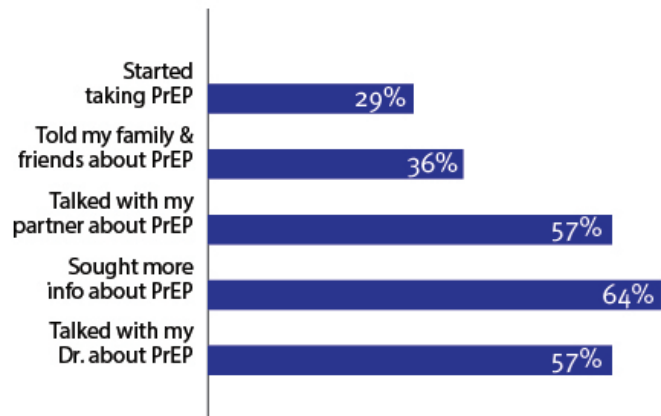


The influence of the campaign on participants’ actual PrEP-related behaviors in the past four months (the duration of the campaign) was also measured.

In the past four months have you... (In-Person) n=88



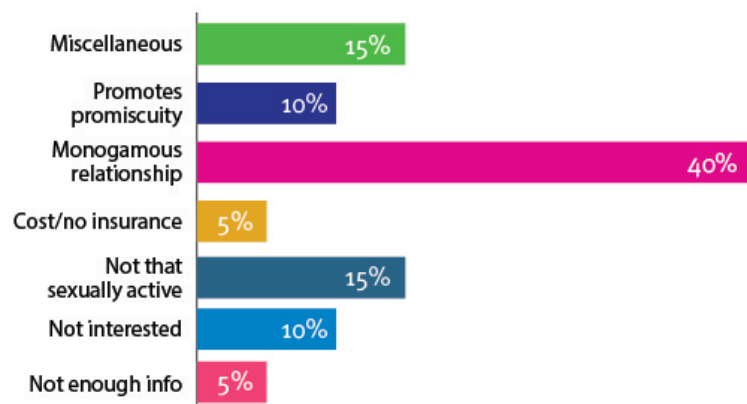
In the past four months have you... (Online) n=14



Barriers to PrEP-Related Behaviors

Participants who indicated “no” to the previous five measures (“In the past four months, have you...”) about their actual behaviors in the past four months were asked to explain why. Eighteen in-person and two online respondents provided explanations which included being in a monogamous relationship, uncertainty about cost and lack of insurance, the belief that PrEP promotes promiscuity, and not being sexually active enough.

Barriers to PrEP use n=20



PrEP-Related Behaviors Discussion

Results for intended behaviors were extremely positive for in-person respondents. A high percentage of participants reported they strongly agreed or agreed that they are more likely to talk to their doctors about PrEP (76%), seek more information about PrEP (75%), talk to their partner about PrEP (65%) or start taking PrEP (60%) as a result of the campaign. The results from online participants also yielded positive responses as a large number reported they strongly agreed or agreed that they are more likely to talk to their doctors about PrEP (79%), seek more information about PrEP (79%), talk to their partner about PrEP (72%), tell their friends or family about PrEP (65%), or start taking PrEP (65%) as a result of the campaign.

When it came to actual behaviors, the majority of in-person participants said they had told their friends and family (64%) about PrEP in the past four months. The majority of participants who took the web-based survey said they had sought more information about PrEP (64%), talked with their partner and doctor about PrEP (57%), or told friends and family about PrEP (58%). Close to half of in-person respondents (45%) reported talking to their doctor in the past four months about PrEP. 24% of those who took the survey in person and 29% of those who took the survey online reported initiating PrEP use.

PrEP Knowledge

Participants indicated their awareness of PrEP before seeing the campaign.

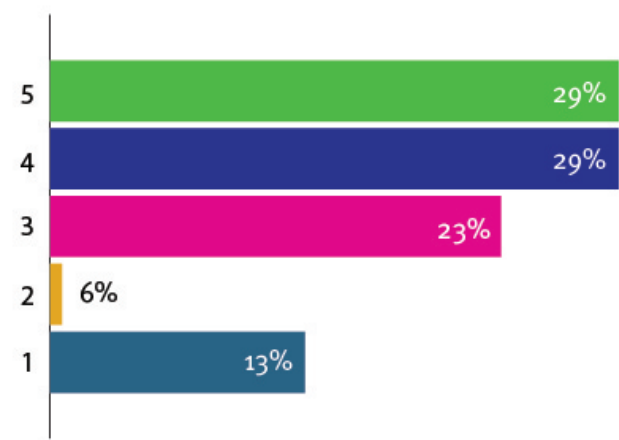
Aware of PrEP prior to campaign



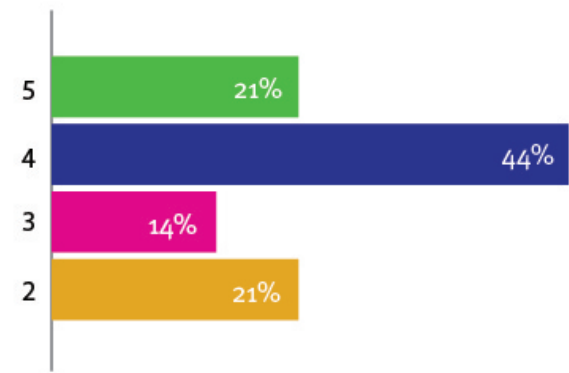
(In-Person n=88, Online n=14)

Participants then rated their knowledge of PrEP after seeing the campaign. (5 = Extremely Knowledgeable, 4 = Knowledgeable, 3 = Neither Knowledgeable or Unknowledgeable, 2 = Unknowledgeable, 1 = Extremely Unknowledgeable).

Knowledge about PrEP after seeing campaign (In-Person) n=88



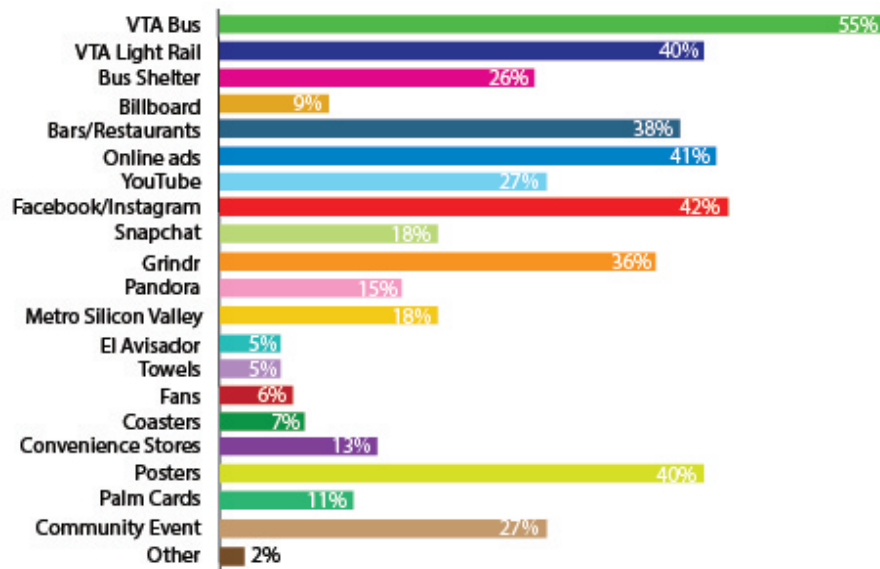
Knowledge about PrEP after seeing campaign (Online) n=14



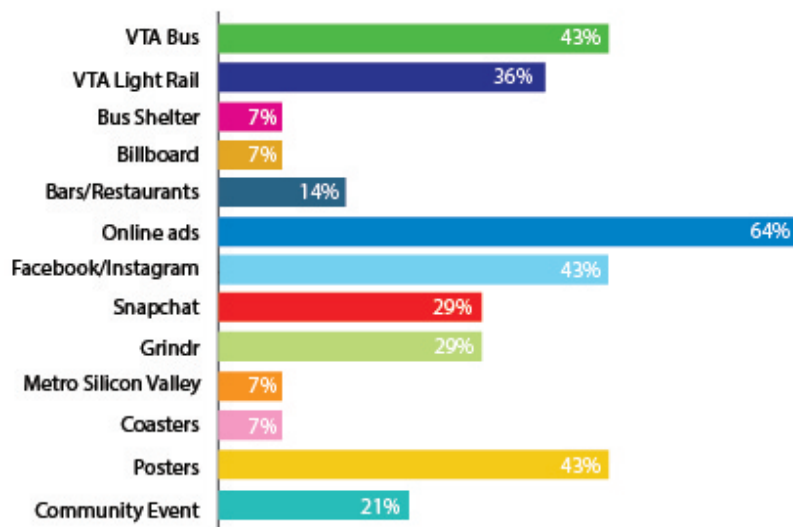
Campaign Exposure

Below are the places participants said they were exposed to the *PrEP is for* campaign.

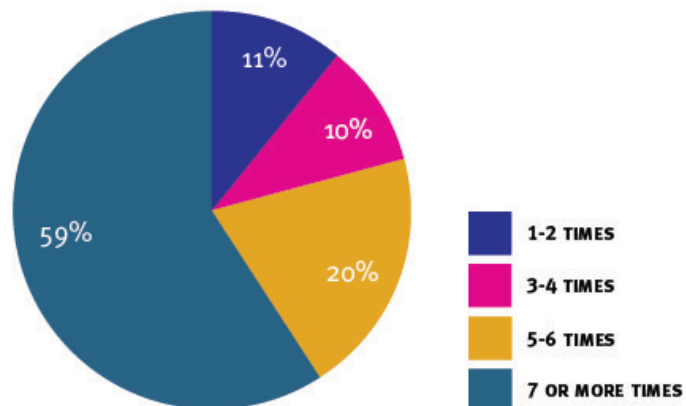
Where have you seen ads (In-Person) n=88



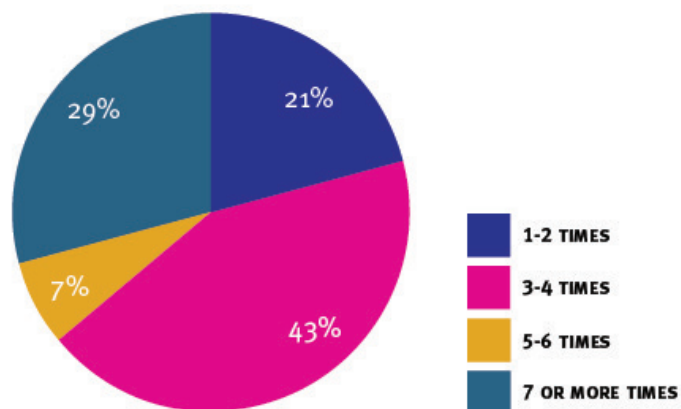
Where have you seen ads (Online) n=14



How many times have you seen this campaign (In-Person) n=88

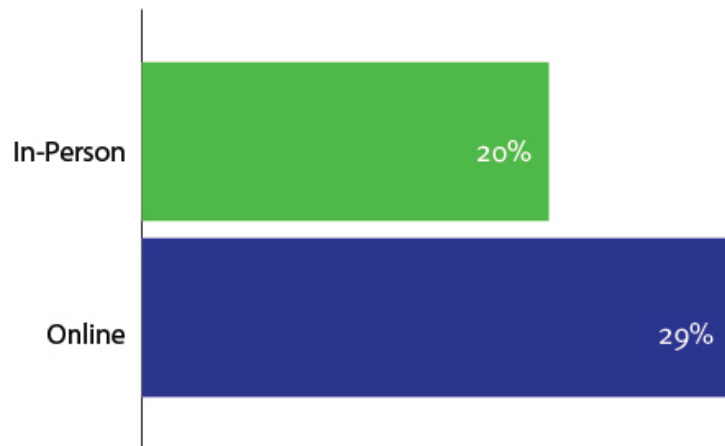


How many times have you seen this campaign (Online) n=14



The findings show that the campaign had the intended reach. Among those who took the survey in-person, over three-quarters (79%) reported seeing the *PrEP is for* ads five or more times. 43% of online respondents reported seeing the ads at least three times and nearly a third (36%) said they saw the ads at least five times. Results indicate campaign exposure was achieved within our desired audience.

Visited campaign website



(In-Person n=88, Online n=14)

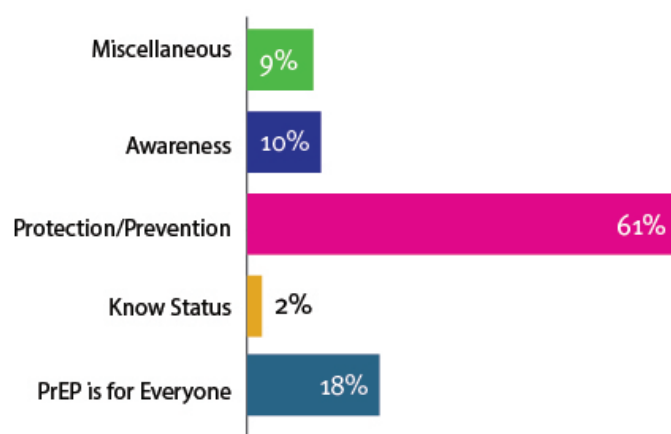
The results for visits to the campaign website were promising, and also highlights the need to continue PrEP promotion through online media. One-fifth of in-person participants (20%) and over a quarter of online participants (29%) reported visiting the *PrEP is for* website.

Campaign Message Interpretation

Participants explained in their own words what they believed to be the main campaign message. Unaided message recall is an important measure to gauge whether the priority population correctly interpreted and internalized the campaign message.

Perceptions of the main message were coded and sorted into different response types. A breakdown of the most common types of responses is shown below for both in-person and online participants. There were 88 in-person and 14 online participants who answered this question for a total of 102 responses.

Main message of campaign n=102

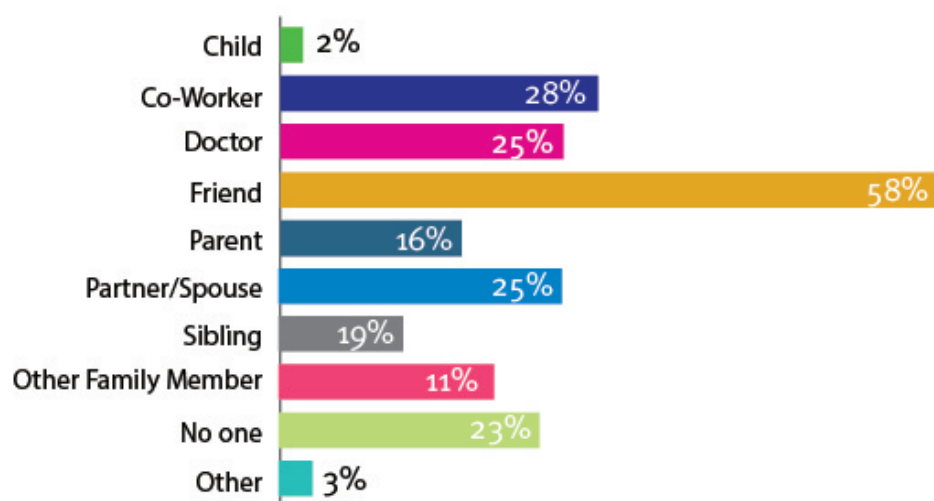


The top responses (61%) were related to general protection, prevention, and health when engaging in sexual activities. Other interpretations of the campaign message were: to know one's status, that PrEP is for everyone - not just those in the LGBTQ+ communities or people labeled as promiscuous – and so is PrEP awareness and safer sex in general. Overall, most participants interpreted the campaign message as it was intended: to prevent HIV.

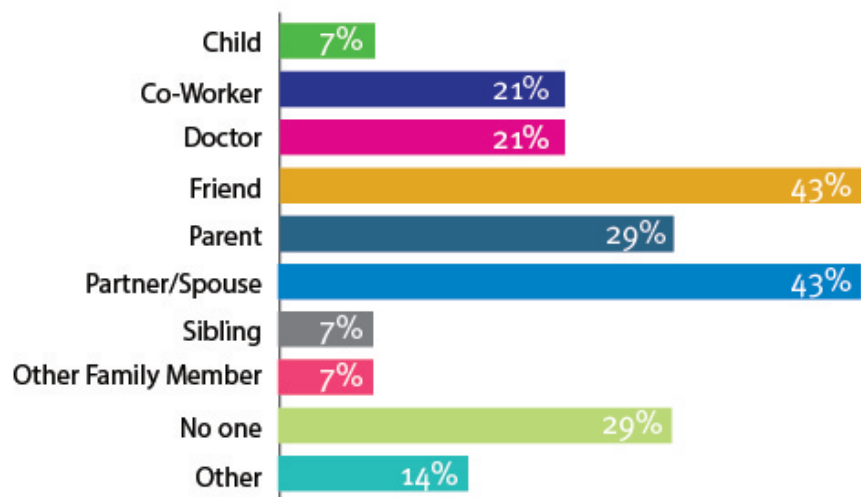
Audience Discussion of Campaign

Gathering feedback about who participants discussed the campaign with is important because it allows us to see if the campaign message is being internalized and reinforced. Discussion of the campaign with others and the issues it raises are crucial to further disseminate the message throughout the community via word-of-mouth, arguably one of the most effective methods of persuasion. The dissemination and discussion of the campaign message were evaluated by asking the respondents with whom they had talked about the campaign.

With whom have you discussed the campaign (In-Person)* n=88



With whom have you discussed the campaign (Online)* n=14



*The total percentage of responses exceeds 100%, as many participants gave multiple responses.

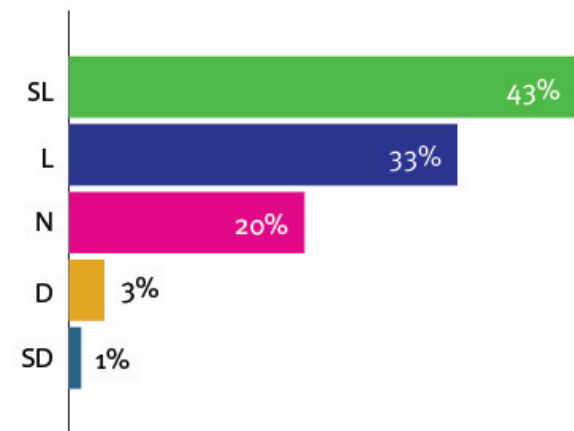
The majority of in-person participants (58%) and nearly half (43%) of online participants reported discussing the campaign with a friend. A quarter (25%) of in-person respondents reported discussing the campaign with their doctor and partner or spouse, while 43% of online respondents reported talking with their partner or spouse and 21% had spoken with their doctor about the campaign.

Although the sampling sizes differed, results from the two methods of data collection were fairly similar. This could be because the in-person surveys and some of the recruitment for online participants occurred in and on environments frequented by MSM. Therefore, it is likely the stigma or barriers that might normally exist in other social settings were removed. These results show that people were willing to have conversations with others about PrEP.

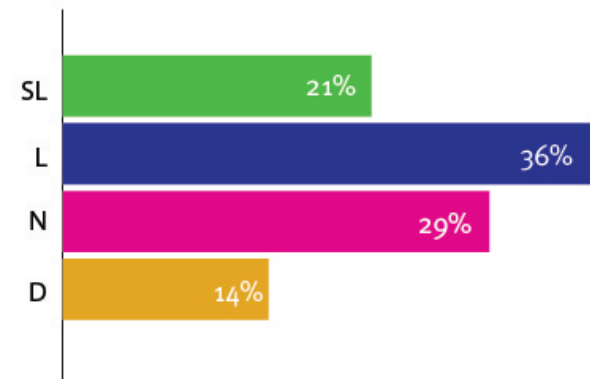
Favorability of Campaign

The audience’s favorability of the campaign was measured by asking them how strongly they liked or disliked the ads. (SL=Strongly Like, L=Like, N=Neither Like or Dislike, D=Dislike, SD=Strongly Dislike).

How much do you like the *PrEP is for* ads (In-Person) n=88



How much do you like the *PrEP is for* ads (Online) n=14

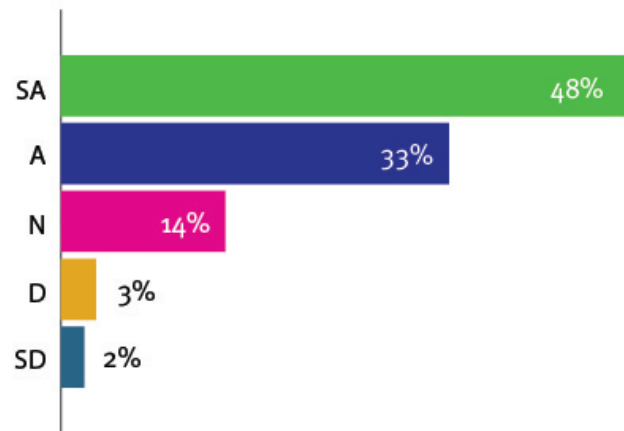


Overall, the majority of in-person (76%) and online (57%) participants expressed they strongly liked or liked the campaign ads.

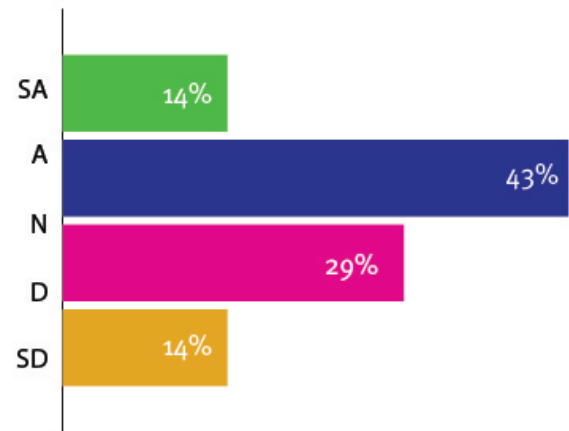
Persuasion of Campaign

Persuasion measures the ability of the advertised message to convince members of the intended audience to change their behavior. It is the campaign’s purpose to foster motivation for change. Four questions were asked to investigate and analyze factors affecting the persuasion of the campaign. The majority of participants indicated they strongly agreed or agreed with each of the four measures (SA=Strongly Agree, A=Agree, N=Neither Agree or Disagree, D=Disagree, SD=Strongly Disagree, DK=Don’t Know).

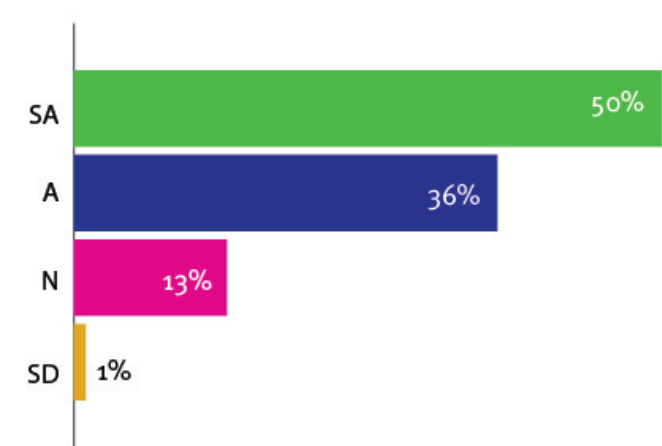
Campaign was convincing (In-Person) n=88



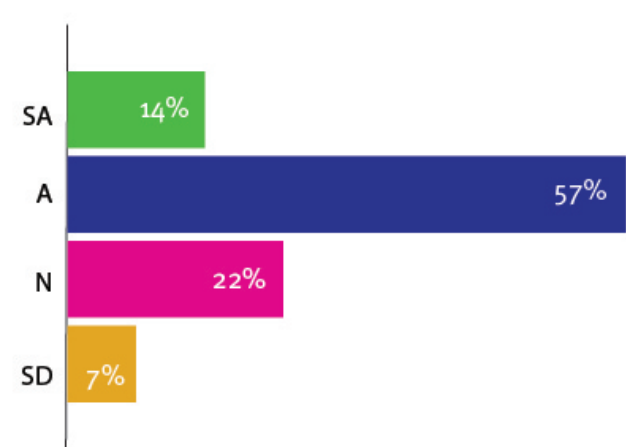
Campaign was convincing (Online) n=14



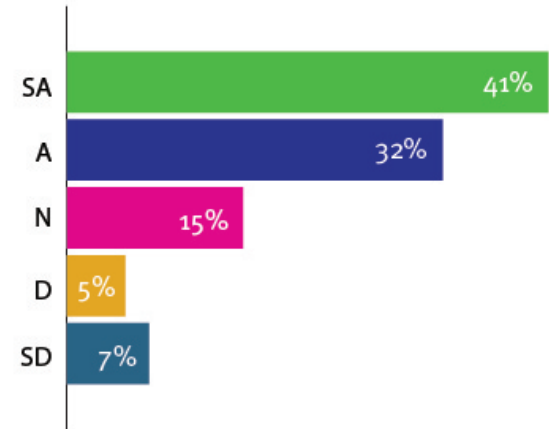
Campaign was memorable (In-Person) n=88



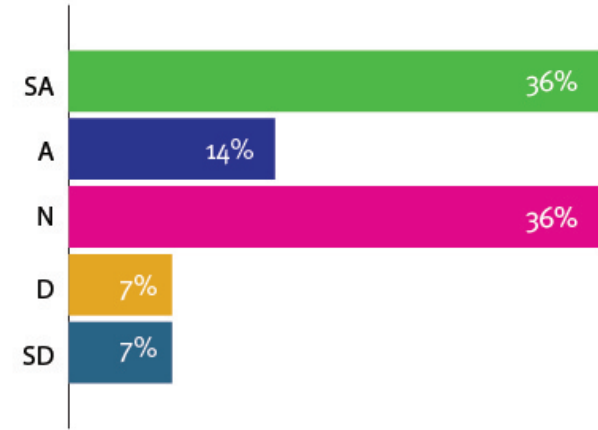
Campaign was memorable (Online) n=14



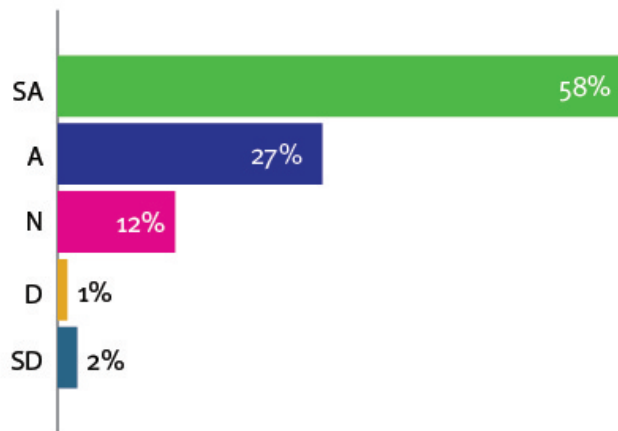
Campaign had personal meaning to me (In-Person) n=88



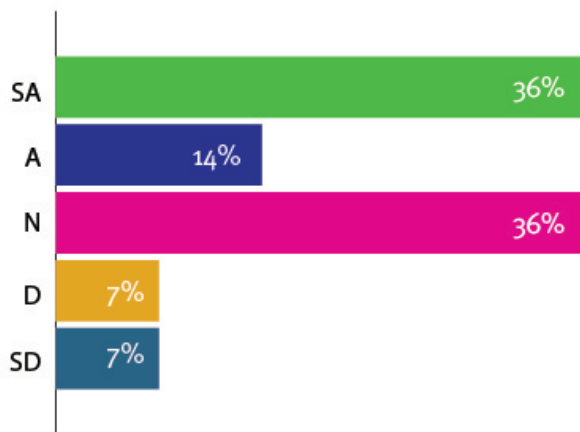
Campaign had personal meaning to me (Online) n=14



Campaign message was clear (In-Person) n=88



Campaign message was clear (Online) n=14

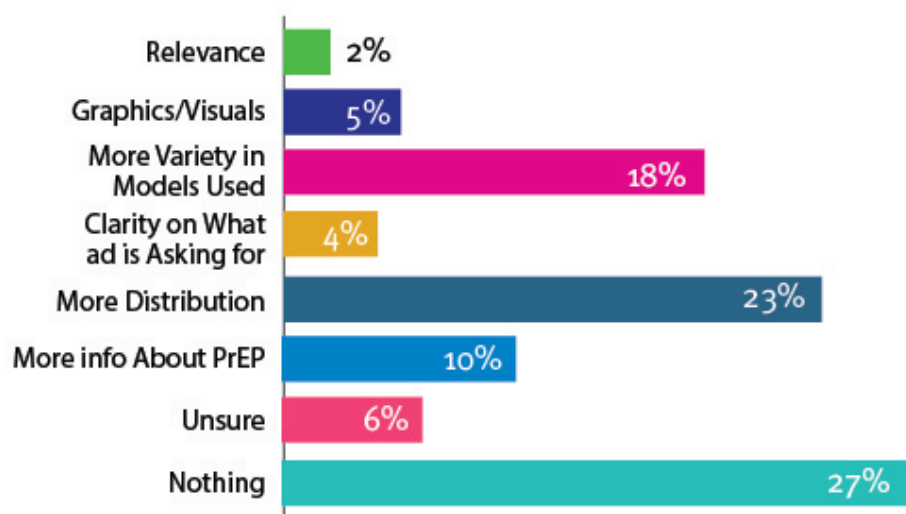


Based on their responses, it is clear that the campaign ads were well-received by the participants. Over 70% of in-person participants said they strongly agreed or agreed that the campaign was convincing, the message was clear and memorable, and had personal meaning to them. Online participant results, while of a lower percentage than the in person, are also indicative of a campaign that was well-received. At least half strongly agreed or agreed the ads were convincing, had personal meaning to them, found the campaign memorable, and the message clear. Even though the findings reflected highly on the persuasion of the campaign, future work could focus on making the message more relatable on a personal level with more members within the desired audience.

Improvement to ads

Participants provided suggestions on how to improve the ads. The top response was not to change anything. The campaign was appreciated by most participants, however some expressed wanting to see more variety with the models used, more distribution across more mediums and in more languages, or wanting more information about how to access PrEP and use it properly. Below is a breakdown of the types of improvements from both online and in-person participants. There were a total of 102 responses.

How would you improve the ads n=102



More distribution (23%)

“Put it on television.”

“Put it in conservative spaces like churches.”

“More mainstream areas not just focused on LGBT spaces.”

Include different models (18%)

“Put straight people in the ads.”

“Want to see people in relationships.”

“Different races/languages.”

More information (10%)

“What is the ad asking me to do?”

“I know what PrEP is, now how do I get it?”

“PrEP is one way to prevent HIV, not the only way, and give information ways to prevent other STIs.”

Graphics/Visuals (5%)

“Don’t just have blue color.”

“Make copy larger.”

“Have a call to action.”

Discussion of Evaluation

Campaign Outcomes

This evaluation was conducted to measure whether the campaign was successful in addressing the questions listed in the Evaluation Objectives (p.5). The results of this evaluation show that the campaign and evaluation objectives were achieved.

Did those who saw the campaign take action or intend to take action about PrEP (find more info, start taking PrEP, etc...)?

Based on the results, most respondents discussed having the intention to take action about PrEP as a result of the campaign. Most said they are more likely to talk to their doctor about PrEP, seek more information about PrEP, talk to their partner about PrEP and talk to their friends and family about PrEP due to the campaign.

Regarding reported behavior change, many participants said they spoke with their doctor and partner or spouse about PrEP. Fewer participants reported starting PrEP use. However, it is encouraging that many had spoken with their doctor about PrEP. This may be a step someone takes as he or she gets closer to adopting the behavior change of incorporating PrEP into their routine sexual health practice.

What did the audience think of the campaign?

Overall, the audience thought highly of the campaign. 76% of in-person respondents and 57% of online respondents said they strongly liked or liked the campaign. Most participants felt the campaign and its message were clear, convincing and memorable. Over half said the campaign had personal meaning. Participants reported that they most liked the inclusiveness of the ad and that it was bringing needed awareness.

What are the barriers to taking action about PrEP?

Respondents revealed some of their top reasons for not taking action about PrEP. These included being in a monogamous relationship and trusting their partner, the belief that their risk was low because they were not that sexually active, or that they just did not know enough about PrEP to access and utilize it.

Limitations

Like most research, this evaluation had its limitations. One limitation was that those who participated in the survey were not randomly selected. Therefore, results cannot be generalized to the larger population of HIV negative individuals. People who had stronger feelings about the campaign may have been more likely to participate than those with neutral opinions. Also, the surveys only captured responses from participants who were likely to frequent Grindr or go to the night clubs/bathhouse or events focused on the priority population's social interests. Another limitation was that the responses were self-reported. Self-reporting is often influenced by people's inclination to produce socially desirable answers and is subject to recall bias, or the participant's ability to remember campaign messaging.

While these limitations are acknowledged, the evaluation results are still useful for measuring the success of the campaign. The data discussed in this evaluation provides a window to understanding the outcomes of the campaign among some HIV negative Latino/Hispanic MSM. Providing measures that show related campaigns can be improved, built-upon and expanded.

Conclusion and Future Steps

The goals of the *PrEP is for* campaign were to raise awareness and encourage the priority population to seek more information about PrEP. The ads were strategically placed through media outlets heavily consumed by Latino/Hispanic MSM. All ads were geographically targeted to Santa Clara County. The results indicate the campaign successfully garnered the attention of the priority population. Many appeared encouraged to learn more about PrEP, and for some to begin taking it. Most respondents reported seeing the ads multiple times and expressed strongly liking or liking them.

The positive outcomes and feedback provide guidance for potential future steps in messaging and campaign work around PrEP and HIV prevention. Future campaigns could focus beyond awareness to encourage those who may know about PrEP to start taking it, and more importantly to remain adherent. Another opportunity for messaging could be to raise awareness of PrEP for medical providers in Santa Clara County. Lastly, the large number of requests to increase distribution through television and more social media platforms is promising. It indicates these channels, along with the incorporation of more languages, could be leveraged to connect with even more audiences in the future.

Appendix 1:

Creative: drag queens & bears

PrEP is for:
drag queens & bears

It's not about who you are or
how much sex you have.

PrEP protects you from HIV. Take it and **stay negative.**

Get Liberated


PrEPisLiberating.org

GETTING TO ZERO
ENDING HIV IN THE
UNITED STATES
ONE STEP AT A TIME

Appendix 1:

Creative: porn stars & amateurs

PrEP is for:
porn stars & amateurs

It's not about who you are or
how much sex you have.

PrEP protects you from HIV. Take it and **stay negative.**

Get Liberated

PrEPisLiberating.org

GETTING TO ZERO
ENDING HIV INFLUENZA
AND TUBERCULOSIS

Appendix 1:

Creative: good boys & bad boys

PrEP is for:
good boys & bad boys

It's not about who you are or
how much sex you have.

PrEP protects you from HIV. Take it and **stay negative.**

Get Liberated

PrEPisLiberating.org

GETTING TO ZERO
WITH PREP
START TODAY
STAY NEGATIVE

Appendix 1:

Creative: singles & couples



PrEP is for:
singles & couples

It's not about who you are or
how much sex you have.

PrEP protects you from HIV. Take it and **stay negative.**

Get Liberated

PrEPisLiberating.org

**GETTING
TO ZERO**
WITH PR
SCHEDULED
CARE

Appendix 1:

Creative: socialists & capitalists

PrEP is for:
socialists & capitalists

It's not about who you are or
how much sex you have.

PrEP protects you from HIV. Take it and stay negative.

Get Liberated

PrEPisLiberating.org

GETTING TO ZERO
ENDING HIV IN THE
COMMUNITY

Appendix 1:

Creative: transformistas y osos



PrEP es para:
transformistas y osos

No se trata de quién seas o
de cuánto sexo tengas.

PrEP previene el VIH. Tómala y **mantente negativo.**

Libérate

PrEPteLibera.org

GETTING TO ZERO
ENDING HIV AND AIDS
AMERICAN OVERSIGHT

Appendix 1:

Creative: porn stars y aficionados

PrEP es para:
porn stars y aficionados

No se trata de quién seas o
de cuánto sexo tengas.

PrEP previene el VIH. Tómalala y **mantente negativo**.

Libérate

PrEPteLibera.org

GETTING TO ZERO
UNA ESTRATEGIA PARA ELIMINAR LA TRANSMISIÓN DEL VIH

Appendix 1:

Creative: chicos buenos y chicos malos

PrEP es para:
chicos buenos y chicos malos

No se trata de quién seas o
de cuánto sexo tengas.

PrEP previene el VIH. Tómala y **mantente negativo**.

Libérate

PrEPteLibera.org

GETTING TO ZERO
UNA ESTRATEGIA PARA
ELIMINAR LA TRANSMISIÓN DEL VIH

Appendix 1:

Creative: solteros y parejas

PrEP es para:
solteros y parejas

No se trata de quién seas o
de cuánto sexo tengas.

PrEP previene el VIH. Tómala y **mantente negativo**.

Libérate

PrEPteLibera.org

**GETTING
TO ZERO**
WITH PREP
CON PREP

Appendix 1:

Creative: socialistas & capitalistas



PrEP es para:
socialistas y capitalistas

No se trata de quién seas o
de cuánto sexo tengas.

PrEP previene el VIH. Tómala y **mantente negativo.**

Libérate

PrEPteLibera.org

**GETTING
TO ZERO**
ENDING HIV INFLUENZA
AND TUBERCULOSIS



Report prepared by:

BETTER WORLD ADVERTISING