



Membership Recruitment Campaign

Introduction

In December 2020, the Miami-Dade HIV/AIDS Partnership was selected to be part of the Ryan White HIV/AIDS Program (RWHAP) Part A Planning Councils Recruitment and Retention Learning Collaborative (LC) led by JSI. The LC Team Miami members were Sannita Vaughn, Community Coalition Chair; Andrea Labbé, Community Coalition Vice Chair; Travis Neff, Partnership Chair; and Christina Bontempo, Planning Council (PC) Staff.

The LC held five 90-minute sessions from February to June 2021 which included strategies for defining the audience(s) for recruitment; and developing messages that address the benefits, barriers, and competition for persons with HIV to participate in RWHAP Planning Councils (locally, the Partnership).

Based on Partnership vacancies and with the goal of ideal representation by people with HIV, Team Miami identified two audiences for recruitment: Black/African-Americans (non-Hispanic) and Hispanic/Latinx. This has later expanded to include White Females, as noted below in *Audiences*.

In considering benefits, barriers, and competition, it was agreed by the Team members that a major shift is needed not only in recruitment but also in how meetings are run and how opportunities for participation are presented to people with HIV. It is fair to say – since the Partnership currently has less than 30% representation by people with HIV – that we are falling short of the ideal of “Nothing about us without us.”

The overarching goals of this Recruitment Campaign are that the importance of participation by people with HIV will be brought to the forefront of the Partnership, including all committees, and that the voices of people with HIV will be heard and incorporated into all decision-making in meaningful and thoughtful ways.

Audiences

Defining the audiences for recruitment strictly based on the requirements of Ryan White Program Planning Councils has been demonstrated as being exclusive of white women with HIV. By only targeting and talking about the importance of including specific audiences, those who do not fall into those categories could be made to feel excluded, “less than”, or not a part of the work of the Partnership. The vacancies below reflect the need for a White Female ROAC member.

The key audiences for recruitment are:

- Black/African-Americans (non-Hispanic) Males and Females
- Hispanic/Latinx Males and Females
- White Females

Those groups are underrepresented on the Partnership based on review of active Partnership members versus ideal representation which is based on the number of people with HIV in Miami-Dade County. A total of 15 Representatives of the Affected Community (ROAC) who are Ryan White Program clients are required to serve on the Partnership.

Members Serving As ROAC (6)

- 1 ⇒ Black/African-American, Female
- 1 ⇒ Black/African-American, Male
- 3 ⇒ Hispanic/Latinx, Male
- 1 ⇒ White, Male

Other HIV+ Members Serving in other seats (2)

- 1 ⇒ Black/African-American, Female
- 1 ⇒ Black/African-American, Male

ROAC Member Vacancies (9)

- 3 ⇒ Black/African-American, Male
- 1 ⇒ Hispanic/Latinx, Male
- 2 ⇒ Hispanic/Latinx, Female
- 1 ⇒ Black/African-American, Male
- 1 ⇒ White/Non-Hispanic, Female

Members held over past their 6-year term pending replacement (3)

- 2 ⇒ Hispanic/Latinx, Male
- 1 ⇒ Black/African-American, Female

Members whose 6-year term ends in July 2022 (2)

- 1 ⇒ Black/African-American, Male
- 1 ⇒ White/Non-Hispanic, Male

Benefits, Barriers, and Competition

While specific strategies for recruitment may be more or less effective depending on our outreach to Black/African-Americans (non-Hispanic) versus Hispanic/Latinx populations, the benefits, barriers, and competition is largely the same.

Benefits

- Receiving meals (at some meetings).
- Making personal connections with peers and other advocates for people with HIV.
- Learning to navigate the HIV health and support service system.
- Meeting providers and strengthening the provider-client relationship.
- Becoming an advocate for other people with HIV.
- Becoming a leader (Officer); improving public speaking and strengthening resume skills.
- Receiving incentive items of appreciation (shirts, bags, mugs, etc.).

Barriers

- Not understanding the historical importance of participation by people with HIV and/or the fact that participation by people with HIV is a requirement of RWHAP Planning Councils.
- Being made to feel like an outsider – not a part of the group; not feeling understood, heard, or represented and therefore losing interest.
- Fear of public disclosure of HIV status and HIV-related stigma.
- Issues with cultural-sensitivity.
 - Various terminology is used: Black-Non-Hispanic; African American; Black/African-American and Hispanic; Latinx; Hispanic/Latinx; Latino, Latina, Latinx.
 - Meetings are only conducted in English.
 - Meeting materials are only provided in English.
- Lengthy application/appointment process.
 - Historically, the applications submitted to the Mayor for appointment can take up to six months to be approved, time during which many applicants lose interest or become discouraged.
 - The Partnership wrote a letter to the new Mayor asking that she expedite future applications; the process has improved.
- Training sessions are not supported with follow-up.
 - New member training is comprehensive yet overwhelming. Member confusion or misunderstanding about the Partnership and membership roles and responsibilities point to the need for a revision of the new member training program.
- Meeting times.
 - Daytime meetings may pose a conflict due to job and/or family responsibilities.
- Transportation to and from meetings.
 - Miami-Dade County covers more than 2,300 square miles. Meeting locations may require traveling 30 miles or more, compounded with constant heavy traffic and/or navigating the public transportation system.
 - Potential members may not know the Partnership offers reimbursement for transportation costs to/from meetings.

- **Restrictions on collaboration due to Government in the Sunshine Laws.**
 - All County Advisory Boards must give public notice of meetings. Two or more members are prohibited to meet – even for the purposes of planning – without public notice.
- **COVID-19 related barriers.**
 - Not being able to meet in person or at locations that cater to in-person groups.
 - Not being able to provide meals or snacks.

Competition

- **Other group events (or support groups) are “fun” based and/or offer financial compensation/rewards.**
- **Demands of (multiple) jobs/employers and family/home.**
 - Potential members may not know the Partnership offers reimbursement for lost wages and/or childcare.
- **Compulsory “volunteer” requirements.**
 - Having to perform community service hours as a legal requirement for non-violent offenses or traffic violations.
- **Lack of interest in volunteering.**
 - AmeriCorps ranks Miami-Fort Lauderdale-Miami Beach as the 51st out of 51 metropolitan areas for volunteering.

Strategies for Reaching New Members

The Community Coalition Committee is the committee tasked with recruitment. As such, the “committee” was rebranded as the Community Coalition Roundtable (CCR), with the motto, “We are the HIV community that serves the HIV community.” The structure of the CCR should be a much more casual and friendly environment with an agenda focused on guests/clients/FUTURE MEMBERS!

Let Your Voice Be Heard!

If it can be demonstrated through actions by the committees and Partnership that needs of clients are being considered, that is the time to approach clients about membership. We must be able to demonstrate that for people with HIV the Partnership is “with us and about us.”

By the time this process is complete, clients – potential members – will have been to two Roundtables and two meetings and will have met a large number of members:

Step 1: Clients will be invited to the CC Roundtable.

- What can we do for you?
- What do you need?

Step 2: Members will listen to the needs, experiences, suggestions, and ideas of clients.

Step 3: The same clients will be invited to share their experiences at the Partnership meeting and/or to attend the meeting and allow the CCR Chair to address their needs and experiences.

- This is a not just “reporting” what clients are saying; this is an opportunity for clients to express themselves directly to the Partnership.
- Attending the Partnership meeting will give clients a chance to meet more members and see how other meetings are conducted.

Step 4: The Partnership will consider the needs of clients.

- Members will work on a solution to the best of their ability or assign a committee to address the concerns.

Step 5: If an issue is forwarded to a committee, the clients will be invited/encouraged to attend that committee meeting.

Step 6: Clients will be invited to share their experiences at the designated committee meeting.

- This is an opportunity for clients to express themselves directly to the committee.
- Attending the committee meeting will give clients a chance to meet more members and see how other meetings are conducted.

Step 7: The committee will consider the needs of clients.

- Members will work on a solution to the best of their ability, with the understanding that this may take more than one meeting to complete.

Step 8: Clients will be asked to return to the CC Roundtable and report on progress.

Activities

Activity	Via	Audience	Persons Responsible	Frequency				
				Daily	Weekly	Monthly	Quarterly	Annually
Bring clients, friends, and peers to meetings (see Steps 1-8, above).	In-person meetings	Open	Members			x		
Coordinate with providers who are doing testing (CAN, Care Resource, AHF) and ask to have a table at those events.	Live events	Varies	Community Coalition (CC) members and Staff			x	x	
Request space at provider agencies for Partnership recruitment/information table.	In person meeting space	Varies	CC members and Staff			x	x	
Present an introduction to the Partnership and explain the importance of participation by people with HIV.	Medical Case Management (MCM) Meetings	MCM – for all audiences	Staff				x	
Post to social media, including regular “Membership Monday” and other standard messages as developed.	Facebook and Instagram	1 message per week to each of the 2 target audiences; and 3 general messages	Staff	x				
Continue <i>Get on Board!</i> Virtual Training.	Zoom	Open to all	Staff with CC to advise on training topics			x		
Develop messages and send blast texts.	Text	Most effective with Hispanic MMSC clients	Staff to make initial text message; CC members to be paired with clients who respond			x	x	

Time to Embrace Change

This strategy represents a notable change to business as usual whereby we ask people to “Join the Partnership”. Until we can demonstrate the value of being a part of the Partnership, it is a huge undertaking to make a case for membership.

In that spirit, members and staff should seriously consider how materials – particularly data – are presented, how jargon is used (as if everyone understands what we’re talking about), and how not understanding those things can be alienating to potential members.

This is an opportunity for members and staff to rebuild the Partnership as a RWHAP Planning Council that is truly representative of and inclusive of people with HIV.

Next Steps

Members are asked to bring at least one person to each Roundtable lunch or dinner.

Members should consider tabling at events as COVID restrictions are lifted.