

# Developing effective programs and services in a population health framework

Presentation to Australasian Evaluation Society conference  
Evidence *and* Evaluation  
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Presented By  
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## Evidence *and* Evaluation

- Who is ACON?
- What do we use as evidence?
- How do we evaluate our work?
- The challenge of evaluation



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## ACON

- Established in 1985, ACON is Australia's largest community-based gay, lesbian, bisexual and transgender (GLBT) health and HIV/AIDS organisation.



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## ACON

- ACON works to improve the health and wellbeing of the GLBT community and people with HIV, and reduce HIV transmission.



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## ACON's Work

- HIV prevention
- Sexual health promotion
- Needle & Syringe Program
- Alcohol and Other Drugs Program
- GLBT Health
- Services and support for HIV positive people
- Counselling
- Housing
- Anti-Violence Project

## Importance of Evaluation At ACON

- The process of evaluating is a central way by which ACON seeks to continually improve our work and gain a greater understanding of emerging organisational issues.

## Importance of Evaluation At ACON

- Evaluating our work at the individual program level as well as the overall outcomes of our organisational Strategic Plan allows us to measure our performance against the National and NSW Strategies.

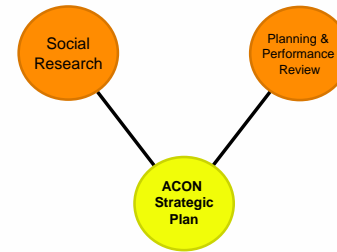
## How We Evaluate Our Work



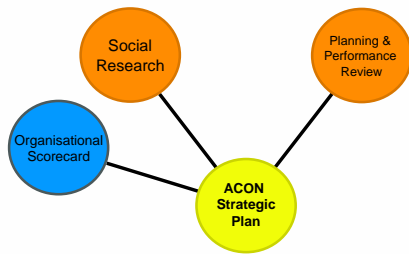
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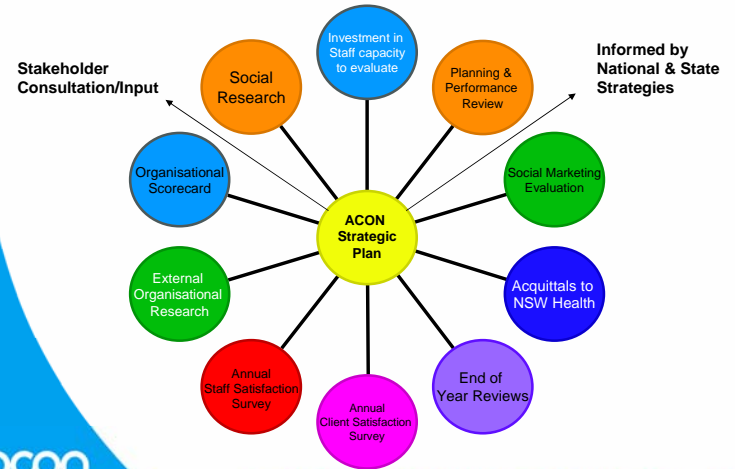
## How We Evaluate Our Work



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## How We Evaluate Our Work



## How ACON Gathers Evidence

### Social Research



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## Social Research – our Partners

- National Centre in HIV Social Research
- National Centre in HIV Epidemiology and Clinical Research
- National Drug and Alcohol Research Centre
- Australian Research Centre in Sex, Health and Society



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## Sydney Gay Community Periodic Survey

- ACON
- NCHSR
- NCHECR
- Positive Life NSW
- NSW Health

## Sydney Gay Community Periodic Survey

- Behavioural surveillance system
- Conducted twice annually since 1996
- Cross-sectional longitudinal study
- Each year around 2,500 responses

## Sydney Gay Community Periodic Survey

- Demographics
- Sexuality & gay community attachment
- Relationships & agreements
- Sexual behaviour & condom use
- HIV & STI testing
- Illicit drug use
- Some knowledge items

## Opportunity to explore emerging issues

- Evidence emerging that men are using serosorting as way to negotiate unprotected sex
- Based on assumptions
- Block of questions in August 2006 SGCPs

## Serosorting

For the purposes of the campaign, serosorting has been defined as:

- 'the practice of having unprotected anal intercourse with a partner believed to be of the same HIV status'; or similarly
- 'discussing HIV status with potential partners and only engaging in UAI with those they believe are of the same status

## Campaign Development

- Ensure that HIV negative men are aware of the risks associated with their serosorting behaviour.
- Challenge specific assumptions and beliefs around HIV status:
  - by providing information that encourages men regardless of their HIV status to improve the discussion and negotiation around the sex they are having in a range of locations

## Campaign Development

- Encourage negotiation and condom use among men engaging in group sex.
- Encourage HIV positive men to ensure that if engaging in UAI, their sex partner has also disclosed their status as HIV positive.
- Encourage a culture of condom use and negotiation among men of HIV negative and unknown serostatus.
- Also among positive men who are having sex with men of HIV negative or unknown serostatus.

## Tareget Audience

- HIV negative men.
- HIV positive men.
- Men into adventurous and group sex.
- Sexually active gay men who use SOPVs.
- Sexually active gay men more generally, particularly those with high numbers of casual sex partners and engaging in UAIC.
- Men of all ages.

## You Just Don't Know



If he hasn't said he's positive too,  
how can you know?

You just don't know.

Most HIV negative guys don't always disclose before sex.\*  
Unless he's clearly told you that he is positive too,  
use condoms and lube.


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\*The more information you know, the better you can protect yourself. © 2016 Acon. All rights reserved.

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## You Just Don't Know



Are you thinking he's negative too?

You just don't know.

1 in 5 guys who recently contracted HIV believed that the other guy was HIV negative.\*  
Protect yourself and your partners by using condoms and lube.

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\*The more information you know, the better you can protect yourself. © 2016 Acon. All rights reserved.

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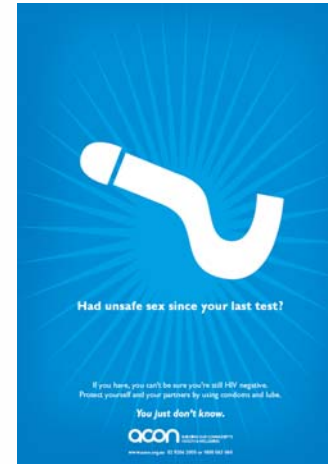
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## Evaluation

- Four group discussions of 5-7 respondents in each – about 1½ hours long
- A group with HIV positive men, group for negative men and 2 groups of men who use sex on premises venues
- All men were screened for appropriateness

## Focus Group Content

- Spontaneous recall of campaign
- Prompted recall of campaign
- Perceptions of campaign
- Impact on behaviour change

## Recall

- Without exception, each of the men recalled the campaign

## Recall

- All men identified that the imagery not only drew their attention to the campaign, but also effectively conveyed the message of not assuming another's HIV status.

*However,*

- The key take-out message was to use condoms to avoid the risk of HIV transmission rather than discussing HIV status

## Perceptions

- There is a general assumption that some will lie regardless, or will simply not know their status
- It is not a discussion that some see as acceptable in the circumstances
- Therefore, the only way to be safe is by ensuring condom use

## Imagery

- The overall strength of the imagery detracted from respondents looking for further information.
- The 'new information' provided in the copy was recessive across all executions due to small font size, wordiness, and difficulties in comprehension and misinterpretation of statistics and language

## Misinterpretation

Campaign – “About  $\frac{3}{4}$  of guys going to sex venues state they are HIV negative”

Interpretation – “Risk isn’t as great as I thought”



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## Misinterpretation

Campaign – “1 in 5 guys who recently contracted HIV believed that the other guy was HIV negative”

Interpretation – “1 in 5 guys have HIV? Then 4 in 5 guys don't”



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## Discussion

- Balance around using imagery that will capture attention, and providing information
- Danger of using facts and figures that are open for misinterpretation

## The Challenge of Evaluation

- Evaluation at ACON is largely focused on measuring the outputs of our work.
- We want to do more evaluation that shows how effective our work is in changing people's behaviour (impact evaluation), and achieving our key organisational goals (outcome evaluation).

**Outputs** – A measure of what occurs or is expected to occur, as a result of a planned activity. Often measured in quantitative terms.

**Impact Evaluation** – A way of measuring whether the intended changes occurred such as examining the effects of a program on individual behaviours/ understandings or attitudes.

**Outcome Evaluation** – A way of measuring the long-term effects of the program, such as changes in health status or disease prevalence.

## The Challenge of Evaluation

- When our clients live in complex worlds, with multiple and diverse determinants and factors influencing their decisions:

***How do we accurately measure the exact influence that ACON's work has had on:***

- *Changing individual behaviour;*
- *Individual health*

## Thank You

### Questions?

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