

Community-based Evaluation of HIV Prevention Programs by ASOs: Preliminary Findings of a Case Study

Nicole Greenspan, MHS, PhD (candidate)

University of Toronto Public Health Policy Fellow

Rhonda Cockerill, PhD

Institute of Health Policy, Management and Evaluation

November 2012



Presentation Outline

- ▶ **Introduction**
 - ▶ Background & Purpose
 - ▶ Methods
- ▶ **Preliminary Findings**
- ▶ **Conclusions**
 - ▶ Implications

Background

- ▶ 25+ years: renewed urgency in HIV prevention
- ▶ ASOs as deliverers: ‘experts’/tension
- ▶ Uncertainties about impact/effectiveness
- ▶ US Centers for Disease Control: DEBIs
 - ▶ Pro-innovation bias of CDC approach (Miller & Shinn, 2005)
 - ▶ Context in which programs are delivered (Norton, 2009)
 - ▶ Characteristics of orgs that deliver them (Norton, 2009)

Purpose

- ▶ **Purpose**

- ▶ To expand our understanding of HIV prevention program evaluation criteria and practices at ASOs

- ▶ **Aim**

- ▶ At 2 ASOs, identify:
 - ▶ qualities or attributes of programs that are used to make judgements about these programs
 - ▶ evaluation practices employed (formal and informal)
 - ▶ aspects of the social and political context that influence evaluation

Methods

- ▶ **Qualitative case study of 2 ASOs**
- ▶ **Case A (larger) & Case B (smaller)**
- ▶ **HIV prevention programs only**
- ▶ **Community Reference Group**
- ▶ **Thematic analysis (inductive) – coding**
(in progress)
- ▶ **Within and cross case analysis**
(to be completed)

Methods: Data Collection

- ▶ Interviews
- ▶ Document Review
- ▶ Attending Meetings (i.e. AGM)
 - ▶ Participant observer

	Staff	Mngmnt	Voluntr	Total	Funder
Case A	6	4	2	12	5
Case B	3	2	1	6	
TOTAL	9	6	3	18	23

Preliminary Findings: Complexity

- ▶ HIV prevention is complex

“We're building a relationship; we're doing one piece of a very big puzzle. So if they continue to not use condoms, I don't think I've done my job badly... I also don't think that I haven't done an important piece of the larger puzzle.”(Worker)

- ▶ Not always distinct from PHA support

“We also included HIV positive young men [in our structured HIV prevention program]... That was also helpful” (Worker)

Preliminary Findings: Complexity

▶ Variety of approaches

- Sustained intervention (incl. support groups)
- Counselling
- Outreach
- Educational workshops
- Facilitated dialogues

▶ Appropriate evaluation criteria differs

“If you're talking about structural things, you're not going to ask someone individually if their self esteem has changed as a result of your conversation. Cause you.. asking that is coming from a structural place, but asking it on an individual level is a little silly, unless you've had eight sessions with them, then maybe. But in one encounter, they'll be like 'Are you joking?' Like, 'Who do you think you are?’” (Worker)

Preliminary Findings: Success Indicators

- ▶ Lack of “perfect” indicators of success

- ▶ even within one approach

“There’s no kind of, ‘Yes, this is the indication that the program is perfect and it works and it captures the kind of magic of the program’.” (Manager)

- ▶ insecurity about M&E practices

“As I said, our [monitoring and evaluation] practices... aren’t quite where I would like them to be.” (Manager)

Preliminary Findings: Success Indicators

▶ **Process indicators: prominent, accessible**

“I think one of the primary drivers of effectiveness for me are that a prevention program is delivered by and for [members for the community].” (Manager)

▶ **popularity (# participants; # resources taken)**

▶ **participant engagement (w/ program; other services etc.)**

“the amount of community engagement that we're able to get, getting people coming through the door and participating in the activities that we provide here... [is] a very tangible way to measure the success of the program.” (Worker)

Preliminary Findings: Success Indicators

▶ Process indicators: relationships

▶ Participants with each other

“You can... find a group of people that are interested in your well-being, your welfare.” (Manager)

▶ Participants with organization

“[Participants] creating a positive association, an affinity with [our organization].” (Manager)

▶ With other workers/organizations

“And other people, other collaborators, I mentioned [specific worker from another ASO]... I mean this project has always had facilitators who’ve been interested and have come from elsewhere that aren’t [our organization's] staff” (Manager)

Preliminary Findings: Success Indicators

▶ Outcome indicators: useful, hard to ascertain

“I think [behaviour change] is important... when we’re talking about HIV prevention what we’re trying to do is reduce the risk of HIV transmissions. That’s what we’re trying to do... [but] we rarely rarely rarely have an opportunity to do the kind of evaluation that would give us the hard answers to, or the fuller answers.” (Manager)

▶ Ambivalence

Preliminary Findings: Success Indicators

[Behaviour change is] something, I'm going to just use the word struggle... I'm also a firm believer in process... Like there is... an impact on community as well... Maybe there was a different change that then got [the participants] ready for another level... So... maybe the change that you meted out was that people... became a little more trusting of the system and the structure so that the next time they went through a program, they might actually be closer to, willing to talk about... [for example] a different way of substance use... So I, I'm not as concrete and absolute, right? So [saying] this... is the only way it should be delivered because it... meets the outcomes... the desired impact., I'm not as, I guess as... firmly committed to that. Although of course, you want that impact to be met, right? But it doesn't mean the program is crap if it doesn't meet that complete goal.” (Funder)



Preliminary Findings: Funders

- ▶ **Government funders**

- ▶ **Monitoring for accountability**

*“I think there’s definitely a bit of a shift towards more accountability.”
(Manager)*

“The first and foremost role of OCHART is to provide accountability for the funding that [agencies] receive... that is its function. It has other by-products, but it's function is to provide accountability for funding.” (Funder)

- ▶ **Diversity in relationships with funders**

- ▶ **Ideal: partnerships/negotiation**

Conclusions

****Preliminary analysis of complex data****

- ▶ **Blurred boundaries**
 - ▶ **HIV prevention vs. support**
 - ▶ **Monitoring vs. Evaluation**
- ▶ **HIV prevention program objectives and clearly linked evaluation criteria**
 - ▶ **Not commonly found**
 - ▶ **Lack of single objectives**

Conclusions & Implications

- ▶ More than just impact on client (or even the community) deemed important
- ▶ ASOs balancing the need for accountability with their service delivery mandates; little/no space for systematic evaluations that:
 - ▶ develop knowledge
 - ▶ assess merit or worth
- ▶ **What role does M&E play in maintaining relationships in this sector?**

Thank you!

This work was supported by an
OHTN Studentship Award (09-11)
Ontario Graduate Scholarship (11-12)
SRC Trainee Award (12-13)

nicole.greenspan@gmail.com

