BACKGROUND

“Jamaica has a generalized HIV epidemic with concentrated epidemics among two key populations: MSM (31.8%) and sex workers (4.9%). The National HIV Program, as part of the overall response to reduce the incidence of HIV and ultimately lower the prevalence, carries out ongoing interventions with sex workers who are street-based, club-based or working in massage parlors. Currently, community peer educators (CPEs) have limited materials to use in their interventions – whether one-on-one or in group sessions. C-Change has developed a toolkit designed for small (up to 15) group sessions that provide orientation on topics including STIs including HIV, condom use, personal safety and human rights. The materials were developed based on testing of 2 concepts resulting in the selection of one theme for use across all materials – SSS – smart, sexy, and safe.”

These materials consist of twelve counseling cards and two proverb cubes that promote discussion on HIV and risk reduction, a ringtone and screen savers for mobile phones, rubber wristbands with different slogans related to the campaign and an information leaflet of island-wide MARP friendly services. There are also tailored made canvas bags for the CPEs to carry the toolkit in, along with a handbook to guide the use of the tools.

The Sexy, Smart, and Safe (Rated SSS) toolkit aims to contribute to the reduction of HIV among FSW by providing information FSW need to protect themselves and by mobilizing women in small group sessions to develop and share solutions and strategies for their own protection. In this way the toolkit aims to address barriers and risk reduction processes by:

1. Increasing the number of FSW who feel in-control because they always use condoms
2. Increasing the number of FSW who equate ‘being safe’ (e.g. using a condom) with being close (showing real love) to their regular partner
3. Increasing the number of FSW who know where to go for clinical services
4. Increasing the number of FSW who feel more confident in accessing health services by bringing a friend with them to the clinic
5. Increasing the number of FSW who have strategies they can use to better control their personal safety
6. Increasing the number of FSW who know their legal rights related to interactions with the police and their health care rights.

1 C-Change RFP 3879-01-601-07
PURPOSE OF PRE-TESTING

The process of pre-testing the Triple S campaign was to assess the acceptability, visual appeal, and legibility of the campaign. It also sought to assess its capacity to produce the desired results of innovatively engaging FSW in conversations about HIV risk reduction, personal safety, rights and responsibilities using the following materials:

1. Counseling cards
2. Proverb cubes
3. Wristbands
4. Information leaflet
5. Mobile ringtone
6. Mobile screen savers

Note: The handbook was not included in this pre-testing exercise.

METHODS

Four focus group discussions (FGDS) with Female Sex Workers and four focus groups with Community Peer Educators who work with FSW in Kingston, Montego Bay and Ocho Rios in urban and rural settings; using tailored made pre-testing tools. (See Appendices 1 & 2).

CPEs who work with FWS were recruited through regional behaviour change communication teams, who in turn recruited FSW for FGDs. A small incentive of a J$200.00 Digicel call credit was given to FSWs at the end of the session.

CONSENT

A guideline outlining the purpose of the focus groups was read to participants. Verbal consent was gained before proceeding with discussions and confidentiality was explained, insofar as no names were recorded at these FGDs or sex work site locations.

RESULTS

Number of FGDs

Six FGDs were completed in total, 2 in Ocho Rios, 2 in Montego Bay and 2 in Kingston. For each location 1 FGD each was conducted with FSW and CPEs as follows:

Table 1. Pre-Test Groups by Category and Location

<table>
<thead>
<tr>
<th>Location</th>
<th>Kingston</th>
<th>Ocho Rios</th>
<th>Montego Bay</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Peer</td>
<td>Community Peer</td>
<td>Community Peer</td>
<td>Community Peer</td>
<td>28</td>
</tr>
<tr>
<td>Educators n=6</td>
<td>Educators n=13</td>
<td>Educators n=9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female Sex</td>
<td>Female Sex</td>
<td>Female Sex</td>
<td></td>
<td>26</td>
</tr>
<tr>
<td>Workers n=7</td>
<td>Workers n=12</td>
<td>Workers n=7</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Based on the similitude of the critique and comments within and across groups, the consultant was able to form a conclusion at the end of 6 pre-test groups for each component of the material as follows:

**Counseling Cards-Perspective of CPEs**

The counseling cards were very well received by the CPEs. In fact each group was very excited to hear that they would be getting these tools to equip them in their work with FSW and were anxious to know how soon they would be receiving their kits. They felt overall that the counseling card images were very vibrant, visually appealing and they loved the illustrations and the use of colours. In their view the images were relevant to FSW and ignited such strong story lines that they said had the potential to be so varied and exciting that the images by themselves could be used even without the discussion tips and pointers. They also noted that the material was also very useful for low-literate FSW. They did not think there was anything in the images that would offend FSWs and they were confident that FSW would be able to relate to these cards. Repeatedly throughout the 3 groups CPEs made very positive statements about the counseling cards. Here are some examples of a few:

- “These tings a real real sumting” (The things (the counseling cards) are very true to life)
- “Whoever do these, know wha dem ah do!” (Whoever developed these knew what they were doing)
- “Card dem sell off” (The cards will be sold out)

Each card contained discussion questions and points and practice examples for suggested use. Apart from some typographical errors which we be highlighted specifically for the relevant cards, the CPEs were of the view that the discussion guides were in sync with the pictures on the cards and were a very innovative way of generating discussion and engaging FSW on the key topic areas. CPEs were asked to rate each card on a scale of 1-5 and the majority of the cards received 5/5 ratings with the exception of the following:

**Card#2**
The discussion on the back of this card did not fit the image (it belonged to card 4) and needed to be changed. Rated 4/5.

**Card# 3**
The majority of CPEs thought that the health worker in this card looked ‘uptight’ and was too well dressed and appeared unfriendly and condescending in this picture. However they felt it was balanced by what they viewed as the other worker who was sitting on the bed with the FSWs demonstrating a more relaxed and less threatening style of interaction with the FSWs. They thought that the card could not be depicting a counseling session as the health worker was standing over the women on the bed. They did not like the shoes in the picture; they all looked the same and they thought them too formal attire for sex workers. They suggested if it was meant to be in a club setting, one of the girls has a towel on and some are shown barefooted to be a more realistic depiction, and for that reason it was rated 4/5.

**Card #4**
Also wrong discussion on the back (belonged to card#2) Rated 4/5.

**Card #5**
They were concerned about a breach of confidentiality that appeared to be depicted on this card. They said if the SW in the room was standing, as if she was just entering or leaving the room it would be ok,
but they were not comfortable with her sitting down whilst the nurse was talking to her while another woman was apparently outside the door listening. They understood it was meant to be showing the friend supporting her by accompanying her to the clinic which was a good thing, but they would rather see the nurse closing the door to reinforce the point that services should be confidential. Rated 3/5.

Counseling Cards-Perspective of FSW

The FSW in all three locations gave very positive feedback on the counseling cards and were of the view that the images on the cards were not offensive to them or would be likely to offend other FSWs. The majority were able to immediately relate the images to the desired topics to be generated from these cards before looking at the discussion points and questions. They also really liked the illustrations and colours and some women asked if they could get some large posters with these images on to put on their walls at home. The particular favourite for them was Card #6, showing the woman in control of the condom negotiation on top of the man on the bed. None of the women thought that the images contained anything offensive, although in 2 groups there were comments alluding to the fact that the FSW were mostly illustrated as undressed and whether or not the material was specifically appealing to a particular ‘type of FSW’ as they said ‘high end’ FSW do not dress like this. However when probed on whether or not they thought the illustrations needed to be altered, they did not think it was necessary because the material was going to be used by CPEs in a context in which sex working status, regardless of type was already established. Like the CPEs the FSWs overall rated the counseling cards 5/5, but there was some particularly interesting perceptions and commentary on some of the cards and some lesser ratings as follows:

Card #1
In every group of FSW almost the identical comments and questions arose about the condom on the chair. For them it suggested that it was placed there because it was not relevant in the context of sex with the main partner and family and needed to be given more prominence. They suggested showing it on the table or the woman holding it in her hand. There was also some discussion in each group about the two women in yellow in the picture. One person said You can see that she (the FSW with the yellow bikini top on the right) feels left out because she don’t have any family”.

Card #2
None of the groups were clear about the relationship dynamic in this picture. One person said “Is she the matey and him di bunner?” (Meaning is she the mistress and he the cheating husband/boyfriend). They didn’t think that the girl on the bed with the man looked the same as in the picture in the top right hand corner, even though they noticed, what they said, was a wedding band on her finger. They thought that she also looked too young and perhaps he was be married to someone else, maybe the woman in the picture. The majority thought so as not to detract from the desired discussion point, which was a couple talking about HIV and condom use, which might get derailed by the relationship dynamic confusion; it would be better to take out the picture in the top right hand corner completely. (They also noted the wrong discussion points on this card and card# 4)

Card # 3
FSW in all groups were uncomfortable with this picture as it appeared to be illustrating a breach of confidentiality. One person also thought that it looked like one of the woman’s medical docket was on the bed, which in their opinion is unacceptable in the context shown. For this reason they rated this card 3/5.
Card # 5
Like the CPEs, the FSW were also not comfortable with the image depicting another woman peeping in the room when the FSW is sitting in with the Nurse. Comments:

- “Don’t like the peeping tom”
- “Gyal ah listen to carry it goh ah road” (The girl is listening so she can spread the news to others)
- “Health services are not confidential…ah so it goh when dem test in tent, so is alright” (That’s how it really is when they do HIV testing in tents, so it is alright)

They said they would prefer that they take out ‘the peeping tom’ or show her supporting her friend by sitting in the waiting area, otherwise it would appear that the main purpose of the picture was to illustrate a breach in confidentiality, rather than focusing on the value of ‘sisters’ supporting each other.

Card #6
In this Illustration they thought the FSW could be offering the man 2 choices for HIV prevention; a condom or a femidom.

Card #7
The general view is the femidom should be displayed vertically and the ring needs to be more prominent. One person said: “is this a female condom or a slice of bread?”

Card #8
They thought this card was illustrating the issue of condom use in relation to erectile dysfunction. They thought that the woman in this picture should also be offering two options, (condom and a femidom) to minimize the male’s frustration and avert his possible anger. Comments:

- “The man vex vex vex”
- “Im nuh badda waan nuh sex again” (He is not interested in sex anymore)

Card #9
In this card in all 3 groups said that the woman’s face looks like she could be persuaded by the extra money, especially from a “neck tie man” (man of influence and means). They said it is not obvious that the woman is not going to take the extra money and that her facial expression should appear sterner and her hand should be up signaling ‘no!’.

Size of the Cards:

Participants were asked whether the size of the Cards shown at 11” x 7” were appropriate for working with an audience of up to 15 persons. CPEs said they thought that the size was appropriate, could be seen easily and that if the size of the cards were reduced they would lose their impact, which in their view was largely due to the striking nature of the illustrations. A myriad of enthusiastic exclamations was evidenced when each one was shown. However there was a suggestion that for the FSWs that could not be engaged into a formal group, these cards would also be useful for sparking discussion with FSW
on the street. However for ease of carrying and circumspection, it was suggested that a pack in the ‘deck of cards’ size be produced for informal discreet discussions. FSW also liked the size of the cards.

**Additional Quotes on the Cards:**

- “These should be used in TV ads, they are brilliant”
- “Why we didn’t have something like this long time?”
- “I think the cards should be laminated because they will last longer that way”

**Proverb Cubes:**

**Perspective of CPEs**

The two proverb cubes were thought to be excellent interactive tools and all the CPEs were very enthusiastic about using these and they were rated 5/5 for being able to generate discussion on the key topic areas. However there was only one contentious proverb:

‘ Wha go bad ah morning can’t come good a evening”

This proverb generated quite a bit of discussion about how it might impact someone who has recently tested positive for HIV. There was no consensus on this across the groups however, as some CPEs felt that could be very useful in relation to HIV risk reduction.

**Perspective of FSWs**

FSW thought these were very useful tools too and considered them to be very positive and true statements that they could readily relate to HIV risk and prevention. One young woman said “that is what my granny always used to say to me” in relation the ‘Wha go bad ah morning can’t come good a evening” proverb. They were not concerned about this statement and also gave them a 5/5 rating.

**Ringtone:**

**Perspective of CPEs**

The concept of the ringtone was very well received as a reminder of the need to be ‘Sexy smart and safe’ and they liked the rhythm. However the main issue that all the CPEs had was with the quality of the production and the vocals, which in their view were not clear, therefore this component of the campaign was the most criticized. Some persons said they could not make out the first few bars and they were not sure if it was a man or woman singing. One person said “ah wha wrong wid dem, yuh nuh ere seh a rough gal.” (What is wrong with them, you can hear it is a rough girl). In their view if the ringtone were to be used, it should feature the main hook in the jingle which is ‘Sexy smart and safe, we are Triple s’. One group suggested using a popular artist instead to make the message more effective. The majority thought that if it was clearer they would use it on their phones and that FSW would also. The ringtone however only got a 3/5 rating.

**Perspective of FSWs**
Again like the CPEs, FSWs views concurred on the ringtone with regards to it not being clear and not knowing if it was a man or woman singing, but they liked the rhythm and the sexy smart and safe’ Triple S, chorus. They also rated it 3/5, but most said that they would put in on their phones nevertheless.

**Screen Saver:**

**Perspective of CPEs**

Overall the purpose of the screen savers to act as a reminder for FSW about HIV risk and the need for prevention were well understood. CPEs said they would put these on their phones and thought that FSW would too. In their view there was nothing in the images that would cause an offence and they rated them 5/5.

**Perspective of FSWs**

Whilst the FSW also understood the purpose of the screen savers they were less enthusiastic about using them. Some were of the view that using these on their phones might raise some difficult questions in relation to why they were there and in turn unduly highlight their sex work status to families and partners who they had not disclosed this too. There was a particular dislike for the large pink condom featured in the middle of the screen saver with the slogan “sexy wise, condomized”. Several women discussed their discomfort with their children seeing it on their phones. One woman said “Now where mi coulda ah go wid dis big dick one!” But there were also contrary views and a suggestion that the condom could still be placed on the screen saver but illustrated in an easily recognizable condom packet in keeping with the slogan. However they really liked the screen saver that illustrated a woman’s fist and the accompanying slogan “I know my rights”. The screen savers were rated 5/5 overall.

**Wristbands:**

The final product of the wristbands were not available for testing, however two examples of brightly coloured wristbands with other slogans on them were shown to participants and the following slogans were read out to them, informing them that they would be on the final product.

- “SSS” sexy, smart and safe
- “My sister’s keeper”
- “I know my rights”
- “I know where to go to be in the know”

These were well rated by CPEs and FSW alike. Everyone said that they would like to have them and in response to the question “Would you wear them?” the following quote captures the overall sentiments “Right now if you have any to give me?” There were no slogans that were disliked, but ‘Triple S’ appeared to be the favoured option. Both groups rated the wristbands 5/5.

**Leaflet:**

The information leaflet that contained island-wide list of MARP Friendly providers locations and contact details were also rated 5/5, with CPEs and FSW believing it to be a very useful resource for finding MARP friendly services and pointing other FSW to them. However the size was a problem as it appeared too big and it was suggested by both groups that it should be designed so it can be folded and fit easily into a handbag.
**Tripe S campaign overall.**

Both groups rated the campaign materials 5/5.

**Conclusion**

Community Peer Educators and FSW are excited about the new ‘Triple S’ health promotion material, which is an indication of its acceptability, visual and creative appeal and likely use. From the perspective of both target groups (users and beneficiaries) pre-testing demonstrated that this health promotion campaign has the potential to effectively promote lively discussion with FSW as it did in the FGDs on correct and consistent condom use with clients and main partners, the need to adopt positive health seeking behaviour through regular visits to the clinic: the adoption and advocacy of personal safety measures to minimize and remedy adverse situations and to increase knowledge of human legal and health care rights, in an innovative, non threatening and participatory manner. Therefore from the feedback in pre-testing, if the material is disseminated widely to CPEs and other persons involved in developing and delivering interventions to FSW, it has the potential to be highly efficacious.

**Recommendations**

1. Correct errors with discussion guides on Cards 2 and 4
2. Consider carefully the comments on illustrations that appear to show breaches of confidentiality to see if simple alterations as suggested are possible in order to detraction from the main message of mutual support.
3. Improve the sound recording of the ringtone and shorten the version to focus more on the sexy smart and safe triple s hook.
4. ‘Sexy, wise, condomized’ screen saver, condom should be packaged so that it more acceptable to FSW.
5. Make the information leaflet smaller by folding or other means so that it can fit into a small hand bag.
6. Disseminate these toolkits as widely as possible in order to maximize the effect of the Triple S campaign.
Appendix I

SEXY, SMART AND SAFE CAMPAIGN -PRE-TEST DISCUSSION GUIDE (CPE)

Welcome to our discussion group. My name is Audrey Brown and I’m here today because I would like to show you some health promotion material that has been designed for use by Peer Educators in interventions with female sex workers (FSW). However before it is finalized it is important that we test them. The material we will look at is included in a health promotion campaign toolkit, which includes counseling cards, discussion cubes, wristbands, a mobile phone screen saver, a ringtone, a leaflet of services, a handbook and a bag. They were developed by C-Change Jamaica, FHI360.

All your contributions are valuable to me. There is no right or wrong answers and feel free to be totally honest. If you disagree with one another, that is ok too. Just think of this as a conversation and you don't need to wait for me to call on you speak.

Just so I don’t miss anything that you say during our discussion, I will be taking notes. All your comments are confidential and I will only be sharing them in a report to C-Change Jamaica, FHI 360, to see whether or not any changes need to be made. I am not recording your names but just general information about the group such as the age range and sex of people here today and how many people attended the group. However it would be nice if we can we refer to each other by a first name or ‘pet name’, so can we just have a brief round of introductions. This session will take about 60 minutes and at the end we will have lunch.

Are there any questions?

Please indicate that you consent to participating in the group by raising your hand. Do I have your permission to begin now?

Play ring tone as introduction (without soliciting comments)
(Read Out to Participants)

The Sexy, Smart, and Safe (Rated SSS) Toolkit aims to contribute to the reduction of HIV among FSW by providing information FSW need to protect themselves and by mobilizing women through small group sessions and beyond to develop and share solutions and strategies for their own protection. Through this, the Toolkit aims to address barriers and risk reduction processes by:

1. Increasing the number of FSW who feel in-control because they always use condoms
2. Increasing the number of FSW who equate ‘being safe’ (e.g. using a condom) with being close (showing real love) to their regular partner
3. Increasing the number of FSW who know where to go for clinical services
4. Increasing the number of FSW who feel more confident in accessing health services by bringing a friend with them to the clinic
5. Increasing the number of FSW who have strategies they can use to better control their personal safety
6. Increasing the number of FSW who know their rights related to police, health care workers, and others.
COUNSELLING CARDS: (Explain Purpose)

I am now going to show you a series of images on twelve counselling cards and for each I want you to tell me what you think is going on. You will see ‘SSS’ throughout the images. This stands for Smart Sexy and Safe or Triple S.

1. What story is this picture telling you?
2. Are the images appropriate for FSW?
3. What part of the image makes you think they are/are not?
4. Is there anything in the image that you particularly like/dislike?
5. Is there anything in the picture you think might offend a FSW?
6. Is there anything in the picture you would like to change and why?
7. Would you say these are positive images for sex workers?
8. On a scale of 1-5 with 5 being the highest and 1 the lowest, how do you rate these counseling cards to generate discussions with FSW?

(Questions repeated for each card)

DISCUSSION CUBES: (Explain Purpose)

1. What does the proverb ‘Wha go bad a morning can’t come good a evening’ mean to you in relation to sex work?
2. What does the proverb ‘Puss and Dog nuh have the same luck’ mean to you in relation to sex work?
3. What does the proverb ‘If you hear devil a come, clear the way’ mean to you in relation to sex work?
4. What does the proverb ‘We run tings, tings nuh run we’ mean to you in relation to sex work?
5. What does the proverb ‘An apple a day keeps the doctor away’ mean to you in relation to sex work?
6. What does the proverb ‘A nuh the same day leaf drop a water bottom it rotten’ mean to you in relation to sex work?
7. On a scale of 1-5 with 5 being the highest and 1 the lowest, how do you rate these discussion cube proverbs for generating discussion with FSWs?

WRISTBANDS:

These are wristbands with messages on them that are designed to generate discussions among FSW. Please pass them around and volunteers can read out the messages on the wristbands:

• What does “SSS” mean to you in relation to sex work?
• What does “my sister's keeper” mean to you in relation to sex work?
• What does “I know my rights” mean to you in relation to sex work?
• What does “I know where to go to be in the know” mean to you in relation to sex work?

8. Is there anything in the messages that you particularly like/dislike?
9. Is there anything in the messages you think might offend a FSW?
10. Is there anything in the messages you think need to be changed and why?
11. Would you say these are positive messages for sex workers?
12. Do you think sex workers will wear these wristbands?
13. Do you think they will generate discussion among FSW?
14. Which messages best match which counselling cards? (Get card numbers, to double check appropriateness of imagery)

15. On a scale of 1-5 with 5 being the highest and 1 the lowest, overall how do you rate these wristbands targeting FSW?

LEAFLET:

I am passing this leaflet around. Please have a look and tell me:
1. What is it trying to do?
2. Do you think sex workers will read it?
3. Do you think they will use it?
4. Do you think they will accept it from you?
5. Do you think it makes finding MARP friendly health and social support services easier for them?
6. On a scale of 1-5 with 5 being the highest and 1 the lowest, overall how do you rate this leaflet targeting FSW?

RINGTONE: (40 Seconds)
1. Who is singing?
2. What is she saying?
3. What is the main message here?
4. Do you like the rhythm?
5. What do you think of the lyrics?
6. If part of it is used as a ringtone which parts of the jingle do you think are most important to enhance this campaign?
7. Is there anything in the lyrics that offend you or you might think would offend FSWs?
8. Do you think that anything in this ringtone should be changed?
9. Would you use it as a ringtone on your phone?
10. Do you think sex workers will use it as a ringtone on their phones?
11. On a scale of 1-5 with 5 being the highest and 1 the lowest, overall how do you rate this ringtone targeting FSW?

SCREEN SAVER:

This is a mobile phone screen saver.
1. What do you think the purpose of this is?
2. Would you put it on your phone?
3. Do you think FSW will put it on their phones?
4. On a scale of 1-5 with 5 being the highest and 1 the lowest, how do you rate this screensaver?

Check promotion of key areas:

In your view can this material assist you as a Peer educator to effectively promote?

- Correct and consistent condom use
- Regular visits to the clinic
- Increase personal safety habits to avoid danger when working
- Increase knowledge of human right?
Increase knowledge of legal health care rights
Increase knowledge of health care rights

OVERALL CAMPAIGN:

1. On a scale of 1-5 with 5 being the highest and 1 the lowest, how do you rate the usefulness of this health promotion campaign material overall?

Do you have any other comments or advice about this material that you would like me to pass on to C-Change?

Thank you for participating.
Appendix II

**SEXY, SMART AND SAFE CAMPAIGN - PRE-TEST DISCUSSION GUIDE (FSW)**

Welcome to our discussion group. My name is Audrey Brown and I'm here today because I would like to show you some health promotion material about keeping yourself safe while at work and find out what you think about them.

All your contributions are valuable to me. There is no right or wrong answers and feel free to be totally honest. If you disagree with one another, that is ok too. Just think of this as a conversation and you don't need to wait for me to call on you speak.

Just so I don't miss anything that you say during our discussion, I will be taking notes. All your comments are confidential and I will only be sharing them in a report to C-Change Jamaica, FHI 360 who developed the materials to see whether or not any changes need to be made.

For the purposes of confidentiality I am not recording your names but just general information about the group such as the age range here today and how many people attended the group. I will not be recording the location either. However it would be nice if we can we refer to each other by a first name or ‘pet name’, so can we just have a brief round of introductions. At the end of the sessions I will be happy to clarify any HIV/sexual health related questions that might come up in the discussion. If at any time you feel uncomfortable with the discussion please let me know and you may leave the group if you want to at any time. This session will take about 60 minutes and you will receive a J$200.00 phone card at the end and refreshments.

Are there any questions?

Please indicate that you consent to participating in the group by raising your hand. Do I have your permission to begin now?
DISCUSSION CARDS:
I am going to show you a series of images on twelve discussion cards that are designed to be used by Peer Educators. You will see ‘SSS’ throughout the images. This stands for Sexy Smart and Safe or Triple S.

1. What do you think is going on in this picture?
2. To whom do you think this message is directed?
3. What part of the picture makes you think that?
4. Is there anything in the picture that you particularly like?
5. Is there anything in the picture that you particularly dislike?
6. Is there anything in the picture you think might offend someone?
7. Is there anything in the picture you would like to change and why?
8. Can you relate to these images?

(At this stage briefly check clarity of discussion questions and points)

9. On a scale of 1-5 with 5 being the highest and 1 the lowest, how do you rate these discussion cards?

(Questions repeated for each card)

DISCUSSION CUBES:
1. What does the proverb ‘Wha go bad a morning can’t come good a evening’ mean to you in relation to sex work and HIV risk and prevention?
2. What does the proverb ‘Puss and Dog nuh have the same luck’ mean to you in relation to sex work and HIV risk and prevention?
3. What does the proverb ‘If you hear devil a come, clear the way’ mean to you in relation to sex work and HIV risk and prevention?
4. What does the proverb ‘We run tings, tings nuh run we’ mean to you in relation to sex work and HIV risk and prevention?
5. What does the proverb ‘An apple a day keeps the doctor away’ mean to you in relation to sex work and HIV risk and prevention?
6. What does the proverb ‘A nuh the same day leaf drop a water bottom it rotten’ mean to you in relation to sex work and HIV risk and prevention?
7. On a scale of 1-5 with 5 being the highest and 1 the lowest, how do you rate these discussion cards?

WRISTBANDS:
These are wristbands with messages on them. Please pass them around and have a look and try them on if you want to, while I read the messages on the wristbands:

A. SSS: Sexy, Smart and Safe
B. My sisters keeper  
C. I know my rights  
D. I know where to go to be in the know

1. Which cards would you choose to go with each message?  (Get card numbers, to double check appropriateness of imagery)

Check message Interpretation:
2. What does “SSS” mean to you in relation to sex work and HIV risk and prevention?
3. What does “my sister’s keeper” mean to you in relation to sex work and HIV risk and prevention?
4. What does “I know my rights” mean to you in relation to sex work and HIV risk and prevention?
5. What does “I know where to go to be in the know” mean to you in relation to sex work and HIV risk and prevention?

Check appropriateness of Message:
6. Is there anything in these messages that you particularly like/dislike?
7. Is there anything in these messages you think might offend someone?
8. Is there anything in these messages you would like to change and why?
9. Would you say these are positive messages for sex workers?

Check perception of likelihood of desired use:
10. Would you wear one of these wristbands and discuss the messages with other sex workers?  
11. On a scale of 1-5 with 5 being the highest and 1 the lowest, overall how do you rate these wristbands?

Check perception of the effectiveness of the messages:

In your view can this material effectively promote?

- Correct and consistent condom use
- Regular visits to the clinic
- Increase personal safety habits to avoid danger when working
- Increase knowledge of human rights
- Increase knowledge of legal rights
- Increase knowledge of health care rights

On a scale of 1-5 with 5 being the highest and 1 the lowest, overall how do you rate these messages?

LEAFLET:

I am passing this leaflet around. Please have a look and tell me:

1. What is it trying to do?  
2. Will sex workers read it?  
3. Is it easy to use and why?
4. Would you take this leaflet from a peer educator?
5. Will it make finding good health and social support services easier for you?
6. On a scale of 1-5 with 5 being the highest and 1 the lowest, how do you rate this leaflet?

RINGTONE: (40 Seconds)
12. Who is singing?
13. What is she saying?
14. What is the main message here?
15. Do you like the rhythm?
16. What do you think of the lyrics?
17. What lyrics in the tune do you think send the most important message?
18. If you had it as a ringtone which parts would you most want to listen to?
19. Is there anything in the lyrics that offends you or you might think would offend others?
20. Do you think that anything in this ringtone should be changed?
21. Would you use it as a ringtone on your phone?
22. On a scale of 1-5 with 5 being the highest and 1 the lowest, how do you rate this ringtone?

SCREEN SAVER:
This is a mobile phone screen saver.
5. What do you think the purpose of this is?
6. Would you put it on your phone?
7. On a scale of 1-5 with 5 being the highest and 1 the lowest, how do you rate this screensaver?

OVERALL CAMPAIGN:
On a scale of 1-5 with 5 being the highest and 1 the lowest, how do you rate this health promotion material overall?

Do you have any other comments or advice about this material that you would like me to pass on to C-Change?

Thank you for participating.