# SCCW1. OUTREACH WORKER EFFECTIVENESS FORM

#### **USE WHEN YOU WANT TO EVALUATE:**

#### Outcomes:

- ✓ Improved capacity of service providers and volunteers
- ✓ Collaboration and networking

#### Intervention types:

- ✓ Training and skill building sessions to increase the capacity of service providers and volunteers
- ✓ Activities to improve collaboration, coordination and networking among service providers and volunteers

# Worked well with these populations:

✓ Peer Outreach Workers

#### Interventions for:

- ✓ HIV
- ✓ STIs
- √ hepatitis C

# **DESCRIPTION**

Ongoing recording form for peer outreach workers (and other service providers) to record the effects of their interventions with priority populations; can be adapted to any content and population.

# WHY THIS TOOL MIGHT BE USEFUL FOR COMMUNITY-BASED INTERVENTIONS

- ✓ In this study, it was shown that peer outreach workers reached twice the number of individuals as expected with the program messages.
- ✓ Suitable for analysis over time (weekly, monthly, or annually)
- ✓ Quick to fill out
- ✓ Easily analysed
- Could easily be programmed to be given electronically

#### Developed in:

✓ English

# ADMINISTRATION, DESIGN, SCORING and ANALYSIS CONSIDERATIONS

#### **ADMINISTRATION**

- Adapt the form to your intervention. It can be used for HIV, hepatitis C and other STIs; you can add other questions about the characteristics of the people being reached. (e.g., their age)
- This form should be filled out by each outreach worker every time he or she makes a contact with a member of the priority population regardless of whether or not he/she was able to deliver the intervention.
- It should take a few seconds to fill out each time, but has to be done regularly, ideally every day or every two days.
- The completed forms should be returned once a week to the program coordinator.
- It should be made clear to outreach workers that it is being used to evaluate the program and not them, to help make the program better. (For further information on ethical considerations in carrying out evaluations, see <a href="Ethics Resources">Ethics Resources</a>)
- Ensure that outreach workers are comfortable to complete the form. To keep information confidential among workers have outreach workers put their completed sheets into sealed envelopes.

**SCORING:** Add up the total numbers in the space provided at the bottom of each sheet. Enter these totals into an Excel file, as shown after the form, with one row per person and adding new information every week.

**ANALYSIS:** Calculate the weekly totals across all the outreach workers. These can be put into a graph or a table to see changes over time in numbers being reached by the intervention. The totals should be steady or increasing, after taking into consideration any contextual factors. (such as poor weather, police repression, migrant population etc.)



# Community Liaison Program: SCCW1 - OUTCOME EVALUATION FORM

Name of Liaison worker:	

Instructions: As you go about the task of sharing our message about [YOUR PROGRAM] with people in your community, use this form to keep a record of the results of the activities. PLEASE RETURN YOUR SHEET EVERY [] TO [] IN A SEALED ENVELOPE.

Date of contact	Gender of contact (adapt to your program)	1st time made this contact?	Cultural/risk group	Gave message about: (adapt to your program)	I feel the contact has increased HIV/Hep C awareness: for example: - the person said they were surprised - the person asked me questions - the person repeated what I said	The contact said he/she will share with others
	☐ Female ☐ Male ☐ Other	☐ 1st time☐ Not the 1st time	☐ (adapt to your program)	□ Yes □ No	□ Yes □ No	□ Yes □ No
	☐ Female☐ Male☐ Other	☐ 1st time ☐ Not the 1st time	□ (adapt to your program) □	□ Yes □ No	□ Yes □ No	□ Yes □ No
	☐ Female☐ Male☐ Other	☐ 1st time ☐ Not the 1st time	□ (adapt to your program) □	□ Yes □ No	□ Yes □ No	□ Yes □ No
	☐ Female☐ Male☐ Other	☐ 1st time ☐ Not the 1st time	□ (adapt to your program) □	□ Yes □ No	□ Yes □ No	□ Yes □ No
	☐ Female ☐ Male ☐ Other	☐ 1st time ☐ Not the 1st time	□ (adapt to your program) □	□ Yes □ No	□ Yes □ No	□ Yes □ No
(add dates as necessary)	☐ Female☐ Male☐ Other	☐ 1st time☐ Not the 1st time	☐ (adapt to your program) ☐	□ Yes □ No	□ Yes □ No	□ Yes □ No
Total contacts this week:	Total female: Total male: Total contacts:	Total 1 <sup>st</sup> time contacts:	Total (cultural group) :	Total yes:	Total yes:	Total yes:

Source: Adapted from: Kelley, R. T., Hannans, A., Kreps, G. L., & Johnson, K. (2012). The community liaison program: A health education pilot program to increase minority awareness of HIV and acceptance of HIV vaccine trials. Health Education Research, 27(4), 746-754.

# Excel file format for compilation and analysis:

Liaison worker name or code	Total female week 1	Total male week 1	Total other week 1	Total 1 <sup>st</sup> time contacts week 1	Total (cultural group) week 1	Total inter-ventions delivered week 1	Total increased knowledge week 1	Total female week 2	Total male week 2	Total other week 2	Total 1st time contacts week 2	Total (cultural group) week 2	Total inter-ventions delivered week 2	Total increased knowledge week 2	Total will pass on week	Total will pass on week 2	etc
1.																	
2.																	
3.																	
4.																	
TOTAL																	