



A P E E R - L E D P R O J E C T

**TRAINING OF  
FACILITATORS  
GUIDE**

## **Important Information for Users**

This HIV/STD risk-reduction intervention is intended for use with persons who are at high risk for acquiring or transmitting HIV/STD and who are voluntarily participating in the intervention. The materials in this intervention package are not intended for general audiences.

The intervention package includes implementation manuals, training and technical assistance materials, and other items used in intervention delivery. Also included in the packages are:

- 1) The Centers for Disease Control and Prevention (CDC) factsheet on male latex condoms,
- 2) The CDC Statement on Study Results of Products Containing Nonoxynol-9,
- 3) The Morbidity and Mortality Weekly Report (MMWR) article “Nonoxynol9, Spermicide Contraception Use—United States, 1999,”
- 4) The ABC’s of Smart Behavior,
- 5) The CDC guidelines on the content of HIV educational materials prepared or purchased by CDC grantees (Content of AIDS-Related Written Materials, Pictorials, Audiovisuals, Questionnaires, Survey Instruments, and Educational Sessions in CDC Assistance Programs) and
- 6) Centers for Disease Control and Prevention- IDU and HIV Prevention: Syringe Disinfection for Injection Drug Users

Before conducting this intervention in your community, all materials must be approved by your community HIV review panel for acceptability in your project area. Once approved, the intervention package materials are to be used by trained facilitators when implementing the intervention.

The SHIELD intervention package was developed by a team at the Johns Hopkins Bloomberg School of Public Health:

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## ***Introduction to the Training of Facilitators (TOF) Curriculum***

### **Purpose and Intended Audience**

The purpose of this training curriculum is to train facilitators of agencies who will implement the SHIELD intervention. This manual is intended to be used by Trainers who are preparing facilitators to lead the six SHIELD group intervention sessions.

After completion of this training, participants will be able to:

- 1) Describe the science behind the SHIELD intervention;
- 2) Recognize the SHIELD Core Elements;
- 3) Describe procedures for recruiting, screening, and enrolling clients into the SHIELD intervention;
- 4) Demonstrate skills needed to facilitate the 6 SHIELD intervention sessions & boosters;
- 5) Identify activities for evaluating the SHIELD intervention.

The Training of Facilitators Manual is divided into four sections:

#### **Section I: SHIELD Background Information**

- Overview of the SHIELD Intervention
- Description of the SHIELD intervention sessions
- Training Activities

#### **Section II: Trainer Information**

- How to use the Training of Facilitators Curriculum
- Materials and Equipment Needed
- Trainer Agenda
- Sample Participants Agenda

#### **Section III: Training of Facilitators Curriculum**

- Day 1: Modules 1-15
- Day 2: Modules 16-20
- Day 3: Modules 21-25

#### **Section IV Appendices**

- Appendix 1: SHIELD Factsheet
- Appendix 2: SHIELD Logic Model
- Appendix 3: Core Elements
- Appendix 4: SHIELD Enrollment Form
- Appendix 5: Sex Risk Reduction Ladder
- Appendix 6: Male Condom Steps
- Appendix 7: Female Condom Steps
- Appendix 8: Rinsing Injection Equipment Steps
- Appendix 9: Injection Risk Reduction Ladder
- Appendix 10: Safer splitting Drugs steps

- Appendix 11: Drug Splitting Risk Reduction Ladder
- Appendix 12: Process Monitoring Form
- Appendix 13: Process Evaluation Form
- Appendix 14: SHIELD Pre-Post Assessment Form
- Appendix 15: Participant Feedback Form

The appendices should be prepared as a folder for TOF trainees. Throughout the TOF, participants will refer to these handouts.

# **Section I:**

## **SHIELD Background**

## A. Overview of the SHIELD Intervention

The Self-Help in Eliminating Life-threatening Diseases (SHIELD) intervention is a group level HIV prevention intervention that trains current and former drug users to be Peer Educators. As a Peer Educator, participants learn communication skills to conduct Peer Outreach to the people in their social network. Participants are also taught HIV risk and prevention information and risk reduction skills.

The SHIELD Intervention has 2 main goals:

- 1) To train individuals to be Peer Educators who conduct outreach with peers by sharing HIV risk reduction information.
- 2) To reduce Peer Educators' own HIV risk behaviors.

These aims are achieved through the following skills-building activities:

<b><i>PEER Communication Skills Building Activities</i></b>	<b><i>HIV Risk Reduction Skills Building Activities</i></b>
<ul style="list-style-type: none"><li>• Facilitator Role-Models</li><li>• Group Problem-solving</li><li>• Role-Plays</li></ul>	<ul style="list-style-type: none"><li>• Risk Ladders</li><li>• Demonstrations</li><li>• Games</li></ul>

The SHIELD intervention is delivered through 6 fun and interactive sessions. Each session lasts 1½ -2 hours and is held in a small group setting (4-12 participants). The small group setting is important for Peer Educator training because it facilitates participant sharing and learning from each others' experiences.

The topics of the SHIELD intervention sessions are:

- ❖ Session 1: Introduction to the Peer Educator role and Peer Outreach
- ❖ Session 2: Peer Educator Communication skills (PEER)
- ❖ Session 3: Reducing sexual risk behavior-Part 1
- ❖ Session 4: Reducing sexual risk behavior-Part 2
- ❖ Session 5: Reducing injection drug use risk behavior
- ❖ Session 6: Graduation and sustainability of Peer Outreach

Each SHIELD Group is led by two trained facilitators. Through facilitated discussion, skills building activities, role-plays, and demonstrations, information, referrals, and risk reduction materials are delivered. In each session, participants are assigned homework assignments to practice their Peer Educator skills outside of the group setting.

### **SHIELD Target Population- Who is SHIELD for?**

SHIELD is designed for adults (18 years and older) and may be implemented with men and women as well as individuals who are HIV positive or HIV negative. SHIELD, which has primarily been implemented with heroin and cocaine users, is appropriate for former

and current drug users who interact with other drug users. While some participants have been injection drug users, others have been non-injection drug users who interact with injection drug users. Agencies may adapt SHIELD to implement with non-injection drug users or other populations such as methamphetamine users.

Peer Education requires motivation, social skills, and dedication. Therefore, it is important that a participant has a willingness and interest in conducting Peer Outreach.

In addition, participants must have frequent interactions with current drug users in order to conduct their Peer Outreach.

### **Setting**

SHIELD was originally conducted in an urban, community-based research clinic. Although the setting may vary, it is important to hold the intervention in a location that is easily accessible by the target population. It is recommended that agencies offer directions or maps of public transportation routes to the setting. Confidentiality is an important component, therefore, sessions should take place in a non-threatening, “safe” place for participants.

### **Research Findings**

The SHIELD intervention was effective at producing the following results among Peer Educators 6 months after they completed the intervention:

- Increased condom use during vaginal sex with casual sex partners (16% of Peer Educators vs. 4% of control group);
- Increased condom use during oral sex with casual sex partners (12% of Peer Educators vs. 3% of control group);
- Reduced needle sharing (69% of Peer Educators vs. 30% of control group);
- Decreased injection drug use frequency (48% of Peer Educators vs. 25% of control group); and
- Stopped using injection drugs (44% of Peer Educators vs. 22% of control group)

### **Theory behind the SHIELD Intervention**

The SHIELD intervention was built upon several psychological theories: Social Cognitive Theory, Social Identity Theory, Cognitive Dissonance (or inconsistency) Theory and Social Influence Theory. Each of these theories guides the Peer Educator approach to HIV risk reduction.

**Social Cognitive Theory** proposes that there are four components necessary for a behavior change to occur: 1) knowledge, 2) development of skills to reduce risk and regulate risk, 3) peer support to reduce risk and 4) self efficacy to reduce risk (belief that one can be successful). In the SHIELD intervention, Peer Educators received psychosocial cognitive skills training to reduce HIV risk behaviors and the opportunity to practice their skills to increase self-efficacy.

**Social Identity Theory** suggests that individuals classify themselves in terms of group labels. Once an individual begins to identify with a group, they act according to what

they perceive other group members are doing. For example, as participants attend each intervention session, they may begin to consider themselves a part of the Peer Educator group. In addition, if they perceive that other Peer Educators are similar to them, their self-efficacy for conducting peer education may increase. Also, individuals may become motivated to practice HIV risk reduction behaviors.

According to **Cognitive Dissonance Theory**, individuals want their actions to match their words. As Peer Educators begin to engage in HIV prevention outreach in their social network, they may change their own risky behaviors in order to make their behaviors and their statements consistent. By talking to their social network members (e.g., partners, friends and family members) about using condoms and not sharing needles, Peer Educators may become motivated to adopt these same risk reduction strategies. Furthermore, individuals may begin to adopt safer behaviors to maintain their credibility as Peer Educators.

**Social Influence Theory** proposes that individual behavior is shaped by observing other people in the social environment and modeling the observed behaviors. In addition, an individual is more likely to adopt a given behavior if they feel they are similar to the person they are observing. After learning risk reduction information and skills in the SHIELD intervention sessions, the Peer Educators go out into their community to share the information with their social network members. They also model safer behaviors. As social network members observe the safer behaviors of Peer Educators (who they perceive as similar to themselves) they may be influenced to change their own risky behaviors.

## B. Description of the SHIELD intervention sessions

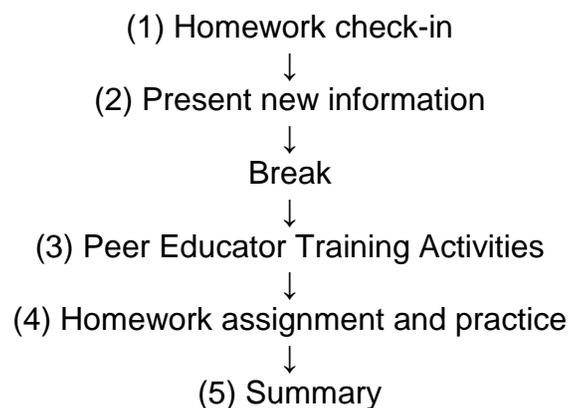
The SHIELD Facilitator Guide contains the SHIELD curriculum. Each SHIELD session begins with a Summary which includes:

- The session objectives
- An outline of the session components with suggested time allotments
- A list of the materials, forms and posters

Within each session, you will see the page divided into two columns. The left column is a list of the Procedures to follow. The right column is the suggested scripts that accompany each Procedure.

### SHIELD Session Structure

One of the SHIELD Core Elements is each session follows a specific structure. By following this structure, risk reduction and communication skills are reinforced and participants have opportunities to practice their Peer outreach. In Session 1, the focus is on introducing concepts of Peer Educator and Peer Outreach. Therefore, the primary activity is brainstorming and group discussion. Sessions 2-6 follow the same structure which is depicted in the following Figure:



Each of the numbered activities is called a Component. The following Table provides an overview of the 1) Purpose, 2) Materials and 3) Procedures of each component.

<b>SHIELD Session Structure Sessions 2-6</b>			
	<b>Purpose</b>	<b>Materials</b>	<b>Procedures</b>
(1) Homework check-in	To check-in with the participants about how their homework assignment went.	Homework review questions	1) Ask the group to describe the homework assignment from the prior session. 2) Ask each participant to share who they did their homework with and their experience. 3) Facilitators should offer positive reinforcement for using PEER communication skills and correct information. 4) Facilitators should encourage the group to help each other problem-solve barriers or negative experiences.
(2) Present New Information	To introduce or review HIV relate risk information or risk reduction options. This section of the session provides content for the homework assignment.	Varies by session	Varies by session. May include risk reduction ladders, information games, etc.
Break	To allow participants to take a break from the training activities	none	Prior to starting the break announce the specific time that the group will begin and encourage participants to return on time.
(3) Peer Educator Training Activities	To provide participants with an opportunity to practice skills.		
Group Problem-solving	To provide an opportunity for participants to review new information	Varies by session	Varies by session
Role-play	To provide an opportunity for the participants to 1) practice using communication skills and sharing new information, 2) to gain social support and positive reinforcement for using skills, 3) to problem-solve difficulties.	1) Role-play debriefing questions. 2) Role-play scenarios included in the session are options to use.	1) Ask participants if they have any scenarios related to the session topic that they would like to role-play and practice Peer Outreach and Peer Communication skills. 2) Have the participant describe the scenario to the group. 3) Ask the participant if they would like to role play with another client or with a facilitator.

			4) Role play the scenario 5) Debrief role-play
(4) Homework assignment and practice	To assign homework and provide participants with an opportunity to 1) practice the homework assignment, 2) gain support and suggestions for doing homework and 3) to assist the participant in problem-solving barriers to doing homework.	Varies by session	1) Describe homework assignment 2) Answer any questions about assignment 3) Ask for participants to volunteer to role play the homework. 4) Facilitators should offer positive reinforcement for using PEER communication skills and correct information. 5) Facilitators should encourage the group to help each other problem-solve barriers
(5) Session Wrap-up	1) To summarize and close the session and 2) To remind participants about the date and time of the next session for retention	Varies by session	Review the main points of the session and remind participants about the next scheduled session.

## C. Training Activities

There are three types of Peer Educator training activities that are utilized during the SHIELD intervention:

- Facilitator Role Model
- Group Problem-solving
- Role-play

### Training Activity Procedures

#### *Facilitator Role Model*

Description: This activity is conducted by the co-facilitators. The aim of this activity is for the facilitators to role model Peer Outreach using skills such as PEER Communication skills or risk reduction skills.

Preparation: Facilitators should prepare for the Role-Model prior to the group by assigning roles and practicing using the scripts provided.

#### Procedures during group:

- Facilitators read the scenario description to the group to “set the scene”.
- Facilitators remind the group which person is playing the Peer Educator and which is playing the peer.
- Facilitators role-play the scenario.
- Facilitator playing the Peer Educator should emphasize or exaggerate the use of good or bad Peer Educator skills based on the activity.
- Debrief the role-model by asking the group for their thoughts and suggestions about improving Peer Educator skills.

#### *Group Problem-solving*

Description: This activity is led by the co-facilitators. The aim of this activity is to involve the group in brainstorming and problem-solving together safer options and strategies for conducting Peer Outreach in different scenarios.

Preparation: Prior to the session, facilitators should review the Guide Questions for each scenario and discuss the possible correct answers.

#### Procedures during group:

- Facilitator read to the question or scenario to the group.
- Have the group volunteer their answers and/or thoughts about the question/scenario.
- Facilitators should use the Guide Questions provided with the activity to focus participant responses on accurate information from the training.
- Facilitators should have the group work together to “brainstorm” how a Peer Educator can approach the scenario and come up with specific

things that the Peer Educator can say to their peers using PEER Communication skills.

### *Role-play*

Description: This activity can be conducted between two clients or a facilitator and a client depending on the groups comfort level. The aim of this activity is to have participants practice using their Peer Educator skills in a supportive environment and gain feedback. Participants who participate in the role-play will also have the opportunity to receive suggestions for improving their skills.

Preparation: Prior to the session, facilitators should review and discuss the optional scenarios provided.

### Procedures during group:

- Facilitators ask for volunteers for the role-play; one to play the Peer Educator and one as the peer. If no one volunteers, or feels comfortable, then the facilitator can play the Peer Educator and encourage another client to play the peer or vice versa.
- Facilitators ask the volunteers/group if they have a scenario that they would like to be role-played. (Ideally, this scenario would be about a peer that one of the group members is actually conducting outreach to).
- If no one suggests a scenario, facilitators pick a scenario provided in the curriculum and read the scenario to the group to “set the scene”.
- Facilitators remind the group that the client is playing the Peer Educator
- Conduct the role-play.
- After the role-play acknowledge both volunteers.
- Facilitators should lead the group and debrief how the role-play was with the Peer Educator using their skills

Note: Facilitators may find it useful to “freeze” the role-play so that they can engage the group in problem-solving how the Peer Educator can handle the situation or give the Peer Educator suggestions. The “freeze” is not intended to distract the group from the skills practice but to clarify and enhance the practice. To “freeze” the role-play a facilitator can say “time-out” or “freeze”.

# **Section II: Trainer Information**

## A. How to use the Training of Facilitators Curriculum

### How is the training curriculum organized?

The SHIELD Training of Facilitators is a 2 ½ day training covering 25 modules. Each day includes a brief morning and afternoon break as well as a lunch period. Each of the components is labeled as Modules.

Each module is organized as a numerical series of steps that the trainer should take to get through the module. At the beginning of each module, the following information is presented:

 <p><b>Objectives of the Module</b></p>	<p>This icon signifies the objectives for a given module.</p>
 <p><b>Time</b></p>	<p>This icon indicates the recommended time frame for the module.</p>
 <p><b>Materials</b></p>	<p>This icon informs the TOF trainers of materials such as posters and other props needed during a given module.</p>

The remainder of the module is organized as three columns.

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. This column describes each activity that will be covered during the module in consecutive order.</p>	<p>Suggested scripts are provided to give trainers guidance on what information should be relayed to participants. Trainers are encouraged to use the suggested scripts until they get comfortable with each module.</p>	<p>This column informs the trainer of points to emphasize as well as which materials or slides should be used. Notes will be preceded by the following icons:</p> <p> Show slide # This icon notifies the trainer of which slide should accompany a given procedure.</p> <p> <u>Trainer's note:</u> This icon signifies suggested pointers to help the trainer get through an activity or emphasize an element of the curriculum.</p>

## References to SHIELD Facilitator’s Guide

During Modules 15-21 (SHIELD sessions), trainers will use sections from the **SHIELD Facilitator’s Guide** to demonstrate an activity. These sections are embedded into the TOF Module. An example of this reference is provided below. Trainers will continue to use the TOF (and follow the procedures for the component) but will refer trainees to the given page in the **SHIELD Facilitator Guide** to follow along.

### SESSION 4 ACTIVITY 1 HOMEWORK CHECK-IN

<b>PURPOSE</b>	Participants will discuss their experiences with doing the homework assignment.
<b>TIME</b>	20 minutes
<b>MATERIALS</b>	Poster with homework check-in questions; tape

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
Welcome participants to group.	Welcome to the fourth session of the SHIELD program. We have already completed half of your Peer Educator training, time is flying!
Review the homework check-in component session.	As we always do we want to check in to see how your homework went. If you were not able to do the homework or if the homework did not go as you wanted we still want to hear about your experience.
Ask the group to describe the homework assignment from the prior session.  ✍️ <b>FACILITATOR NOTE:</b> Session 3 homework assignment was to Share with someone new information that you learned during discussion of the sex risk reduction ladder.  Display and use poster with homework check-in questions to guide the discussion.	So unless anyone has any questions, who can remind us what your homework assignment from Session 3 was?

Ask the participants to share their homework experience.

 **FACILITATOR NOTE:**  
In the case where a participant was not able or did not do their homework, help them problem-solve so that they can avoid the barriers that they encountered.

Who would like to share how your homework went? We would like you to start by first telling us who you did your homework with and how you approached them.

[Read questions off poster]

SESSION 4 COMPONENT 1 HOMEWORK CHECK-IN



SESSION 4 COMPONENT 1 HOMEWORK CHECK-IN

**PROCEDURES**

Summarize the discussion.

**SUGGESTED SCRIPTS**

Thank you all for sharing with us. It sounds like many of you had a [insert description] experience sharing new information about sex risk and safer options.

In today's session we are going to keep talking about safer sex options and are going to focus talking with our Peers about condoms.



SESSION 4 COMPONENT 1 HOMEWORK CHECK-IN

## **B. Materials and Equipment Needed**

The following list outlines the materials and equipment needed to deliver the SHIELD training curriculum:

### Equipment

- Overhead projector (or computer laptop with LCD projector)
- Screen to project the slides
- Electronic Copy of PowerPoint slides

### Supplies

- Newsprint/Easel paper
- Easel
- Pens for participants
- Sign-in sheets
- Markers
- Push pins or masking tape (for posters)
- Male and female condoms
- Water-based Lubricants
- Safer injection materials (i.e., cookers, rinse water)
- Male condom model (to demonstrate correct use of male condoms)
- Female condom model (to demonstrate correct use of female condoms)
- Safer injection materials (syringes, cookers, cotton, water)
- Paper towels

### Materials to be distributed to participants

- Nametags
- Handouts of PowerPoint slide presentation
- SHIELD Factsheet
- Appendices

### Room Setup

Small tables with 4-6 people

### Training Of Facilitators Materials

<b>Module</b>	<b>Prepared Poster</b>	<b>Blank Poster</b>	<b>Handouts</b>	<b>Miscellaneous</b>
1 Welcome				
3 Overview	<ul style="list-style-type: none"> <li>• Training expectations</li> </ul>	<ul style="list-style-type: none"> <li>• Training expectations</li> </ul>		<ul style="list-style-type: none"> <li>• SHIELD Package</li> </ul>
4 Background	<ul style="list-style-type: none"> <li>• SHIELD definition</li> </ul>			
5 Aims & Population	<ul style="list-style-type: none"> <li>• SHIELD Aims</li> <li>• SHIELD Key Words</li> <li>• Definition of Peer Educator</li> </ul>			
6 Science behind SHIELD			<ul style="list-style-type: none"> <li>• Logic Model</li> </ul>	
7 Core Elements	<ul style="list-style-type: none"> <li>• SHIELD Core Elements</li> </ul>		<ul style="list-style-type: none"> <li>• Core Elements</li> </ul>	
10 Recruitment		<ul style="list-style-type: none"> <li>• Blank newsprint for group activity</li> </ul>		<ul style="list-style-type: none"> <li>• Markers</li> </ul>
11 Sequence	<ul style="list-style-type: none"> <li>• SHIELD Sequence</li> </ul>		<ul style="list-style-type: none"> <li>• Enrollment Form</li> </ul>	
15 Session 1	<ul style="list-style-type: none"> <li>• Group Rules</li> <li>• Definition of Peer Educator</li> <li>• Additional Peer Outreach examples</li> </ul>	<ul style="list-style-type: none"> <li>• Peer Educator</li> <li>• Peer Outreach</li> </ul>	<ul style="list-style-type: none"> <li>• Session 1 Homework assignment</li> <li>• SHIELD Calendar</li> </ul>	
17 Session 2	<ul style="list-style-type: none"> <li>• Homework Check-in questions</li> </ul>		<ul style="list-style-type: none"> <li>• Peer Communication skills cards</li> </ul>	

	<ul style="list-style-type: none"> <li>• Peer Communication skills</li> <li>• HIV 101 Poster <ul style="list-style-type: none"> <li>• Body Fluids</li> <li>• Lubricants</li> <li>• True/False</li> </ul> </li> </ul>			
18 Session 3	<ul style="list-style-type: none"> <li>• Homework check-in questions</li> <li>• Blank Risk Reduction Ladder</li> <li>• Sex Risk Reduction Ladder</li> <li>• Sex risk behavior cards</li> </ul>		<ul style="list-style-type: none"> <li>• Sex risk reduction ladder</li> </ul>	
19 Session 4			<ul style="list-style-type: none"> <li>• Male condom steps</li> <li>• Female condom steps</li> </ul>	<ul style="list-style-type: none"> <li>• Variety of Condoms</li> <li>• Variety of Lubricants</li> <li>• Dental dams</li> <li>• Male model for demonstration</li> <li>• Female model for demonstration</li> <li>• Paper towels</li> </ul>
20 Session 5	<ul style="list-style-type: none"> <li>• Blank risk reduction ladder</li> <li>• Injection behavior cards</li> <li>• Injection risk reduction ladder</li> <li>• Drug splitting risk behavior cards</li> <li>• Drug splitting risk reduction ladder</li> </ul>		<ul style="list-style-type: none"> <li>• Steps for rinsing injection equipment</li> <li>• Steps for safe splitting</li> </ul>	<ul style="list-style-type: none"> <li>• Safer injection materials (needleless syringe, cotton, water)</li> <li>• Paper towels</li> </ul>
22 Session 6				<ul style="list-style-type: none"> <li>• Graduation</li> </ul>

				<b>Certificates</b>
24 Evaluation	<ul style="list-style-type: none"> <li>• CDC Evaluation Pyramid</li> <li>• SHIELD Logic Model</li> </ul>			<ul style="list-style-type: none"> <li>• Monitoring and Evaluation Guide</li> <li>• SHIELD Process Monitoring Form</li> <li>• SHIELD Process Evaluation Form</li> <li>• SHIELD Pre-Post Test Assessment</li> <li>• SHIELD Participant Feedback Form</li> </ul>
25 Wrap up		<ul style="list-style-type: none"> <li>• Blank newsprint for group activity</li> </ul>		<ul style="list-style-type: none"> <li>• SHIELD Project Manager's Guide</li> <li>• Markers</li> </ul>

## C. Trainer Agenda

### Day 1

Module	Time Required	Suggested Schedule
Module 1: Welcome and Introductions	5 minutes	9:00-9:05am
Module 2: Ice-Breaker	20 minutes	9:15-9:35am
Module 3: Overview of Training and SHIELD Manual	10 minutes	9:05-9:15am
Module 4: SHIELD Background	10 minutes	9:35-9:45am
Module 5: SHIELD Aims and Target Population	10 minutes	9:45-9:55am
Module 6: Science Behind SHIELD	15 minutes	9:55-10:10am
Module 7: SHIELD Core Elements	25 minutes	10:10-10:35pm
<b>BREAK</b>	<b>10 minutes</b>	<b>10:35-10:45am</b>
Module 8: What SHIELD is Not	10 minutes	10:45-10:55am
Module 9: Pre-implementation	20 minutes	10:55-11:15am
Module 10: Recruitment and Retention	35 minutes	11:15-11:50am
Module 11: SHIELD Sequence	30 minutes	11:50-12:20pm
<b>LUNCH</b>	<b>60 minutes</b>	<b>12:20- 1:20pm</b>
Module 12: HIV 101	30 minutes	1:20-1:50pm
Module 13: Intro to SHIELD facilitation	15 minutes	1:50-2:05pm
<b>BREAK</b>	<b>10 minutes</b>	<b>2:05-2:15pm</b>
Module 14: SHIELD Session Structure	30 minutes	2:15-2:45pm
Module 15: SHIELD Session 1	60 minutes	2:45-3:45pm

## Day 2

Module	Time Required	Suggested Schedule
Module 16: Welcome Back & Recap of Day 1	15 minutes	9:00-9:15am
Module 17: SHIELD Session 2	90 minutes	9:15-10:45am
<b>BREAK</b>	<b>15 minutes</b>	<b>10:45-11:00am</b>
Module 18: SHIELD Session 3	90 minutes	11:00-12:30pm
<b>LUNCH</b>	<b>60 minutes</b>	<b>12:30-1:30pm</b>
Module 19: SHIELD Session 4	90 minutes	1:30-3:00pm
<b>BREAK</b>	<b>15 minutes</b>	<b>3:00-3:15pm</b>
Module 20: SHIELD Session 5	90 minutes	3:15-4:45pm

## Day 3

Module	Time Required	Suggested Schedule
Module 21: Welcome Back & Recap of Day 2	15 minutes	9:00-9:15am
Module 22: SHIELD Session 6	60 minutes	9:15-10:15am
Module 23: SHIELD Booster Sessions	45 minutes	10:15-11:00am
<b>BREAK</b>	<b>15 minutes</b>	<b>11:00-11:15pm</b>
Module 24: Evaluating the SHIELD intervention	60 minutes	11:15-12:15pm
Module 25: Wrap-up	15 minutes	12:15-12:30pm

## D. Sample Participant Agenda

### Day 1

Activity	Time Frame
Welcome and Overview of the Training	9:00-9:30am
Introduction to SHIELD Intervention	9:30-10:30am
<b>BREAK</b>	<b>10:35-10:45am</b>
Specifics of the SHIELD Intervention	10:45-12:20pm
<b>LUNCH</b>	<b>12:20-1:20pm</b>
HIV 101	1:20-1:50pm
SHIELD Facilitation	1:50-2:05pm
<b>BREAK</b>	<b>2:05-2:15pm</b>
SHIELD Session 1	2:15-3:45pm

## Day 2

Activity	Time Frame
Welcome Back & Recap of Day 1	9:00-9:15am
SHIELD Session 2	9:15-10:45am
<b>BREAK</b>	<b>10:45-11:00am</b>
SHIELD Session 3	11:00-12:30pm
<b>LUNCH</b>	<b>12:30-1:30pm</b>
SHIELD Session 4	1:30-3:00pm
<b>BREAK</b>	<b>3:00-3:15pm</b>
SHIELD Session 5	3:15-4:45pm

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## Day 3

Activity	Time Frame
Welcome Back & Recap of Day 2	9:00-9:15am
SHIELD Session 6	9:15-10:15am
SHIELD Booster Sessions	10:14-11:00am
<b>BREAK</b>	<b>11:00-11:15am</b>
Evaluating the SHIELD intervention	11:15-12:15pm
Wrap-up	12:15-12:30pm

# **Section III: TOF Curriculum**

# DAY 1



[http://www.middletownschools.org/uploaded/Board\\_of\\_Education/calendar.jpg](http://www.middletownschools.org/uploaded/Board_of_Education/calendar.jpg)

# MODULE 1

## Welcome and Introductions

## MODULE 1: Welcome & Introduction



**By the end of this module, trainees will:**

1. Be introduced to the Training of Facilitators (TOF) by the trainers.
2. Review the agenda for the 2 ½ day TOF.



**Time**  
9:00-9:05am



**Materials**

Laptop & projector

Procedures	Suggested Script	Trainer Notes & Slides
1. Welcome participants as they arrive and ask them to sign in and take training materials.	Hello. As you come in please sign in and make sure you take a packet of training materials and a name tag.	 Show slide #1 <div style="border: 1px solid black; padding: 10px; text-align: center;"> <p>Welcome to the <b>SHIELD</b> Intervention Staff Training</p> <p>Be sure to sign-in &amp; pick-up your materials</p> </div>
2. Convene the training.	Welcome everyone to the training! Could you please take your seats so that we can get started?	
3. Introduce trainers.	It's great to be here with you all! I am [name] and I am [name] and we will be your trainers for the next two days. We will be working with you to get you ready so that you can implement SHIELD in your agency. You should all have received a packet of materials for the training which includes: <ol style="list-style-type: none"> <li>1) Agenda;</li> <li>2) PowerPoint slides</li> <li>3) SHIELD Project Manager's Guide</li> <li>4) SHIELD Facilitator's Guide &amp;</li> </ol>	 <u>Trainer's note:</u> Hold up each of the materials as you list them so TOF trainees can see them.

	<p>5) SHIELD Handouts for Participants Folder.</p> <p>Does everyone have these items?</p>	
<p>4. Review housekeeping.</p>	<p>Before we take a look at the agenda let's go over a few housekeeping items: [INSERT RELEVANT INFO]</p>	 <p><u>Trainer's note:</u> Review housekeeping info that is relevant to your training site such as bathroom locations, keep cell phones on vibrate, parking information, etc.</p>
<p>5. Describe the Parking Lot and its function throughout the training.</p>	<p>Lastly, we want to point out the parking lot poster which will be posted here throughout the training. If you have a question that you do not want to ask during an activity or we are unable to address at the time, we ask that you write the question on a post-it note and stick it to the parking lot. This will ensure that we do not miss anyone's questions. You do not have to write your name on the question if you prefer not to. What questions do you have about the Parking lot?</p>	
<p>6. Review agenda for the training.</p>	<p>Let's take out the agenda so that we can walk through the two days we will be together. The first section of the training will be an overview of the SHIELD intervention and some background about the original study. Then, we have a discussion about HIV transmission and prevention. Next, we will move into the Facilitators Guide and the 6 SHIELD sessions. For the majority of the training we will be going through all 6 SHIELD sessions.</p> <p>We will be demonstrating some of the intervention activities and having you practice the sessions as well.</p> <p>Finally, we will talk about evaluating SHIELD.</p>	 <p><u>Trainer's note:</u> If a trainee asks what SHIELD stands for, reveal the newsprint poster defining what SHIELD stands for.</p>
<p>7. Summarize and transition to ice-breaker/</p>	<p>If there are no questions, let's move on to an ice-breaker.</p>	

# MODULE 2

## Ice-Breaker

## MODULE 2: Ice-Breaker

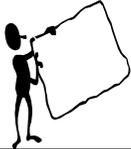


**By the end of this module, trainees will:**

1. Introduce themselves to the rest of the group.
2. Start to get comfortable in the group setting.



**Time**  
9:15-9:35am



**Materials**

Laptop & projector

Procedures	Suggested Script	Trainer Notes & Slides
1. Provide directions for the ice-breaker.	<p>We would like for you to move and sit next to someone who you do not know. Then take about 5 minutes to find out from them the following information:</p> <ul style="list-style-type: none"> <li>• Their name</li> <li>• Their agency</li> <li>• Their favorite food and</li> <li>• Their favorite vacation spot</li> </ul> <p>Are there any questions?</p>	 <p>Show slide #2</p> <div style="border: 1px solid black; padding: 5px;">  <p style="margin: 0;"><b>Ice-breaker</b></p> <ul style="list-style-type: none"> <li>• Pair off with someone that you do not know</li> <li>• Share with them:                             <ul style="list-style-type: none"> <li>– Your name and agency</li> <li>– A skill or ability you are good at</li> <li>– Create a superhero name related to skill/ability</li> <li>– Expectation for the training</li> </ul> </li> <li>• Be prepared to introduce each other to the group</li> </ul> </div>
2. Allow 5 minutes to complete ice-breaker task.	<p>We are going to give you about 5 minutes to talk to your partner. We will reconvene and would like for you to introduce each other.</p>	
3. Reconvene group and have pairs introduce each other to the larger group.	<p>Ok, time is up. Now, we'd like to go around the room and have each person introduce their partner using these 4 bullet points.</p>	 <p><u>Trainer's note:</u> Have each person introduce partner.</p>
4. Summarize and transition to SHIELD background	<p>Thank you all for coming and welcome. Now we are going to start talking about the SHIELD intervention.</p>	

# MODULE 3

## Overview of Training & SHIELD Manuals

## MODULE 3: Overview of Training and SHIELD Manuals



**By the end of this module, trainees will:**

1. Become familiar with the objectives of the TOF.
2. Describe components of the SHIELD intervention package.
3. Walk through the SHIELD Project Manager’s Guide and SHIELD Facilitators’ Guide.



**Time**  
9:05-9:15am



**Materials**

- Laptop & projector
- Newsprint: Blank
- Newsprint: Training Objectives

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Discuss participant’s training expectations.</p>	<p>Over the next 2 ½ days we are going to talk about the SHIELD intervention.</p> <p>What are some of your expectations for this training?</p>	<div style="display: flex; align-items: center;"> <p>Show slide #3</p> </div> <div style="border: 1px solid black; padding: 10px; margin: 10px 0; text-align: center;"> <hr style="width: 80%; margin: 5px auto;"/> <p>TRAINING EXPECTATIONS?</p> </div> <div style="display: flex; align-items: center; margin-top: 20px;"> <p><u>Trainer’s note:</u> Write out participant’s training expectations on a piece of newsprint.</p> </div>

<p>2. Review the training objectives.</p>	<p>Here are the training objectives that we aim to meet over the next couple of days. By the end of this training you should: know the aims of the SHIELD intervention, the 5 Core Elements of SHIELD, and the specific sequence that SHIELD participants must follow to go through this intervention.</p> <p>By the end of the training you will also be familiar with all of the activities and components of the 6 SHIELD sessions. Finally, you will be familiar with the purpose of the booster groups and its components and activities.</p> <p>What questions do you have about these objectives? We are going to keep them posted in the room throughout the session.</p>	 Show slide #4 <div data-bbox="1140 298 1523 571" style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p style="text-align: center;"><b>Training Objectives</b></p> <ol style="list-style-type: none"> <li>1) Describe the science behind the SHIELD intervention;</li> <li>2) Recognize the SHIELD Core Elements;</li> <li>3) Describe procedures for recruiting, screening, and enrolling clients into the SHIELD intervention;</li> <li>4) Demonstrate skills needed to facilitate the 6 SHIELD intervention sessions &amp; boosters;</li> <li>5) Identify activities for evaluating the SHIELD intervention</li> </ol> </div>  <b>Trainer's note:</b> Have the Training Objectives written on a piece of newsprint so that they can be posted throughout the training.
<p>3. Describe the contents of the package</p>	<p>Now we want to orient you to the contents of the SHIELD package.</p> <p>In the package there are 4 different guides or manuals: The Project Managers Guide, the Facilitators Guide, a Monitoring and Evaluation Guide and a Technical Assistance Guide.</p> <p>Each package also contains four posters and four sets of cards and a SHIELD Handouts Folder that you will use during the SHIELD sessions.</p> <p>If everyone could take out the Project Managers Guide we want to provide you with a brief overview.</p>	 Show slide #5 <div data-bbox="1084 1087 1442 1348" style="border: 1px solid black; padding: 5px; margin: 10px 0;">  <b>Contents of the Package</b> <ul style="list-style-type: none"> <li>• Four Guides <ul style="list-style-type: none"> <li>- Project Managers Guide</li> <li>- Facilitator's Guide</li> <li>- Monitoring and Evaluation Guide</li> <li>- Technical Assistance Guide</li> </ul> </li> <li>• Handouts folder</li> <li>• Ladder poster</li> <li>• Envelope with 4 sets of cards <ul style="list-style-type: none"> <li>- Sex Risk</li> <li>- Drug Injection Risk</li> <li>- Drug Sniffing Risk</li> <li>- Lube cards</li> </ul> </li> </ul> </div>

4. Walk-through the Project Manager's Guide.

The Project Manager's guide is an important resource to aide your agency in implementing SHIELD.

The first section consists of detailed background on the SHIELD research study and how SHIELD is designed to work.

Then, the guide describes the 3 stages of delivery: pre-implementation, implementation and maintenance.

The first stage is Pre-implementation which is another way of saying getting ready. Activities during this stage include doing an agency self-assessment to determine capacity including staffing, gaining stake-holder buy-in and developing a marketing and recruitment plan. There is also a list of different decisions that you agency will need to make during this phase.

The second stage is Implementation which is when you will be recruiting clients, conducting the SHIELD sessions, and engaging in evaluation and monitoring activities.

The third stage is Maintenance which provides suggestions for how to integrate SHIELD into your existing program if you want to keep offering SHIELD beyond this case agency opportunity.



Show slide #6

**How Project Manager Guide is organized**

- SHIELD Background
  - SHIELD Research Study
  - How SHIELD is designed to lower HIV risk behaviors
- Three stages of delivering SHIELD
  - Pre-implementation, implementation, & Maintenance
  - What to get, do, & think about
- Appendices



The SHIELD logo features the word "SHIELD" in a bold, sans-serif font, with a stylized yellow and green circular graphic behind the letters. Below the logo, it says "A PEPPER HARBOR PROJECT" and "Project Manager's Guide".

<p>5. Continue walking through Project Manager's Guide.</p>	<p>The Project Manager's manual includes 8 appendices. These appendices include:</p> <ul style="list-style-type: none"> <li>• Glossary of some important terms;</li> <li>• Articles describing the SHIELD research study outcomes &amp; Peer outreach;</li> <li>• Timelines &amp; action steps for each of the 3 stages of the SHIELD intervention delivery;</li> <li>• Recommended forms to be used during implementation;</li> <li>• Local &amp; internet resources;</li> <li>• And several CDC-developed documents on HIV information.</li> </ul> <p>What questions do you have about the SHIELD Project Manager's Guide?</p>	 <p>Show slide #7</p> <div data-bbox="1060 352 1536 621" style="border: 1px solid black; padding: 5px;"> <p>Project Managers Guide – Appendices</p> <ul style="list-style-type: none"> <li>• Glossary of important terms</li> <li>• Research articles</li> <li>• Timelines &amp; action steps</li> <li>• Recommended forms</li> <li>• Resources</li> <li>• CDC documents on HIV</li> </ul> </div>
<p>6. Walk-through the SHIELD Facilitators Guide.</p>	<p>Now let's talk about the SHIELD Facilitators Guide.</p> <p>This guide contains the SHIELD curriculum. Facilitators will use this guide as they deliver the SHIELD sessions. There are 3 main sections of this manual: 1) Background, 2) SHIELD curriculum; and 3) Appendices.</p>	 <p>Show slide #8</p> <div data-bbox="1105 1050 1471 1339" style="border: 1px solid black; padding: 5px;"> <p><b>How Facilitators' Guide is organized</b></p>  </div>
<p>7. Continue walking through the SHIELD Facilitator Guide.</p>	<p>The first section of this guide is an overview of SHIELD and background information for facilitators. Specifically, this section includes:</p> <ul style="list-style-type: none"> <li>• Overview of the SHIELD intervention</li> <li>• Introduction to the Guide</li> <li>• SHIELD Training Activities</li> <li>• SHIELD Session Structure</li> <li>• Set-up &amp; Preparation tips</li> </ul>	 <p>Show slide #9</p> <div data-bbox="1055 1598 1547 1906" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b><u>Facilitators Guide</u></b></p> <ul style="list-style-type: none"> <li>• Section 1: SHIELD Background <ul style="list-style-type: none"> <li>– Background info on SHIELD</li> <li>– Core Elements</li> <li>– Peer Educator training activities</li> <li>– SHIELD session structure</li> <li>– Materials needed</li> </ul> </li> </ul> </div>

<p>8. Continue reviewing the second section of the SHIELD Facilitators Guide.</p>	<p>The next section is the SHIELD curriculum. This section provides details on each of the 6 SHIELD sessions</p> <p>Each of the SHIELD sessions is a different color so it's easy to tell when one session ends and another begins.</p> <p>Each SHIELD session includes a lot of detail. Specifically, each session includes:</p> <ul style="list-style-type: none"> <li>• Session Objectives</li> <li>• Outline of session activities and times</li> <li>• Materials needed</li> <li>• Preparation steps</li> <li>• Procedures</li> <li>• Suggested scripts; and</li> <li>• Take-home points</li> </ul>	 Show slide #10 <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b><u>Facilitators Guide</u></b></p> <ul style="list-style-type: none"> <li>• Section 2: SHIELD Curriculum <ul style="list-style-type: none"> <li>– Session objectives</li> <li>– Outline of the session components with suggested time allotments</li> <li>– List of the materials, forms and posters needed for the session</li> <li>– Session preparation tasks</li> <li>– Session take-home points</li> </ul> </li> </ul> </div>
<p>9. Continue reviewing the second section of the SHIELD Facilitators Guide.</p>	<p>Within each component, you will see the page divided into two columns. The left column is a list of the procedures to follow. The right column is the suggested scripts that accompany each procedure.</p> <p>Following the summary, there is a detailed description of each component of the SHIELD sessions is presented.</p>	 Show slide #11 <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b><u>Facilitators Guide</u></b></p> <ul style="list-style-type: none"> <li>• Section 2: SHIELD Curriculum <ul style="list-style-type: none"> <li>– Detailed description of each component of the SHIELD sessions is presented.</li> <li>– Within each component, you will see the page divided into two columns. <ul style="list-style-type: none"> <li>• Left column: Procedures to follow.</li> <li>• Right column: Suggested scripts that accompany each procedure.</li> </ul> </li> </ul> </li> </ul> </div>

<p>10. Review Facilitators Notes</p>	<p>Throughout the sessions you may see italicized text labeled Facilitators Notes.</p> <p>These are included to provide facilitators with clarifications and suggestions for conducting activities to ensure that they are consistent with the original research.</p>	 <p>Show slide #12</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Facilitators Guide</u></b></p> <ul style="list-style-type: none"> <li>• Facilitator Notes: <ul style="list-style-type: none"> <li>- Written in italicized text and accompanied by a hand &amp; pencil icon.</li> <li>- Meant to provide clarification and suggestions for conducting each activity in order to be consistent with the original intention of the SHIELD intervention.</li> </ul> </li> </ul> </div>
<p>11. Discuss how to use the SHIELD curriculum for practice.</p>	<p>To prepare for each session, facilitators should review the outline and procedures within each component.</p> <p>Also, facilitators should follow the recommended preparation tasks that are included at the beginning of each session.</p> <p>To practice, we suggest reading the suggested scripts first and then as you become more comfortable with the procedures and scripts you can tailor to your own style.</p>	 <p>Show slide #13</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>SHIELD Preparation</u></b></p> <ul style="list-style-type: none"> <li>• Using the Facilitators Guide: <ul style="list-style-type: none"> <li>- Review the outline and procedures within each component.</li> <li>- Follow the recommended preparation tasks that are included at the beginning of each session.</li> <li>- Read the suggested scripts first and then as you become more comfortable with the procedures and scripts you can tailor to your own style.</li> </ul> </li> </ul> </div>
<p>12. Review the third section of the Facilitator Guide</p>	<p>The 3<sup>rd</sup> section of the Facilitator guide is a set of appendices which include:</p> <ul style="list-style-type: none"> <li>• Poster descriptions</li> <li>• Process evaluation forms</li> <li>• General Facilitator Tips &amp;</li> <li>• HIV &amp; Injection 101 review</li> </ul> <p>What questions do you have about the SHIELD Facilitators Guide?</p>	 <p>Show slide #14</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Facilitators Guide</u></b></p> <ul style="list-style-type: none"> <li>• Section 3: Appendices: <ul style="list-style-type: none"> <li>- I. Poster description</li> <li>- II. Homework Assignment Goals</li> <li>- III. Facilitator Debriefing</li> <li>- IV. Facilitator Summary Guidelines</li> <li>- V. Supervisor Rating Forms</li> <li>- VI. General Facilitation Skills</li> <li>- VII. HIV and Injection Drug Use 101</li> </ul> </li> </ul> </div>

<p>13. Introduce the SHIELD Handouts Folder.</p>	<p>The SHIELD Handouts Folder accompanies the SHIELD Facilitators' Guide.</p> <p>This folder includes handouts that you are going to distribute to SHIELD participants during the sessions. These handouts include:</p> <ol style="list-style-type: none"> <li>1) Calendar of Sessions</li> <li>2) Information sheets</li> <li>3) Homework cards</li> <li>4) Scenarios cards (which will be used in the role-plays).</li> </ol> <p>Facilitators will take out these handouts and make copies to distribute to the participants during various sessions.</p> <p>In the footer of each handout is the session when it should be passed out.</p>	 <p>Show slide #15</p> <div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: 80%;"> <p style="text-align: center;"><b>SHIELD Handouts Folder</b></p> <ul style="list-style-type: none"> <li>• Accompanies SHIELD Facilitator Guide</li> <li>• This folder includes handouts that you are going to distribute to SHIELD participants during the sessions <ul style="list-style-type: none"> <li>- Calendar of SHIELD sessions</li> <li>- Information sheets</li> <li>- Homework cards</li> <li>- Scenarios cards (which will be used in the role-plays).</li> </ul> </li> </ul> </div>
<p>14. Describe the posters and poster cards</p>	<p>Each package contains four printed posters:</p> <ul style="list-style-type: none"> <li>• One is a ladder with no words printed on it</li> <li>• One is labeled sex risk ladder</li> <li>• One is labeled Injection risk ladder and</li> <li>• The fourth is labeled Drug splitting ladder</li> </ul> <p>You will also have 3 envelopes labeled sex risk ladder cards, Injection cards and drug splitting cards. These will be used for the ladder activities.</p> <p>To improve the longevity of the blank ladder poster, you may choose to place Velcro on the back of the cards and run a strip of Velcro along one side of the blank ladder because the ladder activity requires that the cards are placed and re-arranged on the poster.</p>	 <p>Show slide #16</p> <div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: 80%;"> <p style="text-align: center;"> <b>Risk Ladders and Cards</b></p> <ul style="list-style-type: none"> <li>• Four posters <ul style="list-style-type: none"> <li>- Blank</li> <li>- Sex risk ladder</li> <li>- Injection risk ladder</li> <li>- Drug splitting ladder</li> </ul> </li> <li>• Three sets of ladder cards</li> <li>• May choose to use velcro on blank ladder and cards</li> </ul>  </div>
<p>15. Summarize and transition to ice-</p>	<p>What questions do you have about the materials in your packet?</p>	 <p>Show slide #17</p>

breaker.

Now let's getting started with an overview of what the SHIELD study was about.



# MODULE 4

## SHIELD Background

## MODULE 4: SHIELD Background



**By the end of this module, trainees will:**

1. State what the letter SHIELD stands for.
2. Be informed about the SHIELD Study's background, purposes, and scientific results.



**Time**  
9:35-9:45am



**Materials**

Laptop & projector  
Newsprint: SHIELD definition

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Describe the original SHIELD study.</p>	<p>To begin, SHIELD stands for Self Help in Eliminating Life-Threatening Diseases and it was conducted by Dr. Carl Latkin in Baltimore, Maryland.</p>	<div style="display: flex; align-items: center;"> <p>Show slide #18</p> </div> <div style="border: 1px solid black; padding: 10px; margin: 10px 0; text-align: center;"> <p><b>SHIELD</b></p> <p><u>S</u>elf <u>H</u>elp <u>I</u>n <u>E</u>liminating <u>L</u>ife-threatening <u>D</u>iseases</p> </div> <div style="display: flex; align-items: center;"> <p><u>Trainer's note:</u> Display a poster with the SHIELD definition to remind participants of it throughout the training.</p> </div>
<p>2. Describe the purpose of original study and the sample.</p>	<p>The original SHIELD study was designed to train current and former drug users to be Peer Educators so that they could conduct outreach to their peers and share HIV prevention information in the community. They were also trained in skills to reduce injection and sex related risk behaviors.</p> <p>The original SHIELD study was based on 4 behavioral theories: 1) Social Cognitive Theory</p>	<div style="display: flex; align-items: center;"> <p>Show slide #19</p> </div> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p style="text-align: center;"><b>SHIELD Research Study</b></p> <ul style="list-style-type: none"> <li>• Funded by National Institute on Drug Abuse (NIDA)</li> <li>• Johns Hopkins School of Public Health in Baltimore MD in the late 1990's</li> <li>• Carl Latkin, PhD, was the Principal Investigator</li> <li>• Participants who received the intervention were predominately:             <ul style="list-style-type: none"> <li>- African-American,</li> <li>- Male (60%)</li> <li>- Average age= 30 years</li> <li>- Unemployed,</li> <li>- Less than a high school education</li> </ul> </li> <li>• Former and current heroin and cocaine drug users were trained to be Peer Educators</li> </ul> </div>

	<p>2) Social Identity Theory 3) Cognitive Dissonance and 4) Social Influence Theories</p> <p>We will be discussing these theories a little later this morning.</p> <p>The majority of participants in the original SHIELD study was African American, unemployed and had less than a high school education.</p>	
<p>3. Describe the scientific results of the SHIELD study.</p>	<p>Study participants were followed for 6 months and the SHIELD intervention was found to be effective in reducing needle sharing and injection drug use as well as increasing condom use with casual partners.</p>	 Show slide #20 <div data-bbox="1117 737 1495 989" style="border: 1px solid black; padding: 5px;"> <p><b>SHIELD Research Study</b> <small>(continued)</small></p> <ul style="list-style-type: none"> <li>• Six months, after they completed the SHIELD intervention, Peer Educators reported: <ul style="list-style-type: none"> <li>- Increased condom use with casual sex partners;</li> <li>- Reduced needle sharing;</li> <li>- Decreased injection drug use;</li> <li>- Increased injection drug use cessation</li> </ul> </li> </ul> </div>
<p>4. Describe additional benefits that study participants reported.</p>	<p>Participants from the original study also reported additional benefits from the SHIELD intervention including learning new information and skills, gaining pride in being able to help others and having increased self esteem.</p>	 Show slide #21 <div data-bbox="1110 1140 1487 1440" style="border: 1px solid black; padding: 5px;"> <p><b><u>Benefits of completing the SHIELD intervention</u></b></p> <ul style="list-style-type: none"> <li>• Learn new information &amp; skills to be safer</li> <li>• Gain pride in being a part of the solution in the fight against HIV in their community</li> <li>• Increased self-esteem</li> <li>• Increased respect from family &amp; friends</li> <li>• Gives participants a pro-social role (i.e., helping others which benefits the community)</li> </ul> </div>
<p>5. Explain the purpose of training former &amp; current drug users.</p>	<p>Some of you may be asking yourself- “Why should we train drug users to be Peer Educators?”</p> <p>Training current and former drug users as Peer Educators to interact with drug users is an efficient HIV prevention technique.</p> <p>Peer Educators are more likely to</p>	 Show slide #22 <div data-bbox="1117 1619 1487 1839" style="border: 1px solid black; padding: 5px;"> <p><b><u>Why train drug users to be Peer Educators?</u></b></p> <ul style="list-style-type: none"> <li>• Efficient HIV prevention strategy</li> <li>• May reach individuals who are hard to reach and don't access traditional HIV prevention services</li> <li>• Makes drug users a part of HIV prevention</li> </ul> </div>

	<p>have access to drug users in the community, especially those who may not access traditional prevention services. Peer Educators may reach individuals on a level that you and your staff may not be able to achieve.</p> <p>Also, by training current and former users as Peer Educators, they become active in the community effort to stop the spread of HIV.</p>	
<p>6. Summarize and transition to SHIELD aims.</p>	<p>What questions do you have about the SHIELD study?</p> <p>Let's move on to talk about the goals of SHIELD.</p>	

# MODULE 5

## **SHIELD Aims and Target Population**

## MODULE 5: SHIELD Aims and Target Population

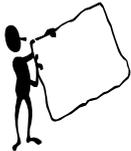


**By the end of this module, trainees will:**

1. Discuss the 2 aims of the SHIELD intervention.
2. Recognize the target population for the SHIELD intervention.
3. Define 3 key terms that are essential to the SHIELD Intervention.



**Time**  
9:45-9:55am



**Materials**

- Laptop & projector
- Newsprint: SHIELD aims
- Newsprint :SHIELD key terms
- Newsprint: definition of Peer Educator

Procedures	Suggested Script	Trainer Notes & Slides
1. Describe what SHIELD is.	<p>So what is SHIELD?</p> <p>SHIELD is 6 fun and interactive small group based sessions. The sessions last about 90 minutes and are co-led by 2 facilitators.</p> <p>The sessions are designed to train participants in skills to conduct Peer Outreach and to reduce their own HIV risk behaviors.</p>	 <p>Show slide #23</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p style="text-align: center;"><b>What is SHIELD?</b></p> <ul style="list-style-type: none"> <li>• 6 fun and interactive small group sessions</li> <li>• Each session lasts about 90 minutes</li> <li>• Led by 2 Facilitators</li> <li>• The Peer Educator training focuses on skills-building:                             <ul style="list-style-type: none"> <li>- PEER communication skills</li> <li>- Risk reduction skills</li> </ul> </li> </ul> </div>
2. Describe SHIELD aims.	<p>SHIELD aims to do 2 things. First it trains individuals to be Peer Educators who conduct outreach and share HIV risk reduction information. Specifically, Peer Educators are trained in communication skills so that they can talk to their peers about HIV and risk reduction.</p> <p>Second, SHIELD trains Peer Educators in skills to reduce their own injection and sex risk behaviors. These skills include condom use, cleaning and not sharing needles and abstinence.</p>	 <p>Show slide #24</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p style="text-align: center;"><b>SHIELD Aims</b></p> <ol style="list-style-type: none"> <li>1. To train individuals to be Peer Educators who conduct outreach with peers by sharing HIV risk reduction information                             <ul style="list-style-type: none"> <li>- PEER Communication Skills</li> </ul> </li> <li>2. To reduce Peer Educators' own HIV risk behaviors                             <ul style="list-style-type: none"> <li>- Safer injection skills</li> <li>- Safer sex skills</li> </ul> </li> </ol> </div>



Trainer's note: Have these aims written on newsprint and posted throughout the training.



Show slide #25



**Who is SHIELD for?**

- Males and females
- Adults (18+ years)
- HIV positive and HIV negative clients
- Current or former drug users
  - Primarily implemented with heroin & cocaine users
  - May be adapted for other types of drug users

Must interact with current drug users

3. Specify the target population for the SHIELD intervention.

As we have said, SHIELD is designed for current or former drug using adults of all genders and individuals who may be HIV positive or negative.

SHIELD has primarily been conducted with heroin and cocaine users. However, it can be adapted for other types of drug use.

Also, SHIELD has been implemented with injection drug users and individuals who do not inject drugs but interact with injection drug users.

If you are interested in implementing SHIELD with other types of drug-using populations, we encourage you to contact your CBA provider.

Most importantly, SHIELD is a program for individuals who interact with other drug users on a regular basis (i.e., at least once a week). SHIELD peer educators do peer outreach with individuals who are at risk.

Who can tell me why this is a criterion for SHIELD? [Answer: because SHIELD aims to train individuals to conduct HIV prevention outreach]

4. Describe the SHIELD group composition.

The original SHIELD study was implemented in groups ranging from 4-12 participants. Keep in mind that based on experience, the ideal number of participants is 6-8. Prior to implementation, your agency should decide on the number of participants



Show slide #26

**SHIELD Group Composition**

- Ideally 5-8 participants
- Can be mixed gender
- Can be mixed serostatus
- Other things to consider: age of participants, recovery & active drug users, stage in your program, etc.

	<p>that will be allowed in one group. Too few participants can make role-plays and group-problem solving difficult and too many can be chaotic. Groups can be mixed gender and mixed HIV status.</p> <p>You and your agency should discuss whether you want your groups to be mixed age groups and whether to separate participants who are active users versus in recovery.</p> <p>What questions do you have about who the SHIELD intervention is for?</p>	
<p>5. Define SHIELD Key terms.</p>	<p>Before we move on to the 5 SHIELD Core Elements we want to recap some of the key terms that we have been using so far to describe SHIELD.</p> <p>SHIELD is an intervention designed to train Peer Educators to conduct Peer Outreach using communication skills which we call Peer Communication skills.</p> <p>And, this Peer Outreach is done with people in their social networks including friends, partners, families, etc.</p>	<p> Show slide #27</p> <div data-bbox="1118 871 1479 1127" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b>SHIELD Key Terms</b></p>  <pre> graph LR     PE[Peer Educators] -- PEER COMMUNICATION SKILLS --&gt; PO((Peer Outreach to Social Network))           </pre> </div> <p> <u>Trainer's notes:</u> As you mention each key term, click the mouse so that the animated visual is activated.</p> <p>Have a newsprint poster of these key terms posted throughout the training.</p>
<p>6. Summarize and transition to SHIELD Core Elements.</p>	<p>We realize that many people have heard about Peer Education. Peer Education can mean a lot of different things to different people. When we start talking about the SHIELD intervention sessions, we will talk a lot about Peer Education. For now, we want to introduce the SHIELD definition of Peer Educator. So, forget what you may have heard</p>	<p> Show slide #28</p> <div data-bbox="1118 1623 1487 1887" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b>SHIELD Peer Educators</b></p> <ul style="list-style-type: none"> <li>• A Peer Educator is someone who conducts outreach to their peers by sharing HIV risk reduction information and resources with them so that they can be safer.</li> </ul> </div>

about Peer Education from other people and remember this definition.

*A SHIELD Peer Educator is someone who conducts outreach to their peers by sharing HIV risk reduction information and resources with them so they can be safer.*

We want to emphasize that Peer outreach is not done with strangers. Rather, peer educators talk to people in their social network like friends, family, sex partners, drug partners, etc. As we will discuss later, Peer outreach is a more effective, comfortable experience, when Peer Educators talk to people that they know.

We are going to keep the definition displayed on newsprint throughout the training to remind us.

What questions do you have about these definitions or what the purpose of the SHIELD program is?

Ok, now we are going to talk the theory and science behind SHIELD.



Trainer's note: Have a newsprint poster of the definition of SHIELD Peer Educator posted throughout the training.

# MODULE 6

## Science Behind SHIELD: Theories and Logic Model

## Module 6: Science Behind SHIELD: Theories & Logic Model



**By the end of this module, trainees will:**

1. Discuss the 3 main behavioral theories that guide the SHIELD intervention.
2. Walk through the SHIELD Logic Model.



**Time**

9:55-10:10am



### Materials

Laptop & projector  
Handout: Logic Model

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Describe the theories behind the SHIELD intervention.</p>	<p>The SHIELD intervention is guided by 4 theories. They theories come from psychology and the study of health behavior.</p> <ol style="list-style-type: none"> <li>1) Social Cognitive Theory</li> <li>2) Social Identity Theory</li> <li>3) Cognitive Dissonance Theory</li> <li>4) Social Influence Theory</li> </ol> <p>There is more detail on their theories in the Project Manager's Guide. We encourage you to read that section before you start SHIELD at your agency.</p>	<p> Show slide #29</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p style="text-align: center;"><b>Theories Behind SHIELD</b></p> <ul style="list-style-type: none"> <li>• Social Cognitive Theory</li> <li>• Social Identity Theory</li> <li>• Cognitive Dissonance</li> <li>• Social Influence Theory</li> </ul> </div>
<p>2. Discuss Social Learning Theory.</p>	<p>The first theory is called <b>Social Cognitive Theory</b>.</p> <p>This theory proposes that there are four components necessary for a behavior change to occur: 1) knowledge, 2) development of skills to reduce risk and regulate risk, 3) peer support to reduce risk and 4) self efficacy to reduce risk (belief that one can be successful). In the SHIELD intervention, Peer Educators received psychosocial cognitive skills training to reduce HIV risk behaviors and the opportunity to</p>	<p> Show slide #30</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p style="text-align: center;"><b>Social Cognitive Theory</b></p> <ul style="list-style-type: none"> <li>• 4 components necessary for a behavior change               <ol style="list-style-type: none"> <li>1) Knowledge</li> <li>2) Development of skills to reduce risk and regulate risk</li> <li>3) Peer support to reduce risk</li> <li>4) Self efficacy to reduce risk (Belief that one can be successful)</li> </ol> </li> </ul> <div style="border: 1px solid black; padding: 5px; margin-top: 5px; font-size: small;"> <p>In the SHIELD intervention, Peer Educators received psychosocial cognitive skills training to reduce HIV risk behaviors and the opportunity to practice their skills to increase self-efficacy.</p> </div> </div>

	<p>practice their skills to increase self-efficacy.</p>	
<p>3. Describe Social Identity Theory.</p>	<p>The second theory is called Social Identity theory.</p> <p>Social Identity Theory has to do with our habit of classifying ourselves in terms of group labels. All of us are HIV prevention professionals. Some of us are mothers and fathers, some are sports fans. Each of these groups is a label that we give ourselves based on who we are or what we do.</p> <p>Social Identity theory says that as a person starts to identify with a group, they start to act according to what they think the group would do.</p> <p>In terms of SHIELD, as participants attend each intervention session, they may begin to consider themselves a part of the Peer Educator group. In addition, if they perceive that other Peer Educators are similar to them, their self-efficacy for conducting peer education may increase. Also, individuals may become motivated to practice HIV transmission risk reduction to lower their own risk.</p>	 Show slide #31 <div data-bbox="1105 369 1511 705" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Social Identity Theory</u></b></p> <ul style="list-style-type: none"> <li>• We identify with groups &amp; assign labels <ul style="list-style-type: none"> <li>– HIV prevention professionals</li> <li>– Mothers and Fathers</li> <li>– Sports Fans</li> </ul> </li> <li>• Once we identify with a group, we like accordingly</li> </ul> <div data-bbox="1133 625 1487 680" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p style="font-size: small;">As participants attend SHIELD sessions, they will start to build a Peer Educator identity. This higher will build their self-efficacy for Peer Outreach. They will start to do and say things that Peer Educators promote.</p> </div> </div>
<p>4. Discuss Cognitive Dissonance Theory.</p>	<p>4. Discuss Cognitive Dissonance Theory.</p> <p>This theory has to do with our interest in making sure that our actions match our words. Most of us don't want to be seen as a hypocrite. People aren't going to listen to us if we don't seem credible. How many of us who smoke have told our kids not to smoke? In that case, they may blow us off since we don't practice what we preach.</p> <p>As Peer Educators begin to engage in HIV prevention outreach in their social</p>	 Show slide #32 <div data-bbox="1117 1465 1523 1787" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Cognitive Dissonance</u></b></p> <ul style="list-style-type: none"> <li>• Want to practice what we preach</li> <li>• Don't want to be seen as a hypocrite</li> </ul> <div data-bbox="1143 1707 1497 1761" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p style="font-size: small;">As Peer Educators talk to their social network members about HIV risk reduction, they will begin to change their own behaviors so they are seen as credible</p> </div> </div>

	<p>network, they may change their own risky behaviors in order to make their behaviors and their statements consistent. By talking to their social network members about risk reduction, Peer Educators may begin to change their own risky behaviors to maintain their credibility as Peer Educators.</p>	
<p>5. Discuss Social Influence Theory</p>	<p>The fourth Theory is called <b>Social Influence Theory</b>.</p> <p>This theory is based on the principle that our behavior is shaped by what we see in our environment. We see people doing things and then start to model their behaviors. Think about when you bought a DVD player. Chances are you got it after you started hearing about it or people you know started getting them.</p> <p>This theory is related to norms. We tend to do what we think the rest of the group is doing. We are more likely to follow the pack when we perceive that they are similar to use.</p> <p>After learning risk reduction information and skills in the SHIELD intervention sessions, the Peer Educators go out into their community to share the information with their social network members. They also model safer behaviors. As social network members observe the safer behaviors of Peer Educators they may be persuaded to change their own risky behaviors.</p>	 Show Slide # 33 <div data-bbox="1102 688 1513 978" style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b><u>Social Influence Theory</u></b></p> <ul style="list-style-type: none"> <li>• Learn by observing other people</li> <li>• Model others' behaviors</li> <li>• More likely to follow people that are like us</li> </ul> <div data-bbox="1136 898 1502 955" style="border: 1px solid black; padding: 5px; margin-top: 10px; font-size: small;"> <p>Peer Educators talk to their social networks about risk reduction &amp; start modeling safer behaviors. Since Peer Educators are a similar, social network members are likely to change their behaviors, too.</p> </div> </div>

<p>6. Describe link between the theories and the importance of fidelity.</p>	<p>Individuals in the SHIELD study are trained to be Peer Educators which is a Social Identity that is defined as helping others be safer – through practicing the different training activities they develop self-efficacy in being a Peer Educator (Social Cognitive Theory) engaging in outreach and promoting safer options thus role modeling and influencing their networks to be safer. If there is a dissonance between their outreach messages and the Peer Educators behavior (e.g., they encourage cleaning needles but do not clean their own needles) this dissonance will either lead to abandoning the Peer Educator identity or increasing the safer behaviors that they are promoting.</p> <p>Think of the 4 SHIELD theories as the four wheels of a car, with the body of the car being the SHIELD intervention. While a car can run with only three or even two wheels, it won't run as smoothly or go as far. Thus, it is important to maintain fidelity to the SHIELD intervention because removing or changing aspects could result in removal of an integral aspect of one of the theories and you'll end up with a car with one less wheel.</p>	 <p>Show Slide # 34</p> <div data-bbox="1096 315 1380 525" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>SHIELD Theories Connection</b></p> </div>
<p>7. Transition to the SHIELD Logic Model.</p>	<p>What questions do you have about these 4 theories?</p> <p>The next part of the science behind SHIELD is called the SHIELD Logic Model.</p>	
<p>8. Introduce the SHIELD Logic Model.</p>	<p>The SHIELD Logic Model illustrates how the SHIELD intervention is designed to decrease risky behaviors among participants. Think of it as a recipe for how to properly implement SHIELD to get a certain desired outcome.</p>	 <p>Show slide #35</p> <div data-bbox="1144 1669 1518 1890" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>SHIELD Logic Model</b></p> <ul style="list-style-type: none"> <li>• Problem Statement</li> <li>• Behavioral Determinants</li> <li>• Activities</li> <li>• Outcomes <ul style="list-style-type: none"> <li>– Immediate</li> <li>– Intermediate</li> </ul> </li> </ul> </div>

	<p>The SHIELD Logic Model is included on page 12 of your Facilitators Guide. Please take that out so we can briefly walk through it.</p>	 <p><u>Trainer's note:</u> As you walk through the Logic Model, define each of the column headers and read a few things listed in each column.</p>
<p>9. Emphasize the SHIELD aims.</p>	<p>As noted previously, SHIELD has 2 aims. In order to achieve these aims, SHIELD focuses on 3 sets of skills: communication safer sex, and safer injection.</p> <p>As a Peer Educator, participants learn risk reduction skills and information that they diffuse throughout their social network by using their communication skills. Through peer outreach, they begin to change their own risky behaviors in order to maintain credibility as a Peer Educator.</p> <p>Keep this is mind when we go through the Logic Model.</p>	 <p><u>Trainer's note:</u> Point to the SHIELD Aims poster when going through the aims.</p>
<p>10. Discuss Problem Statement Box.</p>	<p>The first part of the logic model, found in the top row of the logic model, describes the problem that SHIELD is trying to overcome and offers a solution- Peer Education.</p> <p>SHIELD is designed for former &amp; current drug users who are at risk for HIV through their sex and drug behaviors.</p> <p>Some of the main risk factors for this group include: lack of knowledge, lack of risk reduction supplies, lack of skills, and lack of social support for practicing risk reduction.</p>	 <p>Show slide #36</p> <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b><u>Problem Statement</u></b></p> <ul style="list-style-type: none"> <li>• <b>Who?</b> <ul style="list-style-type: none"> <li>– Former &amp; current drug-using adults who may be HIV+ or HIV-</li> </ul> </li> <li>• <b>What?</b> <ul style="list-style-type: none"> <li>– Risky injection &amp; sex behaviors</li> </ul> </li> <li>• <b>Why?</b> <ul style="list-style-type: none"> <li>– Lack of knowledge, skills, materials, and social support</li> </ul> </li> </ul> </div>

<p>11. Discuss Behavioral Determinants Column.</p>	<p>The first column that we come to is called Behavioral Determinants. The SHIELD intervention is designed to cause changes on several psychosocial characteristics, or determinants that influence an individual's behavior. These determinants are all related to the four psychosocial theories that we covered earlier. By altering these behavioral determinants, the SHIELD intervention will lead to behavior change. SHIELD is designed to increase self-efficacy for Peer outreach and help Peer Educators build a Peer Educator identity. Some of the individual determinants that SHIELD focuses on are knowledge, self-efficacy, attitudes, and intentions towards risk reduction.</p>	 <p>Show slide #37</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Behavioral Determinants</u></b></p> <ul style="list-style-type: none"> <li>• Peer Educator Self-efficacy</li> <li>• Peer Identity</li> <li>• Knowledge</li> <li>• Attitudes</li> <li>• Self-efficacy</li> <li>• Intentions</li> </ul> </div>
<p>12. Discuss Activities Column.</p>	<p>The second column consists of Activities in the SHIELD intervention.</p> <p>Peer Educators learn communication skills which we call PEER Communication skills. They also participate in skills-building activities to help build their outreach skills.</p> <p>From the individual perspective, participants learn about risk reduction through games, demonstrations, role plays, and discussions.</p>	 <p>Show slide #38</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Activities</u></b></p> <ul style="list-style-type: none"> <li>• PEER Communication Skills</li> <li>• Interactive, skills-building activities &amp; practice</li> <li>• Discussions</li> <li>• Risk ladders</li> <li>• Demonstrations</li> <li>• Games</li> </ul> </div>
<p>13. Discuss Immediate outcomes Box.</p>	<p>Next we come to the outcomes. Outcomes refer to the overall goals of the SHIELD intervention. What are we hoping happens after a participant goes through the SHIELD intervention?</p> <p>In the logic model, there are immediate outcomes and intermediate outcomes.</p> <p>Immediate outcomes are what happen a week or 2 after the intervention.</p> <p>Peer Educators have increased self-efficacy for Peer Outreach so they start</p>	 <p>Show slide #39</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Immediate Outcomes</u></b></p> <ul style="list-style-type: none"> <li>• Self-efficacy for peer outreach</li> <li>• Diffusion to social network members</li> <li>• Promote norms about risk reduction</li> <li>• Increased Knowledge</li> <li>• Positive Attitudes about risk reduction</li> <li>• Increased self-efficacy for risk reduction</li> <li>• Increased Intentions to practice risk reduction</li> </ul> </div>

	<p>diffusing information and resources to their social network members.</p> <p>Individuals also gain knowledge about their own risk and begin to take steps to change their own risky behaviors.</p>	
<p>14. Discuss Intermediate outcomes.</p>	<p>The last column is Intermediate outcomes. These outcomes are changes that happen a little later such 1-6 months after the intervention.</p> <p>From the Peer Educator perspective, social network members start using the information and skills Peer Educators passed on to them. Also, Peer Educators start having pride in helping their community.</p> <p>Individuals start practicing risk reduction options that include condom use, decreased needle sharing, and some may even start to seek drug treatment.</p>	 <p>Show slide #40</p> <div data-bbox="1104 583 1526 861" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Intermediate Outcomes</u></b></p> <ul style="list-style-type: none"> <li>• Peer Educators have increased pride</li> <li>• Increased safer sex &amp; safer injection practices</li> <li>• Drug treatment enrollment</li> <li>• Decreased drug use overall</li> </ul> </div>
<p>15. Wrap up the Logic Model and transition to the Core Elements.</p>	<p>What questions do you have about the SHIELD logic model?</p> <p>In the Project Manager’s Guide, there is some more detail about the Logic Model. So, we encourage you to read that section.</p> <p>Now, we are going to get to the heart of SHIELD. We are going to discuss the SHIELD Core Elements.</p>	

# MODULE 7

## SHIELD Core Elements

## MODULE 7: SHIELD Core Elements



**By the end of this module, trainees will:**

1. Articulate the 5 SHIELD Core Elements



**Time**

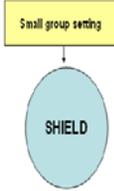
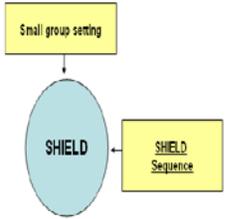
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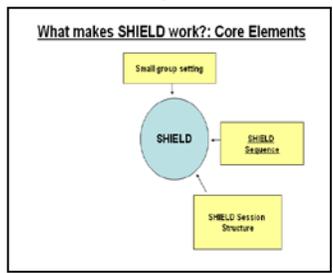
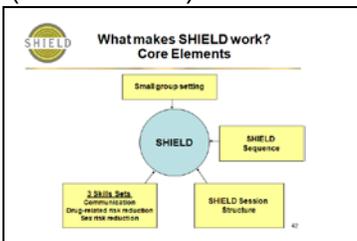
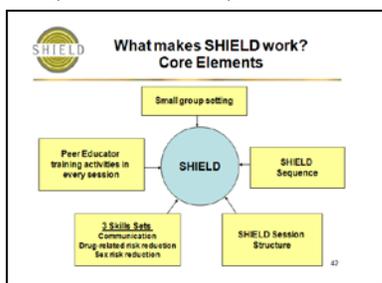


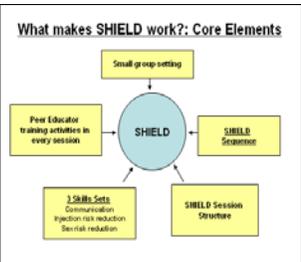
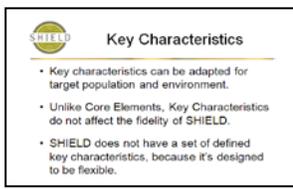
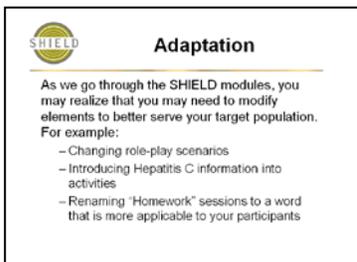
**Materials**

Laptop & projector  
 Newsprint: Core Elements  
 Handout: Core Elements

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Introduce the concept of a core element.</p>	<p>We have talked so far about how SHIELD was found to be effective in changing injection and sex risk behaviors.</p> <p>Specific components of the original SHIELD intervention have been determined to be the underlying reasons for the effective behavior change and these components are referred to as Core Elements.</p> <p>It is essential to adhere to these Core Elements as you implement SHIELD at your agency. If you do not adhere to all 5 then you will not be doing the SHIELD intervention and may not see the same results in behavior change.</p>	<div style="display: flex; align-items: center;"> <p>Show slide #41</p> </div> <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b><u>Core Elements</u></b></p> <ul style="list-style-type: none"> <li>Components of the intervention that have been determined to be the underlying reasons for effective behavior change.</li> <li>Cannot be changed when implemented.</li> <li>Not sticking to the Core Elements means you are not implementing SHIELD</li> <li>The SHIELD intervention has <b>FIVE</b> Core Elements</li> </ul> </div>
<p>2. Point out the Core Elements handout for trainees.</p>	<p>Each of the Core Elements and their rationale are described on the handout in your packet if you want to take that out to read along.</p>	

<p>3. Describe Core Element 1 and its rationale.</p>	<p>First, SHIELD is implemented in a <u>small group setting</u>.</p> <p>By small group we mean about 4-12 participants. A small group setting offers an environment that is conducive to sharing experiences with other group members and getting support and motivation from the group. Also, in a small group participants are able to observe their group members using Peer Educator skills, which facilitates their learning. The small group is very important.</p>	 <p>Show slide #42 (Animated Slide)</p> <div data-bbox="1097 359 1479 655"> <p><u>What makes SHIELD work?: Core Elements</u></p>  </div>
<p>4. Describe Core Element 2 and its rationale.</p>	<p>The next Core Element is that there is a <u>specific sequence</u> that participants must go through in order to complete the SHIELD intervention.</p> <p>First in the sequence is the pre-program contact which is a time where potential participants are screened for SHIELD.</p> <p>Then eligible participants must start the SHIELD sessions with Session 1 and proceed through Session 6.</p> <p>The SHIELD sequence is the most effective way for participants to flow through each step of the program. We are going to talk more about the SHIELD sequence a little later today.</p>	 <p>Show slide #42 (click mouse)</p> <div data-bbox="1102 919 1479 1264"> <p><u>What makes SHIELD work?: Core Elements</u></p>  </div>

<p>5. Describe Core Element 3 and its rationale.</p>	<p>The third core element is that each SHIELD session follows a <u>specific structure</u>.</p> <p>We will be spending more time after the break describing this structure but what is important to know is that the structure allows participants to be trained in skills to be Peer Educators and to practice these skills during each session. The Session Structure is very important for implementing SHIELD.</p>	 <p>Show slide #42 (click mouse)</p> 
<p>6. Describe Core Element 4 and its rationale.</p>	<p>The fourth Core Element is that the SHIELD sessions aim to build <u>3 sets of skills</u> necessary for participants to be Peer Educators.</p> <p>These skills are:</p> <ol style="list-style-type: none"> <li>1) Communication skills,</li> <li>2) <b>Drug-related risk</b> reduction skills and</li> <li>3) Sex risk reduction skills.</li> </ol>	 <p>Show slide #42 (click mouse)</p> 
<p>7. Describe Core Element 5 and its rationale.</p>	<p>Finally, every session includes Peer Educator training activities to reinforce the 3 Peer Educator skills and to build self efficacy to do Peer Outreach. These Peer Educator Training activities are designed to be fun and interactive. As we will discuss later, each of the 6 SHIELD sessions will have a different focus. But, each session will include Peer Educator training activities.</p>	 <p>Show slide #42 (click mouse)</p> 

<p>8. Review the 5 Core Elements and transition to break.</p>	<p>That was a lot of information. These Core Elements will make more sense as we get into the sessions themselves.</p> <p>In summary, remember:</p> <ol style="list-style-type: none"> <li>1. SHIELD is implemented in a small group setting,</li> <li>2. There is a specific SHIELD sequence,</li> <li>3. Each session has a specific structure,</li> <li>4. SHIELD builds 3 sets of skills and</li> <li>5. In each session there are interactive Peer Educator training activities.</li> </ol> <p>What questions do you have right now about the 5 SHIELD Core Elements?</p>	 <p>Show slide #42</p>   <p><u>Trainer notes:</u> As you are reviewing the 5 Core Elements point to each on the slide.</p> <p>Display newsprint with Core Elements figure</p>
<p>9. Discuss Key Characteristics</p>	<p>In some intervention trainings, we have talked about key characteristics. These are components of the intervention that can be changed without affecting fidelity of the intervention.</p> <p>SHIELD was designed to be flexible, so it does not have a set of defined key characteristics.</p>	 <p>Show slide #43</p> 
<p>10. Discuss guidelines for adaptation.</p>	<p>Some agencies may want to adapt some parts of the SHIELD session. As we go through the curriculum, you may have some ideas for changes parts like role-play scenarios or adding information about topics like Hepatitis or STIs.</p> <p>We encourage you to talk to us or your CBA liaison to get some guidance on making adaptations.</p>	 <p>Show slide #44</p> 

	<p>Remember, if you make changes, you may not change the core elements. If you add, omit, or change a core element, you will be implementing an intervention but it will not be SHIELD.</p> <p>What questions do you have any adaptation?</p>	
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# MODULE 8

**What SHIELD is NOT**

## MODULE 8: What SHIELD is NOT



**By the end of this module, trainees will:**

1. Recognize what the SHIELD intervention is not designed to do for participants.



**Time**  
10:45-10:55am



**Materials**

Laptop & projector

Procedures	Suggested Script	Trainer Notes & Slides
1. Introduce the module as focused on describing what SHIELD is not.	<p>We have spent a good deal of time describing to you what SHIELD is.</p> <p>You probably have clients coming to your agency seeking lots of different services. Therefore, it is just as important to understand what SHIELD is NOT.</p>	
2. Describe what SHIELD is NOT.	<p>First, <b>SHIELD is not a support group</b>. Although participants are encouraged to share experiences and offer social support, the group sessions focus on a specific curriculum to teach Peer Outreach skills and risk reduction skills. Clients that are in need of support groups should be referred to other services. Clients may participate in SHIELD and a support group simultaneously.</p> <p>Also, <b>SHIELD is not drug treatment or a recovery group</b>. The SHIELD program covers a lot of different options to lower one's risk for HIV. One option is drug treatment. However, there are many other options for people who want to continue using drugs like cleaning their needles.</p> <p>The information and skills included in</p>	<p> Show slide #45</p> <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b><u>What SHIELD is NOT</u></b></p> <ul style="list-style-type: none"> <li>• Support Group</li> <li>• Drug treatment or recovery group</li> <li>• Job training/preparation</li> </ul> </div>

	<p>SHIELD may not be appropriate for people who are solely seeking drug treatment. It is really important to assess the appropriateness for this individual being enrolled in SHIELD based on their interest in drug treatment services and we will be talking about that screening process shortly.</p> <p>Finally, <b>SHIELD is not a Job Training program.</b> SHIELD is a Peer Educator training program. Peer Educators conduct peer outreach on a volunteer basis. Some SHIELD participants may feel like being a Peer Educator is a “job” and this training may enable and facilitate them in obtaining employment. Agencies should clarify with participants that they are not employees of that agency.</p> <p>Are there any questions about this?</p>	
<p>3. Transition to Break</p>	<p>We are going to take a 10 minute break now. When we come back we will talk about getting ready to implement SHIELD.</p>	<p> Show slide #46</p> <div data-bbox="1076 1251 1450 1499" style="border: 1px solid black; padding: 10px;">  <hr style="border: 1px solid orange;"/> <p style="text-align: center;">10 minute break</p>  </div>

# MODULE 9

## Pre-implementation

## MODULE 9: Pre-implementation



**By the end of this module, trainees will:**

**Time**  
10:55-11:15am

1. Review staffing patterns and preparations
2. Describe resources and materials needed.
3. Discuss staff training and practice.



**Materials**

Laptop & projector

Procedures	Suggested Script	
<p>1. Introduce pre-implementation module.</p>	<p>So far you have been provided with a description of the SHIELD intervention and some background on how the intervention works. Now, we are going to talk about some of the tasks you should do to get ready to implement the intervention.</p>	<p>Trainers note:</p>  Show slide# 47  <div style="border: 1px solid black; padding: 10px; text-align: center;"> <p><u>Getting ready to implement SHIELD</u></p> </div>
<p>2. Review Pre-implementation tasks.</p>	<p>When we talk about pre-implementation, we want to think about:</p> <ul style="list-style-type: none"> <li>• Staffing</li> <li>• Resources</li> <li>• Logistics</li> <li>• Training &amp; practice</li> <li>• Evaluation</li> </ul>	<p>Trainers note:</p>  Show slide# 48  <div style="border: 1px solid black; padding: 10px;">  <p><b>Pre-implementation Tasks</b></p> <ul style="list-style-type: none"> <li>• Staffing</li> <li>• Resources</li> <li>• Logistics</li> <li>• Training &amp; practice</li> <li>• Evaluation</li> </ul> </div>
<p>3. Describe staffing patterns</p>	<p>In order for SHIELD to be successfully implemented, four staff roles are needed. These positions include:</p> <ul style="list-style-type: none"> <li>• One Program Manager at 50%</li> <li>• Two Facilitators at 50% each</li> </ul>	<p>Trainers note:</p>  Show slide# 49

	<ul style="list-style-type: none"> <li>• One Recruiter at 50%</li> </ul> <p>It is possible for 1 person to fulfill 2 of these roles.</p>	<div data-bbox="1154 216 1433 415" style="border: 1px solid black; padding: 5px;"> <p align="center"><b>SHIELD Staffing Pattern</b></p> <ul style="list-style-type: none"> <li>• Program Manager- 50%</li> <li>• 2 Facilitators- 50% (each)</li> <li>• Recruiter- 50%</li> </ul> <p align="center"><small>Other agency staff like receptionists, translators, etc should be familiar with the program</small></p> </div>
<p>4. Discuss Project Manager position.</p>	<p>The Project Manager is responsible for the daily operations of the SHIELD program and staff supervision, as well as ensuring that the program goals are met.</p> <p>Here is a list of specific responsibilities of the Project Manager.</p> <p>The Project Manager should read and get familiar with the Project Manager’s Guide.</p>	<p>Trainers note:</p>  <p>Show slide# 50</p> <div data-bbox="1170 653 1456 852" style="border: 1px solid black; padding: 5px;"> <p align="center"><b>Project Manager tasks</b></p> <ul style="list-style-type: none"> <li>• Overall oversight of SHIELD implementation</li> <li>• Hiring/Supervision of facilitators and recruiter</li> <li>• Debriefing with Facilitators after intervention sessions</li> <li>• Monitoring fidelity of the interventions</li> <li>• Overseeing evaluation activities</li> <li>• Staff training (initial and on-going)</li> <li>• Monitoring recruitment, retention and quality assurance</li> <li>• Meeting with recruiters</li> <li>• Stock up facilitation of intervention sessions</li> <li>• Identifying &amp; requesting areas where Technical Assistance is needed</li> </ul> </div>
<p>5. Discuss Facilitators.</p>	<p>The two Facilitators are responsible for preparation and delivery of the SHIELD intervention sessions. They also serve as a source for referrals (i.e., medical, social services, etc) and information for participants.</p> <p>Later on we are going to talk about why having 2 facilitators is strongly preferred as well as the benefits of co-facilitation.</p>	<p>Trainers note:</p>  <p>Show slide# 51</p> <div data-bbox="1117 1146 1414 1346" style="border: 1px solid black; padding: 5px;"> <p align="center"><b>Facilitators Tasks</b></p> <ul style="list-style-type: none"> <li>• Preparing intervention materials</li> <li>• Setting up and cleaning intervention room</li> <li>• Delivering SHIELD intervention sessions</li> <li>• Debriefing with Project Manager</li> <li>• Preparing SHIELD Group summaries</li> <li>• Assisting with collection of evaluation data</li> <li>• Screening potential participants</li> <li>• Assisting with recruitment &amp; reminder co-facilitators</li> <li>• Setting up database on health information</li> <li>• Forwarding referrals to participants</li> <li>• Ordering supplies for group sessions</li> <li>• Maintaining a repository of community resources</li> </ul> </div>
<p>6. Review recruiter position.</p>	<p>The Recruiter is responsible for spreading the word about the SHIELD intervention to get participants signed-up. They may recruit through street outreach or interacting with other agencies who can be referral sources.</p> <p>Here is a list of other tasks that the recruiter will be involved in.</p>	<p>Trainers note:</p>  <p>Show slide# 52</p> <div data-bbox="1131 1598 1442 1787" style="border: 1px solid black; padding: 5px;"> <p align="center"><b>Recruiter tasks</b></p> <ul style="list-style-type: none"> <li>• Conducting street outreach</li> <li>• Posting flyers in community locations</li> <li>• Keeping detailed notes on recruitment activities</li> <li>• Assisting with screening of potential participants</li> <li>• Establishing linkages with community agencies for referrals</li> <li>• Photographing flyers &amp; advertisements</li> <li>• Making reminder calls/sending letters to participants</li> <li>• Distributing HIV information &amp; risk reduction materials during street outreach</li> </ul> </div>

<p>7. Describe activities for getting staff ready to implement.</p>	<p>We anticipate that the people in this room today are going to fulfill most of these roles. While a few of your staff were able to attend this intensive training, there may be others who will play a role in the SHIELD program or need to know about the SHIELD program who were not here.</p> <p>We recommend holding an orientation meeting with your full staff to inform them about SHIELD and to provide them with a description of SHIELD and what the goals of this program are. During this meeting you can assign or clarify staff roles on the project and discuss as a team what training activities are needed to be ready to begin recruitment. We recommend establishing concrete timelines for all assignments and training activities so that expectations are clear.</p>	<p>Trainers note:</p>  <p>Show slide# 53</p> <div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Getting Staff Ready to Implement SHIELD</b></p> <ul style="list-style-type: none"> <li>• Hold an orientation meeting</li> <li>• Review goals of the SHIELD Program</li> <li>• Identify additional training activities needed</li> <li>• Clarify roles and responsibilities</li> </ul> </div>
<p>8. Review resources needed information.</p>	<p>Staff are one of the most critical resources needed to implement SHIELD.</p> <p>The SHIELD intervention is a low-cost intervention that requires minimal materials. In the SHIELD Program Manager’s Guide, we have a worksheet that agencies can use to estimate their budget for implementing SHIELD. This worksheet includes all essential items including staff, intervention materials, equipment, incentives, etc.</p> <p>Detailed information required for each intervention session is described in the Facilitator Guide.</p>	<p>Trainers note:</p>  <p>Show slide# 54</p> <div style="border: 1px solid black; padding: 5px;">  <p style="text-align: center;"><b>Resources and Materials</b></p> <ul style="list-style-type: none"> <li>• Administrative resources- telephone, computer, etc.</li> <li>• Group room</li> <li>• Newsprint &amp; Posters</li> <li>• Easel &amp; Tape</li> <li>• Markers</li> <li>• Participant Incentives</li> <li>• Condoms and models</li> </ul> <p style="font-size: small; text-align: center;">The Facilitator Guide provides details about what specific materials are needed for each SHIELD session.</p> </div>

<p>9. Introduce logistics.</p>	<p>After your have the staff and the materials, there are several logistics that you need to figure out.</p> <p>There are a number of decisions that you and your agency will need to make prior to implementing SHIELD.</p> <p>Where are you going to hold the sessions? Does your facility have a large room?</p> <p>Your project goals and budget may dictate how many clients you need to serve in a given period. This will impact the frequency of the sessions and how many participants will be in each group.</p> <p>Who will make up your group? We have described for you the typical participants in SHIELD. Your agency needs to decide if the groups will be comprised of older and younger participants? How about former and current drug users?</p> <p>Finally, will your agency provide incentives? In the next section, we will talk more about incentives and how they may help retention of clients.</p>	<p>Trainers note:</p>  Show slide# 55
<p>10. Discuss training and practice activities.</p>	<p>Once your staff and resources are set, it's important to set aside time for practice and preparation before your clients come into the program.</p> <p>Facilitators will need to allot and dedicate a substantial amount of time so that your co-facilitators can practice the SHIELD sessions.</p> <p>In addition to your facilitators, other staff should also practice describing the Pre-program contact, which we will discuss a little later.</p>	<p>Trainers note:</p>  Show slide# 56

**Logistics**

- Location
- Timing & frequency of sessions
- SHIELD Group Composition
  - Number, Age, Drug use status, etc.
- Participant incentives

**In-house training & practice**

- Review decisions with staff
- Practice the Pre-program contact
- Practice using evaluation tools
- Facilitators walk-through material and conduct mock sessions

<p>11. Introduce Evaluation.</p>	<p>If your agency is planning to conduct an evaluation, staff should get familiar with the evaluation tools before the SHIELD sessions begin.</p> <p>Evaluation really starts with recruitment and continues throughout the duration of the program.</p> <p>Later in the training, we are going to talk about evaluation activities.</p>	<p>Trainers note:</p>  <p>Show slide# 57</p> <div data-bbox="1133 396 1458 579" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b><u>Evaluation</u></b></p> <ul style="list-style-type: none"> <li>· Begins with recruitment</li> <li>· Occurs before, during, and after SHIELD sessions</li> </ul> </div>
<p>12. Transition to next section.</p>	<p>What questions do you have about getting ready to implement SHIELD?</p> <p>Now, we are going to talk about recruitment.</p>	

# MODULE 10

## Recruitment and Retention

## MODULE 10: Recruitment and Retention



**By the end of this module, trainees will:**

1. Share ideas for recruitment and retention of SHIELD participants.
2. List potential incentives for SHIELD participants.



**Time**  
11:15-11:50am



**Materials**

Laptop & projector  
Newsprint: Blank  
Markers (for group activity)

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Introduce client recruitment section.</p>	<p>The target population for SHIELD can be a hard to reach and engage population.</p> <p>It is important to think about recruitment and retention strategies early on.</p> <p>We are going to spend some time right now working in small groups to share some of your knowledge, experience and ideas about recruitment and retention for the SHIELD program.</p>	<p> Show slide # 58</p> <div style="border: 1px solid black; padding: 10px; text-align: center;"> <p><b><u>Recruitment and Retention:</u></b></p> <p><b>Getting clients into the SHIELD Program</b></p> <p><b>Keeping Clients Engaged throughout the program</b></p> </div>
<p>2. Divide participants into 4 groups. Give them <b>10 minutes</b> to brainstorm and record their ideas in small groups.</p> <p>(15 minutes including transition into groups)</p>	<p>We are going to have you count off from 1-4. In your groups you will have 10 minutes to brainstorm a specific question about recruitment or retention. Your questions are on this slide.</p> <p>Use the newsprint and markers to record your ideas and be prepared to share back with the full group at the end of the 10 minutes.</p>	<p> Show slide # 59</p> <div style="border: 1px solid black; padding: 10px;"> <p><b>4 Groups: Brainstorm</b></p> <ul style="list-style-type: none"> <li>• <b>Group 1: Recruitment Strategies:</b> What are some recruitment strategies that your agency currently uses, has used in the past, or that you think would be effective for recruiting current and former drug users for the SHIELD intervention?</li> <li>• <b>Group 2: Recruitment Messages:</b> What are some key messages you might want to convey about SHIELD during your recruitment efforts?</li> <li>• <b>Group 3: Retention Strategies:</b> How can you keep clients engaged throughout all 6 sessions of SHIELD? How can you retain them and keep them coming to all 6 sessions?</li> <li>• <b>Group 4: Incentives:</b> What are some incentives that your agency uses or that you think would be good to use during SHIELD?</li> </ul> </div>

		 <p><b>Trainer's note:</b> Pass out a copy of the brainstorm activity.</p>
<p>3. Report back from small group brainstorms.</p> <p>(20 minutes total—5 minutes for each of the 4 groups)</p>	<p>Let's each back from each of the groups.</p>	 <p>Show slide # 60</p> <div data-bbox="984 506 1321 716" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Report Back</b></p> <ul style="list-style-type: none"> <li>• What did your group come up with?</li> <li>• Anything others would like to add?</li> <li>• Key points to take away.</li> </ul> </div>  <p><b>Trainer's note:</b> Go in order of the 4 questions listed. After each group presents back their ideas, allow the whole group to add to the list. After the whole group has commented, the facilitator can add anything omitted and show the appropriate slides.</p>
<p>4. Ask participants to share their small group brainstorm about <b>recruitment strategies</b>.</p> <p>Allow other participants to contribute to the list.</p> <p>Describe any recruitment strategies or key points that were not mentioned by participants.</p> <p>(5 minutes)</p>	<p><b>Group 1 Question:</b> What are some recruitment strategies that your agency currently uses, has used in the past, or that you think would be effective for recruiting current and former drug users for the SHIELD intervention?</p> <p><b>Key points:</b> Some strategies that we have found to be very useful in reaching SHIELD participants are:</p> <ol style="list-style-type: none"> <li>1) Street outreach</li> <li>2) Referrals from other agencies</li> <li>3) Media sources like newspaper or the radio; and</li> <li>4) Word-of mouth</li> </ol>	 <p>Show slide #61</p> <div data-bbox="1143 1209 1495 1430" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Recruitment Strategies</b></p> <ul style="list-style-type: none"> <li>• Street outreach</li> <li>• Other agencies</li> <li>• Newspaper, radio, newsletters, etc.</li> <li>• Word-of-mouth</li> </ul> </div>

5. Ask participants to share their small group brainstorm about **recruitment messages**.

Allow other participants to contribute to the list.

Describe any recruitment messages or key points that were not mentioned by participants.

(5 minutes)

**Group 2 Question:** What are some key messages you might want to convey about SHIELD during your recruitment efforts?

**Key Points:** Some messages that have been used in the past to recruit SHIELD participants are:

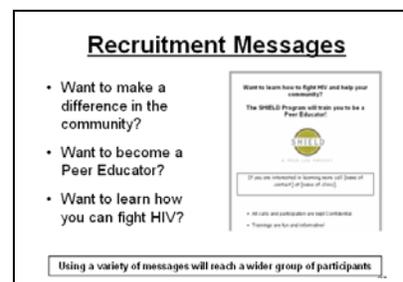
- *Want to make a difference in the community?*
- *Want to become a Peer Educator?*
- *Want to learn how you can fight HIV?*

On this slide you can see an example of a recruitment flyer.

It may also be helpful to have a script for the recruiters to follow in the beginning that enables them to describe SHIELD and answer questions from potentially interested individuals.



Show slide #62



**Recruitment Messages**

- Want to make a difference in the community?
- Want to become a Peer Educator?
- Want to learn how you can fight HIV?

Want to learn how to fight HIV and help your community?  
The SHIELD Program will train you to be a Peer Educator!

If you are interested in learning more call Steve at 604-273-2121 or visit us at [www.shield.ca](http://www.shield.ca)

All calls and questions are kept confidential  
• Trainings are for adults only

Using a variety of messages will reach a wider group of participants

<p>6. Ask participants to share their small group brainstorm about <b>retention strategies</b>.</p> <p>Allow other participants to contribute to the list.</p> <p>Describe any retention strategies or key points that were not mentioned by participants.</p> <p>(5 minutes)</p>	<p><b>Group 3 Question:</b> How can you retain clients and keep them coming to all 6 sessions of SHIELD?</p> <p><b>Key Points:</b> As we said earlier, the SHIELD program is 6 sessions. That means that participants are making a <b>big time commitment</b> to be in the program. And, we want to ensure that they stick with the program. Just as recruiting clients is important, retention of clients is essential to program success.</p> <p>We encourage you to make reminder calls before each session. Simply calling participants and saying “<i>We look forward to seeing you in the session tomorrow</i>” will motivate them to come.</p> <p>Another effective strategy is sending thank you cards. These cards help client feel appreciated and motivated to keep coming to the program.</p> <p>Another strategy is to offer incentives.</p>	 <p>Show slide #63</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p style="text-align: center;"><b><u>Retention</u></b></p> <ul style="list-style-type: none"> <li>• Reminder calls or letters <ul style="list-style-type: none"> <li>– Date &amp; Times of Sessions</li> <li>– <i>We look forward to seeing you in the session tomorrow.</i></li> </ul> </li> <li>• Thank you cards</li> <li>• Incentives</li> </ul> </div>
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Show slide #64

**Incentives**

- Gift cards
- Food
- Transportation
- SHIELD paraphernalia- t-shirts, water bottles, etc.
- Raffles
- Certificates

Most important in the beginning. Once clients buy into the idea of Peer Education, incentives may not be needed.

7. Ask participants to share their small group brainstorm about **incentives**.

Allow other participants to contribute to the list.

Describe any incentives or key points that were not mentioned by participants.

(5 minutes)

**Group 4 Question:** What are some incentives that your agency uses or that you think would be good to use during SHIELD?

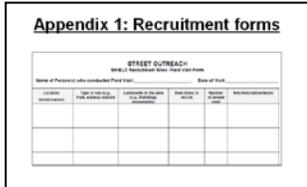
**Key Points:** In the original research study, participants were given monetary incentives for coming to the intervention sessions.

In our experiences, food, transportation, and raffles have worked really well. However, your agency can choose the incentives that you think will work best within your agency and with your budget.

A simple incentive that participants really like is a certificate of completion. This certificate acknowledges participants for all of the Peer Outreach that they do. And, it helps them feel proud of what they accomplished. When we start talking about Session 6, we will talk more about certificates.

We realize that budget may limit your options of incentives that you can provide. Try to find donated items from local business for incentives such as donuts or coupons for a free beverage.

It is also our experience that providing incentives in the beginning 2-3 sessions are more effective in engaging clients, but less important once participants become engaged in the process of becoming a Peer Educator. Once participants start buying into the Peer Educator approach, they will have internal motivation for coming to the sessions and may not need tangible incentives.

<p>8. Summarize the recruitment and retention module.</p>	<p>Before your agency implements the SHIELD program, it should take time to develop a plan for recruitment and retention. The plan should include:</p> <ol style="list-style-type: none"> <li>1) Potential recruitment sites</li> <li>2) Recruitment messages</li> <li>3) Retention strategies, etc.</li> </ol> <p>As you go along, this plan may change because you make learn about some recruitment sites that are more effective than others. Or, you may come up with some new ideas for incentives.</p> <p>We encourage you to take time early on to think about recruitment and retention strategies because they are so important for the success of the program.</p> <p>What questions do you have about recruitment and retention?</p>	 Show slide #65  
<p>9. Introduce evaluation.  (5 minutes for this and the following 2 sections combined)</p>	<p>While many people think of evaluation as something that comes at the end, evaluation for SHIELD starts with recruitment.</p> <p>In the Monitoring &amp; Evaluation Guide, there are a few forms that are useful to keep track of recruitment efforts.</p>	 Show slide #66  
<p>10. Describe recruitment forms.</p>	<p>Appendix 1 includes 2 forms to keep track of street outreach and engagement with community agencies (pgs 14 and 15 in the M&amp;E Guide). Use these forms to keep notes about the site and best time to go.</p>	 Show slide #67  



# MODULE 11

## SHIELD Sequence

## MODULE 11: The SHIELD Sequence



**By the end of this module, trainees will:**

1. Recognize the 3 activities of the SHIELD Sequence.
2. Review the objectives of the Pre-program contact.
3. Walk through each of the sections of the SHIELD enrollment form.



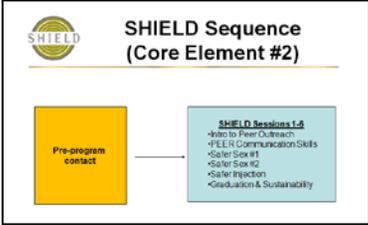
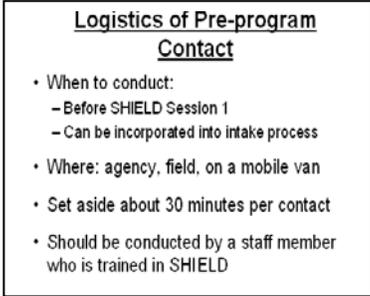
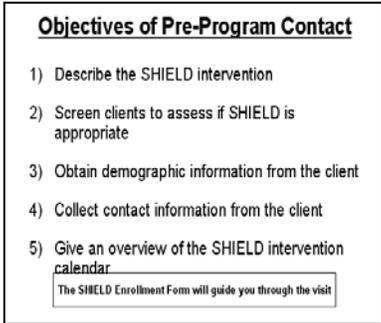
**Time**  
11:50-12:20pm



**Materials**

Laptop & projector  
Newsprint: SHIELD Sequence

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Remind participants that one of the Core Elements is the SHIELD sequence.</p>	<p>As we said earlier, one of the core elements is:</p> <p><i>Participants go through the SHIELD intervention in a specified sequence that includes pre-program contact and six intervention sessions.</i></p>	<div style="display: flex; align-items: center;"> <p>Show slide #69</p> </div> <div style="border: 1px solid black; padding: 10px; text-align: center; margin: 10px 0;"> <p><b><u>The SHIELD Sequence</u></b></p> </div>
<p>2. Walk through the SHIELD sequence.</p>	<p>Participants start this sequence with the Pre-Program Contact and then proceed through Sessions 1 through 6. Each of the 6 sessions build upon each other.</p> <p>This sequence is important to ensure that participants who begin the SHIELD intervention are committed to being a Peer Educator and to enable them in becoming a Peer Educator.</p> <p>Next we will describe in more detail each step of the SHIELD sequence.</p>	<div style="display: flex; align-items: center;"> <p>Show slide #70</p> </div> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <div style="display: flex; justify-content: space-between; align-items: center;"> <p><b>SHIELD Sequence (Core Element #2)</b></p> </div> <div style="display: flex; justify-content: space-around; align-items: center; margin-top: 10px;"> <div style="border: 1px solid black; padding: 5px; background-color: #e0f2f1;">Pre-program contact</div> <div style="margin: 0 10px;">→</div> <div style="border: 1px solid black; padding: 5px; background-color: #e0f2f1;"> <p><b>SHIELD Sessions 1-6</b></p> <ul style="list-style-type: none"> <li>&lt;Start to Peer Outreach</li> <li>&lt;PEER Communication Skills</li> <li>&lt;Start Session 1</li> <li>&lt;Start Session 2</li> <li>&lt;Start Injection</li> <li>&lt;Graduation &amp; Sustainability</li> </ul> </div> </div> </div> <div style="margin-top: 10px;"> <p><b><u>Trainer's note:</u></b> Have a poster with the SHIELD sequence figure written on it.</p> </div>

<p>3. Introduce participants to the first activity of the SHIELD sequence: Pre-program contact.</p>	<p>The first activity in the SHIELD sequence is the pre-program contact. This contact is really important because it is a time to talk to your clients about the SHIELD intervention and determine if a Peer Educator training program is appropriate for them. The intervention requires a significant commitment from the participant so taking the time before your clients begin is important for their success.</p>	 Show slide #71  <p>The diagram shows the SHIELD Sequence (Core Element #2). It consists of a yellow box labeled 'Pre-program contact' followed by a blue box labeled 'SHIELD Sessions 1-6'. The blue box lists the following topics: 'Intro to Peer Outreach', 'PEER Communication Skills', 'Safer Sex #1', 'Safer Sex #2', 'Safer Injection', and 'Graduation &amp; Sustainability'.</p>
<p>4. Discuss logistics of the pre-program contact.</p>	<p>We recommend leaving about 30 minutes for the pre-program contact which should be done by a staff member who has been trained on SHIELD such as any of you who are here today.</p> <p>This contact can be incorporated into your agency's existing infrastructure. For example, it can be done as part of your standard intake process. The pre-program contact can be conducted in a range of settings such as an office, in the field or on a mobile van.</p>	 Show slide #72  <p><b>Logistics of Pre-program Contact</b></p> <ul style="list-style-type: none"> <li>• When to conduct: <ul style="list-style-type: none"> <li>– Before SHIELD Session 1</li> <li>– Can be incorporated into intake process</li> </ul> </li> <li>• Where: agency, field, on a mobile van</li> <li>• Set aside about 30 minutes per contact</li> <li>• Should be conducted by a staff member who is trained in SHIELD</li> </ul>
<p>5. Review objectives of the Pre-program contact.</p>	<p>Here are the objectives of the pre-program contact:</p> <ol style="list-style-type: none"> <li>1. Describe the SHIELD intervention</li> <li>2. Screen clients, using Screening questions, to assess if a Peer Educator training is appropriate</li> <li>3. Obtain demographic information from client</li> <li>4. Collect contact information from client</li> <li>5. Provide client with the SHIELD intervention session schedule</li> </ol>	 Show slide #73  <p><b>Objectives of Pre-Program Contact</b></p> <ol style="list-style-type: none"> <li>1) Describe the SHIELD intervention</li> <li>2) Screen clients to assess if SHIELD is appropriate</li> <li>3) Obtain demographic information from the client</li> <li>4) Collect contact information from the client</li> <li>5) Give an overview of the SHIELD intervention calendar</li> </ol> <p>The SHIELD Enrollment Form will guide you through the visit</p>

<p>6. Introduce SHIELD Enrollment form.</p>	<p>In your packet is the SHIELD enrollment form. Please take that out.</p> <p>The SHIELD enrollment form is designed to guide the pre-program contact. It will assist your agency with recording how many people have been told about SHIELD through your agency and how many have been screened. Finally this is a useful tool to gather background &amp; contact information from eligible clients.</p>	 Show slide #74 <div data-bbox="1089 300 1498 575" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p style="text-align: center;"><b>SHIELD Enrollment Form</b></p>  </div>
<p>7. Point out Section A of the Enrollment Form.</p>	<p>In section A you will be describing the SHIELD study.</p> <p>Some things that you can to describe SHIELD are:</p> <ul style="list-style-type: none"> <li>• “The SHIELD program is a fun and education program where you will get trained to be a Peer Educator.”</li> <li>• As a Peer Educator they will learn about different ways that they can help others be safer from HIV.</li> <li>• The SHIELD program is 6 sessions that meet for about 90 minutes each.</li> </ul> <p>After describing the intervention, if your client seems interested in getting screened you can explain that you will be asking them a few questions to screen them.</p> <p>Both describing the program &amp; seeing if the client is interested in being screened should be recorded on <u>Section A</u> of the enrollment form.</p> <p>Does everyone see Section A of the Enrollment form?</p>	 Show slide #75 <div data-bbox="1089 774 1487 1050" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p style="text-align: center;"><b>Section A: Describe SHIELD</b></p> <div data-bbox="1138 877 1438 978" style="border: 1px solid gray; padding: 5px;"> <p><b>A. Describe the SHIELD Intervention</b></p> <p>1. Agency staff provided information about SHIELD to the client: <input type="checkbox"/> Y <input type="checkbox"/> N (eg. post, e of session, etc.)</p> <p>2. Client is interested in being screened SHIELD: <input type="checkbox"/> Y (Proceed to Section B) <input type="checkbox"/> N (end of visit, offer additional resources)</p> </div> </div>
<p>8. Review Section B: SHIELD screening</p>	<p>Section B of the SHIELD Enrollment form includes the recommended</p>	 Show slide #76

questions.

questions that should be asked by your agency to assess if the SHIELD intervention is appropriate for a given client. The responses that are italicized indicate good candidates for the SHIELD intervention. As you ask each question, record it on the Enrollment Form.

Some agencies may want to ask them verbatim. Others may want to use them to guide the conversation. Your agency can decide what works best for you and your clients.

Peer Education requires motivation, social skills, and dedication. Therefore, it is important that a participant has a willingness and interest in conducting Peer Outreach. In addition, participants must have frequent interactions with current drug users in order to conduct their Peer Outreach. Since some individuals who are in recovery may have difficulty interacting with active drug users, it is important to assess if peer education is appropriate for each client.

If your agency determines that SHIELD is not appropriate for a client, be sure to provide the client with referrals to other programs or services in your area.

If the client is not eligible, you do not need to record any more information on this form. But, you should provide referrals to other programs.

## Section B: SHIELD Screening

1. How often do you interact with other drug users?  
 Never - Not Eligible  About once a month  About once a week  About once a week or more often  Daily

2. What was the last time you used heroin, cocaine, or crack in a cigarette form?  
 Never - Not Eligible  At the past year  At the past 6 months  At the past 3 months  At the past month

3. Are you interested in being trained as a Peer Educator?  
 No - Not Eligible  Yes - Ask Question 4a and 4b

4. Would you feel comfortable talking to people that are having about 100+ problems such as using needles and/or sharing needles?  
 No - Not Eligible  Yes - Ask Question 5

5. Would you feel comfortable talking to other drug users about HIV prevention such as using condoms and safe injection practices?  
 No - Not Eligible  Yes - Ask Question 6

Result of Screening:  Eligible (All responses are indicated. Assign CFM and proceed to Section C)  Not Eligible (Any of "No" offers additional resources)



Trainer's note: Read some of the screening questions aloud.

9. Walk-through Sections C: Client background information.

Section C of the form is where you want to record the client's name, demographics, and how they found out about the program. Some agencies may assign ID numbers so there is a space for that.



Show slide #77

**Section C: Client Background Information**

C. Collect Client Background Information

SHIELD ID: \_\_\_\_\_

First Name (M) \_\_\_\_\_ Last Name \_\_\_\_\_

DOB \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_M\_\_\_\_\_F\_\_\_\_\_T\_\_\_\_\_

Race/Ethnicity: (check all that apply) Referred source: (check all that apply)

African American  Caucasian  Flier  Ad in a newspaper

American Indian  Latino  Word of mouth  Current Client

Asian Pacific Islander  Referred by agency \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

10. Discuss the point of collecting contact information (Sections D & E).

Sections D & E are where you should record the client's contact information as well as contact information for up to 2 other people.

We realize that some agencies may collect extensive contact information from their clients while others may not collect this information at all. We really encourage you to ask your clients for at least one method of contacting them- via phone, address, even e-mail. Since many clients may move around or not have a stable residence, it's a good idea to ask for the contact information of at least 2 other people who will be able to get a message to the client.

You may need to reassure clients that their contact information will only be used for reminder calls & letters or to notify the client about a change in a session.

Sections D & E are where you should record the client's contact information as well as contact information for up to 2 other people.

We realize that some agencies may collect extensive contact information from their clients while others may not collect this information at all. We really encourage you to ask your clients for at least one method of contacting them- via phone, address, even e-mail. Since many clients may move around or not have a stable residence, it's a good idea to ask for the contact information of at least 2 other people who will be able to get a message to the client.

You may need to reassure clients that their contact information will only be used for reminder calls & letters or to notify the client about a change in a session.



Show slide #78

**Section D & E: Contact Information**

D. Collect Client Living Address and Phone Numbers

Street Apt \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_

Client Street \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Page (\_\_\_\_\_) \_\_\_\_\_

Work Phone (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Keypad \_\_\_\_\_ Message: \_\_\_\_\_ OK to receive this agency: \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_

OK to leave message: \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_ OK to receive this agency: \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_

E. Collect Client Contact Information (additional people through which client may be contacted)

CONTACT # 1

Street Apt \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_

Client Street \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Page (\_\_\_\_\_) \_\_\_\_\_

Work Phone (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Keypad \_\_\_\_\_ Message: \_\_\_\_\_ OK to receive this agency: \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_

OK to leave message: \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_ OK to receive this agency: \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_

CONTACT # 2

Street Apt \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_

Client Street \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Page (\_\_\_\_\_) \_\_\_\_\_

Work Phone (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Keypad \_\_\_\_\_ Message: \_\_\_\_\_ OK to receive this agency: \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_

OK to leave message: \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_ OK to receive this agency: \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_

11. Emphasize the point of the SHIELD calendar (Section F).

The last part of the enrollment form, Section F, documents that a calendar of sessions was provided to the client. It is very important to give your client a calendar of sessions. The SHIELD Peer Educator training is a 6-session commitment. So, a client should be given the schedule during the Pre-program contact so that they can plan accordingly.



Show slide #79

**F. Distribute SHIELD Calendar**

1. Agency gave client the SHIELD Calendar of Sessions: \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_

2. Does client have another commitment (e.g. job, group, etc.) that would prevent them from attending the 6 SHIELD sessions? \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_

If no, client will be considered signed up for SHIELD. If yes, refer client to other services

	<p>At this point in the enrollment visit, you should also check in with participants to see if they have another commitment like a job or support group that may prevent them from attending all of the sessions. If they have a conflict, participants should be referred to another SHIELD group.</p> <p>What questions do you have about the Pre-program contact or Enrollment form?</p>	
<p>12. Conduct Trainer Demonstration or Pre-program contacts</p>	<p>We want to do a demonstration of the Pre-Program contact. As we demonstrate feel free to follow along on the form.</p>	<p> Show slide #80</p> <div data-bbox="1110 852 1408 1066" style="border: 1px solid black; padding: 10px; margin: 10px auto; width: fit-content;"> <p style="text-align: center;"><b><u>Trainers demonstrate</u></b></p> <p style="text-align: center;">Pre-Program Contact</p> </div> <p> <b><u>Trainer's note:</u></b></p> <p>[Trainer see examples of demonstration scripts]</p> <p>One trainer should play the potential SHIELD client and one trainer should play the SHIELD staff who is doing the pre-program contact.</p> <p>You may choose to do one example of a pre-program contact in a scenario where the client is an existing client in the agency and a scenario where a client is getting recruited into SHIELD and is new to the agency.</p>

## Sample Script for Trainer Demonstration of Pre-Program Contact with Existing Client at the Agency

SHIELD staff: Hi [client name], its good to see you here today. I want to tell you about a new program that we have just added that I think you may really enjoy.

Client: Thanks for thinking about me, what is the program called?

SHIELD staff: It's called the SHIELD program and it is a fun and education program where you will get trained to be a Peer Educator. As a Peer Educator you will learn about different ways that you can help others be safer from HIV. The SHIELD program is 6 sessions that meet for about 90 minutes each.

If this sounds like something you would be interested in we can screen you now – it only takes a couple of minutes.

Client: What do I have to do to be eligible for the program?

SHIELD staff: Let me ask you a few of these questions and you will see.

Client: Ok

SHIELD staff: Are you interested in being trained as a Peer Educator?

Client: Sure

SHIELD staff: What are some of the reasons why you are interested?

Client: To help people and it sounds interesting.

SHIELD staff: How often do you interact with drug users?

Client: Pretty much everyday in my neighborhood.

SHIELD staff: Would you feel comfortable talking to people that you know about HIV prevention such as using condoms and not sharing needles?

Client: Yes

SHIELD staff: Would you feel comfortable talking to other drug users about HIV prevention such as using condoms?

Client: Sure

SHIELD staff: When was the last time you use heroin, cocaine or crack?

Client: Its been about 30 days.

SHIELD staff: Great it looks like you are eligible for the SHIELD program. So now let me update your contact information so that we can remind you about the sessions. Also, here is a calendar of the session schedule – please take a look to make sure that you can attend all of the sessions.

Client: If I miss one do I get kicked out?

SHIELD staff: Well – in order to be fully trained to be a Peer Educator you do need to complete all of the sessions. Do you see a possible conflict with this schedule because we can always have you start the next round too.

Client: No I should be able to make all of these sessions, I was just curious.

SHIELD staff: Great – well we will see you on [date and time] for the first session of the SHIELD program. Feel free to take some of these flyers so that you can let others know about the SHIELD program.

## Sample Script for Trainer Demonstration of Pre-Program Contact with New client

SHIELD staff: Hi there, my name is [insert name], welcome to our agency. How did you hear about us or the SHIELD program?

Client: I saw a flyer at another agency and I thought I would check it out.

SHIELD staff: Well we are glad you are here checking us out. Let me tell you a little about the SHIELD program. It is a fun and educational program where you will get trained to be a Peer Educator. As a Peer Educator you will learn about different ways that you can help others be safer from HIV. The SHIELD program is 6 sessions that meet for about 90 minutes each.

Client: So where are the sessions held?

SHIELD staff: They are held here at our clinic – usually in the mornings. If this sounds like something you would be interested in we can screen you now – it only takes a couple of minutes.

Client: Ok

SHIELD staff: Are you interested in being trained as a Peer Educator?

Client: Sure

SHIELD staff: What are some of the reasons why you are interested?

Client: To help people and it sounds interesting.

SHIELD staff: How often do you interact with drug users?

Client: Pretty much everyday in my neighborhood.

SHIELD staff: Would you feel comfortable talking to people that you know about HIV prevention such as using condoms and not sharing needles?

Client: Yes

SHIELD staff: Would you feel comfortable talking to other drug users about HIV prevention such as using condoms?

Client: Sure

SHIELD staff: When was the last time you use heroin, cocaine or crack?

Client: Today

SHIELD staff: Great it looks like you are eligible for the SHIELD program. So now I would like to get some information from you so that we can stay in contact with you to remind you about the sessions. All of this information that you provide is kept confidential by our agency.

Also, here is a calendar of the session schedule – please take a look to make sure that you can attend all of the sessions.

Client If I miss one do I get kicked out?

SHIELD staff: Well – in order to be fully trained to be a Peer Educator you do need to complete all of the sessions. Do you see a possible conflict with this schedule because we can always have you start the next round too.

Client: No I should be able to make all of these sessions, I was just curious.

SHIELD staff: Great – well we will see you on [date and time] for the first session of the SHIELD program. Here is a brochure that describes other services that we offer at our agency in case you are interested. .

<p>13. Introduce next step in SHIELD sequence- Sessions 1-6.</p>	<p>After a client goes through the pre-program contact, the next step in the SHIELD sequence is the 6 SHIELD intervention sessions.</p> <p>The order of the sessions is important because each session builds upon each other.</p> <p>We will be spending the majority of this training on the 6 SHIELD sessions after lunch. For now let's discuss the setting and timing of the sessions.</p>	 Show slide #81 <div data-bbox="1089 390 1458 621" style="border: 1px solid black; padding: 5px;">  <p><b>SHIELD Sequence (Core Element #2)</b></p> <div style="display: flex; align-items: center; gap: 20px;"> <div style="border: 1px solid black; padding: 5px; background-color: #e0f2f1;">Pre-program contact</div> <div style="font-size: 24px;">→</div> <div style="border: 1px solid black; padding: 5px; background-color: #fff9c4;"> <p><b>SHIELD Sessions 1-6</b></p> <ul style="list-style-type: none"> <li>◀ Peer to Peer Outreach</li> <li>◀ PEER Communication Skills</li> <li>◀ Selfie Sex #1</li> <li>◀ Selfie Sex #2</li> <li>◀ Selfie Injection</li> <li>◀ Graduation &amp; Sustainability</li> </ul> </div> </div> </div>
<p>14. Discuss timing &amp; setting of SHIELD sessions.</p>	<p>SHIELD was originally conducted in an urban, community-based research clinic. The setting can vary and can include mobile vans, group rooms that may be available in a church basement or in a clinic. Regardless, it is important to hold the intervention in a location that is easily accessible by your population and offers privacy.</p> <p>The timing of intervention sessions should be convenient and consistent for participants. SHIELD sessions have been implemented in mornings, afternoons, evenings, and weekends. Before the SHIELD program starts, agencies should talk to their clients to determine ideal times to hold the intervention sessions.</p> <p>Frequency of sessions is also important to consider. Each of the sessions should be held on a different day. Based on previous experience, holding two sessions per week is ideal. It takes time for Peer Educators to practice new skills through their homework assignments and to integrate their new role into</p>	 Show slide #82 <div data-bbox="1110 942 1490 1260" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Timing &amp; Setting of SHIELD Sessions</u></b></p> <ul style="list-style-type: none"> <li>• Flexible setting options: group rooms, mobile vans</li> <li>• Each session should be held on a different day</li> <li>• Before you set the schedule figure out the time that works best for you &amp; your agency</li> <li>• Make timing consistent and convenient</li> <li>• Have at least one day in between sessions <ul style="list-style-type: none"> <li>– Gives participants time to practice their new skills</li> </ul> </li> </ul> </div>

	<p>their routine. We highly recommend having at least one day in between sessions for Peer Educators to practice their Peer Outreach activities.</p> <p>What questions do you have about the frequency or timing of the sessions?</p>	
<p>15. Discuss SHIELD attendance policy.</p>	<p>Let's talk about attendance policies for SHIELD.</p> <p>The SHIELD Peer Educator training is a 6-session commitment. This means that in order to be fully trained to be a Peer Educator they need to attend each session.</p> <p>Session 1 is important for introductions and learning about the purpose of the SHIELD program.</p> <p>The SHIELD intervention focuses on 3 sets of skills: communication, safer sex, &amp; safer injection. Each session focuses on a different skills set. Session 2 focuses on communication skills, Session 3 &amp; 4 focus on safer sex skills, &amp; Session 5 focuses on safer injection skills.</p> <p>The small-group setting is important for building social support and sharing experiences. This bonding grows stronger after each sequential session.</p> <p>And, finally, each session includes Peer Educator activities to build Peer Educator self-efficacy. When a client misses a session, they miss the opportunity to practice their Peer Educator skills.</p> <p>We encourage you to stress to your clients the importance of attending</p>	 Show slide #83 <div data-bbox="1118 632 1492 928" style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b><u>Attendance Policy</u></b></p> <ul style="list-style-type: none"> <li>• All 6 sessions are important</li> <li>• Group sharing &amp; bonding <ul style="list-style-type: none"> <li>- Learning new information &amp; skills</li> <li>- Reinforcement &amp; practice of skills</li> </ul> </li> </ul> <div style="border: 1px solid black; padding: 2px; text-align: center; font-size: small; margin-top: 10px;"> Agencies should determine their own attendance policy before implementing SHIELD sessions </div> </div>

	<p>each session.</p> <p>It is up to your own agency to determine what the attendance policy will be. Some agencies may allow participants to miss 1 session while other may require attendance at all 6 sessions.</p>	
<p>16. Emphasize important information to keep in mind when developing the attendance policy.</p>	<p>When determining your attendance policy, keep the following information in mind:</p> <p>We know from experience that the more sessions a Peer Educator attends, the more effective their peer outreach is.</p> <p>New participants should not be introduced to the SHIELD group after Session 1 has been held. Adding an individual who has missed the introduction session may prevent others from opening up and may disrupt group dynamics.</p> <p>Once a client starts with 1 group, they should remain in that group. That means, if a client misses Session 3 they shouldn't make it up with another group. Staying with the same group is important for social support and group bonding.</p> <p>Although a client cannot sit in on session that they miss, a facilitator may briefly meet with the client before the next session to review the information they missed. Although this brief meeting may help the participant stay up-to-date with the information, the client will miss the social support and feedback of the small-group setting. Thus, the brief 1:1 meeting is not a substitute for a SHIELD session.</p>	<p> Show slide #84</p> <div data-bbox="1097 646 1495 940" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Things to consider for attendance policy</u></b></p> <ul style="list-style-type: none"> <li>• More sessions attended, more effective Peer Outreach</li> <li>• New participants should not be introduced to the SHIELD group after Session 1 has been held</li> <li>• Once a client starts with a group, they should remain in that group</li> </ul> </div>

	<p>What questions do you all have about coming up with an attendance policy?</p> <p>Now let's talk about an optional activity that is not part of the SHIELD sequence.</p>	
<p>17. Introduce SHIELD boosters.</p>	<p>You may find that “graduated” Peer Educators express an interest in continuing to meet together, talk about their Peer Outreach experiences and practice their skills.</p> <p>One option is to have booster sessions</p>	 <p>Show slide #85</p> <div data-bbox="1102 592 1495 888" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Boosters</u></b></p> <ul style="list-style-type: none"> <li>• <b>Informal group sessions with participants</b> <ul style="list-style-type: none"> <li>– Check-in</li> <li>– Skills refresher</li> <li>– Restock risk reduction materials</li> </ul> </li> <li>• <b>Agency events</b></li> <li>• <b>Community events</b> <ul style="list-style-type: none"> <li>– Street outreach</li> <li>– Health fairs</li> </ul> </li> </ul> </div>
<p>18. Describe types of boosters.</p>	<p>The purpose of these sessions is to get Peer Educators together to check-in and see how their Peer Outreach is going. The boosters are also a chance to refresh Peer Educator’s skills and provide them with information about resources in the community. These boosters may be less structured than the intervention sessions themselves.</p> <p>You may also have Peer Educators involved in other activities at your agency such as serving as volunteers or on a speaker’s panel. If your agency participates in community events such as health fairs or street outreach you could have these events serve as a Booster session for SHIELD graduates. For these types of Boosters you may need to consider having a group facilitator be present to supervise the activity.</p> <p>Later, we will talk more about activities that can be done as booster</p>	

	<p>sessions.</p> <p>We really encourage you to have at least one booster after you have completed the 6 sessions. You will find that many participants get committed to being a Peer Educator so they want a change to check-in and learn new information.</p> <p>Any questions about the SHIELD sequence?</p>	
<p>19. Summarize the SHIELD sequence.</p>	<p>We just covered a lot of information. To recap, participants go through the SHIELD sequence in this order:</p> <ol style="list-style-type: none"> <li>1) Pre-program contact</li> <li>2) Sessions 1-6</li> </ol> <p>What questions do you have about the SHIELD sequence?</p>	 <p><u>Trainer note:</u> Display newsprint with the SHIELD sequence figure.</p>
<p>20. Transition to Lunch Break</p>	<p>Now, we are going to take an hour lunch break. When we come back, we are going to go to start talking about the facilitators guide and SHIELD sessions.</p>	 <p>Show slide #86</p> <div data-bbox="1154 1087 1484 1287" style="border: 1px solid black; padding: 10px; text-align: center;"> <p>Lunch break – 1 hour</p>  </div>

# MODULE 12

## HIV & Injection 101

## MODULE 12: HIV & INJECTION 101

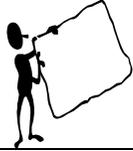


**By the end of this module, trainees will:**

1. Gain knowledge about HIV transmission, prevention, and risk reduction.
2. Get introduced to the HIV and Injection 101 Appendix of the SHIELD Facilitators Guide.



**Time**  
1:20-1:50pm



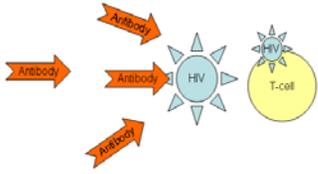
**Materials**

Laptop & projector

Procedures	Suggested Script	Trainer Notes & Slides
1. Introduce HIV & Injection 101 Review Appendix.	Welcome back from Lunch everyone. Now we are going to look at Appendix VII of the SHIELD Facilitators guide which is an overview of some basic information about HIV and AIDS and injection drug use.	 Show slide #87 <div style="border: 1px solid black; padding: 10px; text-align: center;"> <p><b><u>HIV &amp; Injection 101</u></b></p>  </div>
2. Discuss the utility of reviewing the HIV & injection 101 chapter.	<p>We encourage SHIELD staff to review this chapter as an exercise to prepare for implementation. This is especially true for your facilitators. Facilitators will be asked questions about HIV myths as they go through the sessions. Reviewing this chapter ensures that they have accurate information about HIV and drug use which will give them confidence that they can field these questions from the group. This can also be useful to generate a discussion about resources that your agency may need to have available.</p> <p>While we are not going go through this appendix in detail, given that we</p>	 Show slide #88 <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">Reviewing Information</p> <ul style="list-style-type: none"> <li>Key to preparation as a facilitator.</li> <li>Stimulates discussion about resources in the community.</li> <li>Review chapter provided as an appendix.</li> </ul> </div>

	<p>are going to be walking through the SHIELD sessions we want to spend a few minutes reviewing some basics to make sure we are all on the same page.</p>	
<p>3. Review what HIV is.</p>	<p>Who can tell me what HIV stands for?</p> <p>HIV stands for the Human Immunodeficiency Virus which is the virus that causes AIDS. Being infected with HIV does not mean that you necessarily have AIDS.</p>	 <p><b>Trainer note:</b> Wait until participant provides an answer before showing the slide.</p>  <p>Show slide #89</p> <div data-bbox="1114 705 1495 930" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">HIV stands for...</p> <ul style="list-style-type: none"> <li>• Human Immunodeficiency Virus.</li> <li>• This is the Virus that causes AIDS.</li> <li>• Being infected with HIV does not necessarily mean that you have AIDS.</li> </ul> </div>
<p>4. Review what AIDS stands for.</p>	<p>Who can tell me what AIDS stands for?</p> <p>[Trainer show slide after a volunteer has answered the question].</p> <p>AIDS is the Acquired Immunodeficiency Syndrome and is clinically defined by a person's T-cell count OR whether they have an opportunistic infection (OI).</p>	 <p><b>Trainer note:</b> Wait until participant provides an answer before showing the slide.</p>  <p>Show slide #90</p> <div data-bbox="1133 1220 1495 1455" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><u>AIDS stands for...</u></p> <ul style="list-style-type: none"> <li>• Acquired Immunodeficiency Syndrome.</li> <li>• AIDS is a clinical diagnosis that is based on two criteria: <ul style="list-style-type: none"> <li>– Level of CD4 cells (&lt;200 is AIDS) –or–</li> <li>– Presence of an opportunistic infection (OI)</li> </ul> </li> <li>• Doctors use these two criteria to determine medications and care.</li> <li>• Because of the development of medications for AIDS, people who are diagnosed with AIDS can live long lives.</li> </ul> </div>
<p>5. Review what Opportunistic Infections are.</p>	<p>An opportunistic infection is a fancy and technical term that describes a bunch of different infections and diseases that people can get if their immune system is weakened. We provide some examples here such as PCP which is a type of pneumonia or thrush which is a type of yeast infection.</p>	 <p>Show slide #91</p> <div data-bbox="1122 1566 1490 1780" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">Opportunistic Infections</p> <ul style="list-style-type: none"> <li>• Are infections that occur as a result of a weakened immune system.</li> <li>• Examples include: PCP (a type of pneumonia), Thrush (a type of yeast infection), PID (pelvic inflammatory disease).</li> </ul> </div>
<p>6. Describe HIV treatment.</p>	<p>There is a lot of stigma out there around both HIV and AIDS. We want</p>	 <p>Show slide #92</p>

	<p>to make the point here, that because of advances in medications and treatments available, people who are AIDS defined are living long and healthy lives.</p> <p>For people who are infected with HIV, finding an HIV care provider and working with them on a treatment plan is critical. For those individuals who are prescribed HIV medications, adherence to the doses is important so that they do not develop resistance to the medications. Finally, encouraging people living with HIV and AIDS to find a support group can be one way to help them cope and develop a support network.</p> <p>We encourage you to make sure that you have HIV care resources available to your participants.</p>	<div data-bbox="1112 216 1490 485" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b>HIV Treatment Options</b></p> <ul style="list-style-type: none"> <li>• Accessing HIV medical care.</li> <li>• Working with provider on treatment plan</li> <li>• Adherence to medications</li> <li>• Support groups</li> </ul> </div>
<p>7. Review the fluids that transmit HIV.</p>	<p>Ok so who can tell me the four body fluids that can transmit HIV?</p> <p>There are only 4 body fluids that can transmit HIV which are blood, semen, vaginal secretions and breast milk.</p>	<div data-bbox="1015 1003 1117 1102" style="text-align: center;"></div> <p><b>Trainer note:</b> Wait until participant provides an answer before showing the slide.</p> <div data-bbox="1019 1192 1084 1264" style="text-align: center;"></div> <p><b>Show slide #93</b></p> <div data-bbox="1112 1276 1502 1524" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b>Body fluids that CAN transmit HIV</b></p> <ul style="list-style-type: none"> <li>• Blood</li> <li>• Semen</li> <li>• Vaginal secretions</li> <li>• Breast milk</li> </ul> </div>

<p>8. Review the fluids that cannot transmit HIV.</p>	<p>So who can tell me what fluids cannot transmit HIV?</p> <p>Sweat, tears, urine, saliva and feces cannot transmit HIV. There are myths about how saliva transmits HIV through kissing and different accounts about how much saliva it would take. Saliva cannot transmit HIV but if there is blood present in the saliva because of gum disease etc then the blood could transmit HIV.</p> <p>What questions do you have?</p>	 <p><b>Trainer note:</b> Wait until participant provides an answer before showing the slide.</p>  <p>Show slide #94</p> <div data-bbox="1097 491 1500 722" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">Body fluids that CANNOT transmit HIV</p> <ul style="list-style-type: none"> <li>• Sweat</li> <li>• Tears</li> <li>• Saliva</li> <li>• Urine</li> <li>• Feces</li> </ul> </div>
<p>9. Review HIV risk behaviors.</p>	<p>Finally, who can tell me what the main HIV risk behaviors are?</p> <p>The two main HIV risk behaviors are injection drug use and having unprotected sex. A mother can transmit HIV to her unborn baby while the baby is in the uterus or during the birthing process.</p> <p>Because the blood supply has been screened for HIV since the 1980's, HIV transmission through blood transfusions does not happen.</p> <p>What questions do you have?</p>	 <p><b>Trainer note:</b> Wait until participant provides an answer before showing the slide.</p>  <p>Show slide #95</p> <div data-bbox="1073 1087 1438 1352" style="border: 1px solid black; padding: 5px;">  <p style="text-align: center;"><b>Primary Methods for HIV Transmission</b></p> <ul style="list-style-type: none"> <li>• Sharing needles and other injection drug equipment</li> <li>• Unprotected sex</li> <li>• Maternal transmission</li> </ul> </div>
<p>10. Describe the HIV antibody testing process.</p>	<p>HIV testing is considered an important component of HIV prevention because the sooner that someone finds out that they are infected, the sooner they can stop behaviors that may be exposing someone to HIV and the sooner they can get into medical care and treatment. For people who are not infected with HIV, testing and counseling provides them with an opportunity to make a risk reduction plan and obtain resources for being safer such as condoms.</p>	 <p>Show slide #96</p> <div data-bbox="1097 1541 1479 1808" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">Testing for HIV (antibodies)</p>  </div>

	<p>With HIV testing, what we are looking for in the test are HIV antibodies, not the virus itself. HIV antibodies are special cells of the immune system that are produced after someone gets infected with HIV.</p>	
<p>11. Define the window period</p>	<p>It takes about 3-6 months AFTER someone has been infected with HIV for antibodies to show up on the tests that we use. This is referred to as the window period.</p>	 <p>Show slide #97</p> <div data-bbox="1127 537 1511 800" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">Window period</p> <ul style="list-style-type: none"> <li>• Amount of time after someone gets infected with HIV but before antibodies show up on the test.</li> <li>• Average 3-6 months</li> </ul> </div>
<p>12. Review the body fluids that can be tested for HIV antibodies.</p>	<p>The HIV testing technology has become so advanced that we can test a number of different body fluids for HIV antibodies.</p> <p>These include: blood, urine and a fluid that comes from the lining of the mouth which is oral mucosal transidate. This fluid is not the same as saliva but many people think we are testing the saliva which is why they think that saliva can transmit HIV.</p> <p>What questions do you have about this?</p>	 <p>Show slide #98</p> <div data-bbox="1127 930 1511 1230" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">Body fluids that CAN be tested for HIV antibodies</p> <ul style="list-style-type: none"> <li>• Blood</li> <li>• Urine</li> <li>• Oral mucosal <u>transidate</u> (fluid from the lining of the mouth)</li> </ul> </div>
<p>13. Review basic HIV risk reduction recommendations.</p>	<p>The majority of the SHIELD sessions are focused on a number of options for reducing HIV risk which include abstinence, using condoms or clean needles and not sharing injection equipment.</p>	 <p>Show slide #99</p> <div data-bbox="1122 1554 1495 1829" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">HIV Risk Reduction</p> <ul style="list-style-type: none"> <li>• Abstinence from sex and drug use</li> <li>• Proper use of condoms</li> <li>• Safer drug preparation</li> <li>• Safer injection</li> </ul> </div>

<p>14. Review Basics of injection drug use.</p>	<p>Many of you may be familiar with injection drug use terminology and behaviors. But, for facilitators who are new to this, we have included a section that describes basic information about injection drug use. This section covers methods of injection, common terminology or slang, consequences of injection, and risk reduction.</p>	 Show slide #100 <div data-bbox="1105 302 1490 590" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Basics of injection drug use</u></b></p> <ul style="list-style-type: none"> <li>• Common terminology</li> <li>• Methods of injection <ul style="list-style-type: none"> <li>– Vein, muscle, skin-popping</li> </ul> </li> <li>• Consequences <ul style="list-style-type: none"> <li>– Heart problems, infections</li> </ul> </li> <li>• Injection Risk Reduction</li> </ul> </div>
<p>14. Review STD risk and Hepatitis C sections of the Appendix.</p>	<p>Because the target population for the SHIELD intervention is current and former drug users, questions about sexually transmitted disease and Hepatitis C are likely to arise.</p> <p>Rates of many STDs such as herpes and syphilis have been rising and there is a section in the Appendix which reviews some information about a number of different STDs.</p> <p>Also, Hepatitis C is very common among injection drug users and is very easily transmitted. We provide some information in the Appendix to review in preparation for implementing SHIELD.</p>	 Show slide #101 <div data-bbox="1105 758 1479 1024" style="border: 1px solid black; padding: 10px;"> <div style="display: flex; justify-content: space-between; align-items: center;">  <p><b>STDs and Hep C</b></p> </div> <hr style="border: 0.5px solid black; margin: 5px 0;"/> <ul style="list-style-type: none"> <li>• Sexually transmitted diseases greatly increase HIV risk.</li> <li>• STD testing should be promoted in addition to HIV testing.</li> <li>• Hepatitis C is a virus that attacks the liver.</li> <li>• Hepatitis is easily spread through blood and sharing of injection equipment.</li> <li>• Testing for Hep C is recommended.</li> </ul> </div>
<p>15. Summarize module about HIV &amp; injection 101 Appendix.</p>	<p>In summary, we encourage SHIELD staff to review this chapter as an exercise to prepare for implementation. There is a Knowledge assessment that is provided at the end of the Appendix which may be useful in identifying areas that staff may need to improve their knowledge.</p> <p>Before you implement SHIELD, take this quiz to see how you do.</p> <p>Although this appendix covers many topics, some questions may come up</p>	 Show slide #102 <div data-bbox="1114 1444 1495 1749" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Knowledge Assessment</u></b></p> <ul style="list-style-type: none"> <li>• Quiz is available at the end of the Appendix in SHIELD Facilitator Guide.</li> <li>• Take before you implement SHIELD.</li> <li>• It's ok to say "I don't know" if a participants asks something &amp; you do not know the answer <ul style="list-style-type: none"> <li>– Bring the answer back to the next session.</li> </ul> </li> </ul> </div>

	<p>that facilitators are not prepared to answer. When this situation occurs, the best thing to do is to tell the participant that you are unsure of the answer but will research it and bring an answer to the next session. It is better to be upfront with the participants and say “I don’t know” rather than guessing or making up an answer.</p>	
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# MODULE 13

## Introduction to SHIELD Facilitation

## MODULE 13: Introduction to the Facilitating SHIELD



**By the end of this module, trainees will:**

1. Discuss Fidelity of the intervention.
2. Review Preparation steps.
3. Describe goals of co-facilitation.



**Time**  
1:50-2:05pm



**Materials**

Laptop & projector

Procedures	Suggested Script	Trainer Notes & Slides
1. Transition to the Facilitators Guide.	Now, we are going to talk about the actual SHIELD sessions that you will be conducting in your agency. Please take out your Facilitators Guide.	 Show slide #103 <div style="border: 1px solid black; padding: 10px; text-align: center;"> <p><b><u>Facilitating the SHIELD Intervention</u></b></p> </div>

<p>2. Discuss importance of fidelity to SHIELD curriculum.</p>	<p>When we talk about interventions, we often use a term called Fidelity. Fidelity is how well a facilitator adheres to the SHIELD session procedures and scripts.</p> <p>To deliver the SHIELD intervention with fidelity we recommend:</p> <ol style="list-style-type: none"> <li>1) Preparation and planning with your co-facilitator..</li> <li>2) Follow the procedures <i>in the order presented</i>.</li> <li>3) Use the suggested scripts.</li> <li>4) And, use the suggested probes and facilitator notes.</li> </ol>	 <p>Show slide #104</p> <div style="border: 1px solid black; padding: 10px;"> <p><b><u>Delivering SHIELD with Fidelity</u></b></p> <ul style="list-style-type: none"> <li>• Fidelity: How well facilitators adhere to the SHIELD procedures and scripts</li> <li>• Steps for adhering fidelity <ul style="list-style-type: none"> <li>- Review each session prior to delivery</li> <li>- Follow procedures in the outlined order</li> <li>- Use suggested scripts</li> <li>- Use suggested probes &amp; questions</li> </ul> </li> </ul> </div>
<p>3. Review training activities as a strategy for implementing SHIELD with fidelity</p>	<p>Preparation and Planning of sessions is critical for maintaining fidelity.</p> <p>Some planning activities that we recommend are:</p> <ul style="list-style-type: none"> <li>• Discussing the session with your co-facilitators and supervisor to review session take-home points.</li> <li>• Working together with your co-facilitator to prepare session materials.</li> <li>• Following the list of preparation tasks listed in the beginning of each session, and</li> <li>• Doing a mock or walk-through of the session with other staff who act like participants.</li> </ul>	 <p>Show slide #105</p> <div style="border: 1px solid black; padding: 10px;"> <p><b><u>Preparation and Planning</u></b></p> <ul style="list-style-type: none"> <li>• Preparation and planning of sessions is critical. <ul style="list-style-type: none"> <li>- Discussing the session with supervisor.</li> <li>- Preparing materials and posters.</li> <li>- Dividing the session between co-facilitators.</li> <li>- Following preparation tasks for each session</li> </ul> </li> <li>• Practicing and doing a "walk-through" of each session. <ul style="list-style-type: none"> <li>- Focus on Homework Check-In</li> <li>- Risk reduction ladders</li> <li>- Demonstrations</li> </ul> </li> </ul> </div>

<p>4. Emphasize that SHIELD is designed to be co-facilitated.</p>	<p>The last time we want to discuss is that SHIELD is facilitated by 2 facilitators.</p> <p>You should plan on having your co-facilitators spend time together so that they can get to know each other's style and to form a relationship. Especially, for people who have facilitated by themselves, leading groups with another facilitator is a different experience and you want to plan time for them to adjust to sharing leadership.</p>	 <p>Show slide #106</p> <div data-bbox="1118 287 1479 583" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b>Co-facilitation</b></p> <ul style="list-style-type: none"> <li>• SHIELD is designed to be co-facilitated.</li> <li>• Plan time for your facilitators to spend time together to get familiar with each others styles.</li> <li>• Even for seasoned facilitators, co-facilitation is a different experience. Plan for time to practice co-leadership of the group.</li> </ul> </div>
<p>5. Transition to Break</p>	<p>We are now going to take a 10 minute break. We will start with the SHIELD session structure when we come back together.</p>	 <p>Show Slide #107</p> <div data-bbox="1102 787 1388 974" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">10 Minute Break</p> <div style="text-align: center;">  </div> </div>

# MODULE 14

## SHIELD Session Structure

## MODULE 14: The SHIELD Session Structure



**By the end of this module, trainees will:**

1. Walk through the components of the SHIELD Session Structure.



**Time**  
2:15-2:45pm



**Materials**

Laptop & projector

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Review the importance of the SHIELD Session Structure as a Core Element.</p>	<p>Now let's talk about the SHIELD session structure.</p> <p>Who can remember what core element speaks to the SHIELD session structure? (Answer is: Core Element #3: <u>Each SHIELD intervention session follows a specific structure</u>)</p> <p>In Session 1, the focus is on introducing concepts of Peer Educator and Peer Outreach. Session 1 is important to lay the foundation for the rest of the sessions. Therefore, the primary activities are brainstorming and group discussion.</p> <p>Sessions 2 through 6 follow a specific structure so that risk reduction and communication skills are reinforced and participants have opportunities to practice their Peer outreach.</p>	<p> Show slide #108 after getting the group to answer the question.</p> <div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: fit-content;">  <hr style="border: 0.5px solid gold;"/> <p style="text-align: center;"><b>SHIELD Session Structure</b> (Core Element #3)</p> </div>

<p>2. Describe the SHIELD Session Structure for Session 2-6.</p>	<p>The structure for Sessions 2-6 consists of 5 components:</p> <ul style="list-style-type: none"> <li>• Component One is the Homework check-in</li> <li>• Component Two: Present new information</li> <li>• Component Three: Peer Educator training activities, usually group problem solving and then role-plays to practice using PEER communication skills.</li> <li>• Component Four: Homework assignment and practice and</li> <li>• Component Five is the Session Summary.</li> </ul> <p>In your Facilitator Guide on page 19 there is a description of the purpose, materials and procedures for each component. During this training we will also demonstrate how to do each of these components.</p>	 Show slide #109 <div data-bbox="1102 296 1474 594" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>SHIELD Session Structure:</b> Sessions 2-6</p> <pre> graph TD     A["(1) Homework Check-in"] --&gt; B["(2) Present New Information"]     B --&gt; C["(3) Peer Educator Training Activities"]     C --&gt; D["(4) Homework Assignment &amp; Practice"]     D --&gt; E["(5) Summary"] </pre> </div>
<p>3. Describe the Peer Educator Training Activities.</p>	<p>Before we begin the demonstrations we want to describe the three Peer Educator training activities that are used in Component 3: the Facilitator Role-model, Group Problem-solving and Role-plays.</p>	 Show slide #110 <div data-bbox="1102 1188 1474 1375" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"> <b>Peer Educator Training Activities – Component #3</b></p> <ul style="list-style-type: none"> <li>• Facilitator Role Model</li> <li>• Group Problem Solving</li> <li>• Role-plays</li> </ul> </div>
<p>4. Describe the Facilitator Role-Model activity.</p>	<p>The purpose of the Facilitator Role-model activity is to demonstrate or Model a skill for the group. An example of this is in Session 1 where you will be role-modeling the PEER Communication skills and session 4 where you will be role-modeling how to properly put on a condom. It is important for you and your co-facilitator to practice the Role-model before the session so that you can demonstrate without any errors.</p>	 Show slide #111 <div data-bbox="1110 1575 1485 1822" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Facilitator Role Model - Review</b></p> <ul style="list-style-type: none"> <li>• <b>Description:</b> Conducted by both facilitators to demonstrate/role-model skills.</li> <li>• <b>Preparation:</b> Facilitators should meet prior to the session to assign and practice roles.</li> <li>• <b>Procedures:</b> demonstration and debriefing.</li> </ul> </div>

<p>5. Describe the Group-problem solving activity.</p>	<p>The Group-problem solving activity is an opportunity for the participants to work as a group and to brainstorm how a Peer Educator could approach a situation or scenario. Typically after the group brainstorms you will be asking for volunteers to role-play the scenario using the suggestions that the group had discussed. In your sessions you are provided with scenarios to use for the group problem-solving but you also may use a scenario that a client volunteers.</p>	 Show slide #112 <div data-bbox="1130 342 1466 590" style="border: 1px solid black; padding: 5px;">  <b>Group Problem Solving Review</b> <ul style="list-style-type: none"> <li>• <b>Description:</b> Group works together to problem solve scenarios &amp; role-play.</li> <li>• <b>Preparation:</b> Prior to the session facilitators should review and discuss scenarios and choose ones.</li> <li>• <b>Procedures:</b> Have group brainstorm using the information just presented during the session. <span style="float: right;">10</span></li> </ul> </div>
<p>6. Describe the Role-play activity.</p>	<p>The role-play is an opportunity for participants to practice doing Peer Outreach in a supportive environment. Typically, you would ask for one volunteer to play the Peer Educator and one volunteer will play the peer. When selecting volunteers, try to pair participants that are more confident with those that may be a little hesitant about the role-plays.</p> <p>With any role-play, participants are allowed to freeze or time-out the role-play so that they can get more suggestions or to slow the pace. This is a really important because we want participants to feel successful when they are practicing their skills.</p> <p>What questions do you have about these three Peer Educator Training activities?</p>	 Show slide #113 <div data-bbox="1081 903 1430 1165" style="border: 1px solid black; padding: 5px;">  <b>Role Plays Review</b> <ul style="list-style-type: none"> <li>• <b>Description:</b> Aims to allow participants to practice Peer Educator skills.</li> <li>• <b>Procedures:</b> Ask for participants to volunteer to play the Peer Educator and the Peer.</li> <li>• <b>Facilitators</b> can "freeze" the role play to give the Peer Educator time to re-group or to ask the group for suggestions.</li> </ul> </div>

# MODULE 15

## SHIELD Session 1

## MODULE 15: SHIELD Session 1



**By the end of this module, trainees will:**

1. Describe the procedures and activities in SHIELD Session 1.
2. Observe a Trainer Demonstration of Describing the SHIELD program.
3. Observe a Trainer Demonstration of conducting a Brainstorming activity.
4. Observe a Trainer Demonstration describing Peer Outreach settings.
5. Observe a Trainer Demonstration of Homework and Practice.



**Time**  
2:45-3:45pm



**Materials**

- Laptop & projector
- Newsprint: Group Rules
- Newsprint: Definition of Peer Educator
- Newsprint: Additional Peer Outreach Examples
- Handout: Session 1 Homework Assignment
- Handout: SHIELD Calendar

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Introduce the session.</p>	<p>Let's get started by taking a look at Session 1 in your Facilitators Guide. Session 1 starts on page 22. Feel free to take notes as we go along.</p> <p>For Session 1, one of the main goals is to get your participants excited about the Peer Educator training and being part of this program. Make sure you warmly greet people as they come in. You also want them to sign in so that you can track attendance and we suggest providing name tags.</p> <p>Now let's take a look at the session 1 objectives.</p>	<div style="text-align: center;">  <p>Show slide #114</p> <div style="border: 1px solid black; padding: 20px; width: fit-content; margin: 0 auto;"> <p style="text-align: center; font-size: 1.5em; font-weight: bold; text-decoration: underline;">SESSION 1</p> </div> </div>

<p>2. Review the objectives of Session 1.</p>	<p>In session 1 you will be introducing the purpose of the training, defining the Peer Educator role and describing examples of Peer Outreach. You want to make sure that participants leave the session with an understanding of what they will be doing as part of the training.</p> <p>As we just said, an important objective is to generate motivation to remain in the program and to begin the group process so that people feel included and comfortable. Lastly, you will be having participants identify a “homework buddy” or someone with whom they will be practicing their skills with during the 6 sessions.</p>	 Show slide #115 <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p style="text-align: center;">Session 1: Objectives</p> <ol style="list-style-type: none"> <li>1. To introduce the purpose of the program</li> <li>2. To establish group cohesion and expectations</li> <li>3. To generate motivation to remain in the program</li> <li>4. To define Peer Educator role</li> <li>5. To introduce examples of “Peer outreach”</li> <li>6. To identify a “homework buddy”</li> </ol> </div>  <u>Trainer’s note:</u> Point to the objectives as you describe each one.
<p>3. Review Session 1 activities in sequence.</p>	<p>Before we demonstrate this session let’s walk through how the session activities flow.</p> <p>You will begin this session by having everyone introduce themselves. Then you will describe the purpose of the program reading a <i>required script</i>. Most of the scripts in the Facilitator guide are recommended and suggested. Facilitators can tweak these scripts as they get more comfortable with the materials. However, Session 1 has a required script which is noted in bold text in the Facilitator guide. Facilitators should say this script verbatim.</p> <p>Next, you will spend some time reviewing group rules and having a discussion about why these rules are important.</p> <p>After the group rules, you will have your group brainstorm and discuss what they think a Peer Educator is and how they are currently helping</p>	 Show slide #116 <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p style="text-align: center;">Session 1: Activities</p> <ol style="list-style-type: none"> <li>1. Introductions of group and facilitators</li> <li>2. Describe the purpose of the program</li> <li>3. Group rules</li> <li>4. Peer Educator role and Outreach brainstorm</li> <li>5. Peer Outreach – Settings and Safety Brainstorm</li> <li>6. Homework assignment and preparation</li> <li>7. Summary</li> </ol> </div>

	<p>people. For these discussions you will be showing posters with the SHIELD definition of Peer Educator and Examples of Outreach which you will leave hanging for the remaining sessions.</p> <p>Throughout the TOF, we have been using posters that are written on newsprint. At your agency, you can use either newsprint or have the poster professionally printed.</p> <p>After a break you will have the group discuss places and settings that would be ideal or not for Peer Outreach and the aim of this discussion is to emphasize that safety of self and others is important.</p> <p>Then you will describe the purpose of homework and will ask each participant to think of someone that they would want as a homework buddy. As a facilitator, you may need to help participants identify a person who will be supportive and appropriate to help the participant practice their skills. It is very important that every participant leaves the session with a specific person in mind. With each session, you will spend about 15 minutes having participants practice and role-play how they will do the homework. This is very important is because having your participants practice increases the likelihood that they will do their homework and have a positive experience.</p> <p>As you summarize the session make sure you inform the participants when the next session is scheduled so that you can retain as many people for Session 2.</p>	<p>Trainers Note: the term Homework Buddy can be adapted to one that is more relevant to your client population.</p> <p>In cases where a participant is not able to identify someone that they can practice their homework with – then facilitators can stand in to role-play a peer so that the client can practice.</p>
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	<p>What questions do you have about the Session 1 components and the sequence?</p> <p>Are you ready to see Session 1 in action?</p>	
<p>4. Introduce demonstration of component 2 of Session 1: Describing SHIELD program</p>	<p>Please turn to page 25 of your Guide so that you can see Component 2 of Session 1 which is to describe the SHIELD program to your group.</p> <p>You will do Component 2 after you have welcomed the participants to the group and gone through the introductions.</p>	 Show slide #117 <div data-bbox="1127 548 1487 810" style="border: 1px solid black; padding: 10px; margin: 10px auto; width: fit-content;"> <p style="text-align: center;">Trainers demonstrate</p> <p style="text-align: center;">Session 1: Component 2 – Describe SHIELD program</p> </div>
<p>5. Point out the different roles- Trainer, Facilitators, participants, etc. throughout the demonstrations.</p>	<p>As we demonstrate this component, keep in mind that we will be the group facilitators and you will be the group participants. The goal of this demonstration is to show you how to emphasize certain points in the script. After the demonstration we will take your questions. Is everyone ready?</p>	 <u>Trainer's notes:</u> Prior to the training, trainers should assign roles for each of the demonstrations. <p>One trainer should take the lead and read the script to the group.</p>
<p>6. Trainers model component 2 of Session 1: Describe SHIELD program by following the procedures and script.</p>	<p>Welcome everyone....</p>	

## TRAINER DEMONSTRATION

### SESSION 1 COMPONENT 2 DESCRIBE THE SHIELD PROGRAM

<b>PURPOSE</b>	Participants will learn about the purpose of the SHIELD program.
<b>TIME</b>	5 minutes
<b>MATERIALS</b>	Required program description script

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Describe the purpose of the program.</p> <p><b><u>Facilitator Note:</u></b>  <b>THIS IS A REQUIRED SCRIPT THAT YOU MUST READ AS IT IS WRITTEN IN EVERY SESSION 1.</b></p>	<p>The purpose of the SHIELD program is to train you to be a Peer Educator so that you can share HIV prevention information with people that you know so that they can be safer and healthier. We call this Peer Outreach. Through this training you will learn 4 communication skills, which we call PEER Communication skills, so that you can conduct Peer Outreach.</p>
<p>Emphasize that participants in the group are already knowledgeable about HIV.</p>	<p>We believe that you are already experts and have a lot of knowledge about HIV and are an important part of the solution to stopping the spread of HIV.</p>
<p>Emphasize that SHIELD is designed for a variety of individuals.</p>	<p>A lot of different people are getting trained to be Peer Educators through this program. Some may be actively using drugs while others may be in recovery. The one thing that you all have in common is that you all see people doing unhealthy things everyday and therefore have an opportunity to show them safer options. We believe that by promoting options for safer drug use and safer sex, you will not only help others but you will also help yourself be safer and healthier too.</p>

**SESSION 1 COMPONENT 2 DESCRIBE THE SHIELD PROGRAM**

**PROCEDURES**

Address any questions from participants and transition to next component.

**SUGGESTED SCRIPTS**

Throughout the program, we will be talking more about being a Peer Educator, Peer communication skills and Peer Outreach. For right now do you have any questions about the purpose of the SHIELD program?

Ok, let's move on and talk about some rules for our group so that we can all learn in a safe and supportive environment.

**1:2**

**SESSION 1 COMPONENT 2 DESCRIBE THE SHIELD PROGRAM**

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<b>Procedures</b>	<b>Suggested Script</b>	<b>Trainer Notes &amp; Slides</b>
7. Describe the freezing process.	<p>Ok, freeze. Now, we are going to transition back to our role of being trainers and you are the trainees.</p> <p>What I am doing right now is called freezing. As a facilitator you will use this strategy throughout the sessions to point highlights of the role-plays or to get the group to help a participant who is stuck.</p>	

<p>8. Debrief the demonstration.</p>	<p>So this was a demonstration of how the SHIELD program should be described to your group. What questions do you have about the script, the delivery or anything else?</p>	 <p>Show slide #118</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">Debriefing Session 1 Demonstration</p> <ul style="list-style-type: none"> <li>• Questions about script?</li> <li>• Challenges to delivering this component?</li> <li>• Other?</li> </ul> </div>
<p>9. Summarize the main points from component 2 of Session 1: Describing SHIELD program.</p>	<p>This introduction is so important in setting the tone for the rest of the training. As facilitators you want to get the group gelling with each other and have them buy into the program. So be enthusiastic in your delivery, emphasize their experience and expertise, and make the point that this is a program for different people so everyone is welcome.</p>	 <p>Show slide #119</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">Take Home Points</p> <ul style="list-style-type: none"> <li>• Be enthusiastic in your delivery.</li> <li>• Emphasize the expertise that they each bring to the room.</li> <li>• Emphasize that the program is designed for a variety of different people.</li> </ul> </div>
<p>10. Transition to trainer model of Peer Educator Role and outreach brainstorm.</p>	<p>Is everyone ok with Component #1?</p> <p>After you describe SHIELD you will review the group rules and briefly discuss the importance of the rules. The procedures for the group rules component is on page 27 and is fairly straightforward. We have made up a poster of Group Rules for you to see an example and you would have this hanging in your group room throughout the rest of the sessions.</p> <p>Next you will be having your group brainstorm about what a Peer Educator is and examples of Peer Outreach. We are going to demonstrate these components now, so put your participant hats back on and we will take questions after the demonstration.</p>	 <p><u>Trainer's note:</u> Display Group Rules newsprint.</p>  <p>Show slide #120</p> <div style="border: 1px solid black; padding: 10px; margin-top: 20px;"> <p style="text-align: center;">Trainers demonstrate</p> <p style="text-align: center;">Session 1: Component 4 &amp; 5 – Peer Educator and Peer Outreach Brainstorm</p> </div>

<p>11. Trainers model component 4 of Session 1: Brainstorming Activity.</p>		 <p><u>Trainer's notes:</u> Prior to the training, trainers should assign roles to these components. Display Peer Educator definition poster.</p>
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## TRAINERS DEMONSTRATION

### SESSION 1 COMPONENT 4 BRAINSTORMING ACTIVITY

<b>PURPOSE</b>	Participants will become energized and motivated about Peer Educator training.
<b>TIME</b>	20 minutes
<b>MATERIALS</b>	Blank newsprint; SHIELD Peer Educator poster; markers; tape

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
Re-state the purpose of the SHIELD program.	As we have described, the purpose of the SHIELD program is to train you to be a Peer Educator.
Ask participants to brainstorm their definition of a Peer Educator.  <i>✍️ FACILITATOR NOTE: As participants are sharing their definitions of Peer Educator, one facilitator should write down their responses on the newsprint while the other acknowledges their contribution.</i>	What do you think a Peer Educator is?  [Continue with script after the group discusses definition of a Peer Educator]  Yes, a Peer Educator is a person who can play so many different and important roles in the lives of the people they are in touch with everyday.
Define SHIELD Program Peer Educator.  <i>✍️ FACILITATOR NOTE: Hang SHIELD Peer Educator definition poster [Refer to Appendix 1 for poster content].</i>	Peer Educators are so many things such as [read definitions off newsprint].  As part of the SHIELD training, a Peer Educator is someone who conducts outreach to their peers by sharing HIV risk reduction information and resources so they can be safer.
Address any questions about definition of Peer Educator.	Does anyone have any questions about what a SHIELD Peer Educator is?
Point out that many of the participants are already helping others and sharing information and resources.	Many of you are probably already helping others be safer and healthier in different ways.



### SESSION 1 COMPONENT 4 BRAINSTORMING ACTIVITY

PROCEDURES	SUGGESTED SCRIPTS
<p>Ask participants to brainstorm examples of how they are already helping people in their lives/community.</p> <p><i>✍️ FACILITATOR NOTE:</i> 1) Allow time for participants to think about a situation where they are helping someone. If the group is stuck, encourage them to think about providing help with issues of drug use, health, housing, finances, etc.</p> <p>As participants are sharing, one facilitator should write responses on a new sheet of newsprint.</p>	<p>We would like to hear about some of the things that you are already doing to help people, such as sharing information and resources or advice with people.</p> <p>As you share your example, tell us a little about the person that you are helping.</p> <ul style="list-style-type: none"> <li>• How did you know that they needed your help?</li> <li>• How does it feel to give someone information that helps them?</li> <li>• Where did you learn about the resources that you shared?</li> </ul>
<p>Summarize the discussion and transition to session break.</p> <p><i>✍️ FACILITATOR NOTE:</i> During the break, hang the “Additional Examples of Peer Outreach” poster [Refer to Appendix 1 for poster content].</p>	<p>Thank you all for sharing! As you can hear from your stories you are already doing things as Peer Educators to help people be healthier. Also, don't forget that you have also helped yourself to be healthier the moment you decided to participate in this program. As a part of the SHIELD training program we will give you some additional tools to help enhance your role as a peer educator.</p> <p><b>Next we are going to take a 10 minute break.</b></p>

Procedures	Suggested Script	Trainer Notes & Slides
12. Pause the demonstration.	Ok we are going to pause -	
13. Tell group that you are going to move on in the session.	During the actual session you would allow a 10 minute break but we are going to keep moving in the demonstration.	

<p>14. Describe what Facilitators should do during the break.</p>	<p>While the participants are taking a break, you are instructed to display the Additional Examples of Peer Outreach poster.</p> <p>Now we are going back into the demonstration.</p>	 <p><u>Trainer's note:</u> Display Additional Examples of Peer Outreach poster.</p>
<p>11. Trainers model component 5 of Session 1: Peer Outreach Settings.</p>		 <p><u>Trainer's note:</u> Prior to the training, trainers should assign roles to these components.</p>

## TRAINERS DEMONSTRATION

### SESSION 1 COMPONENT 5 PEER OUTREACH SETTINGS

<b>PURPOSE</b>	Participants will generate examples of Peer Outreach and settings.
<b>TIME</b>	15 minutes
<b>MATERIALS</b>	Poster with additional peer outreach examples; blank newsprint; markers; tape

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
Settle group from break.	Welcome back from the break. Let's take our seats.
Review additional examples of Peer Outreach.  <b>📌 FACILITATOR NOTE:</b> Point out the poster of "Additional Examples of Peer Outreach".	Before the break you all shared some stories about how you are already helping people in your lives by sharing information and resources.  We want to encourage you to keep doing that because this is what the SHIELD training program is all about. It is also about taking the information we learn here and not only using it for our benefit, but also for the benefit of others.  Here are some examples that Peer Educators use to conduct outreach. [Read the poster aloud]
Ask the group to identify the variety of contexts where outreach can be conducted.  <b>📌 FACILITATOR NOTE:</b> Encourage participants to think of a variety of settings. If participants are having difficulty providing examples, use some of the examples listed in the suggested script.	You have seen the list of the different things that Peer Educators can do and use as topics for discussion. Now after looking at this list, can you all give me some examples of places where Peer Outreach can be done?  [Examples could include: at a hair salon, at a bus stop, after dinner, at a health clinic]

PROCEDURES	SUGGESTED SCRIPTS
<p>Emphasize the importance of safety when conducting Peer Outreach.</p> <p><b>FACILITATOR NOTE:</b>  <i>Again, encourage participants to think of a variety of settings. If participants are having difficulty providing examples, use some of the examples listed in the suggested script.</i></p>	<p>So what you all are saying is that Peer Outreach is not just standing on a street corner handing out condoms but can be talking to a girlfriend while we get our hair done or leaving brochures in your house for people to read.</p> <p>We want to make sure that whenever and wherever we are conducting Peer Outreach that we are considering our safety and the safety of the people that we are talking to. By safety we are not only talking about physical security, but also being safe with privacy.</p> <p>Who can give me an example of when Peer Outreach may not be safe?</p> <p>[Examples could included: On a busy street corner where drugs are being sold, during a support group, or when you may be disrupting someone's privacy]</p> <p>Be sure to weigh your options when conducting Peer Outreach in these places. Not only can it be a distraction for others, but it can also be unsafe.</p>
<p>Summarize and transition to identifying homework buddy activity.</p>	<p>Thank you all for sharing. In conducting Peer Outreach there may be some places or settings where Peer Outreach may not be safe. Let's move to the next part of the session where we are going to talk about choosing a homework buddy for you to practice Peer Outreach with during this program.</p>

Procedures	Suggested Script	Trainer Notes & Slides
14. Debrief the demonstration.	Ok, there was a lot going on with these components. What questions do you have?	 Show slide #121 <div data-bbox="1112 394 1502 642" style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;">Debriefing Session 1 Demonstration</p> <ul style="list-style-type: none"> <li>• Questions?               <ul style="list-style-type: none"> <li>– Suggested scripts</li> <li>– Procedures</li> <li>– Co-facilitation roles</li> </ul> </li> <li>• Challenges to delivering these components?</li> <li>• Comments?</li> </ul> </div>
15. Summarize components and transition into homework assignment and practice demonstration.	<p>From these components you want to convey to your group that a Peer Educator is someone who helps other people be safer but this does not entail that they stand on a street corner to be effective. It can mean something as simple as having a conversation with a friend or partner.</p> <p>Peer Outreach can be a range of things and can happen in a variety of settings. By having your group discuss the issue of safety for self and others you are setting the stage for talking about one of the PEER Communication skills in session 2 which is Pick the right time and place.</p> <p>We are going to do one more demonstration before we take a break and that is the Homework assignment and practice component.</p>	 Show slide #122 <div data-bbox="1127 810 1485 1094" style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;">Take Home Points</p> <ul style="list-style-type: none"> <li>• Peer Educators help other be safer.</li> <li>• Peer outreach can be a variety of different activities in a variety of settings.</li> <li>• Emphasize the importance of protecting the safety of self and other when conducting Peer Outreach.</li> </ul> </div>

16. Trainers model component 6 of Session 1: Homework & Practice.



Show slide #123

Trainers demonstrate

Session 1: Component 6 –  
Homework and practice



Trainer's note: Use Session 1 Homework assignment handout from SHIELD handouts folder.

## TRAINER DEMONSTRATION

### SESSION 1 COMPONENT 6 HOMEWORK & PRACTICE

<b>PURPOSE</b>	Parttipants will be assigned homework and identify a homework buddy.
<b>TIME</b>	15 minutes
<b>MATERIALS</b>	Session 1 homework handout

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
Describe the purpose of the homework assignment.	An important part of the SHIELD Peer Educator training is practicing the skills that we learn in these sessions. As they say, practice makes perfect; the more you practice, the more you will find yourself getting comfortable with the skills that you are being trained for. After each session, we are going to give you a homework assignment to try before the next session so that we really do get to practice what we are learning here. We know that life is busy and things do come up from time to time, sometimes more often than we would like them to. However, try to do each homework assignment so that when we come back together as a group for each session, we are able to share with each other how things are going, what works, and what does not work.
<p>Ask participants to identify 1-2 homework buddies.</p> <p><b>⚠️ FACILITATOR NOTE:</b> The goal of this activity is to have participants identify people in their lives to whom they can conduct outreach who are likely to be supportive of their outreach and easy to talk to.</p> <p>Based on the aim of conducting outreach to share HIV prevention information, choosing someone who is high risk such as an injection drug user is ideal. However, it is not intended that Peer Educators choose Homework Buddies who may jeopardize their drug treatment plan or drug recovery.</p>	The goal of the homework assignments are to try to give back everything that you are learning during our time together. It would be best to share information with the same person through out the entire program. We will call this person your Homework Buddy.



### SESSION 1 COMPONENT 6 PEER OUTREACH SETTINGS

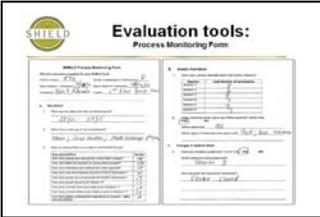
PROCEDURES	SUGGESTED SCRIPTS
<p>Ask participants to identify 1-2 Homework Buddies (CONTINUED).</p>	<p>The best people to choose are those who will be interested and supportive of you as you are being trained to be a Peer Educator. It would also be good if you could choose the people that you want to conduct Outreach with because you want to help them be safer, such as someone who is using or injecting drugs. Take a minute to think about a person that you will see or someone that you interact with on a regular basis and let's go around the room to share.</p> <p>[If participants identify individuals who may be challenging, ask why they may be challenging. Then have them identify someone who they think will be more receptive to outreach and ask why they may be more receptive]</p>
<p>Describe the homework assignment for Session 1.</p> <p><b>FACILITATOR NOTE:</b> The aim of this homework is to solicit participation and support of someone who will be available for the Peer Educator to practice their skills throughout the program.</p> <p>We recommend distributing a written handout of the homework assignment. This handout will help participants remember what the assignment is. A copy of the homework assignment can be found in the SHIELD Handouts for Participants Folder.</p>	<p>Your homework assignment, to be completed by the next session, is to: Tell your Homework Buddy that you are being trained in the SHIELD program to be a Peer Educator and ask them if they are willing to be your "Homework Buddy" for the next 5 sessions.</p> <p>Here are your reminder homework cards. [Now pass out the homework handout]</p> <p>Don't forget that the homework assignment is to be completed by the next time we meet, which will be the 2nd session.</p> <p>Please remember the person you chose today, because this will be the same person that we would like for you to keep working with throughout your training.</p> <p>Does anyone have any questions about this assignment?</p>

PROCEDURES	SUGGESTED SCRIPTS
<p>Have several participants do a role-play to practice how they will do their homework.</p> <p><b>FACILITATOR NOTE:</b>                      The purpose of this role-play is to allow participants to anticipate problems with their homework and to problem-solve with the aid of the facilitators and the group.</p>	<p>We would like to have a few volunteers role-play how they are going to do their homework. Before we do the role-play, tell us when you think you will see your Homework Buddy.</p> <p>[Have the participant role-play their homework assignment with a facilitator. The participant will play the role of Peer Educator and the facilitator will play their Homework Buddy].</p> <p>[Be sure to listen to the information given by the participant so that you can role-play with them accordingly. Provide encouragement and suggestions to participants as they are role-playing their homework.]</p> <p>One thing to remember is that the more time you spend doing the homework, the more your Homework Buddy will get out of it. Ideally the homeworks should take 10-15 minutes to do. If you find it hard to stretch the homework out that long, we can discuss it at the beginning of the next session.</p> <p>Can I have another person volunteer to do the role-play?</p>
<p>Summarize point about homework practice.</p>	<p>Thank you to those who volunteered to role-play. As you could see, when approaching your Homework Buddy, remember these tips:</p> <ul style="list-style-type: none"> <li>• Make sure it is a good time for them.</li> <li>• Explain what your homework is.</li> <li>• Ask them - do not tell them.</li> </ul>

Procedures	Suggested Script	Trainer Notes & Slides
<p>17. Debrief the demonstration.</p>	<p>As you may have notice, we passed out copies of the homework assignment to participants as we did the demonstration.</p> <p>In the SHIELD handouts folder, there are homework assignment cards that you can copy and distribute to your participants. There are 3 copies of the assignment on each handout so you would just cut them.</p> <p>What questions do you have about the homework assignment and role-play?</p>	 Show slide #124 <div data-bbox="1133 390 1474 657" style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;">Debriefing Session 1 Demonstration</p> <ul style="list-style-type: none"> <li>• Questions? <ul style="list-style-type: none"> <li>- Suggested scripts</li> <li>- Procedures</li> <li>- Co-facilitation roles</li> </ul> </li> <li>• Challenges to delivering these components?</li> <li>• Comments?</li> </ul> </div>
<p>18. Review the importance of the homework assignments.</p>	<p>As facilitators it is important to make sure that ample time is allowed so that you can review the homework assignment at the end of the session, answer questions about the assignment, have participants identify their homework buddy and prepare or practice doing their homework.</p> <p>This planning time increases the likelihood that participants will do the homework and have a good experience doing the homework.</p> <p>The homework component is related to Core Elements 4 and 5 of the SHIELD intervention. By having participants continue to practice their skills this will reinforce their identity as a Peer Educator and motivate them to do Peer Outreach.</p>	 Show slide #125 <div data-bbox="1084 942 1453 1209" style="border: 1px solid black; padding: 10px; margin-top: 10px;">  <p><b>Homework Assignment</b></p> <hr style="border: 0.5px solid orange;"/> <ul style="list-style-type: none"> <li>• Opportunities to practice peer outreach. <ul style="list-style-type: none"> <li>- Core Elements 4 &amp; 5</li> </ul> </li> <li>• Reinforce Peer Educator identity <ul style="list-style-type: none"> <li>- Core Element 5</li> </ul> </li> </ul> </div>

<p>19. Review criteria for Homework Buddies.</p>	<p>When participants are choosing their homework buddy try to use these criteria as a guideline. Ideally, we want their buddies to be someone who could benefit from the HIV prevention information being presented in SHIELD such as a drug user but we also want the buddy to be someone who is supportive to the participant.</p> <p>Finally, we want participants to choose buddies with whom they see at least weekly.</p>	 Show slide #126 <div data-bbox="1081 317 1451 581" style="border: 1px solid black; padding: 10px;">  <b>Homework Buddy - Criteria</b> <ul style="list-style-type: none"> <li>• Individual who could benefit from the HIV prevention information (e.g. drug users, IDUs, individuals with multiple sex partners)</li> <li>• Individual who is supportive of the participant being trained to be a Peer Educator</li> <li>• Individual who the participant sees at least once a week</li> </ul> </div>
<p>20. Discuss how to manage barriers to identifying Homework Buddies.</p>	<p>There will be instances where your participants may have a difficult time identifying a homework buddy or where a homework buddy does not work out well. Pay attention to the people that your participants are choosing as Homework buddies. Remember we want participants to have positive and rewarding experiences sharing information so if someone tells you that they want to do their homework with someone with whom they also have a lot of conflict, as a facilitator you would want to encourage them to pick a more supportive person in addition.</p> <p>As facilitators you should be creative keeping in mind the reason for doing the homework, which is to practice skills. In some cases, you may need to spend time having the participant think about different people in their lives who are supportive of them. As a last resort you may need to ask another participant to be a homework buddy or have the participant practice their homework with a facilitator after the session.</p> <p>Finally, to the extent possible,</p>	 Show slide #127 <div data-bbox="1118 867 1489 1134" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b>Facilitating Homework Assignment component</b></p> <ul style="list-style-type: none"> <li>• Facilitators should assist participants with identifying <u>appropriate</u> Homework buddies.</li> <li>• Be <u>creative</u> if there is no appropriate Homework buddy for a participant.</li> <li>• Encourage participants to stick with the <u>same</u> Homework buddy throughout the sessions.</li> </ul> </div>

	<p>encourage your participants to do their homework with the same person.</p>	
<p>21. Summarize component and transition to describing the Summary component.</p>	<p>The most important aspect of the homework assignment and practice component is that you allow plenty of time for participants to practice and problem-solve. As facilitators, really listen to participants when they describe how they plan to approach their homework buddy. Make suggestions about ways to approach their homework buddy in a way that will result in a positive experience.</p> <p>What questions do you have about this component?</p> <p>The last component of session one is the summary. A suggested script is provided for you in the Facilitators Guide. You want to make sure that everyone knows when Session 2 is scheduled and get people excited to return.</p> <p>You also want to distribute a calendar of the remaining SHIELD sessions to remind participants.</p> <p>In the SHIELD handouts folder, there is a calendar that you can use to fill in the dates for the remaining sessions.</p>	
<p>22. Describe Appendix I: Session Debriefing</p>	<p>After this session, it is really important to spend a few minutes with your co-facilitator and supervisor talking or debriefing. In your Facilitator Guide you will see Appendix 3 entitled Session Debriefing. This appendix provides some suggested questions for reflecting on program successes and problem-solve when challenges arise. Debriefings will also help with preparation for the next session.</p>	<p> Show slide #128</p> <div data-bbox="1101 1528 1446 1772" style="border: 1px solid black; padding: 5px;"> <p> <b>Session Debriefing</b></p> <ul style="list-style-type: none"> <li>• To be conducted after each session.</li> <li>• Facilitators and Program Manager or Supervisor.</li> <li>• Focus on successes and challenges of each session.</li> <li>• See Facilitator Debriefing Guidelines.</li> </ul> <p style="text-align: right; font-size: small;">128</p> </div>

<p>23. Show completed Process Monitoring form.</p>	<p>The session debriefing is a great tool to collect process monitoring and evaluation data.</p> <p>There are 2 forms in your Monitoring and Evaluation Guide that you can start completing after each session.</p> <p>Each form will be representative of a full cycle of the 6 SHIELD sessions. But, you want to start adding the data after each session while the information is still fresh.</p> <p>Specifically, complete the Process Monitoring form to keep track of attendance, changes in the schedule, incentives and referrals given out.</p> <p>Here is an example of a completed Process Monitoring form.</p>	 Show slide #129 
<p>24. Show completed Process Evaluation form.</p>	<p>Also, the Process Evaluation form should be used to document any changes to the core elements.</p> <p>Here is an example of a completed process evaluation form.</p> <p>Later in the training we will talk a lot more about evaluation; consider this the introduction.</p>	 Show slide #130 
<p>25. Summarize Day 1 of the training.</p>	<p>We have covered a lot of material today. We talk about the SHIELD package and provided a lot of background on the intervention.</p> <p>What questions do you have about the material we have discussed today?</p> <p>Tomorrow we will cover Sessions 2-5.</p>	

# DAY 2



[http://www.middletownschools.org/uploaded/Board\\_of\\_Education/calendar.jpg](http://www.middletownschools.org/uploaded/Board_of_Education/calendar.jpg)

# MODULE 16

**Welcome and Recap of Day 1**

## MODULE 16: Welcome and Recap of Day 1



### Objectives of the Module

1. Summarize material covered in Day 1 of the training.



### Time

9:00-9:15am



### Materials

Laptop & projector

“Prizes” for TOF trainees that give correct answers to review questions.

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Welcome participants back to training.</p>	<p>Welcome to Day 2 of the training. Yesterday we covered a lot of background information about SHIELD and got through session 1.</p> <p>Before we get started on new materials, we want to briefly review what we covered yesterday.</p>	<p> Show slide #131</p> <div style="border: 1px solid black; padding: 10px; text-align: center; margin: 10px auto; width: fit-content;"> <p><u>Review of Day 1</u></p> </div> <p> <u>Trainer's notes:</u> Have SHIELD posters covered up so participants don't see the answers.</p> <p>Ask review questions and then select 1 participant to provide the answer.</p> <p>Give a little prize to each participant who answers a question correctly.</p>

2. Review SHIELD aims.	Question #1: Who can tell me what the 2 aims of SHIELD are?	 <p><u>Trainer's note:</u> The correct responses are:</p> <ol style="list-style-type: none"> <li>1) To train individuals to be Peer Educators who conduct outreach with <u>peers</u> by sharing HIV risk reduction information.</li> <li>2) To reduce Peer Educators' own HIV risk behaviors.</li> </ol>
3. Review SHIELD Core Elements	Question#2: Who remembers what the SHIELD Core Elements are?	 <p><u>Trainer's note:</u> The correct responses are:</p> <ol style="list-style-type: none"> <li>1) SHIELD is implemented in a small group setting</li> <li>2) Participants go through the SHIELD Sequence</li> <li>3) Each SHIELD intervention session follows a specific structure</li> <li>4) SHIELD sessions aim to build three sets of skills necessary for participants to be a Peer Educator</li> <li>5) Every session includes interactive Peer Educator training activities</li> </ol>
4. Review Number of SHIELD sessions.	Question #3: How many sessions are in the SHIELD intervention?	 <p><u>Trainer's note:</u> The correct Response is 6 sessions.</p>
5. Review boosters.	Question #4: True or false: Boosters are a part of the SHIELD sequence and are required.	 <p><u>Trainer's note:</u> The correct Response is False. Although boosters are a part of the SHIELD sequence, they are an optional step.</p>

<p>6. Summarize and transition to Session 2.</p>	<p>Wow, it looks like you remembered a lot of information from yesterday. Today we are going to talk about Sessions 2-5. We are also going to discuss booster sessions and offer some tips on evaluating SHIELD.</p>	
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# MODULE 17

## SHIELD Session 2

## MODULE 17: SHIELD Session 2



**By the end of this module, trainees will:**

1. Describe the procedures and activities in SHIELD Session 2.
2. Observe a Trainer Demonstration of Homework Check-in.
3. Observe a Trainer Demonstration of Presenting new Information: PEER Communication Skills.
4. Observe a Trainer Demonstration of Peer Educator Training Activities.



**Time**  
9:15-10:45am



**Materials**

- Laptop & projector
- Newsprint: Homework Check-in questions
- Newsprint: Peer Communication skills
- Newsprint: Body Fluids
- Newsprint: Lubricants
- Handout: Peer Communication skills cards

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Introduce the session.</p>	<p>Now we will be moving into Session 2 of the SHIELD program.</p>	<div style="display: flex; align-items: center;"> <p>Show slide #132</p> </div> <div style="border: 1px solid black; width: 150px; height: 100px; margin: 10px auto; text-align: center; padding: 10px;"> <p><b><u>SESSION 2</u></b></p> </div>
<p>2. Describe preparation for Session 2.</p>	<p>Before each session, there are some things that you should be doing to prepare. The beginning of each session has a list of activities that facilitators should do to prepare for a given session.</p> <p>First, we suggest making reminder calls to your group so that you have good attendance and this also can be a chance to remind them to do their homework.</p>	<div style="display: flex; align-items: center;"> <p>Show slide #133</p> </div> <div style="border: 1px solid black; width: 150px; height: 100px; margin: 10px auto; padding: 10px;"> <p style="text-align: center;"><b><u>Session 2: Preparation</u></b></p> <ol style="list-style-type: none"> <li>1. Reminder calls to participants.</li> <li>2. Co-facilitation issues               <ol style="list-style-type: none"> <li>a) Dividing up the session</li> <li>b) Facilitator role-model practice</li> </ol> </li> <li>3. Materials preparation               <ol style="list-style-type: none"> <li>a) Posters</li> <li>b) PEER Communication cards</li> <li>c) HIV review game materials</li> <li>d) Handout with homework assignment</li> </ol> </li> </ol> </div>

We also suggest planning time with your co-facilitator to meet to review the session. When you meet you should discuss who will be taking the lead for different sections of the session and who will be responsible for getting materials together.

In this session there is a Facilitator Role-Model where you will be demonstrating to the group how a Peer Educator uses PEER Communication skills. Please turn to page 49 of your Facilitators Guide. In the second procedure listed on this page, you will see a Facilitators Note that instructs you to choose a scenario to role-model and there are accompanying scripts to go with each scenario. Prior to the session you should decide which scenario you will be demonstrating and should practice this so that it is flawless. It may also be helpful to review and practice Component 3 which is an HIV information activity.

Finally, prior to the session you will want to make sure all of your materials are together. These include posters and materials for the different activities.

Preparation is key to success for implementing SHIELD. There is nothing worse than coming to a group where you are not prepared or are not familiar with the materials.

<p>3. Review the objectives of Session 2.</p>	<p>Let's review the objectives of this session. The objectives of this session are to 1) provide positive reinforcement of the Peer Educator role, 2) to introduce the PEER Communication skills and 3) to review HIV risk information.</p>	 <p><u>Trainer's note:</u> Point to the objectives as you describe each one.</p>  <p>Show slide #134</p> <div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Session 2: Objectives</b></p> <ol style="list-style-type: none"> <li>1. To provide support and positive reinforcement for Peer Educator role.</li> <li>2. To introduce and practice PEER Communication skills</li> <li>3. To review basic HIV risk information</li> </ol> </div>
<p>4. Review Session 2 activities in sequence.</p>	<p>Session 2 follows the SHIELD session structure – which is Core Element #3. This structure has 5 components and is the structure in the remaining sessions.</p> <p>Component 1 is the homework check-in followed by component two which is where you will be presenting new information specifically the PEER Communication skills. You and your co-facilitator will do a role-play demonstrating good and not so good examples of using the PEER Communication skills.</p> <p>After a break is component 3 which are the Peer Educator training activities which include having the group work together to problem-solve questions about HIV risk and then doing role-plays to practice how a Peer Educator can talk to someone about this information. Then for component 4, you will assign homework and allow enough time for people to practice doing their homework and then summarize the session.</p>	 <p>Show slide #135</p> <div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Session 2: Structure</b></p> <ol style="list-style-type: none"> <li>1. Homework check-in</li> <li>2. Present new information: PEER Communication skills</li> <li>3. Peer Educator Training Activities: Group problem solving (HIV information) &amp; Roleplay</li> <li>4. Homework assignment and practice</li> <li>5. Summary</li> </ol> </div>

<p>5. Introduce demonstration of component 1 of Session 2: Homework check-in</p>	<p>We are going to demonstrate components 1, 2 and 3 for you.</p> <p>For this demonstration we will be in the role of group facilitators. You will observe each of us taking the lead role while the other co-facilitates.</p> <p>We want you all to be in the role of group participants. However, feel free to take notes and write down your questions. After the demonstration we will switch back into training mode and will debrief.</p>	 Show slide #136 <div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: fit-content;"> <p style="text-align: center;">Trainers demonstrate</p> <p style="text-align: center;">Session 2 – Components 1-3</p> </div>
<p>6. Trainers model components 1-3 of Session 2: Homework check-in and Present new information following the procedures and script.</p>		 <u>Trainer's note:</u> Display newsprint with Homework Check-in questions. <p>In this demonstration, you will use the following posters:</p> <ol style="list-style-type: none"> <li>1) PEER communication skills</li> <li>2) Body Fluids</li> <li>3) Lubricants</li> </ol>

## TRAINER DEMONSTRATION

### SESSION 2 COMPONENT 1 HOMEWORK CHECK-IN

<b>PURPOSE</b>	Participants will discuss their experiences with doing the homework assignment.
<b>TIME</b>	20 minutes
<b>MATERIALS</b>	Poster with homework check-in questions; tape

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
Welcome participants to group.	<p>We are so excited that you all are back for the second session.</p> <p>Before we get to anything else, we want to first of all remind you that the goal of The SHIELD Peer training program is to train you to conduct peer outreach so that we as a community can help stop the spread of HIV and other STD's.</p>
Describe the homework check-in component.	The first thing we will do at the beginning of each session is to check in with you to hear how your homework assignment went. Remember that the homework assignment is an important part of your Peer Educator training because it gives you a chance to practice your skills with people in your own life. If you were not able to do the homework or if the homework did not go as you wanted we still want to hear about your experience.
Ask the group to describe the homework assignment from the prior session.	So unless anyone has any questions, who can remind us what your homework assignment from Session 1 was?



SESSION 2 COMPONENT 1 HOMEWORK CHECK-IN

PROCEDURES	SUGGESTED SCRIPTS
<p>Ask the participants to share their homework experience.</p> <p> <b>FACILITATOR NOTE:</b>  <b>SESSION 1 HOMEWORK ASSIGNMENT:</b>  Tell your Homework Buddy that you are being trained in the SHIELD program to be a Peer Educator and ask them if they are willing to be your “homework buddy” for the next 5 sessions.</p> <p>Now hang poster with homework check-in questions to guide the discussion [Refer to Appendix 1 for poster content].</p> <p><b>DO NOT read the last question on the poster because the participants have not yet been exposed to the PEER Communication skills.</b></p> <p><b>Attempt to get responses from ALL participants. In the case where a participant was not able or did not do their homework, help them problem-solve so that they can avoid the barriers that they encountered.</b></p>	<p>Who would like to share how your homework went? We would like you to start by first telling us who you did your homework with and how you approached them.</p> <p>[Read questions aloud off poster. DO NOT read the last question.]</p>
<p>Summarize the discussion.</p>	<p>Thank you all for sharing with us. It sounds like from what you shared: [Summarize their experiences].</p> <p>As we talked about last session there are some situations and settings for Peer Outreach that are better than others. This is a great transition into the next part of the session, which is on the 4 PEER Communication skills that Peer Educators use to conduct Peer Outreach.</p>

**SESSION 2 COMPONENT 2 PRESENT NEW INFORMATION:  
PEER COMMUNICATION SKILLS**

<b>PURPOSE</b>	Participants will learn PEER Communication Skills to be used during Peer Outreach.
<b>TIME</b>	25 minutes
<b>MATERIALS</b>	PEER Communication Skills poster; PEER Communication skills cards; tape; markers

**PROCEDURES**

Have the group brainstorm examples of Communication skills that Peer Educators should use when conducting Peer Outreach.

**FACILITATOR NOTE:**  
As participants are brainstorming examples, one facilitator should write their ideas on a new sheet of newsprint.

**SUGGESTED SCRIPTS**

Now we want to spend some time talking about communication.

What are some examples of communication skills that you think Peer Educators should use when we conduct Peer Outreach?

[Skills that should be covered include:

- Non-verbal skills (e.g. good eye contact),
- Affirming body posture (e.g. not having arms crossed),
- Speaking in a respectful manner (e.g. not yelling or cussing)
- Choosing a good time and place for the conversation
- Being non-judgmental and respectful.]

[Demonstrate and expand on how these make communication better. Examples:

- "Looking someone in the eyes when they are talking with you lets them know that you are paying attention."
- "Repeating back to a person what he or she has just said lets them know that you have heard everything that they said."
- "Choosing a good time and place to have a conversation that may be sensitive or private, lets the person know that you respect their feelings and privacy."]



**SESSION 2 COMPONENT 2 PRESENT NEW INFORMATION:  
PEER COMMUNICATION SKILLS**

**SESSION 2 COMPONENT 2 PRESENT NEW INFORMATION:  
PEER COMMUNICATION SKILLS**

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Have the group brainstorm examples of Communication skills that Peer Educators should use when conducting Peer Outreach (CONTINUED).</p>	<p>While we are on the subject about what makes good communication, what are some things that will turn a person off when trying to have a talk with them.</p> <p>[Possible examples: having arms crossed, cutting off a person while they are speaking, rolling your eyes, telling a person what to do, etc.]</p>
<p>Summarize the brainstorm and transition to the 4 PEER Communication skills.</p>	<p>You all covered many important points about communication skills needed to conduct Peer Outreach. For your Peer Educator Training we have identified 4 skills called PEER Communication skills to use to conduct Peer Outreach. So let's take a look at these PEER Communication skills which can be remembered with the word PEER.</p>
<p>Discuss "Pick the Right Place and Time".</p> <p><b>FACILITATOR NOTE:</b> Have the PEER Communication Skills Poster hanging with each letter covered.</p> <p>As you review each letter of the PEER Communication Skills, reveal that part of the poster only.</p>	<p>The first PEER Communication skill is something that we have already talked about:</p> <p>"P" Pick the Right Place and Time: As many of you have mentioned, talking about HIV prevention can be a sensitive topic and Peer Educators are more likely to have a good conversation with someone if the time is good. Last session we talked about different settings and situations that would be good or not so good to do Peer Outreach in. Asking a person "is this a good time?" is one way that we can make sure it is a good time and place.</p>

**SESSION 2 COMPONENT 2 PRESENT NEW INFORMATION:  
PEER COMMUNICATION SKILLS**

PROCEDURES	SUGGESTED SCRIPTS
<p>Discuss "Evaluate Their Situation".</p> <p><b>FACILITATOR NOTE:</b> As you review each letter of the PEER Communication Skills, reveal that part of the poster only.</p>	<p>The second PEER communication skill is: "E" Evaluate Their Situation. In order to evaluate someone's situation we need to listen to what they are saying. Good listening skills include verbal and non-verbal skills. Verbal skills include asking questions to clarify what they are saying and verbally showing them that you are listening (such as uh-huh, ok, etc). Who can give me some examples of good non-verbal skills that we should use [Examples could include: good eye contact, nodding your head, leaning toward the individual]</p> <p>Does anyone have any questions about the second PEER Communication skill?</p>
<p>Discuss "Explore Safer Options".</p> <p><b>FACILITATOR NOTE:</b> As you review each letter of the PEER Communication skills reveal that part of the poster only.</p>	<p>The third skill is: "E" Explore Safer Options. Part of being a Peer Educator is helping people reduce their risk based on what options work for them. It is more effective to offer people a range of safer options than to tell them what to do based on what we want them to do. One way that we can do this is by asking them what options they think are the most realistic for their situation.</p>
<p>Discuss "Resources and Referrals".</p> <p><b>FACILITATOR NOTE:</b> As you review each letter of the PEER Communication skills reveal that part of the poster only.</p>	<p>The last PEER Communication skill is "R" Resources and Referrals. Peer Educators should be prepared to provide people with a variety of resources (such as condoms and clean water) and referrals (such as locations of HIV testing sites and drug treatment information) so that they can help their peers be more successful in reducing their risk.</p>



**SESSION 2 COMPONENT 2 PRESENT NEW INFORMATION:  
PEER COMMUNICATION SKILLS**

**SESSION 2 COMPONENT 2 PRESENT NEW INFORMATION:  
PEER COMMUNICATION SKILLS**

PROCEDURES	SUGGESTED SCRIPTS
<p>Summarize PEER Communication skills and transition to the Facilitator Role Model of using PEER Communication skills.</p> <p> <b>FACILITATOR NOTE:</b> Pass out Peer Communicaiton Skills Cards [Refer to the SHIELD Handouts for Participants Folder].</p>	<p>We think that by using these 4 Communication skills when you conduct Peer Outreach, you are more likely to be successful in having conversations about HIV risk and be more effective in helping your peers make plans for being safer.</p> <p>Does anyone have any questions about the PEER Communication skills?</p> <p>So now we are going to do a demonstration of how the PEER Communication skills look in action.</p>
<p>Describe the Facilitator Role Model scenario and expectations of the participants.</p> <p> <b>FACILITATOR NOTE:</b> If there is only one facilitator for the group, ask a participant to volunteer to be the Peer. Meet with them briefly and share with them the script that they should use to respond to the Peer Educator.</p>	<p>We are going to do a role-play to show you how a Peer Educator can use these PEER Communication skills when doing Peer Outreach. I will be the Peer Educator and [co-facilitator] will be the peer. During the role-play we want you to pay attention to how I (Peer Educator) do using my PEER Communication skills. When the role play is over, we are going to ask you to comment on how you think I did. Does anyone have any questions about what is going to happen next?</p>

**SESSION 2 COMPONENT 2 PRESENT NEW INFORMATION:  
PEER COMMUNICATION SKILLS**



**SESSION 2 COMPONENT 2 PRESENT NEW INFORMATION:  
PEER COMMUNICATION SKILLS**

PROCEDURES	SUGGESTED SCRIPTS
<p>Describe the scenario that will be used for the Facilitator Role Model.</p> <p><b>✍️ FACILITATOR NOTE:</b> PRIOR TO THE SESSION, choose one of the following scenarios:</p> <ol style="list-style-type: none"> <li>(1) Friend is busy with a crying baby.</li> <li>(2) Partner just walks through the door from work.</li> <li>(3) Partner on his way to buy drugs.</li> </ol> <p>Directions for the role-play: Each facilitator should choose a role. For the facilitator playing the Peer Educator, in the first “take” (the bad example) avoid using the PEER Communication skills.</p>	<p>Here is the scenario [Read scenario aloud- See next page for scripts]</p>
<p>Conduct Facilitator Role Model using Bad Example.</p>	<p>[Use suggested scripts on the following pages for Bad Example]</p>
<p>Debrief the Bad Example role-play.</p> <p><b>✍️ FACILITATOR NOTE:</b> As the group is discussing the Role Model ask them for specific suggestions on how the Peer Educator can do a better job.</p>	<p>So, how do you think I did as a Peer Educator?</p> <ul style="list-style-type: none"> <li>• Did I pick the right place and time? Why or why not?</li> <li>• Did I evaluate the situation? Why or why not?</li> <li>• How do you think my peer felt?</li> </ul> <p>Let me redo the scenario using your suggestions.</p>
<p>Conduct Facilitator Role Model using Good Example.</p>	<p>So based on your comments it sounds like I need to re-try the role play really using my PEER Communication skills. I am going to use your suggestions and try again. Tell me what you think.</p> <p>[Use suggested scripts on the following pages for Good Example]</p>



**SESSION 2 COMPONENT 2 PRESENT NEW INFORMATION:  
PEER COMMUNICATION SKILLS**

Session 2 Facilitator **Role Model** Scripts:

**Directions for the Role Model:** Each facilitator should choose a role. For the facilitator playing the Peer Educator, in the first “take” (the bad example) avoid using the PEER communication skills. [PE stands for Peer Educator]

1. Friend is busy with a crying baby.

**Setting:** PE stops by the house. Baby is really crying and the friend is looking tired and frazzled.

**Scripting for a Bad Example:**

PE: Hey Girl what’s going on?

Friend: I think Tyrone is teething, he has not slept and has been crying non-stop, girl I am tired!

PE: Well I stopped by to tell you about this program I just joined and to see if you can help me do my homework because I am going to be trained to be a Peer Educator. So what do you think?

**Scripting for a Good Example:**

PE: Hey Girl what’s going on?

Friend: I think Tyrone is teething, he has not slept and has been crying non-stop, girl I am tired!

PE: Oh I am sorry to hear that, you do look like you could use a break. Can I do something to help out, like go to the store for some teething gel?

Friend: Oh thanks, my mom is coming over with some in a little bit. What’s up?

PE: Well I wanted to tell you about a new program that I started, but it can wait until you have less on your plate to deal with. Is it ok if I call you later after your mom gets here to help you?

Friend: Yes, I really do want to hear about the program but this is not the best time. So call me later!

**Session 2 Facilitator Role Model Scripts:**

2. Partner just walks through the door from work.

**Setting:** PE is in a long term relationship with partner who is a former injector who sometimes smokes crack. Partner comes home and has one foot through the door after a long day at the auto shop.

***Scripting for a Bad Example:***

PE: Hey Baby I'm glad you finally came home!

Partner: Why is that? All I want to do is put my feet up and relax, it was a crazy day, and we had 10 cars come into the shop!

PE: Oh well I joined this program today where I am going to learn about HIV and STDs and I need you to do my homework with me.

***Scripting for a Good Example:***

PE: Hey Baby I'm glad you finally came home!

Partner: Why is that? All I want to do is put my feet up and relax, it was a crazy day, and we had 10 cars come into the shop!

PE: Oh, you do look tired, let me get out of your way so that you can sit down.

Partner: Thanks, how was your day?

PE: Well I joined this program that I am very excited about but if you want to rest a bit I can tell you about it later.

Partner: Well I am glad that you are excited but if you could give me about half an hour to relax I would be in a better mood to hear about it.

PE: Sure, I will be upstairs if you need anything, but go ahead and rest. You do look tired.



Session 2 Facilitator Role Model Scripts:

3. Partner on his way to buy drugs

**Setting:** PE sees a running buddy walking quickly on a busy street.

***Scripting for a Bad Example:***

PE: Hey man, what's up I haven't seen you in a bit?

Partner: What do you want; I don't have any money to lend you and am trying to make it to the spot for the testers.

PE: Oh, I'll walk with you so that I can tell you about a new program that I am in where I am being trained to be an outreach worker.

***Scripting for a Good Example:***

PE: Hey man, what's up I haven't seen you in a bit?

Partner: What do you want; I don't have any money to lend you and am trying to make it to the spot for the testers.

PE: No worries man, I wasn't trying to move in on you and don't want to get in your way. I will look for you later in the day after you get yourself well because I do want to tell you about this program. You may even be interested in joining up, but I will catch you later.

**SESSION 2 COMPONENT 2 PRESENT NEW INFORMATION:  
PEER COMMUNICATION SKILLS**

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Debrief the Good Example Role Model.</p>	<p>So, how do you think I did this time as Peer Educator?</p> <ul style="list-style-type: none"> <li>• Did I pick the right place and time? Why or why not?</li> <li>• Did I evaluate the situation? Why or why not?</li> <li>• How do you think my peer felt?</li> </ul>
<p>Summarize and transition to the break.</p> <p> <b>FACILITATOR NOTE:</b> Now hand out PEER Communication Cards [Refer to the SHIELD Handouts for Participants Folder].</p>	<p>Thanks for all of your suggestions. As you can see, when I use my PEER Communication skills the conversation went much smoother and my peer was more open to hearing about the program and having more conversations in the future.</p> <p>We have made you some cards that have the 4 PEER Communication skills on it for you to keep in your pocket to help you when you do your Peer Outreach. You are going to get a chance to practice your PEER Communication skills after the break.</p> <p>Now we are going to take a 10 minute break.</p>



**SESSION 2 COMPONENT 2 PRESENT NEW INFORMATION:  
PEER COMMUNICATION SKILLS**

<b>Procedures</b>	<b>Suggested Script</b>	<b>Trainer Notes &amp; Slides</b>
<p>7. Tell group that you are going to move on in the session.</p>	<p>During the actual session you would allow a 10 minute break but we are going to keep moving and demonstrate Component 3 which is the Peer Educator Training activities.</p>	

## TRAINER DEMONSTRATION

**SESSION 2 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING AND ROLE-PLAY WITH HIV INFORMATION REVIEW**

<b>PURPOSE</b>	Participants will review information about HIV and practice using PEER Communication Skills.
<b>TIME</b>	25 minutes
<b>MATERIALS</b>	HIV information questions; body fluids poster/ lubricants poster; lubricant cards; tape; markers

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Welcome group back from the break and introduce the Peer Educator Training Activity.</p>	<p>Welcome back from the break. Please take your seats so that we can get started.</p> <p>We have just been talking about the 4 PEER Communication skills that we can use to conduct Peer Outreach. Who can review for us what those 4 skills are?</p> <p>Now we are going to do an activity so that we can practice using these skills when we talk to our peers about HIV information.</p>
<p>Describe the activity rules.</p>	<p>For this activity, we will be asking you a question and we want you all to come up with the answer. Once we agree on the correct answer we are going to read a scenario and we want you to brainstorm some things that a Peer Educator could say to their peer in that scenario.</p> <p>Does anyone have any questions before we start?</p>

**SESSION 2 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING AND ROLE-PLAY WITH HIV INFORMATION REVIEW**



**SESSION 2 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING AND ROLE PLAY WITH HIV INFORMATION REVIEW**

**HIV Information Review Activity Questions and Problem-solving Questions**

**Directions:**

- Read the question in Part A (bolded).
- Have the group discuss and come up with an answer.
- State the correct answer and read the explanation.
- Read PART B to debrief the question and have group brainstorm

*Question #1*

**PART A:**

**Facilitator Read: True or False: You can tell if someone has HIV by looking at them.**

Answer: **FALSE**

Explanation: People who are infected with HIV do not always show symptoms. Thinking that you can tell if someone has HIV by looking at them is harmful for 3 reasons:

- 1) by thinking that the person looks "safe" you may not use protection,
- 2) it stigmatizes people who do not look "healthy" and
- 3) you can not tell that someone has HIV most of the time.

**PART B: This is also true for STDs. People who have been infected with an STD may not have any symptoms. Now that we know that you cannot tell if someone has HIV by looking at them, let's role-play using your PEER skills to talk to someone who says "that someone you know must have HIV because they look gray and their hair is falling out".**



**SESSION 2 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING AND ROLE-PLAY WITH HIV INFORMATION REVIEW**

HIV Information Review Activity Questions and Problem-solving Questions

Question #2

Show poster with the following body fluids written on it.

BLOOD	SWEAT	SEMEN
URINE	TEARS	VAGINAL SECRETIONS
SALIVA	BREAST MILK	FECES

**PART A:**

**Facilitator Read:** Please come up to the poster and circle which fluids you think **CAN** spread HIV.

**FACILITATOR NOTE:**

Allow 1 participant at a time to come up to the poster and circle a fluid. Each time someone finishes circling a fluid, ask the group, “Does anyone else think that another fluid can spread HIV?” Once there is no one left in the group that thinks a fluid should be circled, have the group discuss whether they agree or disagree on the final answer and provide the correct answer with explanation. Finally, place “X’s” over those fluids that do not transmit HIV.

Explanation:

- There are only 4 fluids that transmit HIV: blood, semen, vaginal secretions and breast milk. The reason why these are the only fluids that can transmit the virus is because they are the only fluids that HIV can survive in.
- These body fluids do not transmit HIV: sweat, tears, urine, feces, and saliva.

**PART B:** Now that we know which fluids can and cannot transmit HIV, let’s role-play using your PEER Communication skills to talk to one of your peers who says that they heard about someone getting infected from eating after an HIV-positive person and using their fork or spoon.

**SESSION 2 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING AND ROLE PLAY WITH HIV INFORMATION REVIEW**

**HIV Information Review Activity Questions and Problem-solving Questions**

*Question #3*

**PART A:**

**Facilitator Read:** True or False: People living with HIV (HIV-positive) should use condoms with each other.

Answer: TRUE

Explanation: There are different strains of the HIV virus that people can infect each other with. Also, using condoms protects from other STDs.

**PART B:** Use your PEER Communication skills to talk to someone who says, “If you have HIV you don’t have to wear a condom if you have HIV-positive partners”.

2:3

**SESSION 2 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING AND ROLE-PLAY WITH HIV INFORMATION REVIEW**

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**SESSION 2 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING AND ROLE-PLAY WITH HIV INFORMATION REVIEW**

**HIV Information Review Activity Questions and Problem-solving Questions**

*Question #4*

Show a poster that has two columns: one labeled OK to use with LATEX condoms and one labeled NOT OK to use with LATEX condoms.

Lubricants OK to use with LATEX condoms	Lubricants NOT OK to use with LATEX condoms

**PART A:**

**Facilitator Read:** For this question we are going to be handing out different lubricants that people use with latex condoms. We want you to come to the poster and place your lubricant in the correct column based on whether you think you can or cannot use it with a LATEX condom.

**FACILITATOR NOTE:**

After each participant places a lubricant card on the poster have the group discuss whether they agree or disagree and then provide the correct answer with explanation. If participants ask about female or polyurethane condoms, acknowledge that any kind of lubricant can be used with those types of condoms. Point out that in Session 4 we will talk about these types of condoms and lubricants in detail.

**Explanation:** Petroleum or oil based lubricants (such as Vaseline, baby oil, massage oils, and lotion) break down latex (which is a form of rubber). Water-based lubricants (such as K-Y jelly, Astroglide) and silicone-based lubricants (such as ID Millennium, Wet Platinum) are safe for latex condoms.

Lubricants OK to use with LATEX condoms		Lubricants NOT OK to use with LATEX condoms	
K-Y Jelly	ID Millennium	Vaseline	Baby Oil
Astroglide	Wet Platinum	Massage Oils	Lotion

**PART B:** Now that we know which lubricants we can and cannot use with a latex condom, use your PEER Communication skills to suggest options to one of your peers who insists that massage oil is the best lubricant with Trojans condoms.

**SESSION 2 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:**  
**GROUP PROBLEM-SOLVING AND ROLE-PLAY WITH HIV INFORMATION REVIEW** **2:3**

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**SESSION 2 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:**  
**GROUP PROBLEM-SOLVING AND ROLE PLAY WITH HIV INFORMATION REVIEW**

**HIV Information Review Activity Questions and Problem-solving Questions**

*Question #5*

**PART A:**

**Facilitator Read:** This question is about injection risk. True or False: The best way to clean your needles is by using hot water.

**Answer:** FALSE

**Explanation:** The best practical method for cleaning needles and works is rinsing with cold water. Because blood contains proteins, hot water makes the blood stick to the needle where cold water does a better job rinsing the needle. [Use the example of using cold water to wash blood out of clothes.]

**PART B:** Use your PEER Communication skills to talk to someone who tells us that their needle is clean because they boiled it in hot water.

**2:3**

**SESSION 2 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:**  
**GROUP PROBLEM-SOLVING AND ROLE-PLAY WITH HIV INFORMATION REVIEW**

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HIV Information Review Activity Questions and Problem-solving Questions.

Question #6

PART A:

Facilitator read: True or False: You don't need to go back to get your HIV test results because if you are positive the testing center will come and find you.

Answer: FALSE

Explanation: While there may be some testing centers who track positive test results this is not done by everyone. Instead of making assumptions about your result it is best to go and see the testing counselors. Also, by going back you may learn about resources in your community.

PART B: Now that we know that testing centers don't always try to find people who have a positive test, use your PEER Communication skills to talk to someone who tells you that they were tested while they were incarcerated, but aren't worried because if they had tested positive the jail would come and find them.

PROCEDURES

Debrief the activity and transition to homework assignment and practice.

SUGGESTED SCRIPTS

You all did a great job! As Peer Educators, sharing information is one form of conducting Peer Outreach. Often times, we may find ourselves in a situation where misinformation or a myth about HIV is being discussed. As Peer Educators, we can use this time as an opportunity to have a conversation about the correct information and offer resources to others. We may also find ourselves in a situation where we are asked a question and do not know the answer. As Peer Educators, what should we do in this situation?

[Facilitators should solicit feedback from the group and then summarize]

Because Peer Educators are an important resource in the community it is best to be honest if we do not know the answer.

Does anyone have questions before we move on?

Let's talk about your next homework assignment.

# 2:3

## SESSION 2 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES: GROUP PROBLEM-SOLVING AND ROLE-PLAY WITH HIV INFORMATION REVIEW

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Procedures	Suggested Script	Trainer Notes & Slides
8. Stop the demonstration	So let's stop the demonstration and switch back into training-mode.	
9. Summarize the demonstration	<p>Ok, there was a lot going on with these components. Let's summarize and then we can debrief.</p> <p>During component 1, the homework check-in you want to make sure that you are providing positive reinforcement for doing or attempting to do the homework by identifying one thing that they may have done really well. Make sure you provide encouragement for those who did not do their homework or were unable to do the homework because you want them to try to do the next homework.</p> <p>For component 2, the main point is for your group to see how using the first two PEER communication skills picking the right time and place and Evaluating the situation can make a difference in having a conversation. Make sure you practice the demonstration with your co-facilitator so that it can be smooth.</p>	 <p>Show slide #137</p> <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p>Session 2 Demonstration Summary</p> <ul style="list-style-type: none"> <li>• <b>Component 1: Homework</b> <ul style="list-style-type: none"> <li>- Provide positive reinforcement.</li> <li>- Listen for examples of picking the right place &amp; time and listening</li> </ul> </li> <li>• <b>Component 2:</b> <ul style="list-style-type: none"> <li>- You want the group to see how picking the right place &amp; time and listening can make a difference in the conversation.</li> </ul> </li> <li>• <b>Component 3:</b> <ul style="list-style-type: none"> <li>- Sharing new and correct information about HIV is one way to conduct Peer Outreach.</li> </ul> </li> </ul> </div>

	<p>For component 3, note that the instructions in the Facilitators Guide indicates to have the participants brainstorm what Peer Educators can say to their peers for each knowledge question and then to role-play HOW they would have this conversation with their peers. In cases where you are running behind in time, we suggest that the facilitators choose a couple of role-plays. For example, have them role-play using PEER communication skills to talk to a peer about who says that they heard that you could get infected by eating after someone who has HIV (question #2).</p> <p>Another point that we want to make about is that most of the time your group will have learned something new about HIV. This is important because their homework will be to share what they learned with their homework buddy. The second point of the activity is that sharing information is one way to do Peer Outreach.</p>	
<p>10. Debrief demonstration</p>	<p>Now what questions do you all have about the demonstrations or the components?</p>	 Show slide #138 <div data-bbox="1133 1314 1472 1575" style="border: 1px solid black; padding: 10px; margin-left: 20px;"> <p style="text-align: center;">Debriefing Session 2 Demonstration</p> <ul style="list-style-type: none"> <li>• Questions about content?</li> <li>• Challenges to this session?</li> </ul> </div>
<p>11. Describe the homework assignment.</p>	<p>To wrap up Session 2, please turn to page 61 which is component 4: Homework and practice. As we said previously, the homework assignment is to share with someone new information that you learned during the HIV activity. You want to encourage your group to do their</p>	 Show slide #139

	<p>homework with the same person that they did session 1 homework with. The exception to this would be if that person does not seem suitable to be a homework buddy.</p> <p>Make sure you leave time for people to role-play doing the homework so that you can help them with planning the right time and place. As the directions indicate, a facilitator should play the homework buddy so that the role-play can stay controlled.</p> <p>Also, the SHIELD handouts folder has a copy of the Session 2 homework assignment that you can pass out to participants.</p> <p>There is also a handout of cards that lists the PEER communication skills. These cards will assist participants as they do their homework.</p> <p>What questions do you have about Session 2?</p>	<div data-bbox="1117 233 1451 472" style="border: 1px solid black; padding: 5px;">  <p style="text-align: right;"><b>Extras</b></p> <hr/> <p><b>Participant (Homework) Assignment for Session 2:</b> Share with buddy new information that you learned during the HIV review game.</p> <p><b>Volunteers Needed:</b> Two for 3:1 (HW) Assignment Check-In [pg. 69] and two for 3:3 PEER Educator Training Activities [pg. 74]</p> </div>
<p>12. Transition to the break.</p>	<p>Before the break, we want to get volunteers for the next set of teachbacks that will happen so that the teams can use part of the break to prepare and ask us questions.</p>	<div data-bbox="1024 1150 1084 1220" style="float: left; margin-right: 10px;">  </div> <p>Show slide #140</p> <div data-bbox="1117 1264 1406 1478" style="border: 1px solid black; padding: 20px; text-align: center; margin: 10px auto; width: fit-content;"> <p>15 minute break</p>  </div>

<p>6a. Trainer to meet with Teachback facilitators.</p>		 <p><u>Trainer's notes:</u> Take volunteers off to the side to give them instructions for this Teachback.</p> <p>Ask the volunteers if they have any questions.</p> <p>Help them decide who will take the lead.</p> <p>Review with them the Homework Check-in Poster.</p> <p>Assure them that you will be standing by if they get stuck or need a suggestion.</p>
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# MODULE 18

## SHIELD Session 3

## MODULE 18: SHIELD Session 3

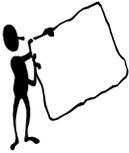


**By the end of this module, trainees will:**

1. Describe the procedures and activities in SHIELD Session 3.
2. Conduct a Teachback of Homework Check-in.
3. Observe a Trainer Demonstration of the SHIELD Sex Risk Reduction Ladder.
4. Conduct a Teachback of Peer Educator Training Activities.



**Time**  
11am-12:30pm



**Materials**

- Laptop & projector
- Newsprint: Homework check-in questions
- Blank Risk Reduction Ladder
- Sex Risk Reduction Ladder
- Sex risk behavior cards
- Handout: Sex risk reduction ladder

Procedures	Suggested Script	Trainer Notes & Slides
1. Introduce the session.	Session 3 is one of two sessions focused on reducing HIV sex risk.	 Show slide #141  <div style="border: 1px solid black; padding: 10px; text-align: center;"> <p><b><u>SESSION 3</u></b></p> </div>
2. Review the objectives of Session 3.	The objectives of this session are to continue to build and support participant’s Peer Educator skills, to review information about the risks associated with sex and provide different options for reducing this risk and to have participants practice their PEER Communication skills to conduct Peer Outreach.	 Show slide #142  <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">Session 3: Objectives</p> <ol style="list-style-type: none"> <li>1. To provide support and positive reinforcement for Peer Educator role</li> <li>2. To review sex risk information and risk reduction options</li> <li>3. To practice using PEER Communication skills about sex risk reduction</li> </ol> </div>

<p>3. Review Session 3 activities in sequence.</p>	<p>The structure in this session should look pretty familiar. Component 1 is the homework check-in, Component 2: Present new information which is specifically the Sex risk reduction ladder, Component 3 is the Peer Educator training activities which will be group problem solving and role-plays. Component 4 is the homework and practice and component 5 is the summary.</p>	 Show slide #143 <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;">Session 3: Structure</p> <ol style="list-style-type: none"> <li>1. Homework check-in</li> <li>2. Present new information: Sex risk reduction options ladder</li> <li>3. Peer Educator Training: Group problem solving &amp; Role plays</li> <li>4. Homework assignment and practice</li> <li>5. Summary</li> </ol> </div>
<p>4. Describe Teachback activity</p>	<p>To review component 1: Homework check-in we are going to do what is called a Teachback. Has anyone ever done a Teachback before?</p> <p>The purpose of a Teachback is to have you all demonstrate or teach back to us what you have learned, which is in this case Component 1. This is a great opportunity to practice your facilitation skills and get used to using the Facilitators Guide. Each of you will be asked to Teachback component 1 before the end of the training. After each Teachback we will debrief and review how things went.</p>	 Show slide #144 <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><u>Teachback</u></p> <p style="text-align: center;">Session 3 – Component 1 Homework check-in</p> </div>
<p>5. Walk through the procedures of the Homework check-in with the entire group.</p>	<p>Before we get started, let's walk through the procedures for Component 1. Please turn to page 69 of your Facilitators Guide. To begin the session and this component you want to welcome your group back and introduce the homework check-in activity. Make sure you encourage everyone to share their experience even if they were not able to do the homework. You want people in the group to help them problem-solve what happened so that they can avoid the same thing for Session 3's homework.</p>	 <u>Trainer's note:</u> Display newsprint with Homework Check-in questions.

	<p>Ask the group to remind you what the homework assignment was and have people share their experiences. You hang the Homework Check-in poster in the front of the room that lists probes and questions to ask as people are sharing. You want to particularly focus on how the participant did with Picking the right time and place which is the first of the PEER Communication skills and what PEER communication skill they thought they did the best with. At the end you want to summarize the discussion and provide lots of praise and encouragement to all.</p> <p>Any questions?</p>	
<p>6. Get volunteers to Teachback component 1: Homework check-in</p>	<p>For the Teachback we have two volunteers who will be the group facilitators. We will all play the role of the participants.</p>	
<p>6b. Trainer to meet with group playing participants.</p>		<p> <u>Trainer's notes:</u> Instruct the rest of the group to act like typical clients from their agency.</p> <p>Answer any questions about what their role should be.</p>
<p>7. Conduct the Teachback of component 1: Homework check-in.</p>		<p> <u>Trainer's note:</u> As the Teachback is happening, make note of instances where the facilitators redirected the conversation back to conducting Peer Outreach, being a Peer Educator and/or PEER communication skills. Also note examples of good co-facilitation creating a supportive environment.</p>

**TEACHBACK**

<b>PURPOSE</b>	Participants will discuss their experiences with doing the homework assignment.
<b>TIME</b>	20 minutes
<b>MATERIALS</b>	Poster with homework check-in questions; tape

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
Welcome participants to group.	Welcome to the third session of the SHIELD program. Thanks for making it back!
Conduct the homework check-in component of the session.	As we did last session, we will be starting this session by checking in to see how your homework went. If you were not able to do the homework or if the homework did not go as you wanted we still want to hear about your experience.
<p>Ask the group to describe the homework assignment from the prior session.</p> <p><i>[Icon]</i> <b>FACILITATOR NOTE:</b>                      Session 2 homework assignment was to share with someone new information that you learned during the HIV review game.</p> <p>Now display the poster with Homework Check-in Questions. [Refer to Appendix 1 for poster content]. Use these questions to guide the discussion.</p>	<p>So unless anyone has any questions, who can remind us what your homework assignment was from Session 2?</p>

<p>Ask the group to describe the homework assignment from the prior session.</p> <p><i>[Icon]</i> <b>FACILITATOR NOTE:</b>                      In the case where a participant was not able or did not do their homework, help them problem-solve so that they can avoid the barriers that they encountered.</p>	<p>Who would like to share how your homework went? We would like you to start by first telling us who you did your homework with and how you approached them.</p> <p>[Read questions off poster]</p>
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**PROCEDURES**

Summarize the discussion.

**SUGGESTED SCRIPTS**

Thank you all for sharing with us. It sounds like many of you had a [insert description] experience sharing new information about HIV.

A few points that we want to make are:

- Sharing information is a great way to get people interested in having a conversation about HIV prevention.
- Using the opening line "I learned something so interesting today, can I tell you what I learned?" is effective, but it is important to remember the first PEER Communication skill which is to pick the right time and place.

Does anyone have any questions or closing comments before we move on?



<p>8. Debrief Teachback.</p>	<p>Give yourselves a round of applause and let's acknowledge the excellent work of our brave volunteers!</p> <p>To debrief this Teachback we want to hear from everyone. Because multiple Perspectives are an important training tool.</p> <p>So let's hear first from the Facilitators. What was your experience like? What were your struggles and strengths?</p> <p>Does anyone from the group want to share their observations or how their experience is going to help them prepare to facilitate this component? Lastly, we would like to offer our</p>	<div data-bbox="1015 1165 1112 1270" data-label="Image"> </div> <p><b>Trainer's note:</b> Point out strengths and areas for improvement.</p> <div data-bbox="1015 1459 1079 1543" data-label="Image"> </div> <p>Show slide #145</p> <div data-bbox="1101 1560 1495 1843" data-label="Complex-Block" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><u>Teachback – Debriefing:</u> Homework check-in</p> <ul style="list-style-type: none"> <li>• <b>Facilitators</b> <ul style="list-style-type: none"> <li>– How did it feel to lead this activity?</li> <li>– What were your challenges?</li> <li>– What did you feel comfortable with?</li> </ul> </li> <li>• <b>Group participants</b> <ul style="list-style-type: none"> <li>– Observations about the activity?</li> <li>– How will your perspective influence how you prepare to facilitate this component?</li> </ul> </li> <li>• <b>Trainers Observations</b></li> </ul> </div>
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	observations of the delivery of the component.	
9. Summarize and transition to demonstration of Sex risk reduction ladder	So to summarize Component 1 – the homework check-in, this is a great opportunity for Peer Educators to share their experiences and learn from each other different strategies for conducting Peer Outreach. Always point out the positive so that people feel successful. Let’s move on to a demonstration of the sex risk ladder which is component 2.	 Show slide #146 <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p style="text-align: center;"><u>Homework Check-in</u> <u>Take home points</u></p> <ul style="list-style-type: none"> <li>• Through homework check-ins, participants will: <ul style="list-style-type: none"> <li>- Share experiences</li> <li>- Learn different strategies for Peer Outreach</li> <li>- Problem-solve solutions to any challenges they encounter</li> </ul> </li> <li>• Facilitators should focus on the positive so participants feel successful</li> </ul> </div>
10. Introduce Component 2 demonstration.	We are going to demonstrate how you would facilitate this component. So we will be taking off our trainers hats and putting on our facilitators hats and we need you all to put on your participant hats. Feel free to take notes or jot down questions as we move through this. Afterwards we will summarize and debrief.  Are you ready to begin?	 Show slide #147 <div style="border: 1px solid black; padding: 10px; margin-top: 10px; text-align: center;"> <p>Trainers demonstrate</p> <p>Session 3</p> <p>Component 2: Risk reduction ladder</p> </div>

11. Demonstrate component 2: Present new information, using procedures from the Facilitators Guide.		 <u>Trainer’s note:</u> Display blank risk reduction ladder with “Sex risk” ladder card.  In this demonstration, you will use the following materials: <ol style="list-style-type: none"> <li>1) Sex risk behavior cards</li> <li>2) Sex risk ladder handout</li> </ol>
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## TRAINERS DEMONSTRATION

### SESSION 3 COMPONENT 2 PRESENT NEW INFORMATION: SEX RISK REDUCTION OPTIONS

<b>PURPOSE</b>	Participants will learn about different levels of HIV sex risk and options for reducing risk.
<b>TIME</b>	30 minutes
<b>MATERIALS</b>	Blank risk reduction ladder poster with sex behavior cards; sex risk ladder answer key; Velcro tape

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Explain to participants that this session will specifically focus on conducting Peer Outreach to reduce sex risk and to share options for safer sex.</p>	<p>Today we are going to focus on ways that we can help others reduce their HIV sex risk and how to use our PEER Communication skills to talk about sex risk. Talking about sex is sensitive and can be embarrassing for some people. We want to remind you about the group rules, especially Respect. People do different things and people have different preferences when it comes to sex and as Peer Educators we need to be respectful, even if we disagree with others' choices.</p>
<p>Explain the sex risk reduction ladder layout.</p> <p> <b>FACILITATOR NOTE:</b> Now display a blank risk ladder poster as you begin this section.</p>	<p>When talking about sex risk, what we want you to realize is that there are different levels of risk associated with different sex behaviors. We are going to use a ladder to describe these different levels of risk.</p> <p>[Point out blank ladder poster]</p> <p>The higher up on the ladder the higher the HIV risk. Notice the higher up on this ladder the color gets red to indicate danger and as you go down the ladder the color becomes blue for less risk. The ground on this poster represents not having sex as the safest option.</p>

**SESSION 3 COMPONENT 2 PRESENT NEW INFORMATION:  
SEX RISK REDUCTION OPTIONS**

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Pass out cards for Sex risk ladder activity and describe directions.</p> <p><b>FACILITATOR NOTE:</b> As participants place their cards on the ladder, ask them to explain their reasons for the placement. Allow the cards to be placed incorrectly so that there can be a good discussion from the group.</p>	<p>We are going to do an activity so that we can talk about the different levels of risk associated with different sex behaviors. We are going to give you each a card with a behavior written on it. We want you to come up to the poster, tell the group what is written on your card and then place it on the ladder based on how risky you think it is. Then we will discuss. Does anyone have any questions?</p>
<p>Rearrange sex behavior cards so that they are correct and summarize.</p> <p><b>FACILITATOR NOTE:</b> Use the Sex Risk Ladder Answer Key to determine the correct order of behavior cards on ladder [Refer to SHIELD Handouts for Participants Folder].</p>	<p>You all did a wonderful job with this activity. The main point of this ladder is that there are many different options available to us and our peers for reducing HIV risk related to sex.</p> <p>So let's walk through the different levels starting at the top of the ladder which is the highest risk. Having anal sex without a condom is the riskiest type of sex. Who can say why this is? [Answer: Because the tissue in the anal area is sensitive and can easily tear which would either increase the chance that blood will be present or be an open cut].</p> <p>Vaginal sex without a condom is also a very high risk behavior. The vaginal area is much stronger than the anal area but what body fluids are present during unprotected vaginal sex? [Answer: Vaginal secretions, semen and possibly blood].</p> <p>Farther down the ladder, a safer option is having vaginal or anal sex with a condom. Because a condom is a barrier, if you use it properly from start to finish, it greatly reduces HIV transmission and infection. We will be spending most of the next session talking about condoms.</p>



**SESSION 3 COMPONENT 2 PRESENT NEW INFORMATION:  
SEX RISK REDUCTION OPTIONS**

**SESSION 3 COMPONENT 2 PRESENT NEW INFORMATION:  
SEX RISK REDUCTION OPTIONS**

PROCEDURES	SUGGESTED SCRIPTS
<p>Rearrange sex behavior cards so that they are correct and summarize (CONTINUED).</p> <p><b>📌 FACILITATOR NOTE:</b> The risk behaviors on the ladder are not specific to any sexual orientation or identity. HIV transmission risk associated with sharing sex toys is sparse so if participants ask about this refocus the discussion to risk associated with the different body fluids that can transmit HIV. For example, if there was HIV infected blood present on a dildo then sharing could be a risk. Encourage using a condom on sex toys.</p>	<p>Farther down the ladder, an even safer option is performing oral sex, where your mouth is on someone's penis or vagina. In fact, oral sex is about 20-50 times less risky than vaginal or anal sex. Remember that HIV can be transmitted through cum or women's vaginal fluid so getting these fluids in your mouth is still a risk. This risk can be higher if you have cuts or open sores on your lips, mouth, or tongue.</p> <p>Using your hands to stimulate your partner is very low risk for HIV infection. Remember that vaginal secretions and semen can transmit HIV so be aware if you have cuts or sores on your hands.</p> <p>And as we said in the beginning of this activity, not having sex is an option and is the only option that will ensure that you will not get infected or infect someone else with HIV. As Peer Educators we should be using our PEER Communication skills to evaluate whether this is a realistic option to suggest to our peers. In some cases it will be, but in others it may not. Does anyone have any questions about any of the behaviors and their levels of risk on the ladder?</p>
<p>Summarize and transition to the break.</p> <p><b>📌 FACILITATOR NOTE:</b> During the break, display the sex risk ladder poster.</p>	<p>The point of this activity was to point out the variety of options that we can suggest to our peers for being safer when it comes to sex. After the break we are going to do an activity where we are going to brainstorm what we can say to our peers when talking about sex risk and you will also get a chance to role-play the scenario as a Peer Educator.</p> <p>Let's take a 10 minute break.</p>

Procedures	Suggested Script	Trainer Notes & Slides
<p>12. Summarize demonstration of Component 2: Sex risk ladder.</p>	<p>Use the Sex risk reduction ladder handout that is in the SHIELD handouts folder to guide you through the correct placement of the behaviors.</p> <p>There are a few points about this component that we would like to make.</p> <ol style="list-style-type: none"> <li>1. To prepare for this activity make sure that you have your behavior cards ready to hand out.</li> <li>2. Make sure that you review the Ladder answer key so that you know how to rearrange the behaviors.</li> <li>3. Allow participants to place the cards on the ladder and then rearrange and explain the correct order.</li> <li>4. When explaining the behaviors on the ladder ALWAYS start from the top, that way you can say: “a safer option is...” versus moving up the ladder which is going to higher levels of risk.</li> <li>5. Lastly, notice the Facilitator note that addresses the question of sharing sex toys.</li> </ol>	<p> Show slide #148</p> <div style="border: 1px solid black; padding: 10px;">  <b>Summarizing Session 3 – Sex Risk Ladder Demonstration</b> <ul style="list-style-type: none"> <li>• Prepare for activity (cards, answer key)</li> <li>• Engage your group in the activity</li> <li>• When explaining the ladder start at the TOP and move down (“a safer option is”)</li> <li>• Facilitator note on risk associated with sharing sex toys (FG pg. 73).</li> </ul> </div>
<p>13. Debrief demonstration of Component 2: Sex risk ladder.</p>	<p>What other questions do you have about this component?</p>	<p> Show slide #149</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">Debriefing Session 3 – Sex risk ladder demonstration</p> <ul style="list-style-type: none"> <li>• Questions about content?</li> <li>• Challenges to this session?</li> </ul> </div>
<p>14. Summarize and</p>	<p>Learning how to facilitate the ladder</p>	

<p>transition to Teachback of Component 3-Peer Educator Training Activities.</p>	<p>activity takes practice and you will have the chance to Teachback a risk ladder tomorrow. Right now we are going walk through the procedures for Component 3 of Session 3 which is the Peer Educator Training Activities so that two volunteers can do a Teachback of this component.</p>	
<p>15. Walk through the procedures for Session 3 – Component 3.</p>	<p>Please turn to page 74 of your Facilitators Guide. The main focus of this component is getting your group to practice using their skills. You are provided with two scenarios involving sex risk behaviors. You may also add another scenario that is more relevant to your participants.</p> <p>You are going to read each scenario to your group and then use the Problem-solving questions to lead a discussion focused on what a Peer Educator can do or say for the person in the scenario. You want your group to be specific when they make suggestions or answer the questions. Once the group has discussed different ways to conduct Peer Outreach for the scenario ask for two volunteers from the group, one to play the Peer Educator and one to play the peer. After the role-play, you want to debrief with your Peer Educator and peer just like we do after a demonstration.</p> <p>What questions do you have about the procedures for this component?</p>	 Show slide #150 <div data-bbox="1105 596 1500 879" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Facilitating Peer Educator Activities</u></b></p> <ul style="list-style-type: none"> <li>• Choose a suggested scenario or add one that is relevant to your group</li> <li>• Read scenario aloud to the group</li> <li>• Use problem-solving questions to guide discussion of suggestions for what a Peer Educator can do or say in the given scenario</li> <li>• Ask participants to do a role-play</li> </ul> </div>
<p>16. Get volunteers to Teachback component 3: Peer Educator Training activities.</p>	<p>For this Teachback we will need two volunteers who will be the group facilitators. We will all play the role of the participants.</p>	 Show slide #151 <div data-bbox="1149 1646 1500 1820" style="border: 1px solid black; padding: 10px; text-align: center;"> <p><b><u>Teachback</u></b></p> <p>Session 3 – Component 3 Peer Educator Training Activities</p> </div>

<p>16a. Trainer to meet with Teachback facilitators.</p>		 <p><u>Trainer's notes:</u> Take volunteers off to the side to give them instructions for this Teachback.</p> <p>Ask the volunteers if they have any questions.</p> <p>Help them decide who will take the lead.</p> <p>Review with them the Homework Check-in Poster.</p> <p>Assure them that you will be standing by if they get stuck or need a suggestion.</p>
<p>16b. Trainer to meet with group playing participants.</p>		 <p><u>Trainer's note:</u> Instruct group to act as typical participants in their agency.</p>
<p>17. Conduct the Teachback of component 3: Peer Educator Training Activities.</p>		 <p><u>Trainer's note:</u> As the Teachback is happening, make note of instances where the facilitators redirected the conversation back to different options on the sex risk ladder, being a Peer Educator and/or PEER communication skills. Also note examples of good co-facilitation creating a supportive environment.</p>

## TEACHBACK

### SESSION 3 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES: GROUP PROBLEM-SOLVING & ROLE-PLAYS

<b>PURPOSE</b>	Participants will review safer sex options and practice using PEER Communication skills.
<b>TIME</b>	30 minutes
<b>MATERIALS</b>	PEER Communication Skills Poster

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Review the PEER Communication skills and explain the group problem solving activity.</p>	<p>Welcome back from the break!</p> <p>We have spent the beginning of the session talking about different safer sex options. Now let's review our PEER Communication skills to get ready for our next activity.</p> <p>Who can tell us what the 4 skills are? [Choose participants from the group to say what the 4 PEER communication skills are].</p> <p>For the next activity we are going to read you a scenario and ask you to answer some questions about how a Peer Educator can use their PEER Communication skills to help their peer be safer. Then, we are going to ask for volunteers to role-play the scenario using the groups' suggestions. Does anyone have any questions before we begin?</p>
<p>Group problem solving for scenario 1.</p> <p> <b>FACILITATOR NOTE:</b> You may tailor the scenarios to fit your specific group or you may ask your group to volunteer a scenario to problem-solve. Make sure that you use the problem-solving discussion questions to guide the discussion.</p> <p>Pass out Session 3 Scenario #1 Cards. [Refer to the SHIELD Handouts for Participants Folder]. Have participants follow along as you read aloud.</p>	<p>Here is the first scenario:</p> <p>Jason and his female partner have been together for 12 years. Jason also has sex with men without his female partner's knowledge. He does not use condoms with her but will occasionally use condoms when he has sex with men he doesn't know.</p>



### SESSION 3 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES: GROUP PROBLEM-SOLVING & ROLE-PLAYS

**SESSION 3 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING & ROLE PLAYS**

PROCEDURES	SUGGESTED SCRIPTS
<p>Group problem solving for Scenario 1 (CONTINUED).</p>	<p>Problem-solving questions:</p> <ul style="list-style-type: none"> <li>• What is Jason doing that is risky? [Ask the group what PEER Communication skill this represents. Answer: Evaluate the situation.]</li> <li>• What are some safer options that you could suggest to Jason when he exchanges sex? (e.g. use condoms, only have oral sex) [Ask the group what PEER Communication skill this question represents. Answer: Explore safer options.]</li> <li>• When would be a good time and place to talk to Jason about his risk? [Ask the group what PEER Communication skill this represents. Answer: Pick the right time and place.]</li> <li>• What would be some resources and referrals that we could have available when we talk to Jason? [Answer: Condoms, lubes, information about places to get free condoms.]</li> </ul>
<p>Have participants volunteer and describe the guidelines for the role-play.</p> <p><b>FACILITATOR NOTE:</b> If participants are reluctant to role-play then have one facilitator play the Peer Educator for the first scenario, but insist that someone volunteer for the second scenario.</p>	<p>You all did an excellent job coming up with some suggestions for things that a Peer Educator could say and suggest to Jason. Now we would like a volunteer to role-play the Peer Educator who is going to conduct Peer Outreach to Jason. Can we get another volunteer to role-play Jason?</p> <p>Now before we get started let me explain that it is ok if the Peer Educator wants to pause or time-out the role-play to get additional suggestions from the group or to get your thoughts together. Just say time-out. For those of you observing the role-play look for examples of when the Peer Educator uses their PEER Communication skills. After the role-play we will discuss how things went.</p> <p>Are there any questions?</p>

**SESSION 3 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING & ROLE-PLAYS**

PROCEDURES	SUGGESTED SCRIPTS
<p>Have volunteers role-play scenario.</p> <p><b>FACILITATOR NOTE:</b> Pay attention to instances when the Peer Educator uses PEER Communication skills so that you can comment on this during the debriefing.</p>	<p>Now , we would like to role-play this scenario. Can we have a couple of volunteers be the Peer Educator and Jason?</p>
<p>Debrief the role-play.</p> <p><b>FACILITATOR NOTE:</b> Include your comments during the debriefing.</p>	<p>Let's give our volunteers a round of applause!</p> <p>To debrief this role-play, first we want to hear from the Peer Educator. How did it feel in this scenario doing Peer Outreach?</p> <p>Now let's hear from Jason; how did it feel when the Peer Educator was suggesting safer options and resources for being safer?</p> <p>Lastly, from the group, which PEER Communication skills did you see in action?</p>
<p>Summarize the scenario.</p>	<p>Excellent job everyone! Remember when we conduct Peer Outreach it is really important to pick the right time and place and then to listen and evaluate their situation so that we can suggest options that are realistic to them.</p>
<p>Group problem solving for scenario 2.</p> <p><b>FACILITATOR NOTE:</b> You may tailor the scenarios to fit your specific group or you may ask your group to volunteer a scenario to problem-solve. (Make sure that you use the problem-solving discussion questions to guide the discussion.) (e.g. have participants brainstorm safer options that they can suggest, where a good time and place for the conversation is, and what resources are appropriate.)</p>	<p>Here is the second scenario:</p> <p>Kara is a close friend who you know smokes crack and occasionally injects drugs. She tricks for her drugs and has a pretty regular group of dates. You run into Kara one day and she is pretty high. She tells you that her last date just paid her "real good" for doing it raw (without a condom) and she was able to really score some good drugs.</p>



**SESSION 3 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING & ROLE-PLAYS**

**SESSION 3 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING & ROLE PLAYS**

PROCEDURES	SUGGESTED SCRIPTS
<p>Group problem solving for scenario 2 (CONTINUED).</p> <p><i>📄</i> <b>FACILITATOR NOTE:</b> Pass out Session 3 Scenario #2 Cards. [Refer to the the SHIELD Handouts for Participants Folder]. Have participants follow along as you read aloud.</p>	<p>Problem-solving questions:</p> <ul style="list-style-type: none"> <li>• What is Kara doing that is risky?</li> <li>• Is this the best time to talk to Kara about her risk? How could you follow-up with her later?</li> <li>• What are some safer options that you could suggest to Kara that are realistic for her? [e.g., oral sex or hand jobs, use condoms when dates want to have vaginal or anal sex]</li> <li>• What are some resources and referrals that you can have for Kara?</li> </ul>
<p>Have volunteers role-play scenario.</p> <p><i>📄</i> <b>FACILITATOR NOTE:</b> Pay attention to instances when the Peer Educator uses PEER Communication skills so that you can comment on this during the debriefing.</p>	<p>Now , we would like to role-play this scenario. Can we have a couple volunteers be the Peer Educator and Kara?</p>
<p>Debrief the role-play.</p> <p><i>📄</i> <b>FACILITATOR NOTE:</b> Include your comments during the debriefing.</p>	<p>Let's give our volunteers a round of applause!</p> <p>Let's first hear from the Peer Educator. How did it feel in this scenario doing Peer Outreach?</p> <p>Now let's hear from Kara, how did it feel when the Peer Educator was suggesting safer options and resources for being safer?</p> <p>Lastly, from the group, which PEER Communication skills did you see in action?</p>

**SESSION 3 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING & ROLE-PLAYS**

**PROCEDURES**

Summarize and transition to homework assignment and practice.

**SUGGESTED SCRIPTS**

You all did a great job using your PEER communication skills. Now we are going to tell you your homework assignment for today so that you can get some more practice and conduct Peer Outreach.



**SESSION 3 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES:  
GROUP PROBLEM-SOLVING & ROLE-PLAYS**

Procedures	Suggested Script	Trainer Notes & Slides
<p>18. Debrief Teachback.</p>	<p>Give yourselves a round of applause and let's acknowledge the excellent work of our brave volunteers!</p> <p>To debrief this Teachback we want to hear from everyone because multiple perspectives are an important training tool.</p> <p>So let's hear first from the Facilitators. What was your experience like? What were your struggles and strengths?</p> <p>Does anyone from the group want to share their observations or how their experience is going to help them prepare to facilitate this component? Lastly, we would like to offer our observations of the delivery of the component.</p>	 <p><u>Trainer's note:</u> Point out strengths and areas for improvement.</p>  <p>Show slide #152</p> <div data-bbox="1133 1272 1487 1562" style="border: 1px solid black; padding: 5px;"> <p><b><u>Teachback – Debriefing: Peer Educator Training Activities</u></b></p> <ul style="list-style-type: none"> <li>• <b>Facilitators</b> <ul style="list-style-type: none"> <li>– How did it feel to lead this activity?</li> <li>– What were your challenges?</li> <li>– What did you feel comfortable with?</li> </ul> </li> <li>• <b>Group participants</b> <ul style="list-style-type: none"> <li>– Observations about the activity?</li> <li>– How will your perspective influence how you prepare to facilitate this component?</li> </ul> </li> <li>• <b>Trainers Observations</b></li> </ul> </div>
<p>19. Summarize and transition to describing the Homework</p>	<p>As we said previously, this component is a great way to get your participants to really start practicing their skills and applying their new</p>	

<p>assignment for Session 3</p>	<p>knowledge about risk. You can tailor the scenarios to fit with your target population and you can also use a scenario that a participant describes or wants help with.</p> <p>After you complete this component you will be moving into Component 4 which is the Homework assignment and practice. The assignment is to have participants share with someone new information that they learned through the discussion of the sex risk ladder. Make sure you have time for participants to practice how they will do their homework, especially picking the right place and time because talking about sex can be sensitive.</p> <p>Also, the SHIELD handouts folder has a copy of the Session 3 homework assignment that you can pass out to participants.</p> <p>You can also distribute copies of the risk ladder to assist participants as they do their homework.</p> <p>What questions do you have about Session 3?</p>	 <p>Show slide #153</p> <div data-bbox="1073 501 1474 732" style="border: 1px solid black; padding: 10px;">  <p style="text-align: right;"><b>Extras</b></p> <hr/> <p><b>Participant (Homework) Assignment for Session 3:</b> Share with your assignment buddy new information that you learned during the discussion of the sex risk reduction ladder.</p> </div>
<p>20. Remind group about Debriefing with their co-facilitator after group and introduce the Facilitator Summaries.</p>	<p>After each group we encourage you to spend some time debriefing with your co-facilitator and Project Manager or Supervisor about the group. Use the debriefing questions that are in Appendix 3 of the Facilitator Guide to guide this debriefing.</p> <p>Also, this may also be a good time to begin your Facilitator Summary which is described in Appendix 4 of your Facilitator Guide. The Facilitator Summary is one document that is meant to describe each SHIELD</p>	 <p>Show slide #154</p> <div data-bbox="1073 1451 1453 1713" style="border: 1px solid black; padding: 10px;">  <p style="text-align: right;"><b>Facilitator Summaries</b> (Appendix IV)</p> <hr/> <ul style="list-style-type: none"> <li>• To be written by facilitators after each SHIELD cycle.</li> <li>• Summary reports aim to document group successes and changes in behavior.</li> <li>• See Facilitator Summary Guidelines.</li> </ul> </div>

	<p>group or cycle. This report can be used by your Project Manager to evaluate whether the SHIELD project is effective in changing risky behaviors and can be a good diary of your successes and challenges as facilitators. There are some guiding questions provided in the Appendix. Remember to adhere to your agency's policies about Confidentiality as you write the Summary.</p> <p>What questions do you have about the Debriefing or Facilitator Summary?</p>	
<p>21. Solicit volunteers for the next couple of Teachbacks</p>	<p>We are going to need some volunteers for two different teachbacks. One is the homework check-in for session 4 and one is for the Peer communication skills activity.</p>	 <p>Slide Show # 155</p> <div data-bbox="1102 879 1416 1052" style="border: 1px solid black; padding: 5px;">  <p style="text-align: right;">Extras</p> <hr style="border: 0.5px solid orange;"/> <p><b>Volunteers Needed:</b> Two for 4:1 (HW) Assignment Check-In [pg. 87] and two for 4:3 PEER Communication Skills [pg. 95]</p> </div>
<p>22. Transition to Lunch.</p>	<p>It's time for our lunch break. When we come back we will review the activities of Session 4.</p>	 <p>Slide Show # 156</p> <div data-bbox="1065 1199 1399 1415" style="border: 1px solid black; padding: 10px; text-align: center;"> <p>1 Hour Lunch Break</p>  </div>

# MODULE 19

## SHIELD Session 4

## MODULE 19: SHIELD Session 4



**By the end of this module, trainees will:**

1. Describe the procedures and activities in SHIELD Session 4.
2. Conduct a Teachback of Homework Check-in.
3. Conduct a Teachback of Peer Educator Training Activities.



**Time**  
1:30-3:00pm

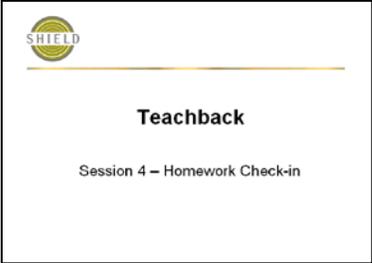


**Materials**

- Laptop & projector
- Variety of Condoms (male, female, flavored, colored, etc.)
- Variety of Lubricants (oil and water-based)
- Dental dams
- Male model for demonstration
- Female model for demonstration
- Handout: Male condom steps
- Handout: Female condom steps.

Procedures	Suggested Script	Trainer Notes & Slides
1. Introduce the session.	Session 4 is the second session on reducing HIV sex risk and focuses on skills for proper condom use and skills for talking about proper condom use during peer outreach.	 Show slide #157  <div style="border: 1px solid black; width: 200px; height: 100px; margin: 0 auto; text-align: center; padding: 10px;"> <p><b><u>SESSION 4</u></b></p> </div>
2. Review the objectives of Session 4.	The objectives of this session are to continue to support and reinforce development of the Peer Educator role, to review information about male and female condoms and lubricants and to have your participants practice their Peer Educator skills.	 <u>Trainer's note:</u> Point to the objectives as you describe each one.

		 <p>Show slide #158</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p style="text-align: center;"><b>Session 4: Objectives</b></p> <ol style="list-style-type: none"> <li>1. To provide support and positive reinforcement for Peer Educator role.</li> <li>2. To review male and female condom information.</li> <li>3. To practice using PEER Communication skills about condom use and barriers to condom use.</li> </ol> </div>
<p>3. Review Session 4 activities in sequence.</p>	<p>You all should have the structure of this session memorized by now.</p> <p>Who can tell me what component 1 is? [Homework check-in].</p> <p>What is Component 2? [Present new information which in this session is about male and female condoms.]</p> <p>Who can tell me what Component 3 is? [Peer Educator training activities.]</p> <p>What is component 4? [Homework and practice]</p> <p>And finally, what is component 5? [Summary].</p> <p>[Read after you show the slide] As you can see on this slide, your agency can decide on whether or not to provide safer sex kits to participants during this session and we will review this when we get to component 4.</p>	 <p><u>Trainer's note:</u> Don't show slide until after participants have responded to questions.</p>  <p>Show slide #159</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p style="text-align: center;"><b>Session 4: Structure</b></p> <ol style="list-style-type: none"> <li>1. Homework check-in</li> <li>2. Present new information: Condoms &amp; Lubes</li> <li>3. Peer Educator Training: Group problem solving &amp; Role plays</li> <li>4. Homework assignment and practice               <ol style="list-style-type: none"> <li>a) Safer sex kits (optional)</li> </ol> </li> <li>5. Summary</li> </ol> </div>
<p>4. Review Teachback procedures.</p>	<p>Now we are going to do a teachback of the homework check-in. Turn to page 87 of your Facilitators Guide to review the procedures for this component. By this point in the program your participants will be</p>	

	<p>expecting and used to the Homework check-in. Remember, you will ask the group to remind you what the homework assignment was and have people share their experiences. You are provided with some suggested probes and questions to ask as people are sharing. You want to particularly focus on how the participant did with their PEER Communication skills and at the end you want to summarize the discussion and provide lots of praise and encouragement to all.</p> <p>Any questions?</p> <p>For Component 1 we are going to do a Teachback.</p>	 Show slide #160 
<p>5. Get volunteers to Teachback component 1: Homework check-in.</p>	<p>For the Teachback we will need two volunteers who will be the group facilitators. The rest of us will play the role of the participants.</p>	 <u>Trainer's note:</u> Display newsprint with Homework Check-in questions.
<p>5a. Trainer to meet with Teachback facilitators.</p>		 <u>Trainer's notes:</u> Take volunteers off to the side to give them instructions for this Teachback.  Ask the volunteers if they have any questions.  Help them decide who will take the lead.  Review with them the Homework Check-in Poster.  Assure them that you will be standing by if they get stuck or need a suggestion.

<p>5b. Trainer to meet with group playing participants.</p>		 <p><u>Trainer's notes:</u> Instruct the rest of the group to act like typical clients from their agency.</p> <p>Answer any questions about what their role should be.</p>
<p>6. Conduct the Teachback of component 1: Homework check-in.</p>		 <p><u>Trainer's note:</u> As the Teachback is happening, make note of instances where the facilitators redirected the conversation back to conducting Peer Outreach, being a Peer Educator and/or PEER communication skills. Also note examples of good co-facilitation creating a supportive environment.</p>

## TEACHBACK

### SESSION 4 ACTIVITY 1 HOMEWORK CHECK-IN

<b>PURPOSE</b>	Participants will discuss their experiences of doing the homework assignment.
<b>TIME</b>	20 minutes
<b>MATERIALS</b>	Poster with homework check-in questions; tape

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
Welcome participants to group.	Welcome to the fourth session of the SHIELD program. We have already completed half of your Peer Educator training, time is flying!
Conduct the homework check-in component of the session.	As we always do we want to check in to see how your homework went. If you were not able to do the homework or if the homework did not go as you wanted we still want to hear about your experience.
<p>Ask the group to describe the homework assignment from the prior session.</p> <p><i>✍️ FACILITATOR NOTE:</i> Session 3 homework assignment was to: Share with someone new information that you learned during discussion of the sex risk reduction ladder.</p> <p>Point out to participants the Homework Check-in Questions Poster that was displayed in Session 3. [Refer to Appendix 1 for poster content]. Use these questions to guide the discussion.</p>	So unless anyone has any questions, who can remind us what your homework assignment from Session 3 was?
<p>Ask the participants to share their homework experience.</p> <p><i>✍️ FACILITATOR NOTE:</i> In the case where a participant was not able or did not do their homework, help them problem-solve so that they can avoid the barriers that they encountered.</p>	<p>Who would like to share how your homework went? We would like you to start by first telling us who you did your homework with and how you approached them.</p> <p>[Read questions off poster]</p>

**PROCEDURES**

Summarize the discussion.

**SUGGESTED SCRIPTS**

Thank you all for sharing with us. It sounds like many of you had a [insert description] experience sharing new information about sex risk and safer options.

In today's session we are going to keep talking about safer sex options and are going to focus on talking with our Peers about condoms.

4:1

SESSION 4 COMPONENT 1 HOMEWORK CHECK-IN

Procedures	Suggested Script	Trainer Notes & Slides
<p>7. Debrief Teachback.</p>	<p>Give yourselves a round of applause and let's acknowledge the excellent work of our brave volunteers!</p> <p>To debrief this Teachback we want to hear from everyone because multiple perspectives are an important training tool.</p> <p>So let's hear first from the Facilitators. What was your experience like? What were your struggles and strengths?</p> <p>Does anyone from the group want to share their observations or how their experience is going to help them prepare to facilitate this component? Lastly, we would like to offer our observations of the delivery of the component.</p>	 <p><u>Trainer's note:</u> Point out strengths and areas for improvement.</p>  <p>Show slide #161</p> <div data-bbox="1112 1417 1494 1711" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><u>Teachback – Debriefing:</u> Homework check-in</p> <ul style="list-style-type: none"> <li>• <b>Facilitators</b> <ul style="list-style-type: none"> <li>– How did it feel to lead this activity?</li> <li>– What were your challenges?</li> <li>– What did you feel comfortable with?</li> </ul> </li> <li>• <b>Group participants</b> <ul style="list-style-type: none"> <li>– Observations about the activity?</li> <li>– How will your perspective influence how you prepare to facilitate this component?</li> </ul> </li> <li>• <b>Trainers Observations</b></li> </ul> </div>

<p>8. Summarize and transition to demonstration of male condom</p>	<p>Is everyone feeling comfortable with how to facilitate the Homework check-in component of the SHIELD program?</p> <p>Now let's move into Component 2 of the session.</p>	
<p>9. Introduce Component 2</p>	<p>Component 2 can be a lengthy component depending on how many questions people may have. You will start this component by talking about the male condom. Turn to page 89 of your Guide to see the procedures.</p> <p>To start you will be handing out a variety of male condoms to your group and you want to encourage them to open the packages, stretch them and “play” with them.</p> <p>Notice the Facilitator note which suggests that you have a variety which includes flavored, extra large, polyurethane and colored condoms.</p> <p>We do not recommend having a lambskin condom because we would not want people taking this condom thinking that it protects against HIV, which it does not. You will address lambskin condoms in the summary of this section but think it is best to not show one.</p>	 Show slide #162 <div data-bbox="1073 573 1453 835" style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p style="text-align: center;"> <b>Materials for Condom Demonstrations</b></p> <ul style="list-style-type: none"> <li>• Male condoms <ul style="list-style-type: none"> <li>– Latex, polyurethane, polyisoprene condoms</li> <li>– Different colors and flavors</li> <li>– Do not use lambskin condoms</li> </ul> </li> <li>• Female condoms</li> <li>• Variety of lubricants</li> <li>• Male and/or female model</li> <li>• Napkins</li> </ul> </div>  <u>Trainer's note:</u> Pass out a variety of condoms to the group.
<p>10. Review male condom information with the group.</p>	<p>As your participants are experiencing the condoms, you want to ask them some questions which are outlined on page 90- the 3<sup>rd</sup> procedure. So we are going to ask you all:</p> <ul style="list-style-type: none"> <li>• Who can show me where to find the expiration date? [on the outside of the wrapper]</li> <li>• Who can show me the best way to open a condom packet?</li> </ul>	 <u>Trainer's note:</u> Use the steps for properly using a male condom to guide you through this discussion.

	<p>[using hands, not teeth or scissors because they may tear the wrapper]</p> <ul style="list-style-type: none"> <li>• Who can show me the reservoir tip? [tip at the top of the condom that resembles a nipple]</li> <li>• What do you do if you put the condom on inside out? [Best is to throw it away and get a new condom]</li> <li>• Is wearing 2 condoms safer than just 1? [No because the friction can cause breakage]</li> <li>• Where are some places you should not keep or store condoms? [In a hot place such as a back pocket or in the car because the heat breaks down the condom]</li> </ul>	 Show slide #163 <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b><u>Condom points to discuss</u></b></p> <ul style="list-style-type: none"> <li>• Expiration date</li> <li>• Opening condom packets</li> <li>• Reservoir tip</li> <li>• Turning condoms inside &amp; out</li> <li>• Using 2 condoms</li> <li>• Where to store/keep condoms</li> </ul> </div>
<p>11. Describe polyurethane condoms.</p>	<p>When we talk about condoms, most people will think of latex condoms. We want to point out that there is another type of condom called polyurethane condoms.</p> <p>Polyurethane is a material that is similar to plastic.</p> <p>There are many pros of polyurethane condoms including: [READ off of SLIDE]</p>	 Show slide #164 <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b><u>Polyurethane Condoms</u></b></p> <ul style="list-style-type: none"> <li>• Good for people with latex allergies</li> <li>• More durable than latex condoms</li> <li>• Better transfer of heat</li> <li>• May be more expensive or hard to find</li> <li>• Label name: Avanti condoms</li> </ul> </div>

<p>12. Describe polyisoprene condoms</p>	<p>There are also condoms on the market made of polyisoprene. It's a material that is good for people with latex allergies.</p> <p>[READ off of SLIDE}</p> <p>We encourage your agency to try to have a variety of condoms available for your participants. However, it is important to point out the different types of lubes that can and cannot be used with each type.</p>	 Show slide #165  <div data-bbox="1081 333 1446 575" style="border: 1px solid black; padding: 5px;">  <b>Polyisoprene Condoms</b> <ul style="list-style-type: none"> <li>• Another material for condoms</li> <li>• Good for people with latex allergies</li> <li>• Softer and stretchier for a more natural feeling.</li> <li>• Water or silicone-based lubricants</li> <li>• Label names: Durex Bare or Lifestyles SKYN</li> </ul> </div>
<p>13. Ask for a volunteer to demonstrate how to properly use a male condom</p>	<p>Great, you all seem to know a lot about the male condom. Now we would like a volunteer to come up and demonstrate how to properly put on a male condom. Comments and suggestions from the group are welcome.</p>	 Show slide #166  <div data-bbox="1114 806 1484 1003" style="border: 1px solid black; padding: 10px; text-align: center;"> <h3>Male Condom Demonstration</h3> </div>  <b>Trainer's note:</b> Select a volunteer to do the demonstration and tell them to solicit help from the rest of the group if they get stuck.
<p>14. Recap and review steps for properly using a male condom.</p>	<p>Let's give them a round of applause. The main points that you want to ensure that your group gets are:</p> <ul style="list-style-type: none"> <li>• Place the condom on so that it unrolls easily (not inside out),</li> <li>• Squeeze the air from the tip, this will really reduce breakage,</li> <li>• Roll the condom down to the base of the penis and</li> <li>• Remove as soon after ejaculation as possible.</li> </ul> <p>In your packets, as well as the SHIELD handouts folder, there is a step by step guide for properly using</p>	 <b>Trainer's note:</b> Pass out the "Steps for putting on a male condom" handout.   Show slide #167  <div data-bbox="1118 1640 1484 1896" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Steps for putting on a Male condom</b></p> <ul style="list-style-type: none"> <li>• Check expiration date</li> <li>• Squeeze packet to make sure there are no holes</li> <li>• Open packet (don't use scissors or teeth)</li> <li>• Squeeze reservoir tip</li> <li>• Unroll condom to base of penis (don't flip over)</li> <li>• Withdraw and dispose of condom ASAP after ejaculation</li> </ul> </div>

	<p>a male condom.</p> <p>What questions do you have about the male condoms or how to properly facilitate this activity?</p>	
<p>15. Review lubricant information.</p>	<p>Next you will be reviewing information about lubricants. The lubricant issue has become a little complicated with the advent of polyurethane condoms. So thoroughly reviewing this information is important.</p> <p>Hold up your lubricant if you can use it with a latex condom. [only water based and silicone; oil-based lubricants can break down latex which damages the condom]</p> <p>Hold up your lubricant if you can use it with a polyurethane condom. [can be water, silicone or oil based]</p> <p>Who can tell me why lubricants with nonoxynol 9 should not be used? [Nonoxynol 9 is irritating to some people which can increase risk of HIV transmission].</p>	 <p><u>Trainer's note:</u> Pass out a variety of lubricants to the group including water, oil-based and silicone.</p> <p>Water or silicon-based lubricants include Ky-Jelly and Glide. Oil-based lubricants include baby oil, lotion, etc.</p>
<p>16. Summarize lubricant information.</p>	<p>These are the basic facts about lubes that you want to cover in this section.</p> <p>Remember that we briefly talked about lubricants in Session 2 when we played the HIV review game? Lubricant information is also included in Appendix 7 of the SHIELD Facilitators Guide.</p> <p>What questions do you have about lubricants?</p>	 <p>Show slide #168</p> <div data-bbox="1079 1377 1453 1642" style="border: 1px solid black; padding: 5px;">  <p style="text-align: center;"><b>Lubricant Take-Home Points</b></p> <ul style="list-style-type: none"> <li>• Water or silicone-based lubes only for latex condoms</li> <li>• Oil-based lubes (e.g. baby oil, Vaseline, etc) can damage latex condoms</li> <li>• Can use water, oil-based, or silicone-based lubes for polyurethane condoms</li> <li>• Do not use condoms with Nonoxynol-9</li> </ul> </div>

<p>17. Introduce female condoms.</p>	<p>So far we have talked about males condoms. How many people have heard about the female condoms?</p> <p>The female condom is another option that people have to practice safer sex. The Reality condom was the first female condom on the market which is made of polyurethane, a type of plastic.</p> <p>There is a new type of female condom on the market called FC2. It's another option to lower one's risk for HIV. The FC2 condom, is made of a non-latex rubber.</p>	 Show slide #169 <div data-bbox="1081 325 1406 478" style="border: 1px solid black; padding: 5px; text-align: center;"><p><b><u>Female Condoms: another safer sex option</u></b></p></div>
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<p>18. Ask for a volunteer to demonstrate how to properly use a female condom</p>	<p>The last activity of this component is a demonstration of the female condom. We would like a volunteer to come up and demonstrate how to use the female condom.</p>	 Show slide #170  <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p><b><u>Female Condom Demonstration</u></b></p> </div>   <b><u>Trainer's note:</u></b> Select a volunteer to do the demonstration and tell them to solicit help from the rest of the group if they get stuck.
<p>19. Recap and review steps for properly using a female condom.</p>	<p>Let's give a round of applause for the demonstration.</p> <p>When doing this demonstration you want to emphasize to women that they should practice inserting the condom at least 3-4 times before giving up on it as an option for being safer.</p> <p>As demonstrated, you want to insert the inner ring into the vagina and push it in until it springs open and feels comfortable. Encourage your clients to use lots of lube and removal as soon as the man ejaculates.</p> <p>There is a handout in the SHIELD handouts folder that illustrates each step for using the female condom. You should give this to participants to assist with their homework.</p>	 <b><u>Trainer's note:</u></b> Pass out the "Steps for putting on a female condom" handout.   Show slide #171

**Female/Reality/FC2 Condoms**  
Take home points

- Practice inserting 3-4 times
- Can use water or oil-based lubes
- Squeeze inner ring and insert into vagina until comfortable (ring should spring open to cover the cervix)
- Does not have a NuvaRing

<p>20. Review information about barriers for oral sex.</p>	<p>The last activity that you will cover in this component is on barrier protection for performing oral sex. The main point that you will be making here is that barrier protection such as a male or female condom should be used when performing oral sex.</p> <p>Dental dams, such as Sheer Glyde Dam is a thinner latex barrier that is recommended for performing oral sex on a woman or for oral-anal sex.</p> <p>For individuals who may not have access to dental dams, Non-microwavable saran wrap is another option. Microwavable saran wrap has holes in it. So, HIV and other STDS can be transmitted through these holes.</p> <p>What questions do you have about barriers for oral sex?</p>	 Show slide #172 <div data-bbox="1110 537 1490 810" style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;">Barrier Protection – Oral Sex Take home points</p> <ul style="list-style-type: none"> <li>• Male and Reality condoms can be used</li> <li>• Sheer Glyde Dental dams (<a href="http://www.sheerglydedams.com">www.sheerglydedams.com</a>)</li> <li>• Non-microwavable plastic wrap an option</li> </ul> </div>
<p>21. Summarize Component 2.</p>	<p>In this component there is a lot of information covered and 2 demonstrations that you will need to do.</p> <p>To allow for time at the end of the session for the Peer Educator Training activities and the Homework practice you may need to meet with people who have a lot of questions after the session or plan for this session to run longer than the others.</p> <p>Let's move on to another Teachback, this will be for Component 4 the Peer Educator Training Activities.</p>	

<p>22. Get volunteers to Teachback component 3: Peer Educator training activities.</p>	<p>For this Teachback we will need two volunteers who have not practiced this component.</p>	 Show slide #173 <div style="border: 1px solid black; padding: 10px; text-align: center; margin: 10px auto; width: fit-content;"> <p><u>Teachback</u></p> <p>Session 4 – Component 3 Peer Educator Training Activities</p> </div>
<p>23. Trainer to meet with Teachback facilitators.</p>		 <u>Trainer's notes:</u> Take volunteers off to the side to give them instructions for this Teachback.  Ask the volunteers if they have any questions.  Help them decide who will take the lead.  Assure them that you will be standing by if they get stuck or need a suggestion.
<p>24. Trainer to meet with group playing participants.</p>		 <u>Trainer's notes:</u> Instruct the rest of the group to act like typical clients from their agency.  Answer any questions about what their role should be.
<p>25. Conduct the Teachback of component 3: Peer Educator Training Activities.</p>		 <u>Trainer's note</u> As the Teachback is happening, make note of instances where the facilitators redirected the conversation back to different options on the sex risk ladder, being a Peer Educator and/or

		PEER communication skills. Also note examples of good co-facilitation creating a supportive environment.
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## TEACHBACK

### SESSION 4 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES: GROUP PROBLEM-SOLVING

<b>PURPOSE</b>	Participants will practice talking to peers about safe sex options using PEER Communication Skills.
<b>TIME</b>	15 minutes
<b>MATERIALS</b>	PEER Communication Skills poster; Sex Risk Reduction Ladder poster; tape

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Describe the directions for the activity.</p> <p><i>📌 FACILITATOR NOTE:</i> Have the PEER Communication Skills Poster hanging next to the Sex Risk Reduction Ladder. [Refer to Appendix 1 for poster content].</p>	<p>As Peer Educators we are likely going to encounter people who have had negative experiences with condoms and are resistant to using them. We are going to do an activity where we want you to brainstorm different things that Peer Educators can say in response to these people.</p>
<p>Group problem solving.</p> <p><i>📌 FACILITATOR NOTE:</i> You may tailor the scenarios to fit your specific group or you may ask your group to volunteer a scenario to problem-solve.</p> <p>Try to discuss several of the accompanying scenarios. Read each scenario aloud and allow the group to offer suggestions of what a Peer Educator could say.</p>	<p>Scenarios:</p> <p>a) Your male sex partner says that condoms make him lose his erection.</p> <ul style="list-style-type: none"> <li>• Using your PEER Communication skills, what can you suggest to your partner? (Possible answer: Try using more lube to increase sensation; use female or polyurethane condoms).</li> </ul> <p>b) Your friend says that condoms always break on them.</p> <ul style="list-style-type: none"> <li>• What can you suggest to your friend? (Possible answer: Check the expiration date, squeeze the air out, get a bigger condom; make sure using right lube).</li> </ul>

- c) Your friend says that they always have an allergic reaction to condoms.
- What can you suggest to your friend? (possible answer: try polyurethane or female condom).

SESSION 4 COMPONENT 3 PEER EDUCATOR TRAINING ACTIVITIES: **4:3**  
GROUP PROBLEM-SOLVING

Procedures	Suggested Script	Trainer Notes & Slides
<p>26. Debrief Teachback.</p>	<p>Give yourselves a round of applause and let's acknowledge the excellent work of our brave volunteers!</p> <p>To debrief this Teachback we want to hear from everyone because multiple perspectives are an important training tool.</p> <p>So let's hear first from the Facilitators. What was your experience like? What were your struggles and strengths?</p> <p>Does anyone from the group want to share their observations or how their experience is going to help them prepare to facilitate this component? Lastly, we would like to offer our observations of the delivery of the component.</p>	<p> Show slide #174</p> <div data-bbox="1102 846 1490 1136" style="border: 1px solid black; padding: 5px;"> <p><b><u>Teachback – Debriefing: Peer Educator Training Activities</u></b></p> <ul style="list-style-type: none"> <li>• <b>Facilitators</b> <ul style="list-style-type: none"> <li>– How did it feel to lead this activity?</li> <li>– What were your challenges?</li> <li>– What did you feel comfortable with?</li> </ul> </li> <li>• <b>Group participants</b> <ul style="list-style-type: none"> <li>– Observations about the activity?</li> <li>– How will your perspective influence how you prepare to facilitate this component?</li> </ul> </li> <li>• <b>Trainers Observations</b></li> </ul> </div> <p> <b><u>Trainer's note:</u></b> Point out strengths and areas for improvement.</p>

<p>27. Summarize and transition to describing the Homework assignment for Session 4.</p>	<p>The homework assignment for this session is to share with someone something new that you learned about condoms or lubricants.</p> <p>The SHIELD handouts folder has a copy of the Session 4 homework assignment that you can pass out to participants.</p> <p>The handouts folder also includes the steps for putting on a male condom and steps for putting on a female condom. You can distribute these to clients to assist them with their homework.</p> <p>Finally, your agency may consider providing your participants with safer sex kits which include different condoms and lubes so that they can do their homework.</p>	 <p>Show slide #175</p> <div data-bbox="1073 340 1403 573" style="border: 1px solid black; padding: 5px;">  <p><b>Homework Assignment</b></p> <ul style="list-style-type: none"> <li>• Assignment: Share something new with your buddy that you learned about condoms and/or lube.</li> <li>• Copies of the homework assignment and steps to use a male and female condom are in your folders.</li> </ul> </div>
<p>28. Describe Safer sex kits.</p>	<p>A safer sex kit can be as fancy or simple as you like or that your budget allows.</p> <p>Here is an example of a safer sex kit. We used a small gift bag that can be purchased in bulk from a dollar store and included a couple latex male condoms, a couple polyurethane male condoms, 2 female condoms and a lot of lubricants. We splurged and purchased flavored lubricants because our clients really like them and have told us that it is a fun way to bring up the condom conversation.</p> <p>You may also want to include a list of places in the community where people can get free condoms.</p> <p>What thoughts do you have about your agency providing safer sex kits as part of the homework assignment?</p>	 <p>Show slide #176</p> <div data-bbox="1110 1066 1502 1377" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Example of Safer Sex kit</b></p>  </div>

<p>29. Remind group about Debriefing with their co-facilitator after group and introduce the Facilitator Summaries.</p>	<p>Don't forget, after each group we encourage you to spend some time debriefing with your co-facilitator and Project Manager or Supervisor about the group and to add to your Facilitator Summary about the group.</p>	
<p>30. Transition to the break.</p>	<p>Before we take a 15 minute break we would like to get volunteers for the teachbacks on the risk ladders in Session 5.</p> <p>After the break we will do some demonstrations and then have the teachbacks in Session 5.</p>	<p> Show slide #177</p> <div data-bbox="1117 569 1406 785" style="border: 1px solid black; padding: 10px; text-align: center;"> <p>15 minute break</p>  </div>

# MODULE 20

## SHIELD Session 5

## MODULE 21: SHIELD Session 5



**By the end of this module, trainees will:**

1. Describe the procedures and activities in SHIELD Session 5.
2. Observe a Trainer Demonstration of properly cleaning injection equipment.
3. Conduct a Teachback of the SHIELD Injection Risk Reduction Ladder.
4. Conduct a Teachback of the SHIELD Safer Splitting Injection Risk Reduction Ladder.



**Time**  
3:15-4:45pm



**Materials**

- Laptop & projector
- Safer injection materials (syringe, cotton, water)
- Blank risk reduction ladder
- Injection behavior cards
- Injection risk reduction ladder
- Drug splitting risk behavior cards
- Drug splitting risk reduction ladder
- Paper towels

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Introduce the Session</p>	<p>Session 5 is focused on HIV risk associated with injection drug use. This session includes information and practice activities about injection drug use and is important to cover because even if your participants are former drug users, they are likely interacting with injectors and can share this information with them.</p> <p>We want to point out that the demonstrations are optional. Your agency may choose to skip the actual demonstrations, especially if you are working with clients who are in recovery. If you decide to skip the demonstrations, you should still walk through the steps so Peer Educators</p>	<div style="display: flex; align-items: center;"> <p>Show slide #178</p> </div> <div style="border: 1px solid black; width: 150px; height: 100px; margin: 20px auto; text-align: center; padding: 10px;"> <p><b><u>SESSION 5</u></b></p> </div> <div style="display: flex; align-items: center; margin-top: 20px;"> <p><u>Trainer's note:</u> Refer the trainees to the "Who is SHIELD for" section of the Facilitators Guide (page 7) where it discusses the inclusion criteria.</p> </div>

	<p>have this information for their Peer Outreach.</p> <p>Since some of the activities in this session may be a trigger for people in recovery or former drug users, we suggest that your agency discuss whether you want your groups mixed by drug user status and how to handle participants who relapse or become triggered. These suggestions are in your Project Manager’s Guide. Finally, ensure that you have resources on hand for your participants about places to seek drug treatment if appropriate, needle exchange or support groups.</p> <p>Don’t forget about the HIV &amp; injection 101 appendix in the SHIELD Facilitators guide. This appendix will give you an overview of injection drug use behaviors and terms which will prepare you for this session.</p>	<p>You can also refer them to the Project Mangers Guide which provides suggestions for policies on dealing with participants who are in recovery or relapse.</p>
<p>2. Review the Objectives of Session 5.</p>	<p>The objectives of this session are to focus on correct information about injection and drug splitting risks and to have your participants practice using their PEER communication skills to conduct Peer Outreach about injection and drug splitting risks.</p>	<p> <u>Trainer’s note:</u> Point to the objectives as you describe each one.</p> <p> Show slide #179</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p style="text-align: center;"><b>Session 5: Objectives</b></p> <ol style="list-style-type: none"> <li>1. To provide support and positive reinforcement for Peer Educator role.</li> <li>2. To review injection and drug splitting risk.</li> <li>3. To practice using PEER Communication skills about safer injection.</li> </ol> </div>
<p>3. Review Session 5 activities in sequence.</p>	<p>As with previous sessions there are 5 components to this session. Within component 2, are the 2 demonstrations and presenting 2 risk ladders, an injection risk ladder and a</p>	<p> Show slide #180</p>

	<p>drug splitting risk ladder.</p> <p>Also, as with session 4, your agency can choose to provide safer injection kits and you can distribute these during Component 4: Homework and practice. We will talk more about these kits later.</p>	<div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b>Session 5: Structure</b></p> <ol style="list-style-type: none"> <li>1. Homework check-in</li> <li>2. Present new information               <ol style="list-style-type: none"> <li>a) Demonstration of cleaning injection equipment</li> <li>b) Injection risk reduction ladder</li> <li>c) Demonstration of safer drug splitting</li> <li>d) Drug splitting risk reduction ladder</li> </ol> </li> <li>3. Peer Educator Training: Group problem solving &amp; Role plays</li> <li>4. Homework assignment and practice               <ol style="list-style-type: none"> <li>a) Safer injection kits (optional)</li> </ol> </li> <li>5. Summary</li> </ol> </div>
<p>4. Introduce demonstrations of Proper Injection Equipment cleaning.</p>	<p>Now we are going to do a demonstration of properly cleaning injection equipment. Please turn to page 109 of your Facilitators Guide. In order to do this demonstration you will need the following materials: a syringe, a bottle of clean cold water and some paper towels. Prior to the demonstration make sure that you let your group know what is about to happen and allow them to excuse themselves if they are not feeling comfortable watching. You can also do the demonstration by talking through it and then showing the steps. As we said, talk with your Supervisor and Project Manager to make these decisions.</p> <p>When talking about properly cleaning equipment, it is important to stress that the safest way to prevent HIV infection or HCV infection risk is to use a new needle for every single injection. However, this is often not a realistic message which is why injectors need to have the skills for properly cleaning their equipment.</p>	<div style="text-align: center;">  <p>Show slide #181</p> </div> <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b><u>Cleaning Injection Equipment Demonstration</u></b></p> <p>Materials you will need:</p> <ul style="list-style-type: none"> <li>• Syringe</li> <li>• Clean <b>COLD</b> water</li> <li>• Paper towels</li> </ul> </div>

<p>5. Demonstrate proper injections equipment cleaning. Session 5, Component 2a) Present new information</p>	<p>Now we are going to do the demonstration following the procedures starting on page 109 in your Facilitators Guide. There is also a handout with pictures that you can provide your participants. This handout is in the SHIELD</p>	<p> Show slide #182</p> <div data-bbox="1081 304 1393 499" style="border: 1px solid black; padding: 10px; text-align: center;">  <hr style="border: 0.5px solid gold;"/> <p><b>Trainers Demonstrate</b></p> <p>Session 5 Component 2(A): Demonstration of Properly Cleaning Injection Equipment</p> </div> <p><u>Trainer's note:</u> Follow procedures from Facilitators Guide.</p> <p>Pass out the “Steps for rinsing injection equipment” handout.</p>
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## TRAINER DEMONSTRATION

### SESSION 5 COMPONENT 2(A) PRESENT NEW INFORMATION: DEMONSTRATION OF PROPERLY CLEANING INJECTION EQUIPMENT

<b>PURPOSE</b>	Participants will learn steps for properly cleaning injection equipment.
<b>TIME</b>	10 minutes
<b>MATERIALS</b>	Needle; clean water; cooker; paper towels

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Introduce injection risk reduction.</p> <p><b>FACILITATOR NOTE:</b> As noted in the Project Manager’s Guide, the cleaning demonstration is optional. Facilitators should meet with the Project Manager prior to the session to decide if the demonstration will be done. If no demonstration will be done, facilitators should verbally walk participants through the Steps to Clean Injection Equipment Handout [Refer to the SHIELD Handouts for Participants Folder].</p> <p>Have resources available for participants about places where they can obtain drug treatment and/or clean syringes (if applicable).</p>	<p>As you all know, injection drug use remains a major risk for HIV. As Peer Educators it is important that we are able to share information about safer options for injecting drugs with our peers. These options are especially important if our peers are not ready or wanting to stop using.</p> <p>Before we do the activity we want to say a word about the settings and situations where we do Peer Outreach to talk about safer injection.</p> <p>Do you all remember in Session 1 talking about the importance of safety when doing our Peer Outreach? This is especially important when talking about safer injection. Make sure you Pick the right time and place for your peer and yourself.</p> <p>If your peer was heading out to cop some drugs do you think this is the best time and place? [Answer: It does depend, but the Peer Educator should ask them if they have time to talk].</p> <p>Likewise, if you are trying to cut down your own use or are in a treatment program, going to a busy corner where drugs are being sold may not be the best time or place for you. Because we will be talking about safer injection drug use, if anyone feels uncomfortable during the session please let us know.</p> <p>Does anyone have any questions before we begin?</p>

### SESSION 5 COMPONENT 2(A) PRESENT NEW INFORMATION: DEMONSTRATION OF PROPERLY CLEANING INJECTION EQUIPMENT

5:2

**SESSION 5 COMPONENT 2(A) PRESENT NEW INFORMATION:  
DEMONSTRATION OF PROPERLY CLEANING INJECTION EQUIPMENT**

**PROCEDURES**

Discuss the importance of properly cleaning injection equipment.

 **FACILITATOR NOTE:**  
You may want to have the CDC article available for people if they want to read or learn more about the bleach issue:

<http://www.cdc.gov/idu/facts/disinfection.htm>

**SUGGESTED SCRIPTS**

To reduce the risk of using someone else's needle, one option is to rinse out the syringe with water, at least 3 times. It is important that the water is clean and not rinse water. The more times that you rinse your syringe, the better. Each time you rinse with clean cold water, you greatly lower your risk of getting HIV. Laboratory studies find that if you rinse once you cut down your risk more than half. If you rinse twice your risk is less than 1 in 4 and if you rinse three times your risk is less than 1 in 20. These numbers are conservative. So the more you rinse the better. Rinsing five times with cold water is great.

Another option to reduce risk even further is to rinse your needle 1 time with clean cold water, 1 time with bleach, and 1 time again with new clean cold water. The reason why this is more effective than just rinsing with water is because bleach kills HIV. But if there's a lot of blood in the syringe the bleach cannot get to the HIV. That's why it is important to rinse first with water and get all the blood out of the syringe. Even if you cannot see the blood it can still be in the syringe.

There are several factors that will effect how well you remove HIV from the syringe. These include whether the bleach was stored properly and its expiration date. Another key factor is whether the blood has clotted inside the syringe.

It is often less stressful to rinse your own syringe after you inject, especially heroin, than before injecting. After injecting you're more relaxed. Rinsing right after you inject is also better since the blood hasn't had a chance to clot yet.

**5:2**

**SESSION 5 COMPONENT 2(A) PRESENT NEW INFORMATION:  
DEMONSTRATION OF PROPERLY CLEANING INJECTION EQUIPMENT**

**SESSION 5 COMPONENT 2(A) PRESENT NEW INFORMATION:  
DEMONSTRATION OF PROPERLY CLEANING INJECTION EQUIPMENT**

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Discuss the importance of properly cleaning injection equipment (CONTINUED).</p>	<p>Of course if you're in a situation where you have to immediately share a needle then rinse the needle several times before using it. If someone asks to use your needle, insist on rinsing it before giving it to them.</p> <p>It is also a good idea to rinse your syringe before using it if you are not certain that someone else may have used your syringe when you were away.</p> <p>We don't know for certain if bleaching or rinsing syringes with water can prevent Hepatitis C transmission, because Hepatitis C is much more infectious than HIV. But without a doubt rinsing with water or bleach greatly reduces the number of viruses in the syringes.</p> <p>So, let's show you how to properly rinse your needle.</p>
<p>Demonstrate cleaning a needle.</p>	<p>The idea behind these steps is to reduce the risk of HIV transmission by flushing blood and drugs from the syringe, which reduces the number of viral particles. A common mistake is contaminating</p> <p><u>Step 1:</u> Start by pouring some water into a separate clean cap or container. (Do not dip your used needle into the source of the clean water. Though you may not see it, there can still be traces of blood inside the needle which can get in the water source and contaminate it.</p> <p><u>Step 2:</u> Draw up the clean cold water fully into the needle.</p> <p><u>Step 3:</u> Shake and/or tap the needle so that you can loosen the dried blood or particles.</p> <p><u>Step 4:</u> Squirt the contaminated water onto a paper towel.</p>

**SESSION 5 COMPONENT 2(A) PRESENT NEW INFORMATION:  
DEMONSTRATION OF PROPERLY CLEANING INJECTION EQUIPMENT**

PROCEDURES	SUGGESTED SCRIPTS
Demonstrate cleaning a needle.	<p><u>Step 5:</u> Repeat this up to 5 times. The more rinses the better.</p> <p>If you have bleach available, do this process with bleach in between the cold water rinses.</p> <p><u>Step 6:</u> Rinse your cooker out with clean cold water and throw the used cotton away.</p> <p>To clean your cooker you would want to rinse it with cold water until all of the residue and blood is gone.</p> <p>We also recommend using new cotton each injection because blood and viruses can stay trapped in which is a risk.</p> <p>Does anyone have any questions about how to rinse your needle?</p>

**5:2**

**SESSION 5 COMPONENT 2(A) PRESENT NEW INFORMATION:  
DEMONSTRATION OF PROPERLY CLEANING INJECTION EQUIPMENT**

110

	<p>During the demonstration, stress the message that the more rinses with clean cold water the better the result. Each time the needle is rinsed the more potentially infected blood is rinsed out. Laboratory studies have shown that rinsing once cuts down risk more than half. Rinsing five times with clean cold water is the best.</p> <p>Another option to reduce risk further is to rinse your needle with clean cold water, then with bleach and then with clean cold water again. Bleach has been shown to kill HIV infection in blood. However, if bleach does not come into contact with ALL of the blood</p>	<p> Show slide #183</p> <div data-bbox="1068 1402 1448 1675" style="border: 1px solid black; padding: 5px;"> <p> <b>Properly Cleaning Injection Equipment</b></p> <ul style="list-style-type: none"> <li>• Pour water into a clean container.</li> <li>• Draw water into syringe fully.</li> <li>• Shake and tap syringe to loosen particles.</li> <li>• Squirt out onto paper towel.</li> <li>• Repeat 5 times.</li> <li>• Dispose of water in container.</li> </ul> <p style="text-align: center; font-size: small;"><a href="#">Emphasize that the more rinses the better</a></p> </div>
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	<p>in the syringe or the blood has clotted and is dried then it may not be as effective.</p> <p>We don't know for sure whether bleach can kill HCV (Hepatitis), because HCV is more infectious than HIV. Without a doubt, rinsing with water or bleach reduces the amount of virus in the syringe.</p> <p>Injectors often find that it is less stressful to rinse their needle after they inject because they are more relaxed. Also, rinsing after injecting is better because the blood has not had a chance to dry or clot. But remember, regardless of when you rinse, the more the better.</p> <p>Now are you ready to see the demonstration?</p>	
<p>6. Introduce Teachback of the injection risk and drug splitting ladders.</p>	<p>The main point of this demonstration is rinsing with clean and cold water is effective in reducing HIV risk and the most practical method for cleaning injection equipment because it's pretty easy to get clean water.</p> <p>What questions do you have about this demonstration?</p> <p>After you do the cleaning demonstration, you will present the injection risk ladder. Since we did a ladder in Session 3, now is your chance to show us what you have learned. We are going to do a Teachback for the injection risk ladder.</p>	 <p>Show slide #184</p> <div data-bbox="1117 1136 1484 1411" style="border: 1px solid black; padding: 10px; text-align: center;"> <p>Teachback</p> <p>Session 5 – Present New Information Safer Injection Ladder</p> </div>
<p>7. Get volunteers to Teachback Injection Risk Ladder.</p>	<p>For the Teachback we will need two volunteers who will be the group facilitators. The rest of us will play the role of the participants.</p>	

<p>7a. Trainer to meet with Teachback facilitators.</p>		 <p><u>Trainer's notes:</u>  Aim to have volunteers who have not done a Teachback on the ladder.</p> <p>Take volunteers off to the side to give them instructions for this Teachback.</p> <p>Ask the volunteers if they have any questions.</p> <p>Help them decide who will take the lead.</p> <p>Review the injection Ladder answer key with the volunteers so they are familiar with the correct placement of cards.</p> <p>Assure them that you will be standing by if they get stuck or need a suggestion.</p>
<p>7b. Trainer to meet with group playing participants.</p>		 <p><u>Trainer's notes:</u> Instruct the rest of the group to act like typical clients from their agency.</p> <p>Answer any questions about what their role should be.</p>
<p>8. Conduct the Teachback of the Session 5: Component 2b) Injection Risk ladder.</p>		 <p><u>Trainer's note</u> As the Teachback is happening, make note of instances where the facilitators redirected the conversation back to different options on the sex risk ladder, being a Peer Educator and/or PEER Communication skills. Also note examples of good co-facilitation creating a supportive environment.</p>

## TEACHBACK

### SESSION 5 COMPONENT 2(B) PRESENT NEW INFORMATION: INJECTION RISK REDUCTION OPTIONS

PURPOSE	Participants will learn about different levels of injection risk and options to decrease risk.
TIME	10 minutes
MATERIALS	Blank risk reduction ladder; injection risk behavior cards; velcro tape; injection ladder answer key

PROCEDURES	SUGGESTED SCRIPTS
<p>Provide directions for the injection risk ladder activity.</p>	<p>As we did with the sex risk behaviors, we are going to use a ladder to show the different options for reducing injection risk behaviors. Remember, that the higher on the ladder the riskier the behavior and the ground represents not injecting. The reason why not injecting drugs is on the poster is because it is always an option. As Peer Educators it is important to make sure that even people who are in recovery know prevention information in case they relapse.</p>
<p>Hand out Safer Injection Behavior Cards and conduct the activity.</p> <p><i>📌 FACILITATOR NOTE:</i> Allow 1 participant at a time to come up to the poster and place their card on the ladder. Each time, engage the group and ask them if they agree or disagree with the card placement and what reasoning they have for their decision.</p>	<p>We are going to give you each a card with a behavior written on it. Please come up to the poster, tell the group what is on your card and then place it on the ladder where you think it belongs.</p>
<p>Rearrange injection behavior cards so that they are correct and summarize.</p> <p><i>📌 FACILITATOR NOTE:</i> Use the Injection Risk Ladder Answer Key Handout to determine the correct order of behavior cards on the ladder [Refer SHIELD Handouts for Participants Folder].</p>	<p>You all did a great job working together to do this activity.</p> <p>So let's take a look at the different levels of risk and safer options. At the top of the ladder is injecting with someone else's unclean needle. We know that there are people nowadays who do not use other people's needles, but may lend their unclean needle out. We think that this is just as harmful.</p>

### SESSION 5 COMPONENT 2(B) PRESENT NEW INFORMATION: INJECTION RISK REDUCTION OPTIONS

# 5:2

**SESSION 5 COMPONENT 2(B) PRESENT NEW INFORMATION:  
INJECTION RISK REDUCTION OPTIONS**

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Rearrange injection behavior cards so that they are correct and summarize (CONTINUED).</p>	<p>Another high risk behavior is injecting drugs that were in someone else's unclean cooker. Because there could be blood in the cooker, it could mix with your drugs. As we have talked about, blood is a fluid that can transmit HIV.</p> <p>One way to reduce some of the harm of using an unclean needle is rinse out the needle with cold water (point to ladder). Cold water is better than hot water because it rinses the blood out better, hot water makes the blood stick to the syringe.</p> <p>Rinsing once will decrease your risk of HIV infection by about 10 times, but rinsing more than once will greatly decrease your risk. As we just discussed during our earlier demonstration, we recommend repeating rinses at least 5 times with clean cold water. Remember, clean cold water is effective at getting blood with HIV out of needles. Also, clean water may be easier to find than bleach and it's the most practical method.</p> <p>One of the safest options is to use a brand new needle every time you inject.</p>
<p>Summarize injection drug risk ladder activity and transition to safer drug splitting.</p> <p><b>FACILITATOR NOTE:</b> Now display the Injection Risk Reduction Ladder Poster and remove injection cards from the blank ladder poster.</p>	<p>Are there any questions about this ladder or where the different behaviors are placed?</p> <p>Did anything surprise you?</p> <p>Let's move on to talk about safer options for splitting our injection drugs.</p>

**5:2**

**SESSION 5 COMPONENT 2(B) PRESENT NEW INFORMATION:  
INJECTION RISK REDUCTION OPTIONS**

<p>9. Debrief Teachback.</p>	<p>Give yourself a round of applause and let's acknowledge your work!</p> <p>Let's hear first from the Facilitators. What was your experience like? What were your struggles and strengths?</p> <p>Does anyone from the group want to share their observations or how their experience is going to help them prepare to facilitate this component?</p> <p>Lastly, we would like to offer our observations of the delivery of the component.</p> <p>Use the injection risk reduction ladder handout that is in the SHIELD handouts folder to guide you through the correct placement of the behaviors.</p>	 <p><u>Trainer's note:</u> Point out strengths and areas for improvement.</p>  <p>Show slide #185</p> <div data-bbox="1102 552 1479 829" style="border: 1px solid black; padding: 10px; text-align: center;"> <p><u>Teachback - Debriefing</u></p> <p>Session 5 – Present new information Safer injection ladder</p> </div>
<p>10. Demonstrate safer splitting skills. Session 5: Component 2c) Safer splitting skills.</p>	<p>Now, we are going to talk about safer splitting.</p> <p>The procedures for the safer splitting demonstration begins on page 113 of your Facilitators Guide with a discussion about how dry splitting or splitting powder is a low risk because there is or should be no blood present when this happens.</p> <p>To safely split drugs wet you will need a brand new, never been used sterile syringe, a brand new, never been used cooker, brand new never been used cotton. This brand new needle will be used to divide the drugs into each individuals own cooker for them to draw up from. So to be clear, the needle and cooker is only used to divide the drugs. Never to inject.</p> <p>This is similar to having a pot of soup and ladle and everyone has their own bowl and spoons. You would not have everyone sip off the ladle – but instead</p>	 <p><u>Trainer's note:</u> Follow procedures from Facilitators Guide.</p> <p>Pass out the “Steps for Safely splitting drugs” handout.</p>  <p>Show slide #186</p> <div data-bbox="1102 1377 1479 1675" style="border: 1px solid black; padding: 10px;"> <p><u>Safer Splitting Demonstration</u></p> <p>Materials you will need:</p> <ul style="list-style-type: none"> <li>• One Syringe</li> <li>• Three cookers/caps</li> <li>• Clean <b>COLD</b> water</li> <li>• Clean cotton</li> </ul> </div>

	<p>would serve everyone with the ladle and put it away.</p> <p>To do the split, you would draw up your drug solution into the new needle and portion out into everyone’s cooker. Then, put the splitting needle and cooker away so that someone does not use them to inject.</p> <p>There is a handout in the SHIELD handouts folder that illustrates each of the safer splitting steps. You should give this to participants to assist with their homework.</p>	
<p>11 Summarize and transition to Drug Splitting Risk Ladder</p>	<p>The main point about the safer splitting demonstration is that the “splitting needle” and “splitting cooker” are never to be used for personal injection. You use these for measuring water and dividing drugs. Have your participants brainstorm ways to keep the splitting needle and cooker safe from injection use. Some ideas are to use a marker to mark the splitting needles. Another idea is to burn off the numbers on the syringe.</p> <p>What questions do you have about splitting drugs?</p>	 Show slide #187 <div data-bbox="1104 856 1481 1129" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Safer Splitting Demonstration</u></b></p> <p>Take Home Points</p> <ul style="list-style-type: none"> <li>• Splitting needle &amp; cooker are for dividing drugs ONLY.</li> <li>• Mark needle and cooker so that people do not use them to inject.</li> </ul> </div>
<p>12. Transition to Drug Splitting Risk Ladder.</p>	<p>Now we are going to do a Teachback of the drug splitting ladder. For the next Teachback we will need two more volunteers.</p>	 Show slide #188 <div data-bbox="1104 1430 1500 1682" style="border: 1px solid black; padding: 10px; text-align: center;"> <p><b><u>Teachback</u></b></p> <p>Session 5 – Present New Information Safer Splitting Ladder</p> </div>  <b><u>Trainer’s note:</u></b> Aim to have volunteers who have not done a Teachback on the

		ladder.
13 Trainer to meet with Teachback facilitators.		 <p><u>Trainer's notes:</u> Aim to have volunteers who have not done a Teachback on the ladder.</p> <p>Take volunteers off to the side to give them instructions for this Teachback.</p> <p>Ask the volunteers if they have any questions.</p> <p>Help them decide who will take the lead.</p> <p>Review the Ladder answer key with the volunteers so they are familiar with the correct placement of cards.</p> <p>Assure them that you will be standing by if they get stuck or need a suggestion.</p>
13b. Trainer to meet with group playing participants.		 <p><u>Trainer's notes:</u> Instruct the rest of the group to act like typical clients from their agency.</p> <p>Answer any questions about what their role should be.</p>
14. Conduct the Teachback of Splitting Risk Ladder.: Session 5: Component 2d: Present New information		 <p><u>Trainer's note</u> As the Teachback is happening, make note of instances where the facilitators redirected the conversation back to different options on the sex risk ladder, being a Peer Educator and/or PEER communication skills.</p>

		Also note examples of good co-facilitation creating a supportive environment.
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## TEACHBACK

### SESSION 5 COMPONENT 2(D) PRESENT NEW INFORMATION: DRUG SPLITTING RISK REDUCTION OPTIONS

<b>PURPOSE</b>	Participants will learn about different levels of drug splitting risk and options to reduce risk.
<b>TIME</b>	10 minutes
<b>MATERIALS</b>	Blank risk reduction ladder; drug splitting behavior cards; Velcro tape; drug splitting answer key

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
Describe instructions for drug splitting ladder activity.	<p>So for this next activity we will be giving you cards that have different behaviors related to injection drug splitting on them and we want you to come up to the poster and place them where you think they belong based on their risk level.</p> <p>Does anyone have any questions before we begin?</p>
<p>Conduct the activity.</p> <p><i>📌 FACILITATOR NOTE:</i> Allow 1 participant at a time to come up to the poster and place their card on the ladder. Each time, engage the group and ask them if they agree or disagree with the card placement and what reasoning they have for their decision.</p>	<p>Who would like to go first?</p>
<p>Place cards in the proper order and summarize the activity.</p> <p><i>📌 FACILITATOR NOTE:</i> Use the Drug Splitting Risk Ladder Answer Key Handout to determine the correct order of behavior cards on the ladder [Refer to the SHIELD Handouts for Participants Folder].</p>	<p>You all did a great job. Let's review the different options for safer splitting. The highest drug splitting risk behavior is splitting drugs using someone else's unclean needle. By using an unclean needle to measure out water and then drugs you are essentially rinsing any blood in the needle in with the drugs and then injecting this. If you are going to split drugs wet, a safer option is to use a needle that has been rinsed with cold water at least once and/or multiple times. An even safer option [Facilitator motion down the ladder] is to use a new/never been used needle and cooker just for the drug splitting. And an even safer option is to divide the drugs dry.</p>

### SESSION 5 COMPONENT 2(D) PRESENT NEW INFORMATION: DRUG SPLITTING RISK REDUCTION OPTIONS

5:2

**SESSION 5 COMPONENT 2(D) PRESENT NEW INFORMATION:  
DRUG SPLITTING RISK REDUCTION OPTIONS**

**PROCEDURES**

Summarize and transition to break.

**SUGGESTED SCRIPTS**

We went over a lot of information this morning! As Peer Educators it is important to be able to share information about safer injection options and safer splitting options with others.

After our 10 minute break we are going to practice using our PEER Communication skills to have these conversations.

**5:2**

**SESSION 5 COMPONENT 2(D) PRESENT NEW INFORMATION:  
DRUG SPLITTING RISK REDUCTION OPTIONS**

116

Procedures	Suggested Script	Trainer Notes & Slides
<p>15. Debrief Teachback</p>	<p>Give yourselves a round of applause!</p> <p>Let's hear first from the facilitators. What was your experience like? What were your struggles and strengths?</p> <p>Does anyone from the group want to share their observations or how their experience is going to help them prepare to facilitate this component?</p> <p>Lastly, we would like to offer our observations of the delivery of the component.</p> <p>Use the drug splitting risk reduction ladder handout that is in the SHIELD handouts folder to guide you through the correct placement of the behaviors. Is everyone feeling comfortable with the Risk Ladders?</p>	<p> <u>Trainer's note:</u> Point out strengths and areas for improvement.</p> <p> Show slide #189</p> <div data-bbox="1089 1396 1495 1671" style="border: 1px solid black; padding: 10px; text-align: center;"> <p><u>Teachback - Debriefing</u></p> <p>Session 5 – Present new information Safer splitting ladder</p> </div>

<p>16. Describe Component 3: Peer Educator training activities.</p>	<p>Component 3, the Peer Educator Training activities are scenarios specific to injection risk for your group to problem-solve. If there are scenarios that individuals in your group would like to have the group problem-solve you can use those too. Make sure you have participants role-play the scenario after they problem-solve safer options to suggest and strategies for doing peer outreach.</p>	 Show slide #190 <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b>Session 5</b></p> <ul style="list-style-type: none"> <li>• <u>Component 3</u> – Peer Educator Training Activities.</li> <li>• <u>Component 4</u> – Homework assignment and practice.</li> </ul> </div>
<p>17. Summarize and transition to describing the Homework assignment for Session 4. The homework assignment for this session is to share with someone something new that you learned about condoms or lubricants.</p>	<p>The homework assignment for Session 5 is to share information from the discussions of the injection risk or drug splitting risk reduction ladder.</p> <p>The SHIELD handouts folder has a copy of the Session 5 homework assignment that you can pass out to participants.</p> <p>The handouts folder also has copies of the Injection risk reduction ladder and drug splitting risk reduction ladder. We encourage you to give them to your participants to help them with their homework assignment.</p>	
<p>18. Summarize and introduce safer injection kits</p>	<p>Just like the safer sex kits from Session 4, your agency may decide to distribute safer injection kits during Session 5. These kits may include new syringes, cookers, cottons, or cotton pads.</p> <p>What questions do you have about safer injection kits?</p>	 Show slide #191 <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align: center;"><b>Safer Injection Kits</b></p>  </div>
<p>10. Wrap-up of Day 2.</p>	<p>At this point, we are finished going through the 5 of the SHIELD sessions.</p> <p>Tomorrow when we come back, we will talk about Graduation, Booster sessions. We are also going to</p>	

	discuss evaluation and next steps for getting your agency ready to implement SHIELD.	
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# DAY 3



[http://www.middletownschools.org/uploaded/Board\\_of\\_Education/calendar.jpg](http://www.middletownschools.org/uploaded/Board_of_Education/calendar.jpg)

# MODULE 21

**Welcome Back & Recap of Day 2**

## MODULE 22: Welcome Back & Recap of Day 2



### Objectives of the Module

1. Summarize material covered in Day 2 of the training.



### Time

9:00-9:15am



### Materials

Laptop & projector

“Prizes” for TOF trainees that give correct answers to review questions.

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Welcome participants back to training.</p>	<p>Welcome to Day 3 of the training. Yesterday we covered Sessions 2 through 5 of the SHIELD intervention.</p> <p>What questions do you have about the sessions?</p>	<div style="display: flex; align-items: flex-start;"> <div style="margin-right: 10px;">  </div> <div> <p>Show slide #192</p> </div> </div> <div style="border: 1px solid black; width: 150px; height: 70px; margin: 10px auto; text-align: center; padding: 5px;"> <p>Recap of Day 2</p> </div> <div style="margin-top: 20px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  </div> <div> <p><u>Trainer's notes:</u> Allow participants to ask questions about the sessions. Then, start the review game.</p> </div> </div> </div>

<p>2. Introduce Review game.</p>	<p>Today we are going to talk about booster sessions and evaluation. Before we get started we have a little review game to play just like yesterday.</p>	 <p><u>Trainer's notes:</u> Have SHIELD posters covered up so participants don't see the answers.</p> <p>Ask review questions and then select 1 participant to provide the answer.</p> <p>Give a little prize to each participant who answers a question correctly.</p>
<p>3. Review Session 3</p>	<p>Question#1: The higher up a behavior is on the Sex risk ladder, the safer it is.</p>	 <p><u>Trainer's note:</u> The correct Response is False. The higher up a behavior is, the more risky it is. Just like dangers increases every step you go up on a ladder, the higher up you are on the risk ladder, the higher your risk for getting HIV.</p>
<p>4. Review Session 4.</p>	<p>Question #2: Name 2 types of condoms.</p>	 <p><u>Trainer's note:</u> There are many different kinds of condoms. Some possible responses include: Male, female, latex, polyurethane, flavored, or colored.</p>
<p>5. Review Session 5.</p>	<p>Question #3: True or False: Your agency must conduct the demonstrations of safer splitting and cleaning injection equipment.</p>	 <p><u>Trainer's note:</u> The correct Response is False. Agencies have the option of passing out the handouts that describe each step rather than doing the demonstrations. The demonstrations may be a trigger</p>

		for some participants. And, some regulations may not allow agencies to perform the demonstrations.
7. Transition Session 6.	Well done! Now we are going to talk about Session 6 and some additional sessions your agency may hold called Booster sessions.	

# MODULE 22

## SHIELD Session 6

## MODULE 23: SHIELD Session 6

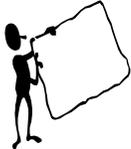


**By the end of this module, trainees will:**

1. Describe the procedures and activities in SHIELD Session 6.
2. Observe a Trainer Demonstration of Peer Educator Training activities.



**Time**  
9:15-10:15am



**Materials**

Laptop & projector  
Graduation Certificates

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Introduce the session.</p>	<p>Session 6 is the big graduation session. For many of your participants this may be their first graduation from anything so it is important to treat this as a significant accomplishment. You may want to have a cake to celebrate and we suggest having a certificate printed for your participants. There is an example of a certificate in the SHIELD handouts folder.</p>	<p> Show slide #193</p> <div style="border: 1px solid black; padding: 10px; text-align: center;"> <p><b><u>SESSION 6</u></b></p> </div>
<p>2. Review the objectives of Session 6.</p>	<p>The objectives of this session are to provide motivation for participants them to continue their Peer Outreach and to identify and problem-solve barriers to their Outreach. Some agencies may not have continued contact with their participants after graduation so you want to do as much as you can to sustain their Outreach.</p> <p>Another objective is for the participant to think about and problem-solve barriers to their own risk reduction plan.</p> <p>Lastly, if your agency decides to have Booster sessions, this is a great opportunity to advertise them and recruit for them.</p>	<p> Show slide #194</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b>Session 6: Objectives</b></p> <ol style="list-style-type: none"> <li>1. To provide support and positive reinforcement for Peer Educator role.</li> <li>2. To provide motivation for sustainability of Peer Outreach.</li> <li>3. To problem-solve barriers to Peer Outreach and individual behavior change.</li> <li>4. To promote Booster sessions <i>(if applicable)</i>.</li> </ol> </div>

<p>3. Review Session 6 activities in sequence.</p>	<p>The session structure for Session 6 is the same as the previous sessions, in that there are 5 components. The components are a little different from sessions 2-5.</p> <p>First you will do the Homework check-in.</p> <ul style="list-style-type: none"> <li>• Component 2 is a Knowledge Review activity.</li> <li>• Component 3 is actually 3 different brainstorm discussions focused on the issues of Peer Outreach, personal risk reduction and barriers.</li> <li>• Component 4 is the graduation ceremony and</li> <li>• Component 5 is the summary.</li> </ul>	 <p>Show slide #195</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">Session 6: Structure</p> <ol style="list-style-type: none"> <li>1. Homework check-in</li> <li>2. Knowledge review</li> <li>3. Peer Educator Training             <ol style="list-style-type: none"> <li>a) Goal setting for Peer Outreach</li> <li>b) Barriers to sustainability for Peer Outreach</li> <li>c) Goal setting personal risk reduction</li> </ol> </li> <li>4. Graduation ceremony</li> <li>5. Summary</li> </ol> </div>
<p>4. Introduce demonstration of Component 3.</p>	<p>We are going to demonstrate how to facilitate Component 3 of Session 6 which are the discussions about Peer Outreach goals and personal risk reduction goals.</p> <p>So we will be putting on our “facilitator hats” and you all can put on your “participant hats”.</p> <p>As usual, feel free to take notes as we go along and we will discuss after the demonstration.</p> <p>Is everyone ready to begin?</p>	 <p>Show slide #196</p> <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">Component 3: Peer Educator Training Activities</p> <ol style="list-style-type: none"> <li>1. Goal Setting for Peer Outreach</li> <li>2. Barriers to Sustainability for Peer Outreach</li> <li>3. Goal Setting for Personal Risk Reduction</li> </ol> </div>

<p>5. Demonstrate Component 3 (a-c) Peer Educator Training Activities.</p>	<p>Conduct Demonstration.</p>	<p> Show slide #197</p> <div data-bbox="1125 327 1442 516" style="border: 1px solid black; padding: 10px; text-align: center;"><p><b><u>Trainers Demonstrate</u></b></p><p>Session 6 Component 3a-c</p></div> <p> <b>Trainer's note:</b> Prior to the training, trainers should assign roles to these components.</p>
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## TRAINER DEMONSTRATION

### SESSION 6 COMPONENT 3(A) PEER EDUCATOR TRAINING ACTIVITIES: GOAL SETTING FOR PEER OUTREACH

PURPOSE	Participants will set a goal for conducting Peer Outreach in the next month.
TIME	5 minutes
MATERIALS	Posters from Sessions 1-5; tape

PROCEDURES	SUGGESTED SCRIPTS
<p>Review Peer Educator definition.</p> <p><b>⚡ FACILITATOR NOTE:</b> Point to the Peer Educator poster as you read the definition.</p>	<p>In Session 1 of this program you were told that you were going to be trained to be a Peer Educator who conducts outreach to their peers by sharing HIV risk reduction information and resources so that they can be safer.</p>
<p>Have a discussion about what being a Peer Educator means to participants.</p> <p><b>⚡ FACILITATOR NOTE:</b> The aim of this discussion is to focus participants on the positive and rewarding aspects of being a Peer Educator and have individual participants reflect on their experience and successes so that they can formulate a goal for their Peer Outreach.</p>	<p>Now that you are about to graduate from this program. What have you learned by being a Peer Educator?</p> <p>How do you think being a Peer Educator has changed you and/or your peers?</p>
<p>Ask participants to describe a personal goal for conducting Peer Outreach for the next month.</p>	<p>We would like for you to take a minute to think about a goal for Peer Outreach that you would like to set for yourself for the next month. It could be that you want to finally talk to that guy that you see selling needles in your neighborhood or you want to talk with your partner about getting tested for HIV.</p> <p>When you are ready please share with us your Peer Outreach goal.</p>
<p>Summarize and transition to goal setting for personal risk reduction.</p>	<p>We are excited to hear your goals for Peer Outreach and wish you the best. Next, we want to talk about and problem-solve some of the barriers that may get in our way as we continue our Peer Outreach.</p>



### SESSION 6 COMPONENT 3(A) PEER EDUCATOR TRAINING ACTIVITIES: GOAL SETTING FOR PEER OUTREACH

**SESSION 6 COMPONENT 3(B) PEER EDUCATOR TRAINING ACTIVITIES:  
BARRIERS TO SUSTAINING PEER OUTREACH**

<b>PURPOSE</b>	Participants will problem solve solutions to common Peer Outreach barriers.
<b>TIME</b>	5 minutes
<b>MATERIALS</b>	Posters from Sessions 1-5; blank newsprint; tape; markers

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Ask the group to identify qualities in a Peer Educator that are important for maintaining credibility with their peers.</p> <p><b>FACILITATOR NOTE:</b> Write responses on the newsprint.</p>	<p>As Peer Educators, what are some things that are important for us to keep in mind so that we can maintain our credibility with our peers?</p> <p>[Points to include if not raised by the group:</p> <ul style="list-style-type: none"> <li>• Practicing what you preach is important.</li> <li>• Peer Educators are human. They are not expected to be perfect and sometimes make mistakes.</li> <li>• Being able to admit mistakes is important.</li> <li>• If you don't know the information, let the person know that you will get the correct answer and get back to them. Agency facilitators/agency contacts can serve as sources for information.]</li> </ul>
<p>Ask the group to problem-solve situations that would challenge a Peer Educator's credibility and be a barrier to sustained Peer Outreach.</p> <p><b>FACILITATOR NOTE:</b> The aim of this discussion is to allow participants to see that set backs or barriers may happen, but can be overcome.</p>	<p>Being a Peer Educator is a lot of work. We are going to read to you some scenarios and want you to work as a group and come up with some solutions for the Peer Educator in this situation.</p> <p>[Read each scenario and ask the group what they would suggest for the Peer Educator:</p> <ul style="list-style-type: none"> <li>• The last time I did Peer Outreach, someone asked me a question that I did not know the answer to and they laughed at me and called me a name.</li> </ul>

**SESSION 6 COMPONENT 3(B) PEER EDUCATOR TRAINING ACTIVITIES:  
BARRIERS TO SUSTAINING PEER OUTREACH**

PROCEDURES	SUGGESTED SCRIPTS
<p>Ask the group to problem-solve situations that would challenge a Peer Educator's credibility and be a barrier to sustained Peer Outreach (CONTINUED).</p>	<ul style="list-style-type: none"> <li>• I am too embarrassed to do Peer Outreach because people will think that I am still using (or have relapsed).</li> <li>• People from my neighborhood will always see me as a trouble maker and a drug addict so they will never listen to me.</li> <li>• I ran out of condoms to give out so I can't do Peer Outreach anymore.]</li> </ul>
<p>Summarize discussion and transition to personal risk reduction goal setting.</p>	<p>As you can see from this discussion, we may have Outreach encounters that do not go as planned or get asked a question that we do not know the answer to and this may result in negative feelings about the Peer Outreach work.</p> <p>If or when this happens remind yourself of how much work you have put into being trained to be a Peer Educator and how much information you have shared with your Homework Buddy and possibly others.</p> <p>Solutions to these barriers can be as simple as telling yourself that a Peer Educator is an important person who is helping the community and seeking out supportive people.</p> <p>It is not our job to know everything, but to be able to refer people to the appropriate resources for help. Peer Educators are leaders in the community who are making a difference in stopping the HIV epidemic.</p> <p>Let's move on to talk about how we have personally been reducing our risk.</p>



**SESSION 6 COMPONENT 3(B) PEER EDUCATOR TRAINING ACTIVITIES:  
BARRIERS TO SUSTAINING PEER OUTREACH**

**SESSION 6 COMPONENT 3(C) PEER EDUCATOR TRAINING ACTIVITIES:  
GOAL SETTING FOR PERSONAL RISK REDUCTION**

<b>PURPOSE</b>	Participants will set a personal risk reduction goal.
<b>TIME</b>	10 minutes
<b>MATERIALS</b>	Posters from Sessions 1-5; tape

<b>PROCEDURES</b>	<b>SUGGESTED SCRIPTS</b>
<p>Ask group to reflect on where they fall on each ladder and to identify a realistic goal for the next month.</p> <p><i>✍️ FACILITATOR NOTE:</i> Allow the group 2-3 minutes to reflect. Give the participants the opportunity to share their goal with the group.</p>	<p>Most of what we have been talking about in your training is how to help others be safer with their behavior. Looking at these ladders we want you to think about where your behavior is and what goals you would like to set to reduce high risk or maintain low risk behavior.</p> <p>If you would like to share you are welcome to, but this can be personal so we want to respect privacy as well.</p> <p>Does anyone want to share?</p>
<p>Ask the group to think about barriers to their personal risk reduction goal and risks to relapse.</p> <p><i>✍️ FACILITATOR NOTE:</i> Allow group 2-3 minutes to reflect.</p>	<p>Now take a few minutes to think about situations or people who may get in the way of you achieving your personal risk reduction goal. How can you use your Peer Educator training to help yourself stay safe?</p> <p>If you would like to share or get your peers suggestions you are welcome, but don't feel that you have to.</p> <p>Does anyone want to share?</p>
<p>Summarize and transition to graduation ceremony.</p>	<p>So let us summarize by saying that one way that Peer Educators are leaders in the community is by working on reducing or keeping their own risk low. Good luck with your goals. Now let's move on to our graduation ceremony.</p>

**SESSION 6 COMPONENT 3(C) PEER EDUCATOR TRAINING ACTIVITIES:  
GOAL SETTING FOR PERSONAL RISK REDUCTION**



Procedures	Suggested Script	Trainer Notes & Slides
<p>6. Summarize and debrief Component 3.</p>	<p>Component 3 is a series of related discussions about sustaining Peer Outreach and personal risk reduction. Sustainability of the skills and risk reduction is important because you want the positive effects of the SHIELD training to last beyond session 6.</p> <p>In the first discussion you want to have participants reflect on the positive experience that they have had as a Peer Educator. In many cases, participants started the program feeling unsure about their ability to be a Peer Educator or to help someone and usually they have done quite a lot to share information and risk reduction techniques with others. So draw attention to this progress.</p> <p>When they identify their goal for Peer Outreach, work with them to make this a really specific and achievable goal. So instead of having a goal of “talking to drug users at a shooting gallery” you could get them to identify one particular drug user that they want to start with, The more specific and achievable the goal the more likely they are to succeed.</p> <p>The second discussion is designed to discuss situations where their Peer Outreach does not go as planned so they do not feel like giving up. You want to plant the seed in their mind that one stumble or failure does not mean they should stop doing Peer Outreach.</p>	 <p>Show slide #198</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p style="text-align: center;"><b>Summarizing Session 6 – Peer Educator Training Activities</b></p> <ul style="list-style-type: none"> <li>• <b>Goal Setting for Peer Outreach</b> <ul style="list-style-type: none"> <li>– Goal should be specific and achievable</li> <li>– Goal helps sustain Peer Outreach</li> </ul> </li> <li>• <b>Barriers to Sustainability for Peer Outreach</b> <ul style="list-style-type: none"> <li>– Bumps in the road happen</li> <li>– Help participants plan for dealing with barriers versus quitting Peer Outreach</li> </ul> </li> <li>• <b>Goal Setting for Personal Risk Reduction</b> <ul style="list-style-type: none"> <li>– Reducing personal risk is one way to avoid issues of credibility with peers</li> <li>– Serves to enhance sustainability of Peer Outreach</li> </ul> </li> </ul> </div>

	<p>Encourage them to seek supportive people in their lives and remind them that they are human.</p> <p>The final discussion is meant to have participants take a look at themselves not only so that they can make changes to be safer but also as a way to point out that Peer Educator should practice what they preach.</p> <p>What questions do you have about this component?</p>	
<p>7. Describe Component 4.</p>	<p>The next part of the session is graduation. We encourage you to pass out certificates to your participants.</p> <p>For the graduation, you will read each name aloud and congratulate participants as they come up to receive their certificate. Allow participants to say a word about their participation in the intervention.</p>	
<p>9. Summarize Session 6.</p>	<p>The last component of Session 6 is a summary.</p> <p>After congratulating the group, inform of them of any future opportunities at your agency such as boosters or other services or programs.</p> <p>Thank them for being trained to be a Peer Educator and encourage them to keep up with their Peer outreach.</p> <p>What questions do you have about Session 6?</p>	

# MODULE 23

## SHIELD Booster Sessions

## MODULE 24: SHIELD Booster Sessions



**By the end of this module, trainees will:**

1. Describe the procedures and activities in SHIELD Booster sessions.



**Time**  
10:15-11:00am



**Materials**

Laptop & projector

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Summarize Session 6 and transition to Booster session description.</p>	<p>We have a few more things to cover about the SHIELD sessions and Facilitators Guide.</p> <p>After session 6 your agency may choose to conduct Booster sessions. Boosters are not required but there are many benefits.</p> <p>Boosters are a great way to stay in touch with Peer Educators. They also give participants a chance to keep their peer outreach skills fresh and learn new information. We have found that after graduation, many Peer Educators want to stay connected to your agency. So, boosters are a great option.</p>	<p> Show slide #199</p> <div style="border: 1px solid black; width: 200px; height: 100px; margin: 20px auto; text-align: center; padding: 10px;"> <p><b>Booster Sessions</b></p> </div>

<p>2. Introduce Booster session purpose.</p>	<p>We have heard that the biggest barriers to holding booster sessions are time and money.</p> <p>Boosters do not have to be costly and they are a lot less structured than the intervention sessions. So, they often take less time.</p> <p>There are a variety of different types of boosters that you can have at your agency.</p> <p>Scheduling Boosters is up to the agency though we recommend that you pick a day and time and stick to it. So for example, you may want to have a Booster every second Wednesday of the month. This will allow your Peer Educators to plan for the Boosters and will improve attendance.</p>	 Show slide #200 <div data-bbox="1112 315 1494 619" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Boosters</u></b></p> <ul style="list-style-type: none"> <li>• Informal group sessions with participants <ul style="list-style-type: none"> <li>- Check-in</li> <li>- Skills refresher</li> <li>- Restock risk reduction materials</li> </ul> </li> <li>• Agency events</li> <li>• Community events <ul style="list-style-type: none"> <li>- Street outreach</li> <li>- Health fairs</li> </ul> </li> </ul> </div>
<p>3. Review Booster session structure</p>	<p>The Boosters are not designed to last as long as a regular SHIELD session and therefore only have 3 components. Turn to the Booster session in your Facilitators Guide to follow along.</p> <p>The first component: <u>Peer Educator check-in.</u></p> <p>This is a chance to hear from people how their Outreach is going and to have the group offer suggestions and problem-solve barriers that they have been encountered. You are provided with some suggestions for questions to use for this component in the Booster Session in your Facilitators Guide.</p> <p>The second component is the <u>Skills Refresher.</u></p>	 Show slide #201 <div data-bbox="1120 1134 1502 1428" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b>Booster Session Structure</b></p> <ul style="list-style-type: none"> <li>• <u>Component 1:</u> Peer Educator Check-in</li> <li>• <u>Component 2:</u> Peer Educator Skills Refresher</li> <li>• <u>Component 3:</u> Closing</li> </ul> </div>

	<p>The aim is to review knowledge or communication skills. When participants are sharing about how their Peer Outreach is going you may hear some things that you think your group needs to brush up on such as misinformation that was given or not picking the right place and time. You are provided with some suggestions for activities so that you can refresh these skills. You are also encouraged to come up with your own activities for skills refreshers.</p> <p>Boosters are also a great way to cover information about hepatitis and overdose if these are topics that your clients would be interested in.</p> <p>The last component is the <u>Closing</u>. You will close the session by providing encouragement and motivation to continue Peer Outreach.</p> <p>What questions do you have about boosters?</p> <p>How many of you think your agency will want to have booster sessions?</p>	
<p>4. Transition to the break.</p>	<p>Ok. We are going to take a 15 minute break.</p> <p>After the break we will go evaluation of the SHIELD intervention.</p>	<p> Show slide #202</p> <div data-bbox="1117 1484 1406 1698" style="border: 1px solid black; padding: 10px; text-align: center;"> <p>15 minute break</p>  </div>

# MODULE 24

**Evaluating the SHIELD intervention**

## MODULE 25: Evaluating the SHIELD Intervention



**By the end of this module, trainees will:**

1. Summarize suggested evaluation activities.
2. Walk through examples of evaluation forms.



**Time**  
11:15-12:15pm



**Materials**

- Laptop & projector
- Newsprint: CDC Evaluation Pyramid Poster
- SHIELD Logic Model Poster
- SHIELD Monitoring and Evaluation Guide:
  - SHIELD Process Monitoring Form
  - SHIELD Process Evaluation Form
  - SHIELD Pre-Post Test Assessment
  - SHIELD Participant Feedback Form

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Transition into evaluation.</p>	<p>At this point, you have now implemented a full cycle of SHIELD. You have completed Sessions 1-6 and even the optional Booster sessions. Now wouldn't it be nice to know what has happened as a result of implementing SHIELD at your agency?</p> <p>Over the last two days, we've talked a little bit about how we keep track of our SHIELD activities and our progress. Let's get into more detail and see how we can assess what has taken place.</p>	<div style="display: flex; align-items: center;"> <p>Show slide #203</p> </div> <div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: 80%; text-align: center;"> <p><b><u>Evaluating the SHIELD intervention</u></b></p> </div>

<p>2. Reframe the concept of evaluation.</p>	<p>Before we start this module on evaluation, we want you to forget everything you have ever learned about evaluation. This isn't going to be about someone else measuring you, or about all the forms that you have to track for your funders.</p> <p>We are all in this room because we want to help people stay safe and we are learning this intervention because we believe it will help. We believe that we all actually want to offer the best programs that we can, and knowing what is working and what isn't working is an important part of doing that.</p> <p>That is how we are going to talk about evaluation: as something that you can do to <b>understand</b> what is <b>working</b> and what you might want to <b>change</b> in order to have the best program possible.</p> <p>We want you to get what YOU want out of evaluation and to learn what YOU want to learn.</p>	
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<p>3. Discuss purposes of evaluation</p>	<p>Before we start talking about the specifics of our SHIELD evaluation, we want to discuss evaluation in general.</p> <p><b><i>Why do we conduct monitoring and evaluation activities?</i></b></p> <p>Funders typically have specific evaluation requirements. But evaluation serves a lot of other purposes as well, such as:</p> <ul style="list-style-type: none"> <li>• Documenting the implementation process, challenges encountered, and solutions</li> <li>• Identifying strengths and weaknesses of the program and using that information to improve the program</li> <li>• Accountability at the agency and staff level</li> </ul> <p>Here are some of the most common reasons, many of which you have already mentioned.</p>	 <p>Show slide #204</p> <div data-bbox="1193 321 1479 522" style="border: 1px solid black; padding: 5px;"> <p><b>Purposes of Evaluation</b></p> <ul style="list-style-type: none"> <li>• Documenting the implementation process</li> <li>• Figuring out what works &amp; doesn't work</li> <li>• Recognizing milestones &amp; challenges encountered</li> <li>• Demonstrating program effectiveness</li> <li>• Accountability</li> <li>• Applying and securing future funding</li> <li>• Showcasing the program to stakeholders</li> </ul> </div>  <p><b>Trainers note:</b> Write participant responses on poster board. After they have responded, show slide.</p>
<p>4. Introduce the CDC Evaluation Pyramid.</p>	<p>The CDC uses a pyramid that we find very helpful for understanding evaluation.</p> <p>At the base of the pyramid is <b>formative evaluation</b>. This is conducted during the pre-implementation phase. It is part of the planning process and includes things like:</p> <ul style="list-style-type: none"> <li>• Assessing agency resources and capacity</li> <li>• Conducting a community assessment to identify partner agencies and establish MOUs/MOAs</li> <li>• Pre-testing materials, etc.</li> </ul> <p>Formative evaluation is needed to identify needs, build capacity, and prevent gaps in the program during implementation. It is the strong foundation of our pyramid.</p> <p>Next up is <b>process monitoring and evaluation</b>. These measure what we are doing in our agencies: how many cycles of SHIELD we conduct, how many sessions, how many</p>	 <p>Show slide #205</p> <div data-bbox="1156 1169 1481 1409" style="border: 1px solid black; padding: 5px;"> <p><b>CDC Evaluation Pyramid</b></p>  </div>

participants, how many outreach contacts, etc.

Higher up the pyramid are **outcomes monitoring and evaluation**. These are the changes that participants experience; changes in sexual risk behaviors, IDU risk behaviors, substance use, self-efficacy, confidence, comfort talking to peers, etc.

We are not going to talk about the top level of the pyramid, **outcomes evaluation**, today. Outcomes evaluation requires very rigorous measurement including control groups or comparison groups. This is the level of evaluation that was done in the original research, but is not something we usually do at an agency level.

We will talk about the third level of the pyramid, **outcomes monitoring**. Outcomes monitoring tells us about how participants have changed from before they started the intervention until after the intervention. This is usually the part of evaluation that we most want to know. This is great to show our funders, or just for us to feel the satisfaction of making a difference.

Just like this pyramid shows, the process monitoring and evaluation are the strong foundation of our pyramid. Before we can get to the outcomes that we are most excited about, we need to have a strong foundation.

5. Connect evaluation to the SHIELD Logic Model.

Another way to think about evaluation is to look at:

- Resources – the things you put into your program
- Activities – what you do in your program
- Results – what happens as a result of what you put in and what you do

We can use a logic model to help us visualize these different components. There are many kinds of logic models. At the beginning of this training, we saw a behavioral logic model. This logic model example is to help provide a picture of the implementation of SHIELD and illustrate how the pieces connect. This kind of logic model is really helpful for evaluation.

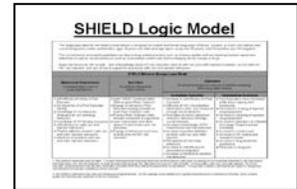
The logic model is really a series of “if, then” statements.

Think of the logic model as a series of “**if, then**” statements.

- If you contribute these resources (**inputs**), then you can conduct these **activities**.
- If you conduct these **activities**, then this is what happens – these are the **outputs** you can look at.
- If you contribute these inputs, conduct these activities, and look at these outputs, then you can expect these **immediate outcomes**
- If you see these **immediate outcomes**, then you should see these **intermediate outcomes**
- As we go beyond the time frame of the logic model: If we get the **intermediate outcomes**, then we know we are on the right path toward the **long-term outcomes** that we hope for (reduced number of new and existing cases of HIV and viral hepatitis in the community).



Show slide #206



<p>6. Introduce the Monitoring and Evaluation Guide tools.</p>	<p>Evaluation helps to show us if we are on the right path to the outcomes we want, and how to make our programs even better.</p> <p>We have included a number of SAMPLE tools in the Monitoring and Evaluation Guide (including some of the original tools from the research study). These tools can be adapted to your specific needs. They can be changed and integrated into what you may already do at your agencies. The Word files of these forms are all on the SHIELD CD in your handouts folders.</p> <p>Let's go back to the evaluation pyramid and look at the sample tools that we have included.</p>	 Show slide #207  <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>SHIELD Monitoring &amp; Evaluation Guide</u></b></p> <ul style="list-style-type: none"> <li>• Overview of Evaluation</li> <li>• Evaluation activities &amp; plan</li> <li>• Evaluation tools</li> </ul> <p style="text-align: right; font-size: small;">207</p> </div>
<p>7. Review the 3 types of evaluation for SHIELD.</p>	<p>Evaluating SHIELD focuses on three levels of the pyramid</p> <ul style="list-style-type: none"> <li>• Process Evaluation</li> <li>• Process Monitoring</li> <li>• Outcome Monitoring</li> </ul>	 Show slide #208  <div style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b><u>Types of Evaluation</u></b></p> <ul style="list-style-type: none"> <li>• Process Evaluation</li> <li>• Process Monitoring</li> <li>• Outcome Monitoring</li> </ul> </div>

8. Describe process monitoring.

Starting at the bottom of the pyramid, the strong foundation:

**Process monitoring** is measuring what you have actually done: how many people you have outreached to, how many participants have attended SHIELD, etc.

Some of the questions that process monitoring answers include:

- How many people were recruited for the SHIELD intervention?
- What recruitment sites were most productive?
- How many people called to get more information about SHIELD?
- How many people attended each intervention sessions?
- What referrals were given to participants?
- What risk reduction materials were distributed?



Show slide #209

**What does Process Monitoring tell us?**

1. How many people were recruited for the SHIELD intervention?
2. What recruitment sites were most productive?
3. How many people called to get more information about SHIELD?
4. How many people attended each intervention sessions?
5. What referrals were given to participants?
6. What risk reduction materials were distributed?

9. Introduce Process Monitoring Form

Look at the process monitoring form in the M&E Guide (Appendix 2, pg 17). Let's walk through it. (Trainers Note: Quickly read through some of the sections, but don't spend a lot of time reading every item.)

This form is to be used at the end of each CYCLE (a full set of Sessions 1-6).

In order to fill this out, you would need to have been tracking your recruitment efforts all along. How would you track your recruitment efforts? (Trainers Note: Allow for a few answers.)

You may already have internal processes and forms. If not, turn to pgs 14-15 of the M&E Guide. You could use something LIKE this. (This is not exactly for tracking!)

How would you fill out the attendance info? There are attendance sign-in sheets in the handouts folder. You may also want to use the Facilitator Summary to capture some of this (pg 154 of the Facilitator Guide).

Start using the recruitment specific forms as soon as recruitment starts. Then fill out the Process Monitoring form at the end of every CYCLE (cycle = 6 sessions). This should be connected to the kind of tracking you may already do in your agency.

10. Summarize Process Monitoring activities.

What questions do you have about Process Monitoring?



Show slide #210



**Trainer's note:**  
Walk participants through the Process Monitoring form.



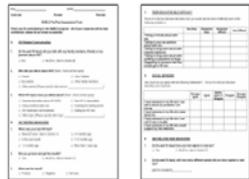
Show slide #211

**Process Monitoring**

Data Source	Timeline	Person Responsible
SHIELD Process Monitoring Form	Before & after each set of SHIELD cycle	Project Manager, Facilitator

\* Reminder: the data that are compiled on the Process Monitoring Form need to be collected on an ongoing basis after each SHIELD session.

<p>11. Describe Process Evaluation.</p>	<p>Moving up the pyramid we have: <b>Process evaluation.</b></p> <p>Process Evaluation measures what you <b>actually did</b> compared to what you <b>intended to do</b>. For example: you intended to implement 10 cycles of SHIELD and you actually did 6. Process Evaluation looks at the successes and challenges so that you can make any necessary changes and improve your programs. Process Evaluation is also about issues of Fidelity to the core elements. Remember our earlier conversation about adaptation versus re-invention. To implement SHIELD with fidelity, you cannot change any of the Core Elements.</p> <p>Process Evaluation will answer the following questions:</p> <ul style="list-style-type: none"> <li>• Were any of the SHIELD core elements changed?</li> <li>• What core elements were changed?</li> <li>• Why were the core elements changed?</li> <li>• Was the intervention adapted?</li> <li>• How was the intervention adapted?</li> </ul>	 Show slide #212 <div data-bbox="1193 325 1494 504" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>What does Process Evaluation tell us?</b></p> <ol style="list-style-type: none"> <li>1. Were any of the SHIELD core elements changed?</li> <li>2. What core elements were changed?</li> <li>3. Why were the core elements changed?</li> <li>4. Was the intervention adapted?</li> <li>5. How was the intervention adapted?</li> </ol> </div>
<p>12. Introduce the Process Evaluation Form.</p>	<p>Let's look at the Process Evaluation form on pg 21 of the M&amp;E Guide.</p> <p>This form was designed to be filled out at the end of each CYCLE. In order to be able to do this, you will need to have been tracking each session!</p> <p>There are also two other tools, the Facilitator summaries (pg 25) and the supervisor rating forms (pg 26). These two forms can also help you capture some of the information you need after each Session. Compiling this information is what will allow you to fill out the Process Evaluation Form at the end of the Cycle.</p> <p>Do NOT wait until the end of the entire cycle to complete the Process Evaluation form. Make it part of your debrief with your co-facilitator after each Session!</p>	 Show slide #213 <div data-bbox="1193 1260 1518 1512" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Process Evaluation Form</b></p>  </div>  <b>Trainer's note:</b> Walk participants through the Process Evaluation form.

<p>13. Summarize Process Evaluation activities.</p>	<p>What questions do you have about Process Evaluation?</p>	 <p>Show slide #214</p> <div data-bbox="1166 306 1516 537" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Process Evaluation Activities</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Data Source</th> <th style="text-align: left;">Timeline</th> <th style="text-align: left;">Person Responsible</th> </tr> </thead> <tbody> <tr> <td>SHIELD Process Evaluation Form</td> <td>Ongoing (Before and after each session)</td> <td>Project Manager, Facilitators</td> </tr> <tr> <td>Facilitator summaries</td> <td>After each SHIELD group</td> <td>Facilitators</td> </tr> <tr> <td>Supervisor rating forms</td> <td>Before and after each session observed</td> <td>Project Manager</td> </tr> </tbody> </table> <p style="font-size: small; margin-top: 5px;">* <b>Reminder:</b> the data that are collected on the Process Evaluation Form need to be collected on an ongoing basis after each SHIELD session.</p> </div>	Data Source	Timeline	Person Responsible	SHIELD Process Evaluation Form	Ongoing (Before and after each session)	Project Manager, Facilitators	Facilitator summaries	After each SHIELD group	Facilitators	Supervisor rating forms	Before and after each session observed	Project Manager
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<p>14. Describe outcome evaluation.</p>	<p>Moving up the pyramid we have: <b>Outcomes monitoring.</b></p> <p>Outcomes monitoring measures the changes in participants' behaviors, intentions, &amp; attitudes <b>before</b> the intervention compared to <b>after</b> the intervention.</p> <p>In the original research study, the SHIELD intervention was rigorously evaluated to assess change in participant's behavior.</p> <p>Outcome monitoring is important to determine if the expected intervention outcomes occurred.</p>	 <p>Show slide #215</p> <div data-bbox="1203 678 1516 940" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>What does Outcome Monitoring tell us?</b></p> <ol style="list-style-type: none"> <li>1. Did SHIELD participants change their behaviors?</li> <li>2. Did the attitudes of SHIELD participants change?</li> <li>3. How did participation in the SHIELD intervention affect participants?</li> </ol> </div>												
<p>15. Introduce SHIELD pre-post assessment.</p>	<p>In the Monitoring &amp; Evaluation Guide &amp; your folders, there is a copy of the SHIELD Pre &amp; post test assessment that was used in the initial research. (pg #28)</p>	 <p>Show slide #216</p> <div data-bbox="1203 1220 1516 1476" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>SHIELD Pre-Post Assessment</b></p>  </div>												

<p>16. Point out tips for administered the pre-post test assessment.</p>	<p>We want to offer some tips for administering this assessment.</p> <p>First, it was designed to be administering face-to-face. And, may be administered by the Project Manager or Facilitators.</p> <p>Next, you should give the pre-test to your participants before they come to Session 1. A good time may be the pre-program contact.</p> <p>The post-test should be given once participants have completed the SHIELD sessions. Your agency may want to look at changes over a 30-day period or something longer like 6-month or a year. One strategy is to hold a booster session around the time that you want to do the post assessment. That way, before you get started on the booster, you can administer the post test.</p> <p>What questions do you have about Outcome Monitoring?</p>	 <p>Show slide #217</p> <div data-bbox="1193 304 1518 577" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>SHIELD Pre-Post Assessment</b></p> <ul style="list-style-type: none"> <li>• Face-to-face interview</li> <li>• Pre-test: Before clients go to Session 1 (e.g., Pre-program Contact)</li> <li>• Post-test: At least 30 days after a participant has graduation from the SHIELD program (e.g., After a Booster session).</li> <li>• To assess long-term changes, give post-test 3 or 6 months after graduation</li> <li>• Compare the pre and post assessments to evaluate client outcomes.</li> <li>• Includes questions about behaviors, Peer Educator self-efficacy, social networks, and communication</li> </ul> </div>
<p>17. Introduce the Participant Feedback form.</p>	<p>Another useful outcome monitoring tool that is in your folder &amp; the Monitoring &amp; Evaluation Guide is the Participant feedback form (Page 36). This form may capture some changes in your clients' behavior or attitudes that the pre-post test assessment does not capture.</p> <p>The feedback form is a way to further explore how the program has impacted your clients. And, the Project Manager or Facilitators can administer this form.</p> <p>This form should be filled out after your SHIELD participants they have graduated such as before or after a booster session.</p>	 <p>Show slide #218</p> <div data-bbox="1218 1176 1518 1417" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Participant Feedback Form</b></p> <p style="font-size: small;">This form is designed to help you gather feedback from your clients about their experience with the SHIELD program. It includes questions about their satisfaction with the program, their knowledge of HIV prevention, and their self-efficacy. The form is intended to be used by Project Managers or Facilitators after a SHIELD session.</p> <ol style="list-style-type: none"> <li>1. How satisfied are you with the SHIELD program?</li> <li>2. How much do you know about HIV prevention?</li> <li>3. How confident are you about your ability to prevent HIV?</li> <li>4. How much do you know about the SHIELD program?</li> </ol> </div>

<p>18. Summarize outcome evaluation activities.</p>	<p>Here is a brief summary of outcome evaluation activities that we suggest.</p> <p>What questions do you have about outcome evaluation?</p>	 <p>Show slide #219</p> <div data-bbox="1201 310 1518 529" style="border: 1px solid black; padding: 5px;">  <p style="text-align: center;"><b>Outcome Monitoring</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Data Source</th> <th style="text-align: left;">Timeline</th> <th style="text-align: left;">Person Responsible</th> </tr> </thead> <tbody> <tr> <td>SHIELD Pre-Assessment Form</td> <td>Before Session 1 or 2, Pre-Program Contact</td> <td>Project Manager, Facilitators</td> </tr> <tr> <td>SHIELD Post-Assessment Form</td> <td>At least 30 days after graduation from SHIELD</td> <td>Project Manager, Facilitators</td> </tr> <tr> <td>SHIELD Participant Feedback Form</td> <td>After last session or during booster sessions</td> <td>Project Manager, Facilitators</td> </tr> </tbody> </table> </div>	Data Source	Timeline	Person Responsible	SHIELD Pre-Assessment Form	Before Session 1 or 2, Pre-Program Contact	Project Manager, Facilitators	SHIELD Post-Assessment Form	At least 30 days after graduation from SHIELD	Project Manager, Facilitators	SHIELD Participant Feedback Form	After last session or during booster sessions	Project Manager, Facilitators
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<p>19. Summarize evaluation activities.</p>	<p>Again, all of these forms are just EXAMPLES of what was done in the original research. Hopefully they will be helpful to you in planning your evaluation and thinking about what YOU want to learn about how SHIELD is working for your organization. As we talked about in the Pre-Implementation module, evaluation planning is an important part of getting ready to implement SHIELD.</p> <p>What questions do you have about evaluation?</p>													
<p>20. Next steps for Evaluation.</p>	<p>We have been talking about all the things you might want to evaluate in order to know how SHIELD is working at your agencies.</p> <p>Now, we want everyone to think about <b>one thing</b> they want to learn from their SHIELD evaluation.</p> <p>Think about this for a minute, and then we will go around the room and share.</p>	 <p>Show slide #220</p> <div data-bbox="1214 1171 1526 1386" style="border: 1px solid black; padding: 10px;">  <hr style="border: 0.5px solid black; margin: 5px 0;"/> <p style="text-align: center;">Please share one thing you would like to learn from your evaluation of SHIELD.</p> </div>												

<p>21. Ask some participants to share.</p>		 <p><u>Trainer's notes:</u> Have <b>some</b> participants share what they want to learn.</p> <p>Contextualize their responses by referring back to the evaluation pyramid and the evaluation tools in the M&amp;E Guide.</p>
<p>22. Thank everyone for sharing and transition to Agency Self-Assessment Module.</p>	<p>Thanks everyone for sharing. Next we are going to look at some <b>other next steps</b> as you get ready to implement SHIELD.</p>	

# MODULE 25

## Wrap-up

## MODULE 26: Wrap-up



**By the end of this module, trainees will:**

1. Notify agencies about decisions needed to be made before implementation.
2. Develop an action plan for SHIELD implementation.



**Time**  
12:15-1:00pm



**Materials**

- Laptop & projector
- SHIELD Project Manager's Guide
- Newsprint: Blank
- Markers (for group activity)

Procedures	Suggested Script	Trainer Notes & Slides
<p>1. Discuss tools available to help agencies get ready.</p>	<p>We have come to the end of the Training for SHIELD. We have covered a lot of information in a short amount of time!</p> <p>Once you get back to your agency there are several decisions you need to make.</p> <p>There are two assessments that can help lead your pre-implementation activities. The first is the SHIELD Self Assessment Readiness Tool that is available on at <a href="http://www.effectiveinterventions.org">www.effectiveinterventions.org</a>. This tool will help your agency identify current capacity to implement SHIELD.</p> <p>Second, in the Project Manager's Guide, there is a section that outlines the major decisions your agency will need to make before you implement SHIELD.</p>	<div style="display: flex; align-items: center;"> <p>Show slide#221</p> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <div style="display: flex; justify-content: space-between; align-items: center;"> <p>Assessment Tools</p> </div> <ul style="list-style-type: none"> <li>• SHIELD Self Assessment Readiness Tool – <a href="http://www.effectiveinterventions.org">www.effectiveinterventions.org</a> – In your grey folder</li> <li>• Agency Decision Worksheet – Page 46 in Program Manager's Guide</li> </ul> </div>
<p>2. Describe Agency Decisions.</p>	<p>The second assessment looks into your agency's readiness to implement the more detailed steps of</p>	<p>Trainers note:</p> <div style="display: flex; align-items: center;"> <p>Show slide# 222</p> </div>

	<p>the intervention. The Agency Decision Worksheet on page 46 of the Project Manager’s Guide provides you with an opportunity to evaluate critical decisions that need to be made prior to implementation. For example, timing and frequency of your sessions, whether your agency will be demonstrating the safer splitting techniques and whether your agency will be providing safer sex kits.</p>	<div data-bbox="1105 205 1409 436" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;"><b>Agency Decisions</b></p> <ul style="list-style-type: none"> <li>• Location, Timing, &amp; Frequency</li> <li>• Composition of the group</li> <li>• Optional activities <ul style="list-style-type: none"> <li>– Cleaning &amp; spitting demonstrations</li> <li>– Distribute safer sex &amp; safer injection kits</li> <li>– Booster Sessions</li> </ul> </li> <li>• Community resources</li> <li>• Safety/Emergency, &amp; relapse prevention plans</li> <li>• Evaluation</li> </ul> </div>
<p>3. Agency readiness activity</p>	<p>We have one last activity before we end the training.</p> <p>Please get together with your agency co-workers and complete both the SHIELD Self Assessment Readiness Tool and Agency Decision Worksheet on page 46 of the Project Manager’s Guide and answer three questions:</p> <ol style="list-style-type: none"> <li>1. Initial Observations. Any surprises?</li> <li>2. Anticipated challenges?</li> <li>3. Next Step? Identify one next step</li> </ol> <p>Each agency will get a sheet of newsprint to record their answers and then share with the group.</p>	<div data-bbox="1036 678 1101 745" style="float: left; margin-right: 10px;"></div> <p>Show slide#223</p> <div data-bbox="1133 772 1425 955" style="border: 1px solid black; padding: 5px; margin: 10px auto; width: fit-content;"> <div style="display: flex; justify-content: space-between; align-items: center;">  <span>Agency Questions</span> </div> <hr style="border: 0.5px solid orange; margin: 5px 0;"/> <ol style="list-style-type: none"> <li>1. Initial observations? Any surprises?</li> <li>2. Anticipated challenges?</li> <li>3. Next steps?</li> </ol> </div> <div data-bbox="1036 949 1133 1039" style="float: left; margin-right: 10px;"></div> <p><b><u>Trainer’s note:</u></b> Give each agency 3 pieces of newsprint with the following titles:</p> <ol style="list-style-type: none"> <li>1. Initial Observations. Any surprises?</li> <li>2. Anticipated challenges?</li> <li>3. Next Step?</li> </ol>
<p>3. Have agencies share their experiences</p>	<p>Now, we would like to hear from each of the groups today.</p>	<div data-bbox="1036 1369 1133 1459" style="float: left; margin-right: 10px;"></div> <p><b><u>Trainer’s note:</u></b> Have a representative from each agency report back on the activity.</p>

<p>4. Pass out graduation certificates.</p>	<p>We would like to recognize each of you for your contribution to the training over the past 3 days.</p> <p>When I read your name, please come up to receive your certificate. Please take a moment to say something.</p>	<p>Trainers note:</p>  <p>Show slide# 224</p> <div data-bbox="1078 323 1411 525" style="border: 1px solid black; padding: 10px; text-align: center;"> <p><u>Graduation</u></p> <p>Congratulations and Good Luck</p> </div>  <p><u>Trainer's note:</u> Read each participant's name and pass out their certificate.</p>
<p>5. Provide Technical Assistance information.</p>	<p>Give yourselves a round of applause for all of the hard work that you have done. Good luck implementing SHIELD.</p> <p>If you have any questions after you leave here, you can contact a Capacity-Building Agency provider who can help your agency further ready to implement SHIELD.</p>	
<p>6. Review Training Expectations</p>	<p>Now we are going to review the Training Expectations that you listed at the beginning of the training. Please tell us if there expectations were met.</p>	 <p><u>Trainer's note:</u> Review newsprint with training objectives.</p>

# **Section IV: Appendices**

# Self-Help in Eliminating Life-threatening Diseases (SHIELD): Training Peer Educators to conduct



## The Science behind the Package

The Self-Help in Eliminating Life-threatening Diseases (SHIELD) intervention is an innovative approach to HIV prevention. SHIELD, a group level intervention, trains current and former drug users to be Peer Educators who share information with people in their social networks (e.g., friends, family, sex partners, etc.).

The SHIELD intervention is based on several theories; Social Cognitive Theory, Social Identity Theory, Cognitive Dissonance (or inconsistency) Theories, and Social Influence Theories. In the SHIELD model of HIV prevention, one individual (a Peer Educator) is taught strategies to reduce HIV risk associated with drug use and sex behavior. In addition, Peer Educators are taught effective communication skills in order to pass on the prevention information to people in their social networks. Peer Educators are trained to be leaders within their social networks and communities. They use their communication skills to have conversations about prevention to help stop the spread of HIV.

Training current and former drug users who interact with other drug-using individuals as Peer Educators is an efficient HIV prevention approach. Peer Educators are more likely to have access to drug users in the community, especially those who may not access traditional prevention services. Furthermore, by training drug users to be Peer Educators, they become an active participant in the community effort to stop the spread of HIV. According to this model, training one individual leads to teaching and positively influencing many others.

SHIELD is low-cost and requires few technology resources and nominal space, which allows for implementation with minimal budget, staff, and facility size. Finally, by training former and current drug users to conduct outreach, hidden and hard-to-reach individuals may be engaged in HIV prevention.

## Target Population

The target population for the SHIELD intervention is male and female adults (18 years or older) who are current or former 'hard' drug users (heroin, cocaine, and crack) who interact with other drug users. The intervention can be delivered with clients who are HIV positive and HIV-negative.

## Intervention

The SHIELD intervention is delivered through 6 small group sessions which can be held in a community-based setting (e.g., CBO meeting space, community center). Each group is led by 2 trained facilitators. Information, referrals, and risk reduction materials are delivered through group problem-solving activities, role-plays, and demonstrations.

### SHIELD Session Topics

1. Intro to the Peer Educator role & Peer Outreach
2. PEER Communication skills
3. Sexual risk behavior-Part 1
4. Sexual risk behavior- Part 2
5. Injection drug use behavior
6. Graduation

### Core Elements

- 1) SHIELD is implemented in a small group setting (4-12 participants) to offer an environment that is conducive to sharing experiences and gaining social support from peers.
- 2) Participants go through the specified SHIELD Sequence- a series of activities that includes pre-program contact and 6 intervention sessions in a specified sequence.
- 3) Each SHIELD intervention session follows a specific structure that includes 5 components: homework check-in, presentation of new information, Peer Educator training activities, homework assignment, and summary.
- 4) SHIELD sessions aim to build three sets of skills necessary for participants to be a Peer Educator. These skills are:
  - Communication skills for conducting effective peer outreach (PEER)
  - HIV injection-related risk reduction techniques
  - HIV sex-related risk reduction techniques
- 5) Every session includes interactive Peer Educator training activities which build Peer Outreach skills and increase Peer Educator self-efficacy. Through increased self-efficacy, participants develop a Peer Educator Identity. Activities include:
  - Facilitator Role-models, Group Problem-solving activities, & Role-plays

### Research Results

The SHIELD intervention produced the following results among current and former drug users:

- Increased condom use during vaginal sex with casual sex partners (16% of Peer Educators vs. 4% of control group);
- Increased condom use during oral sex with casual sex partners (12% of Peer Educators vs. 3% of control group);
- Reduced needle sharing (69% of Peer Educators vs. 30% of control group);
- Decreased injection drug use frequency (48% of Peer Educators vs. 25% of control group); and
- Stopped using injection drugs (44% of Peer Educators vs. 22% of control group)

### For More Details on the Research

Latkin, CA, Sherman, S, & Knowlton, A. (2003). HIV prevention among drug users: Outcome of a network-oriented peer outreach intervention. *Health Psychology, 22*(4), 332-339.

## Appendix 2: SHIELD Logic Model

Problem Statement			
<p>The target population for the SHIELD intervention is designed for current and former drug users of heroin, cocaine, or crack who interact with current drug users; males and females; ages 18 years and older (average age in study was 39 years); and HIV positive and HIV negative.</p> <p>The risk behaviors among this population are due to drug-related practices such as sharing needles and not cleaning injection equipment effectively as well as sexual behaviors such as inconsistent condom use and exchanging sex for money or drugs.</p> <p>The major risk factors for HIV include: Lack of knowledge about HIV risk reduction, Lack of safer sex and safer injection materials, Lack of skills for HIV risk reduction, and Lack of social support for practicing safer sex and injection behaviors.</p>			
SHIELD Behavior Change Logic Model			
Behavioral Determinants <i>Corresponds to risk or contextual factors</i>	Activities <i>To address behavioral determinants</i>	Outcomes <i>Expected changes as a result of activities targeting behavioral determinants</i>	
		Immediate Outcomes	Intermediate Outcomes
<ul style="list-style-type: none"> <li>• Self-efficacy for being a Peer Educator</li> <li>• Development of a Peer Educator Identity</li> <li>• Knowledge of risk reduction strategies for sex and drug behaviors</li> <li>• Knowledge of HIV Testing resources</li> <li>• Self-efficacy for safer sex and injection behaviors</li> <li>• Positive attitudes towards safer sex &amp; safer injection behaviors</li> <li>• Intentions to practice safer sex &amp; safer injection behaviors</li> </ul>	<ul style="list-style-type: none"> <li>• Learn PEER Communication Skills to guide Peer Outreach.</li> <li>• Engage in interactive Peer Educator training activities to build Peer Outreach skills</li> <li>• Practice Peer Outreach skills through homework assignments</li> <li>• Learn information and skills about HIV prevention and risk reduction</li> <li>• Engage in interactive exercises to build skills for HIV risk reduction</li> </ul>	<ul style="list-style-type: none"> <li>• Increase in self-efficacy for Peer Outreach</li> <li>• Diffusion of HIV risk reduction information, skills, and resources through social networks</li> <li>• Promotion of norms about risk reduction behaviors through social networks</li> <li>• Increase in knowledge of HIV transmission and risk reduction</li> <li>• Increase in positive attitudes towards safer sex &amp; safer injection</li> <li>• Recognition of own risky behaviors</li> <li>• Increase in self-efficacy for personal risk reduction</li> <li>• Increase in intention to practice risk reduction</li> </ul>	<ul style="list-style-type: none"> <li>• Peer Educators have increased pride about helping their community</li> <li>• Decrease in sharing of injection drug equipment</li> <li>• Increase in cleaning of injection drug equipment</li> <li>• Increase in utilization of a Needle Exchange Programs (where available)</li> <li>• Increase in condom use</li> <li>• Increase in HIV testing and receipt of results</li> <li>• Increase in drug treatment enrollment</li> <li>• Reduction in drug use</li> </ul>

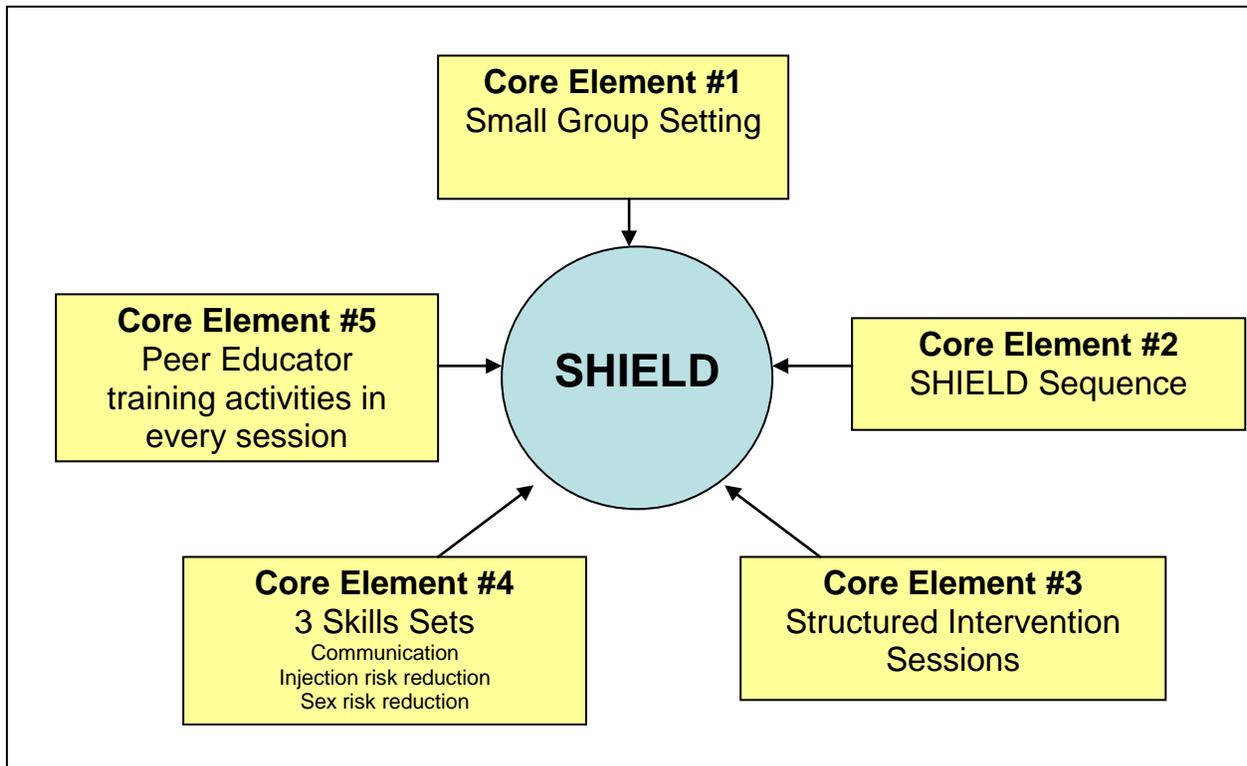
1- The SHIELD intervention has two aims: 1) to train individuals to be Peer Educators who conduct outreach with peers by sharing HIV risk reduction information; and 2) to reduce Peer Educators' own HIV risk behaviors. In order to achieve these goals, the intervention focuses on 3 sets of skills: communication, safer sex, and safer injection. As a Peer Educator, participants learn risk reduction information and skills which they diffuse throughout their social network. Through peer outreach, participants also begin to change their own behaviors to maintain credibility as a Peer Educator.

2- The SHIELD intervention was built upon three psychological theories: Social Learning, Social Identity and Cognitive Dissonance (or inconsistency) Theories. Each of these theories guides the Peer Educator approach to HIV risk reduction.

**Core Elements of the SHIELD Intervention**

The SHIELD intervention has been shown to be effective in changing risky sex and drug behaviors among former and current drug users.

Below is a list of the five Core Elements of the SHIELD intervention and supporting rationale behind each one. Each of these core elements must be maintained to ensure fidelity to the SHIELD intervention. Without each of the core elements, the intervention may not be effective at changing HIV risk behaviors.



**1) SHIELD is implemented in a small group setting to offer participants an environment that is conducive to sharing experiences and gaining social support from peers.**

Rationale: Small group sessions (4-12 individuals) facilitate learning through shared experiences and encouragement among peers. In the small group setting, participants hear their peers’ experiences with personal risk reduction and peer outreach as well as share their own experiences. As the sessions progress, participants will have the opportunity to observe each other’s communication and risk reduction behaviors through role-plays and demonstrations. By observing others practice risk reduction, participants may become motivated to change their own behaviors. The small group approach also leads to social

support towards risk reduction among participants.

**2) Participants go through the SHIELD Sequence- a series of activities that includes pre-program contact and six intervention sessions in a specified sequence.**

Rationale: Peer education requires motivation and willingness to interact with social network members. Thus, potential participants should be briefed about the SHIELD intervention and screened to determine if peer education is appropriate for them during the Pre-program contact. Once a client is screened eligible, they will progress through Sessions 1 through 6. This order is important to build risk reduction and communication skills, develop the Peer Educator identity, and establish a supportive environment where participants can share their experiences.

**3) Each SHIELD intervention session follows a specific structure that includes 5 components.**

Rationale: Each intervention session follows a specific structure. This structure includes the following five components: homework check-in, presentation of new information, **Peer Educator** training activities (i.e. group problem-solving and role-plays), homework assignment and practice, and summary. By following this structure, risk reduction and communication skills are reinforced and participants have opportunities to practice their Peer outreach. For more information about the SHIELD session structure, please refer to the **SHIELD Facilitators Guide**.

**4) SHIELD sessions aim to build three sets of skills necessary for participants to be a Peer Educator. These skills are:**

- Communication skills for conducting effective peer outreach (**PEER**)
- HIV injection-related risk reduction techniques
- HIV sex-related risk reduction techniques

Rationale: The central focus of the SHIELD intervention is to train individuals to be Peer Educators. Peer Educators are taught four basic communication skills to be used during peer outreach. These four communication skills (PEER) include Pick the right time and place; Evaluate their situation; Explore safer options for their situation; Resources and referrals. PEER is an acronym to assist Peer Educators in recalling the four communication skills.

The main objective of Peer Outreach is to educate social network members about techniques to reduce one's risk for HIV. Thus, participants learn drug and sex-related risk reduction information and skills to disseminate through their social networks as well as to lower

their own risk for HIV. These risk reduction skills are presented through risk ladders, demonstrations, and games. Peer Educators are encouraged to use their PEER Communication skills to share this information with their social network members.

**5) Every session includes interactive Peer Educator training activities which build Peer Outreach skills and increase Peer Educator self-efficacy. Through increased self-efficacy, participants develop a Peer Educator Identity. Activities include:**

- Facilitator Role-models
- Group Problem-solving activities
- Role-plays

Rationale: Becoming a Peer Educator and conducting Peer Outreach is a process. First, participants need to be introduced to the concept of Peer Education. Then, by engaging in activities and discussion about peer outreach throughout each session, the Peer Educator role is reinforced which leads to adoption of the Peer Educator Identity. Peer Educator identity means that the participant sees themselves as a Peer Educator and looks at Peer Outreach as an important role in their lives.

Interactive sessions include hands-on activities that help participants increase their self-efficacy, or confidence in one's ability to be a Peer Educator. Communication skills can be practiced with other participants in the small group. In the small group, participants give peer feedback and suggestions. Within the small group, participants can learn and then model the ways they can share with others and negotiate for themselves new safer injection and safer sex skills. Interactions with peers within the small group help participants adopt the Peer Educator Identity.



**D. Collect Client Contact Information**

Street/Apt \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Cross Street: \_\_\_\_\_  
 Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Pager (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Email: \_\_\_\_\_ Hangouts: \_\_\_\_\_  
 OK to leave message: \_\_Y\_\_N OK to mention this agency: \_\_Y\_\_N

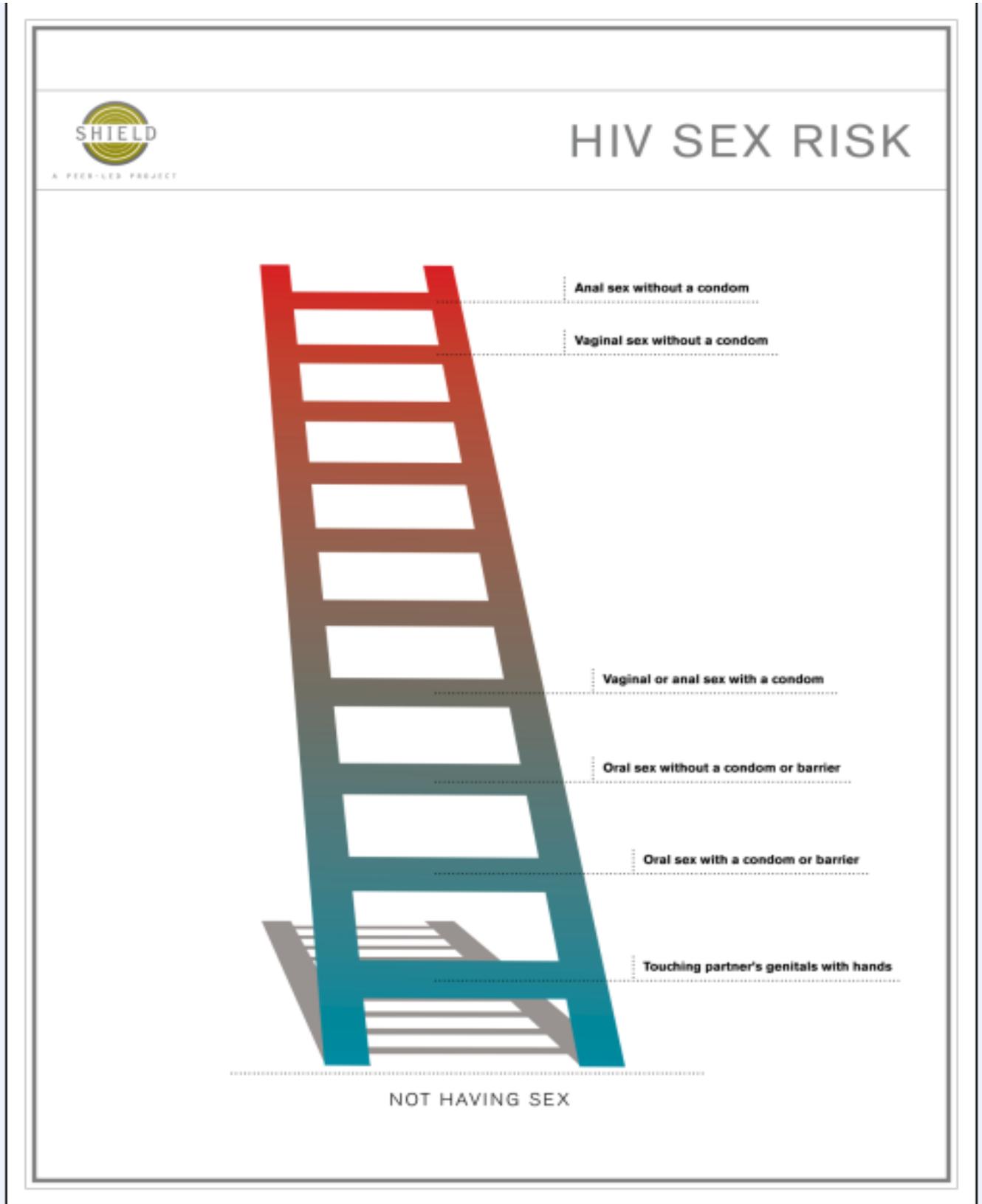
**E. Collect Additional Locating Information** (additional persons through which client may be reached)

**CONTACT #1**  
 Street/Apt \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Cross Street: \_\_\_\_\_  
 Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Pager (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Email: \_\_\_\_\_ Hangouts: \_\_\_\_\_  
 OK to leave message: \_\_Y\_\_N OK to mention this agency: \_\_Y\_\_N

**CONTACT #2**  
 Street/Apt \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Cross Street: \_\_\_\_\_  
 Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Pager (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Email: \_\_\_\_\_ Hangouts: \_\_\_\_\_  
 OK to leave message: \_\_Y\_\_N OK to mention this agency: \_\_Y\_\_N

**F. Distribute SHIELD Calendar**

1. Agency gave client the SHIELD Calendar of Sessions: \_\_Y\_\_N  
 2. Does client have another commitment (i.e. job, group, etc.) that would prevent them from attending the 6 SHIELD sessions? \_\_Y\_\_N  
 If no, client will be considered signed up for SHIELD; If yes, refer client to other services



## Steps for properly putting on a male condom

<p><b>1. Check the expiration date.</b></p>		<p><i>This is located on the back of the condom. If the condom is expired it is more likely it is to break, but it is safer than not using a condom.</i></p>
<p><b>2. Squeeze the condom to make sure there are no holes in it.</b></p>		
<p><b>3. Open the package.</b></p>		<p><i>Using your thumb, move the condom down in the package to avoid tearing. Do not use teeth or scissors to open a condom or you may tear or damage the condom.</i></p>
<p><b>4. Squeeze the reservoir tip of the condom.</b></p>		<p><i>Make sure you place the condom on the penis so that the condom rolls down easily. Check to make sure that it is not on inside out.</i></p>
<p><b>5. Unroll the condom to the base of the penis.</b></p>		

## Appendix 6: Male Condom Steps

<p><b>6. After ejaculation, hold the rim of the condom and remove from partner while penis is still slightly hard.</b></p>		<p><i>This will keep semen from spilling out of the condom.</i></p>
<p><b>7. Properly dispose of condom by tying a knot at the end and place in trash receptacle.</b></p>		<p><i>Flushing condoms in the toilet will cause plumbing problems.</i></p>

## Steps for properly putting on a Female condom

<p><b>1. Check the expiration date</b></p>		<p><i>This is located on the back of the condom. If the condom is expired it is more likely it is to break, but it is safer than not using a condom.</i></p>
<p><b>2. Squeeze packet to make sure there are no holes.</b></p> <p><b>3. Open the package.</b></p>		<p><i>On the Female condom package there is an arrow to indicate where to open the package. Using scissors or teeth could damage the condom.</i></p>
<p><b>4. Take the condom out of the package.</b></p>		<p><i>The female condom has two rings, the inner ring which you will insert into the vagina and the outer ring which will remain outside of the vagina.</i></p>
<p><b>5. Squeeze the inner ring to form a figure 8.</b></p>		<p><i>It is best to use the thumb and middle finger to squeeze the inner ring.</i></p>
<p><b>6. Using Index finger, insert inner ring into the vagina and push until the ring “pops” open (covering the cervix).</b></p>		

## Appendix 7: Female Condom Steps

<p>7. Make sure the condom is in place prior to intercourse.</p>	 <p>Correct</p>  <p>Incorrect</p>	<p><i>Make sure that the penis is inserted <b>into</b> the condom to protect against HIV.</i></p>
<p>8. After ejaculation, twist the condom while it is in the vagina to prevent any semen from spilling and gently pull to remove.</p>		
<p>8. To properly dispose of condom, tie a knot in the end and place in trash receptacle.</p>		

## Steps for properly rinsing injection equipment

- Rinsing your needle and injection equipment with clean cold water is an important step in reducing HIV risk.
- Rinsing with bleach between rinses with water has been shown to kills HIV infected blood, but bleach does not kill hepatitis C.
- The more you rinse the more you are able to get potentially infected blood out.

### What you will need

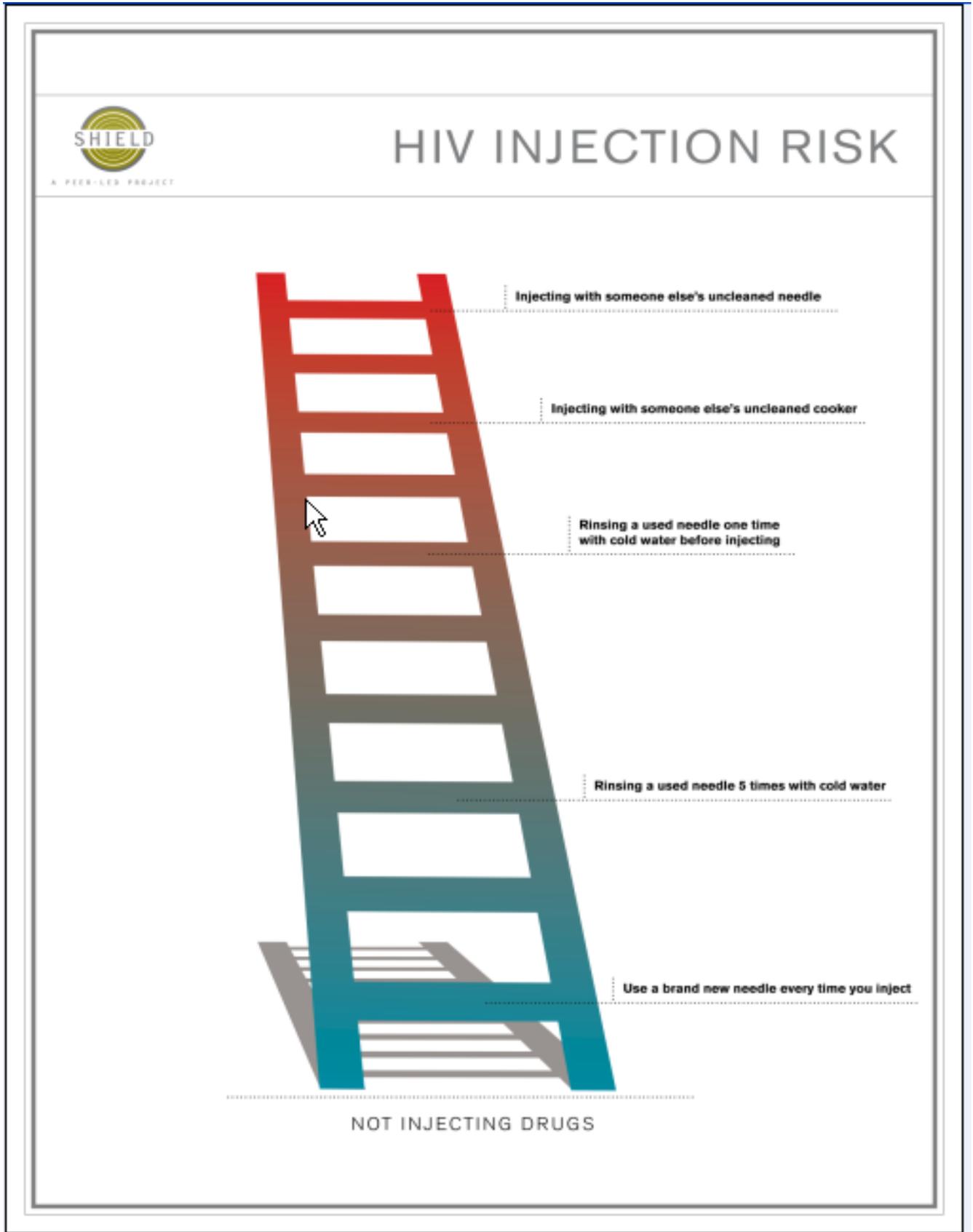
- Clean cold water (toilet water and water from outside spigots may contain bacteria).
- Clean paper towels or napkins
- Household bleach



<p>1. Pour clean cold water into a separate container or cap.</p>	
<p>Do not dip your used needle into the source of the clean water.</p>	
<p>2. Draw up the clean cold water fully into the needle.</p>	

## Appendix 8: Rinsing Injection Equipment Steps

<p>3. Shake and/or tap the needle so that you can loosen the dried blood or particles.</p>	
<p>4. Squirt the contaminated water onto a paper towel.</p>	
<p>5. Repeat this up to 5 times. The more rinses the better. If you have bleach available, do this process with bleach in between the water rinses</p>	
<p>6. Rinse your cooker out with clean water and throw the used cotton away.</p>	



## Steps for Safely Splitting Injection Drugs

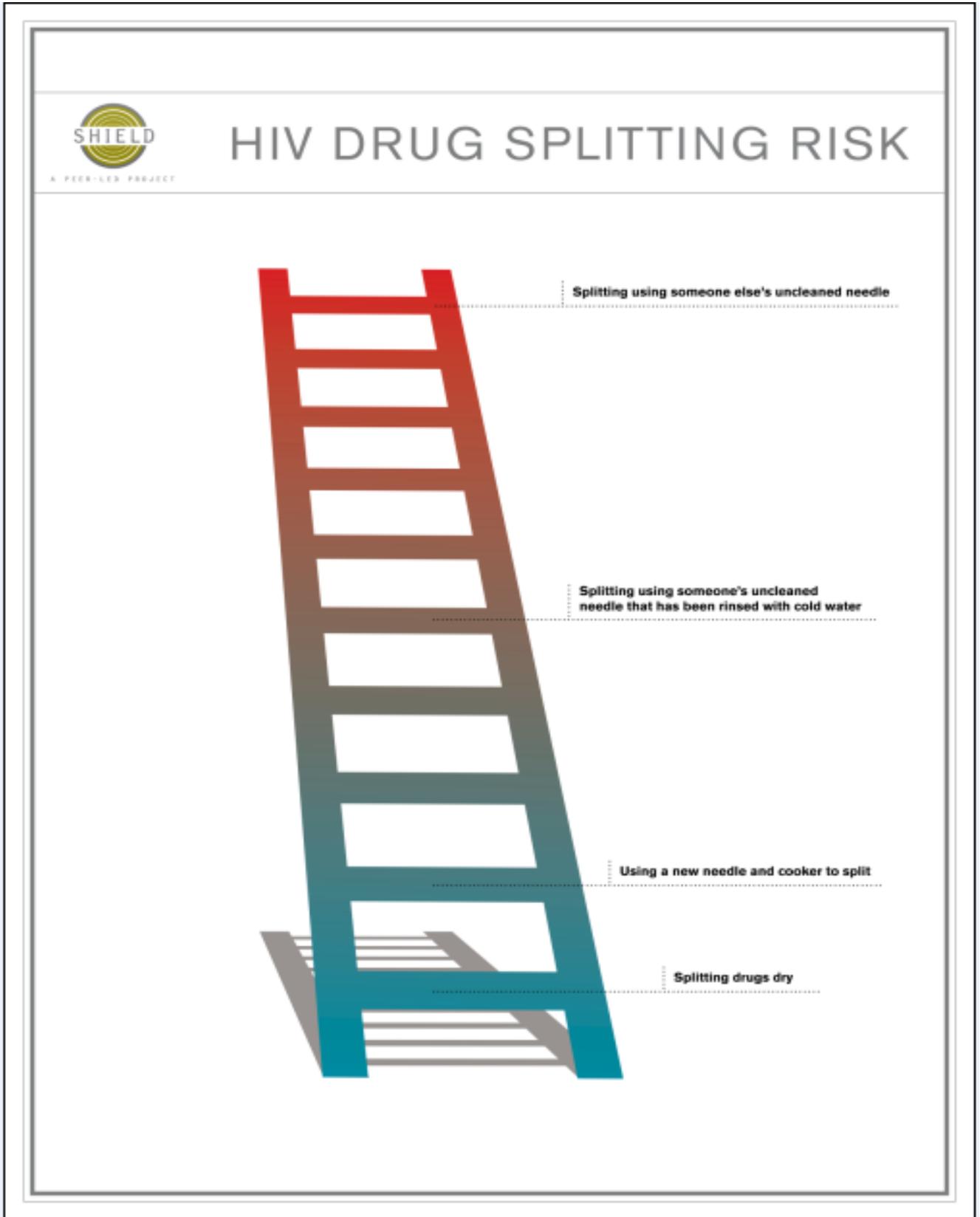
- Rinsing your needle and injection equipment with clean cold water is an important step in reducing HIV risk.
- Rinsing with bleach between rinses with water has been shown to kills HIV infected blood, but bleach does not kill hepatitis C.
- The more your rinse the more you are able to get potentially infected blood out.

### What you will need

To safely split injection drugs you should use equipment that is NEVER used for injection. Some people like to mark the splitting equipment with marker to designate that they are not to be used for injection.

- One brand new needle for measuring and splitting the drugs
- One brand new container (cooker)
- Brand new cotton

<p>1. Use the brand new needle to measure out the water.</p>	
<p>2. Use the brand new needle to measure out the drugs and portion into each persons cooker.</p>	
	
<p>3. Put the splitting equipment away so that it cannot be used to inject.</p>	



## SHIELD Process Monitoring Form

*This form should be completed for each SHIELD Cycle.*

SHIELD Group #: \_\_\_\_\_ Number of participants in SHIELD group: \_\_\_\_\_  
 Date of Session 1 (Introduction): \_\_\_\_\_ Date of Session 6 (Graduation): \_\_\_\_\_  
 Facilitator(s) : \_\_\_\_\_ Location: \_\_\_\_\_



### A. Recruitment

1. What were the dates of for this recruitment period?  
 \_\_\_\_\_  
 \_\_\_\_\_
  
2. Where did recruiters go to recruit participants?  
 \_\_\_\_\_  
 \_\_\_\_\_
  
3. What recruitment efforts were made for this SHIELD Group?

Recruitment Effort	Number
How many people were approached during street outreach?	
How many flyers were passed out during street outreach?	
How many individuals were referred from other agencies?	
How many calls were received about the SHIELD intervention?	
How many people were screened for the SHIELD intervention?	
How many people signed-up for Session 1?	
How many reminder calls were made prior to Session 1?	
How many reminder letters were mailed our prior to Session 1?	
How many people confirmed their attendance for Session 1 (after reminder efforts)?	

### B. Session Attendance

1. How many people attended each Intervention Session?

Session	Total Number of participants
Session 1	
Session 2	
Session 3	
Session 4	
Session 5	
Session 6	

2. Were incentives given out at any of the sessions? (circle one)  
**YES**                      **NO**

Which session(s) \_\_\_\_\_

Which types of incentives were given out? \_\_\_\_\_

**C. Changes in Session Dates**

1. Were any sessions postponed? (circle one) **YES**                      **NO**

Which session(s) was postponed?  
 \_\_\_\_\_

Why was/were the session(s) postponed?  
 \_\_\_\_\_  
 \_\_\_\_\_

2. Were any sessions cancelled? (circle one) **YES**                      **NO**

Which session(s) was/were cancelled?  
 \_\_\_\_\_

Why was/were the session(s) cancelled?

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**D. Referrals and Resources**

<b>Referral or Resource</b>	<b>Number</b>
How many referrals for HIV testing were provided?	
How many referrals for mental health services were provided?	
How many referrals for drug testing were provided?	
How many safer sex kits were distributed?	
How many safer injection kits were distributed?	

## SHIELD Process Evaluation Form

***Below are the Core Elements of SHIELD as outlined in the SHIELD Project Manager’s Guide. Please refer to this list as you answer the following items.***

- 1) SHIELD is implemented in a small group setting to offer participants an environment that is conducive to sharing experiences and gaining social support from peers.
- 2) Participants go through the SHIELD Sequence- a series of activities that includes pre-program contact and six intervention sessions and optional booster sessions in a specified sequence.
- 3) Each SHIELD intervention session follows a specific structure that includes 5 components.
- 4) SHIELD sessions aim to build three sets of skills necessary for participants to be a Peer Educator. These skills are:
  - Communication skills for conducting effective peer outreach (PEER)
  - HIV injection-related risk reduction techniques
  - HIV sex-related risk reduction techniques
- 5) Every session includes interactive Peer Educator training activities which build Peer Outreach skills and increase Peer Educator self-efficacy. Through increased self-efficacy, participants develop a Peer Educator Identity. Activities include:
  - Facilitator Role-models
  - Group Problem-solving activities
  - Role-plays

.....

### Core Elements

1. Have your agency *dropped* any of the Core Elements listed above?

Yes (**Go to 1a**)

No (**Go to #2**)

1a. Which of the Core Elements was dropped? (circle all that apply)

#1

#2

#3

#4

#5

2. Has your agency *modified* any of the Core Elements listed above?

Yes (**Go to 2a**)

No (**Go to #3**)

2a. Which of the Core Elements was modified? (circle all that apply)

#1

#2

#3

#4

#5

2b. Please explain WHY each Core Element was modified.

**Appendix 13: Process Evaluation Form**

<b>Core Element</b>	<b>Why Core Element was Modified</b>
1	
2	
3	
4	
5	

2c. Please explain HOW each Core Element was modified.

<b>Core Element</b>	<b>How Core Element was Modified</b>
1	
2	
3	
4	
5	

3. Overall, how would you rate how closely your agency maintained each of the Core Elements listed above? (circle one)

Not very closely                      Somewhat closely

Closely                                      Very closely

**Adaptations to SHIELD**

*In the following section, please record any revisions or adaptations that your agency has made to the SHIELD intervention. Also note why your agency made the changes.*

1. Setting: Community-based

---

---

2. Target population: Current and former drug users

---

---

3. Number of Sessions: 6

---

---

4. Length of Sessions: 1 ½-2 hours

---

---

5. Activities: Role Plays

---

---

6. Activities: Problem-solving activities

---

---

7. Activities: Condom demonstrations & distribution of safer sex kits

---

---

9. Activities: 2- Injection demonstrations & distribution of safer injection kits

---

---

9. Handouts

---

---



**C. PEER EDUCATOR SELF-EFFICACY**

**READ:** Which of the following best describes how you would rate the level of difficulty of each of the following activities is. You can say *Very Easy, Somewhat East, Somewhat Difficult, or Very Difficult.*

	Very Easy	Somewhat Easy	Somewhat Difficult	Very Difficult
Talking to friends about safer sex				
Talking to your sex partners about safer sex.				
Talking to drug users about safer injection behaviors				
Talking to drug users about safer splitting or preparation of drugs				
Suggesting to someone that they should get a HIV test				

**D. SOCIAL NETWORK**

**READ:** How much do you agree with the following statements? You can say *Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, or Strongly Disagree.*

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I have someone in my life who I can talk to about any problems I am having.					
I have someone in my life who cares about me.					
I have someone in my life who I can call if I am in trouble.					
I have someone in my life who would support my risk reduction.					

**E. SEX-RELATED RISK BEHAVIORS**

1. In the past 30 days, have you had vaginal or anal sex?

- Yes                       No *[If no, skip to Section F]*

2. In the past 30 days, with how many different people did you have vaginal or anal sex?

[WRITE NUMBER] \_\_\_\_\_

**READ:**            *A Casual Partner is someone that you hook up with from time to time to have sex.*

*An Exchange Sex Partner is someone you have sex with in exchange for food, money, shelter or drugs.*

*A Main Partner is someone you have a relationship with like a spouse or lover, boyfriend or girlfriend.*

3. How many of the partners that you have had in the past 30 days do you consider:

TYPE OF PARTNER	Number
3a. Casual Sex Partners?	
3b. Exchange Sex Partners?	
3c. Main Sex Partners?	
TOTAL	
<i>[NOTE: Add previous 3 rows; number should be the same as the response given to question #E2]</i>	

*[Complete Question E4 ONLY if client had any CASUAL partners in Question 3a.]*

**Appendix 14: Pre-Post Assessment Form**

**READ: The following questions are about your casual sex partners.**

**READ: Which of the following best describes how often you do each of the following behaviors [READ RESPONSES]**

	Always	More than half the time	About half the time	Less than half of the time	Never
4a. [In the past 30 days], when you had <u>VAGINAL</u> sex with your <u>CASUAL</u> Partner, how often did you use condoms?					
4b. [In the past 30 days], when you had <u>ANAL</u> sex with your <u>CASUAL</u> Partner, how often did you use condoms?					

*[Complete Question E5 ONLY if client had any EXCHANGE partners in Question 3b]*

**READ: The following questions are about your exchange sex partners.**

**READ: Which of the following best describes how often you do each of the following behaviors [READ RESPONSES]**

	Always	More than half the time	About half the time	Less than half of the time	Never
5a. [In the past 30 days], when you had <u>VAGINAL</u> sex with your <u>EXCHANGE</u> Partner, how often did you use condoms?					
5b. [In the past 30 days], when you had <u>ANAL</u> sex with your <u>EXCHANGE</u> Partner, how often did you use condoms?					

*[Complete Question E6 ONLY if client had any MAIN partners in Question 3c.]*

**READ: The following questions are about your main sex partners.**

**READ: Which of the following best describes how often you do each of the following behaviors [READ RESPONSES]**

	Always	More than half the time	About half the time	Less than half of the time	Never
6a. [In the past 30 days], when you had <u>VAGINAL</u> sex with your <u>MAIN</u> Partner, how often did you use condoms?					
6b. [In the past 30 days], when you had <u>ANAL</u> sex with your <u>MAIN</u> Partner, how often did you use condoms?					

**F. DRUG-RELATED RISK BEHAVIORS**

1. When was the last time you:

**READ: Which of the following best describes the last time you used each drug [READ RESPONSES].**

	Never	In the past month	1-3 months ago	4-6 months ago	More than 6 months ago
Snorted or sniffed heroin?					
Snorted or sniffed cocaine?					
Smoked crack?					
Injected cocaine?					
Injected heroin?					
Injected speedball (mixture of heroin or cocaine)?					

*[Complete Question F2 ONLY if client has injected drugs In the past 30 days- shaded boxes from question F1]*

2. Drug Injection-related behaviors

**READ: Which of the following best describes how often you do each of the following behaviors [READ RESPONSES].**

	Always	More than half the time	About half the time	Less than half of the time	Never
[In the past 30 days], how often did you use a needle or tools immediately after another person used it, <u>without</u> cleaning it first with water or bleach?					
[In the past 30 days], how often did you use a cooker that had been used by another person?					
[In the past 30 days], how often did you use a new, sterile syringe that had never been used?					

*[ANSWER Questions F3-F4 ONLY if Needle/Syringe Exchange Programs are available in the region]*

3. Have you ever exchanged your needles through the Needle Exchange Program?

- Yes                       No *[If no, skip to Section G]*

4. **[In the past 30 days], how often have you exchanged your needles through the Needle Exchange Program? [READ RESPONSES]**

- |  |   |
|--|---|
| <input type="checkbox"/> Never [In the past 30 days] | <input type="checkbox"/> Once a week        |
| <input type="checkbox"/> Once or twice               | <input type="checkbox"/> A few times a week |
| <input type="checkbox"/> A few times a month         | <input type="checkbox"/> Everyday           |

**G. DRUG TREATMENT**

1. **[In the past 30 days], have you enrolled or participated in any time of drug treatment program?**

- Yes                       No *[If no, skip to Section H]*

2. **What type of drug treatment program were you in during the past 30 days? [Note: Read each type of program and check yes or no]**

	YES	NO
12-step or self-help program such as AA or NA		
Drug detox		
Methadone Maintenance Program/Buprenorphine		
Residential or Inpatients Drug Treatment Program		
Outpatient Drug Treatment Program		
Other Type of drug treatment program PLEASE SPECIFY: _____		

H. FUTURE BEHAVIORS

*READ: Which of the following best describes how likely you are to do of the following behaviors. You can say Very Likely, Somewhat Likely, Somewhat Unlikely, and Very Unlikely.*

	Very likely	Somewhat Likely	Somewhat unlikely	Very Unlikely
How likely are you to use a condom the next time you have vaginal sex?				
How likely are you to use a condom the next time you have anal sex?				
How likely are you to use a new needle the next time you inject drugs?				
How likely are you to clean your needle (before injecting) the next time you inject drugs?				

***Read: Thank you for completing the survey.***

## SHIELD Participant Feedback Form

*The following form may be used to collect feedback from participants on their experiences with the SHIELD program after graduation. The questions should be answered in a face-to-face interview.*

### Overall impression of the SHIELD sessions

1. Let's first talk about your experiences with coming to the intervention sessions. How did you feel about coming to the very first session?
  - a. Did your feelings change as you came to more sessions? Please describe.
  
2. What information did you learn about in the SHIELD program?
  - a. Was there any new information that really stands out in your mind?
  
3. What did you like most about the SHIELD intervention sessions?
  
  
4. What did you like least about the SHIELD intervention sessions?

## Appendix 15: Participant Feedback Form

5. Was there anything that was not covered in the SHIELD intervention sessions that you would have liked to include?

6. Do you have any recommendations for how we can improve the SHIELD program?

7. Would you recommend the SHIELD program to anyone you know?

a. Have you recommended it to anyone? Who?

### **Impact of the SHIELD program**

1. Finally, we would like to talk about how the SHIELD program has affected your behavior. Are you doing anything differently since you graduated from the program?

2. In the SHIELD program we talked a lot about how we can lower our risk for HIV. Have you done anything different in your relationships because of your participation in the SHIELD program?

3. Has the SHIELD Program affected your life in any other way? Please describe.