

## Session 5.1 – Monitoring of peer education and behaviour change programmes

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### Aim

To provide participants with the knowledge and skills to develop monitoring indicators to enable them to monitor progress and impact of their interventions

### Learning objectives

At the end of this session participants will be able to:

- Explain what monitoring and evaluation is
- Define the difference between process and impact monitoring
- Develop indicators that are SMART
- Define who should collect the indicators

### Key points

1. Monitoring is the regular collection, analysis and use of information to help guide a project. Monitoring compares the way things are actually done with the way they were originally planned – and then taking action to bring reality and expectations together.
2. Process monitoring is checking for achievement of targets
3. Impact monitoring is checking achievements of results

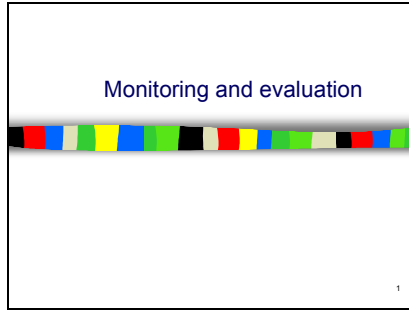
### Materials and handouts

#### 5.1.1 Handout of presentation

Handout: Monitoring and evaluation of peer education programmes from: Peer education, training of trainers manual (UN Interagency group on Young Peoples Health) [http://www.youthpeer.org/upload/resources/155\\_ResFile\\_Manual.pdf](http://www.youthpeer.org/upload/resources/155_ResFile_Manual.pdf)

Handout: Monitoring and evaluation from: Care Bangladesh Manual [http://who arvkit.net/sw/en/content/media/Guidelines\\_behaviour\\_change Bangladesh.pdf](http://who arvkit.net/sw/en/content/media/Guidelines_behaviour_change_Bangladesh.pdf)

## Handout 5.1.1 Monitoring and evaluation



### What is monitoring

- Monitoring is the regular collection, analysis and use of information to help guide a project. Monitoring compares the way things are actually done with the way they were originally planned – and then taking action to bring reality and expectations together.

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### Monitoring: Why and when

- Monitoring is to improve implementation, performance, results and impact
- It indicates where the project needs attention so necessary action can be taken
- Monitoring is a continuous process

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### Who does the monitoring

- Community
- Project supervisors
- Project coordinators
- Programme managers
- Other partners/stakeholders

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### Characteristics of a good monitor

- Anyone who has a strong interest in the issue or is neutral
- Those who can and want to take action to improve the situation
- There should more than one monitoring mechanism to ensure validity and reliability of the information
- Monitoring should be done at lowest possible level and results be used there

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### Process monitoring and impact monitoring

Process:  
Checks for achievements of the targets such as: number of people trained, number of needles exchanged, number of condoms handed out

Impact:  
Is the achievement of results and objectives, focus on issues as: changes in behaviour, use of skills by peer educators, use of services

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### Planning steps in monitoring

- Identify key issues, problems and concerns
- Define indicators and criteria
- Who collects or checks? Are extra checks needed? By whom?
- Collecting, analysing data, reporting. (how do we collect, when, sample size)
- Who acts? What action? (plan for use of monitoring info)

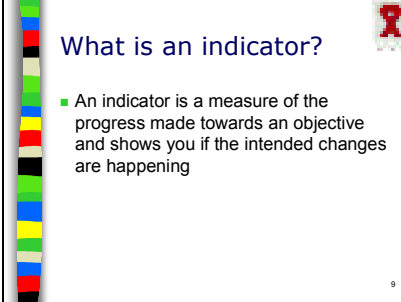
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### Identify key issues, problems and concerns

- Essential to consult with stakeholders to identify the issues that will be monitored.
- How:
- Visits to communities, meet with key staff, meet with key groups
- Through use of participatory activities (mapping)
- Organise participatory workshops

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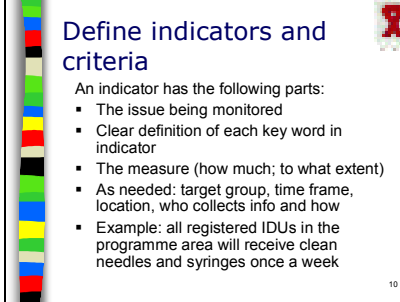
## Participants notes : Day 5



### What is an indicator?

- An indicator is a measure of the progress made towards an objective and shows you if the intended changes are happening

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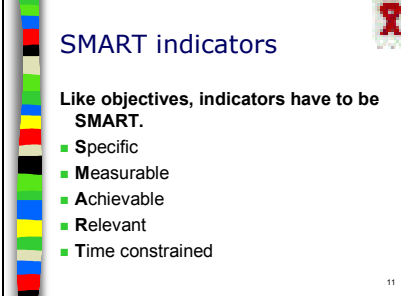


### Define indicators and criteria

An indicator has the following parts:

- The issue being monitored
- Clear definition of each key word in indicator
- The measure (how much; to what extent)
- As needed: target group, time frame, location, who collects info and how
- Example: all registered IDUs in the programme area will receive clean needles and syringes once a week

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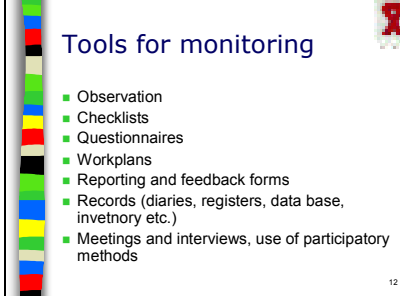


### SMART indicators

Like objectives, indicators have to be **SMART**.

- Specific
- Measurable
- Achievable
- Relevant
- Time constrained

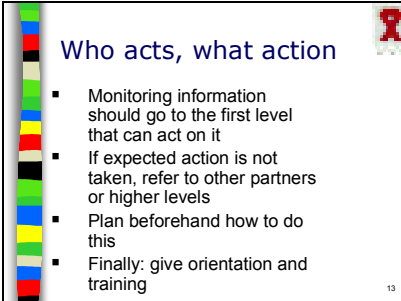
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### Tools for monitoring

- Observation
- Checklists
- Questionnaires
- Workplans
- Reporting and feedback forms
- Records (diaries, registers, data base, inventory etc.)
- Meetings and interviews, use of participatory methods

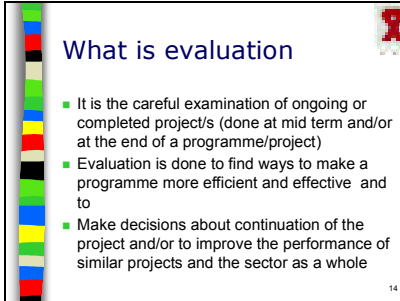
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### Who acts, what action

- Monitoring information should go to the first level that can act on it
- If expected action is not taken, refer to other partners or higher levels
- Plan beforehand how to do this
- Finally: give orientation and training

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### What is evaluation

- It is the careful examination of ongoing or completed project/s (done at mid term and/or at the end of a programme/project)
- Evaluation is done to find ways to make a programme more efficient and effective and to
- Make decisions about continuation of the project and/or to improve the performance of similar projects and the sector as a whole

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## **Handout 5.1.2 Monitoring and evaluation of peer education programmes**

### **What is the difference between monitoring and evaluation?**

**Monitoring** is the regular collection, analysis and use of information to help guide a project. Monitoring compares the way things are actually done with the way they were originally planned.

**Evaluation** is the careful examination of an ongoing or completed project. The goal of an evaluation is to find ways to make a programme more efficient and effective.

### **What do we mean by 'process evaluation', 'impact evaluation' and 'outcome evaluation'?**

Based on the data collected through monitoring the programme's activities, **process evaluation** tells us how well the programme is working (for example, does the programme reach the intended target group?).

**Impact evaluation** determines the immediate effects of the intervention in the target population (such as increased knowledge or changes in attitudes).

**Outcome evaluation** is an assessment of longer-term effects due to the programme's effort and measures more sustained changes (for example, a decrease in rates of sexually transmitted infections, increased use of health services, etc).

Outcome and impact evaluations, therefore, measure a programme's results and effects; they compare data collected before and after programme activities

### **What are indicators?**

An **indicator** is a measure of the progress made towards meeting one of the programme's objectives. Indicators should be measurable, factual and verifiable. For example, by the end of the project, a certain number of high school students should have been reached, or a certain number or certain percentage of the target population should have decided to use a condom. Before a programme is implemented, a set of measurable objectives or indicators needs to be decided upon. An evaluation will look at whether the project is meeting these indicators.

One set of indicators is related to the process evaluation. These indicators reflect the activities that were proposed as part of the project, such as the number of peer educator training sessions conducted, number of educators trained, number of workshops held, number of condoms distributed, etc.

Another part of the evaluation must measure the impact and outcome indicators. These measures reflect the programme's actual impact and longer-term outcomes, such as changes in knowledge, attitude and behaviour of the target audience. (See box below for typical peer education indicators.)

### **Typical peer education indicators**

<b>Process evaluation/monitoring</b>	<b>Outcome/impact monitoring</b>
Number of peer educators trained	Knowledge of HIV transmission
Attendance at regular meetings	Knowledge of services available

## Participants notes : Day 5

Gender of trainers/audience	Use of services available
Level of youth participation achieved	Attitudes about using services
Number of outreach activities	Intention to use condoms
Number of educational materials distributed	Intention to use condoms
Number or percentage of target audience reached	Number of partners
Referrals to other services	Risky sexual behaviours
Costs	

### **The challenge of measuring behaviour change**

It is relatively easy to measure changes in knowledge, as peer educators know what information they want to teach to their group's trainees or participants. Measuring attitudes and skills (or at least perceived skills) and behavioural intentions is also relatively easy. Measuring real behaviour change however is complicated, often requiring, more sophisticated measurement techniques. Sometimes changes in behaviour resulting from peer education interventions can only be measured through individuals' reports of their own behaviour, which are hard to check. More over, asking questions about behaviour related to sexuality or substance use may be controversial and frowned upon in certain cultures or institutions. It is nevertheless important to collect useful behavioural data and to report on the process and outcomes of a programme.

Previous research in peer education has shown positive results for a variety of indicators. Some programmes have been able to demonstrate increased protective behaviour and delays in the onset of sexual activity among participants. Other research data - especially for large-scale programmes - have demonstrated an impact with regard to indicators beyond the individual, for example, lower HIV and STI incidence within a community.

### **Tips for simple and creative monitoring**

Few peer education programmes are part of a significant research project and, for this reason, they are often not organized as part of an experimental design. To evaluate a programme's efficacy in a good research project, participants would be randomly assigned to one or another 'condition' (i.e., receiving the intervention or not, receiving different interventions or not, etc.). Therefore, unless there is at least a group that can be compared more or less equally, it is hard to draw definite conclusions about the real : cause of changes that might seem to result from a peer education programme. However, even without a rigorous research methodology, there are many ways to evaluate the impact, richness and value of a peer education programme. Below are some simple, useful tips for finding ways to monitor and report on a peer education programme:

- Begin with a questionnaire before an educational event. This can be done at different levels, from a community down to a specific class in a school, using pre- and post- event surveys that assess knowledge, attitudes and behaviours.
- Record on film peer education events and activities such as planning meetings with peer educators; training sessions; workshops; outreach

## Participants notes : Day 5

events; and the reactions and opinions of participants immediately after training sessions.

- Collect photographs of peer education events.
- Ask participants to write a letter about their experience with the programme.
- Create events that attract the media and are recorded (therefore getting good, high- quality video free of charge).
- Inform others if you get requests from schools/organizations to deliver the programme. . Collect data on how useful participants found the programme in general and specific exercises in particular.
- As far as possible, keep a record of presentations at conferences relevant to the topics covered in peer education (e.g., peer education itself, HIV/AIDS, substance use, gender- based violence, human sexuality and reproductive health, etc.) and the number of people attending these presentations.

## **Handout 5.1.3 Monitoring and evaluation**

When designing a project, we have an overall goal or aim of what is to be achieved (e.g., to prevent the transmission of HIV to and from sex workers or injecting drug users). To achieve this aim and get where we want to, we express the goal in specific, measurable, achievable, realistic and time bound (SMART) objectives. Concrete steps have to be taken to achieve these objectives (for instance, providing clean needles, STI services or basic information on HIV/AIDS). These are the activities of the project.

The purpose of monitoring (continuously collecting information about program implementation) and evaluation (analysing this information) is to assess how well the project is achieving its aims and objectives, and whether interventions need to be modified to make them more effective.

Measurable indicators are used to monitor progress.

Ideally, objectives should be developed in partnership with the community within the overall goal and purpose of the project.

### **Monitoring and evaluation**

- Helps to assess the effectiveness and impact of the program so that interventions can be reoriented, if necessary
- Provides detailed information on how the project is progressing and whether any changes are necessary to achieve the project goals
- Creates greater efficiency and effectiveness by breaking down activities and assigning responsibility
- Establishes accountability for everybody by monitoring activities and responsibilities
- Informs donors about which resources are being used, and whether they are being used efficiently and as planned
- Ensures a coordinated and organized schedule of supervision of work and workers

### **The three stages of monitoring and evaluation**

- Identifying indicators to measure progress
- Collecting and analysing data
- Reviewing and modifying existing interventions and developing new programs, if necessary

### **What is an indicator?**

An indicator measures the progress made towards an objective and shows you if intended changes are happening. For instance, if the objective of an intervention for sex workers is to market condoms through outreach workers, the indicators could include the number of outreach visits per week, number of sex workers contacted on each visit, number of condoms sold.

Depending on the aims and objectives of your project, you will need to select indicators that show if your programme activities are having the desired impact.

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Three kinds of indicators can be used to monitor and evaluate whether the intended changes are occurring:

**Input indicators**, such as money and the number of staff recruited and training etc

**Process indicators**, or what is happening on the ground (for instance, number of STI cases treated, number of training sessions conducted, number of STI cases treated in the clinic, the number of injecting drug users seeking treatment)

**Output indicators**, or the direct effect of an intervention (proportion of sex workers received HIV knowledge, STI treatment etc)

It is important to identify initial indicators as this allows documentation of inputs, activities, outputs, number of beneficiaries and coverage. However, as the project develops, the objectives of the project may ! change and you may need to constantly redefine what you mean by them and identify new indicators. For instance, knowledge of STI/ HIV and how it spreads may be an initial program objective that may need to be redefined after the early phase of intervention as the community may also need to be informed about preventive measures and clinical follow-up.

### Monitoring

- Provides information on whether you are doing what you have set yourself to do to achieve the, goal '
- Indicates where there is movement and areas that need attention so you can take necessary steps to address gaps or modify what your doing
- Assesses the coverage of intervention.
- Enables you to see how to change what you are doing '

Depending on the intervention, different information needs to be collected. Project staff, project clients, external evaluators and community members can collect information for the regular monitoring of the programme.

In any intervention, every player is accountable and needs to monitor his/her progress and performance according to measurable targets. These targets provide an overall goal and sense of purpose, are explicit and can be monitored, are time-bound, and are challenging. A peer educator may, for instance, set a target of contacting 100 sex workers or drug users in one week, or ensure that within a month a certain proportion of the vulnerable group will be able to correctly state one method of protection against HIV.

Different performance indicators are required at each level (for example, at the field level, peer educators and clinic staff will have different goals and targets and therefore different indicators will be used).

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Monitoring can be based on self-reported information (by asking 'how often') as well as objectively assessed. Try and

- Confirm whether the information is about actual or reported behaviour
- Find ways to confirm responses
- Use indicators that can be objectively verified

Monitoring can be based on primary or secondary sources of data

- Primary information is based on observable facts (such as what the group is doing) or objectively verifiable behaviour (for instance, how many needles were returned)
- Secondary information is based on reported sources, such as minutes of meetings recorded by peer educators, clinical reports, number of condoms distributed and number of drug cycles dispensed.

### Action

Design a monitoring plan at the beginning of the project. This will show that activities are being carried out as planned as well as help you identify and modify problems during the project cycle. Ideally, monitoring should start prior to intervention (i.e., from baseline) and continue throughout the duration of the project. Evaluation should be done at the program planning stage and periodically thereafter.

Baseline

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Monthly/Quarterly

↓

Mid term

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End of project

- Identify the goal and objectives of the program
- Identify the indicators to measure progress and outcome
- If the findings show an intervention is not progressing as planned, reassess the program and introduce more appropriate activities.

### Monitoring Tools

Different monitoring tools are required at various levels. For instance, program activities can be monitored by using checklists, checking work plans or using reporting and feedback forms. In clinics, a list of attendees, medical records and details of drugs dispensed can be useful.

For peer educators, monitoring tools should be simple and easy to use.

- Maps can be used to show actual coverage (peers mark the houses that they visited on a map of the area)
- Diaries can be used to record daily activities (for instance, peer educators note how many people they visited on a given day, what

## **Participants notes : Day 5**

each one said, how many condom demonstration sessions were conducted, comprehension of IEC , materials)

- Colour codes can be used to assess indicators (for instance, how many sex workers know how to use a condom correctly, how many are using condoms consistently). Daily registers or diaries can be effectively used (for instance, to note how many people were visited). Minutes of meetings, monthly /weekly reports can also provide information on the impact of intervention.

As far as possible, involve peer educators and beneficiaries when designing monitoring tools and interpreting information.

### **Remember**

- It is important to have external evaluation (both mid-term and end of project) as it is an objective way of assessing the progress and effectiveness of the intervention
- Involve the community in monitoring the impact of interventions and share findings with them.

## Participants notes : Day 5

- **Session 5.2 – Consolidating the group work results**

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### **Aim**

To give the participants the opportunity to consolidate the work they have done over the whole week in to one presentation.

### **Learning objectives**

At the end of this session participants will be able to:

- Present a full strategy for peer education and behaviour change communication
- Have a good overview of the activities in the different elements of the strategy
- Discuss why they have developed the strategy as it is

### **Key points**

1. It is very useful to have an overview of all steps that need to be undertaken in the development of a strategy
2. By filling in the information that already exists, it is also possible to note what information is missing – that then helps to guide the process.
3. In having to present a strategy, people have to think very clearly how they are going to 'defend' what they want to do. This in itself is very useful

### **Materials and handouts**

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## Session 5.3 – Evaluation and closing

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### Aims

- To evaluate the course in terms of contents, objectives and expectations fulfilled, as well as facilitation
- To close the course

### Learning objectives

At the end of the session the participants will be able to:

- Express their opinion on the course and its facilitation

### Key points

Evaluation of a training course is very useful for participants, to enable them to reflect on their expectations and share comments; and for the facilitators, to improve on their performance and the contents of the course  
The evaluation will enable the participants and facilitators to prepare for changes that can be incorporated in the training during the next few days.

### Materials and handouts

5.4.1 Evaluation form

## Handout 5.4.1– Evaluation form

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Your evaluation comments will be used to review and adapt the module and its implementation, where necessary. We appreciate your time and effort to provide this important feedback.

1. In general: did the training meet your expectations? Was the training relevant for you? Did you learn useful new things? Please explain.

The objectives of the training were as follows:

At the end of the training the participants are able to:

- Guide different target groups to develop a peer education strategy based on a common understanding of the nature and purpose of peer education, its benefits and its limits
- Use effective strategies to reach intended target groups and to select, motivate, train and supervise peer educators
- Display non discriminatory values and attitudes related to STI/HIV/AIDS, drug use, commercial sex work, MSM and use the right language and (gender) sensitivity to discuss these issues
- Use participatory techniques, group working skills and skills based education to work with peer educators
- Develop peer education strategies as part of a wider programme (access to Sexual and Reproductive Health care, condom promotion, harm reduction) including linkages to referral stakeholders/institutions and information resources
- Develop a strategy for behaviour change communication that is based on an assessment of the intended target audience

2. Did the training meet all of the objectives? Please explain.

**Participants notes : Day 5**

3. Which sessions/topics were most useful or did you like most? Why?

4. Which sessions/topics were least useful or did you like least? Why?

5. Which topics did you miss and need to be included? Why?

6. Do you feel the facilitator was well prepared for its tasks (with regard to contents, methodology and group dynamics)? Please make suggestions for improvement.

**Participants notes : Day 5**

7. Please write here any other comment or suggestion you may have.

8. During the training days next week, which are the specific topics/sessions that you feel you need to discuss again in order for you to be able to facilitate the workshop yourself? Please explain.

THANK YOU!