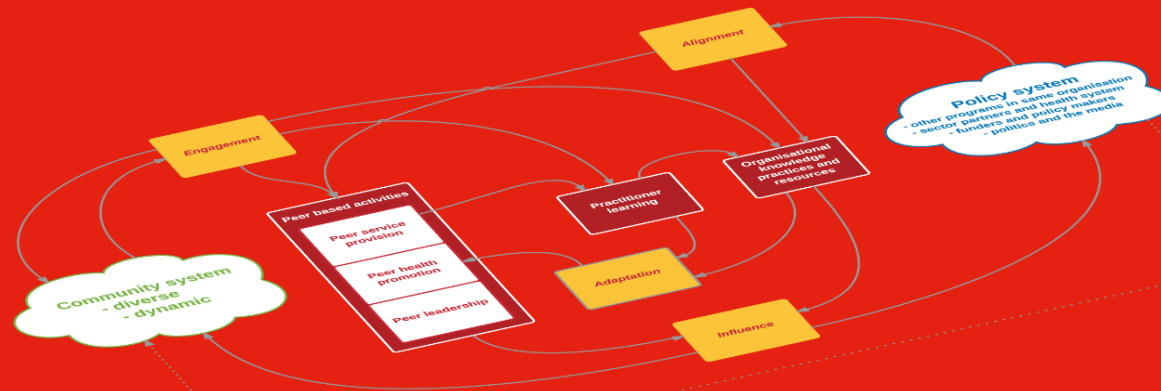


Applying complex systems to implementation evaluation in peer-led health promotion interventions: The W3 Project

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- Graham.brown@Latrobe.edu.au



W3 project.org.au

Role of peer and community led organisations in HIV prevention and treatment



What Works and Why (W3) Project

W3 Project took a systems approach to develop a 'system' level **program theory for community and peer-led organisations** to guide their planning, evaluation and evolution in a changing social and biomedical environment

 w3project.org.au

Collaborating Community and Peer Led Organisations

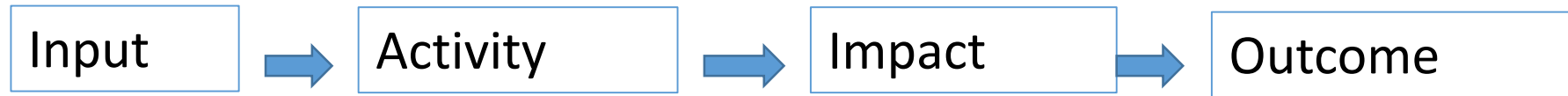
- Australian Federation of AIDS Organisations
- Australian Injecting and Illicit Drug Users League
- Harm Reduction Victoria
- Living Positive Victoria
- National Association of People Living with HIV/AIDS
- Peer Based Harm Reduction Western Australia
- Positive Life NSW
- Queensland Positive People
- Scarlet Alliance – Australian Sex Workers Association
- Thorne Harbour / Victorian AIDS Council

W3 is funded by the Australian Government Department of Health

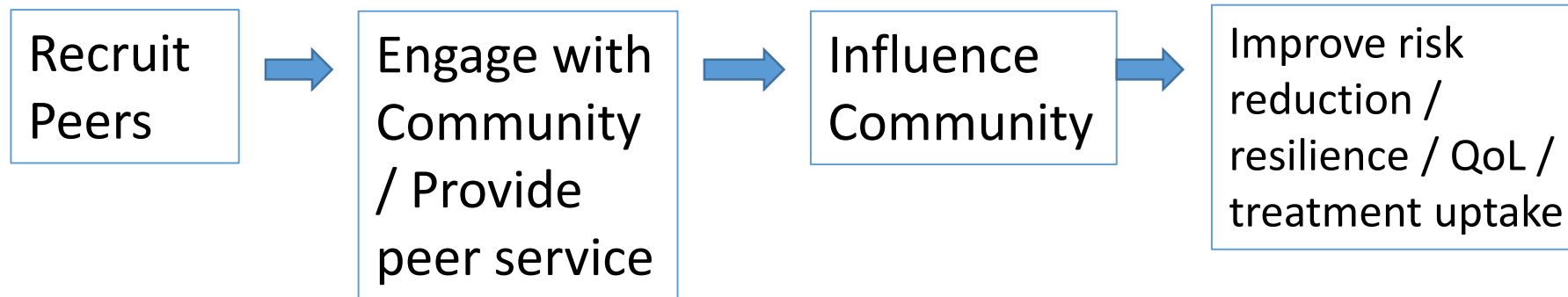
Four stages to develop W3 Framework

1. Highly participatory systems workshops with the partner organisations to develop system maps.
2. Collaboratively analysed the system maps to identify common themes and functions, and develop a draft framework.
3. Draft framework reviewed by additional peer organisations and stakeholders from across Australia
4. Worked with the partner organisations to apply the W3 Framework to identify draft quality and impact indicators

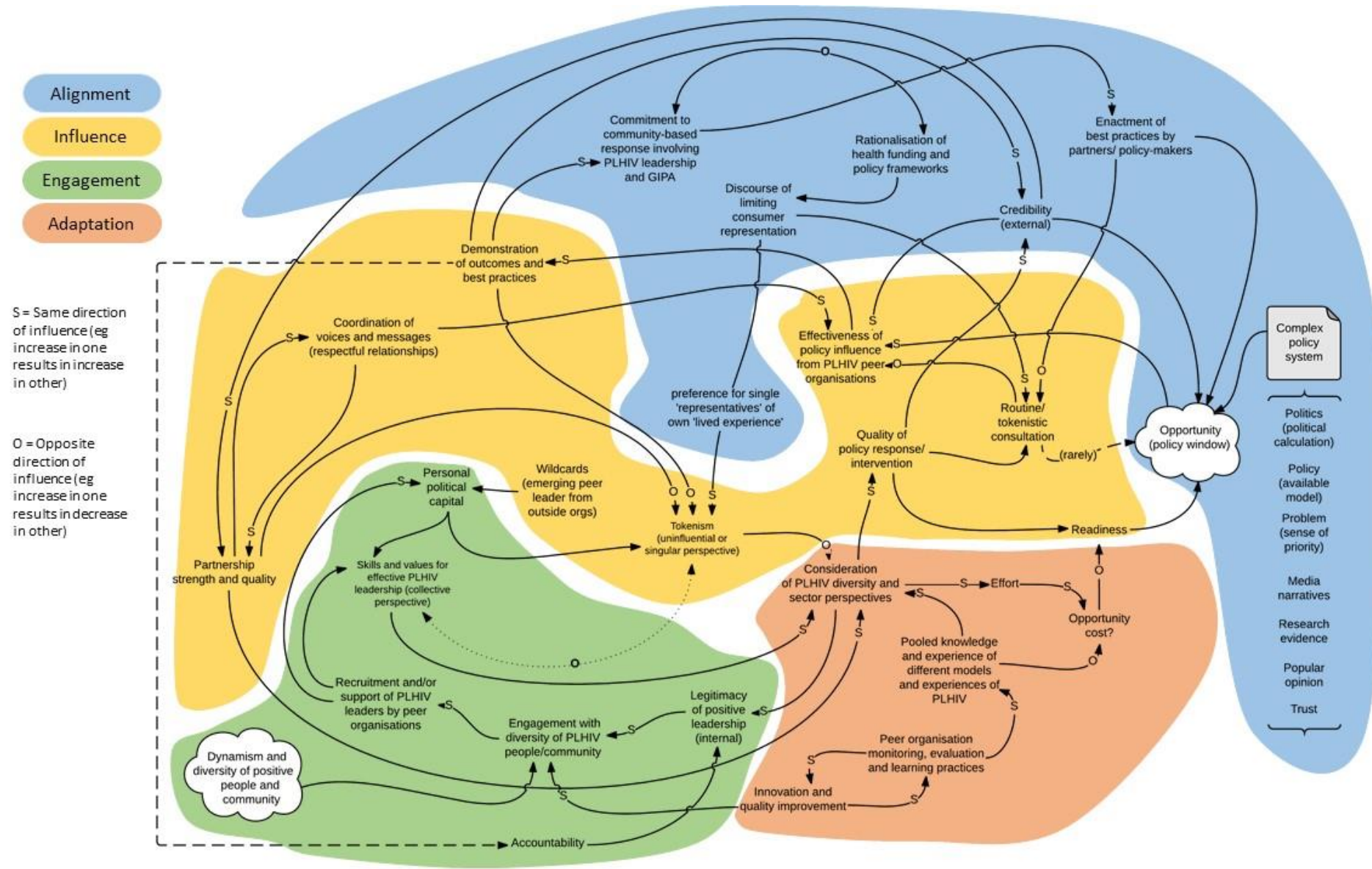
Instead of this....



For example...



We found this...

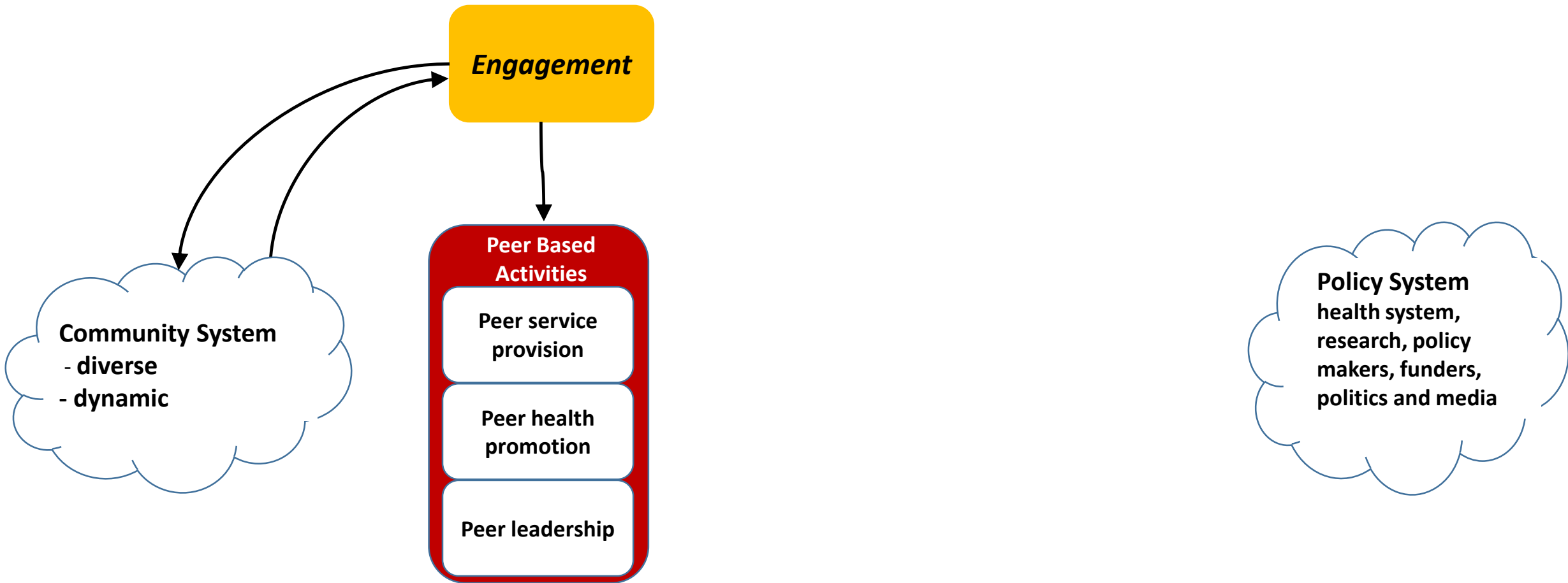


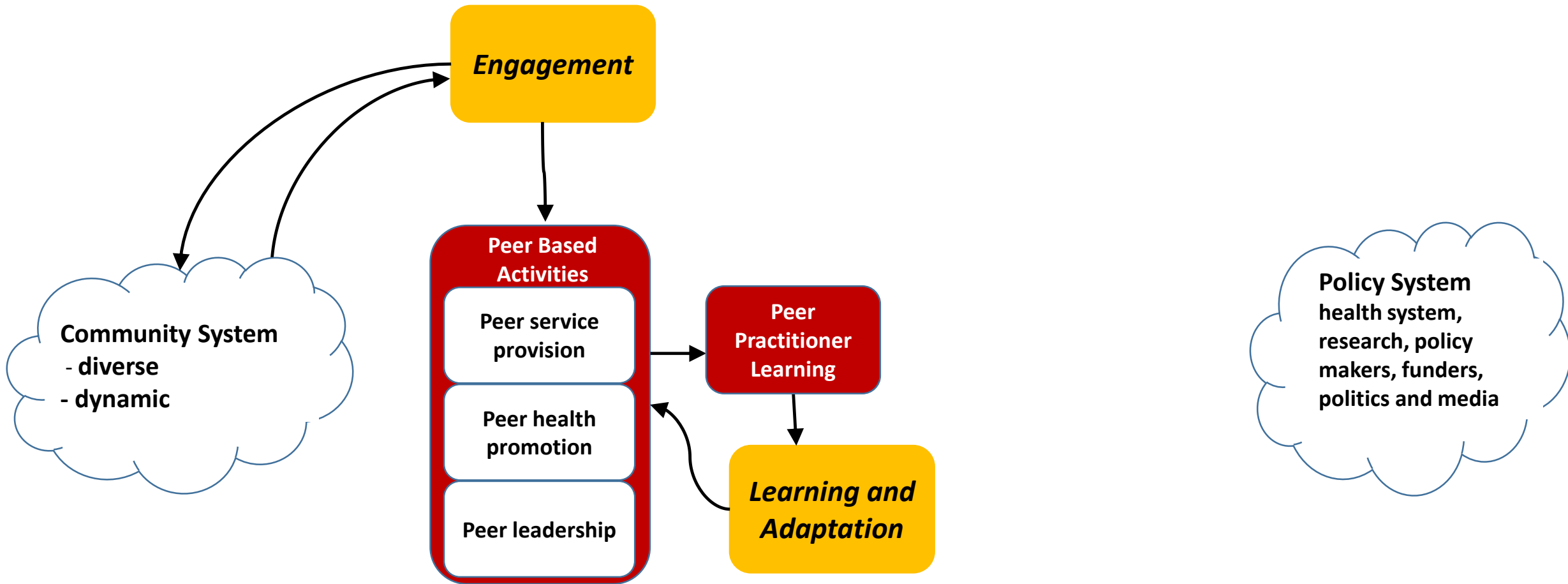
Community System
- diverse
- dynamic

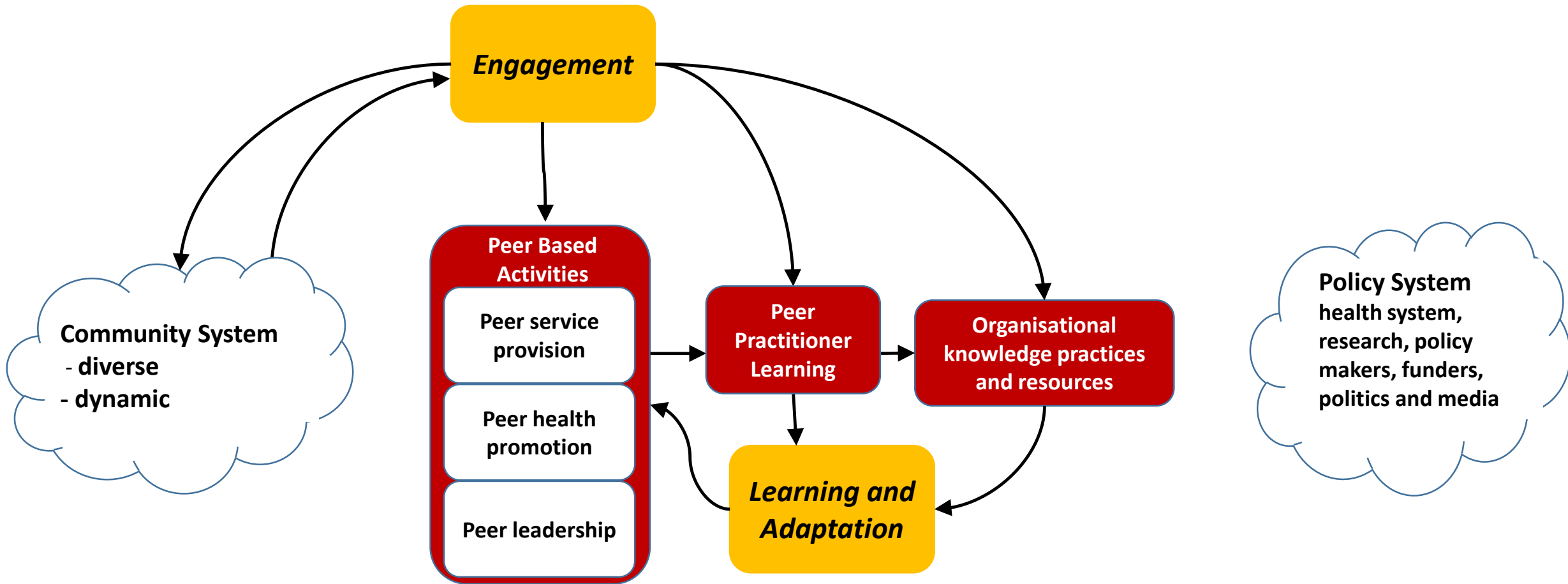
**Peer Based
Activities**

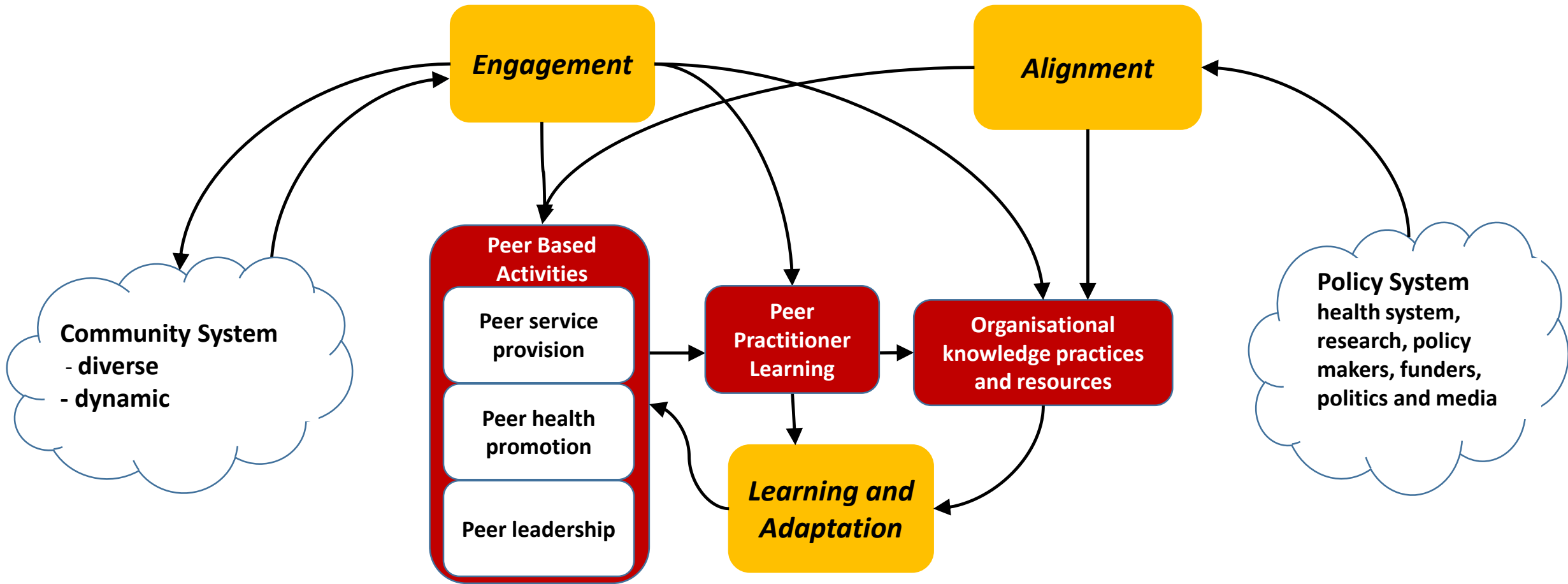
- Peer service provision
- Peer health promotion
- Peer leadership

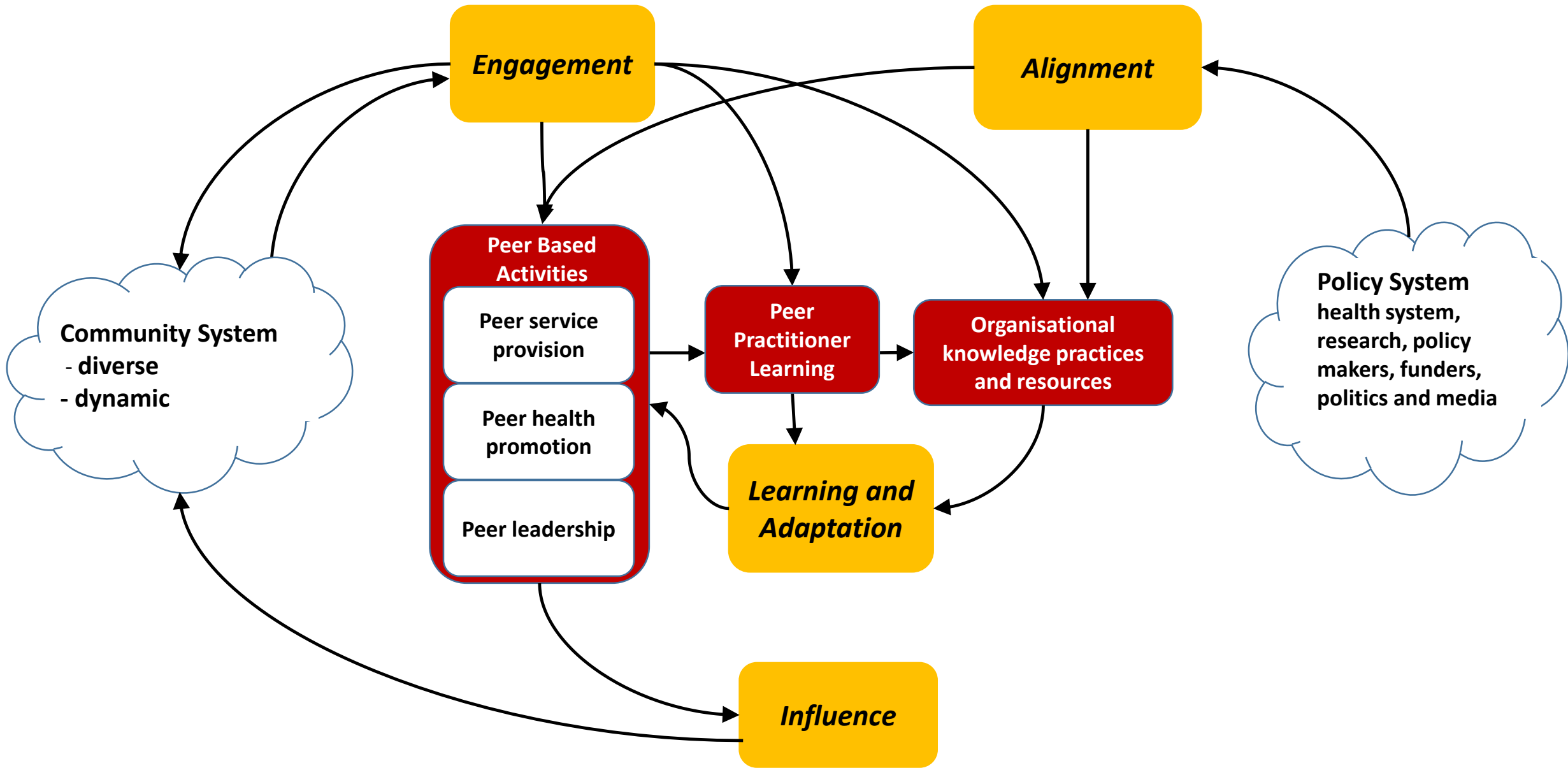
Policy System
health system,
research, policy
makers, funders,
politics and media

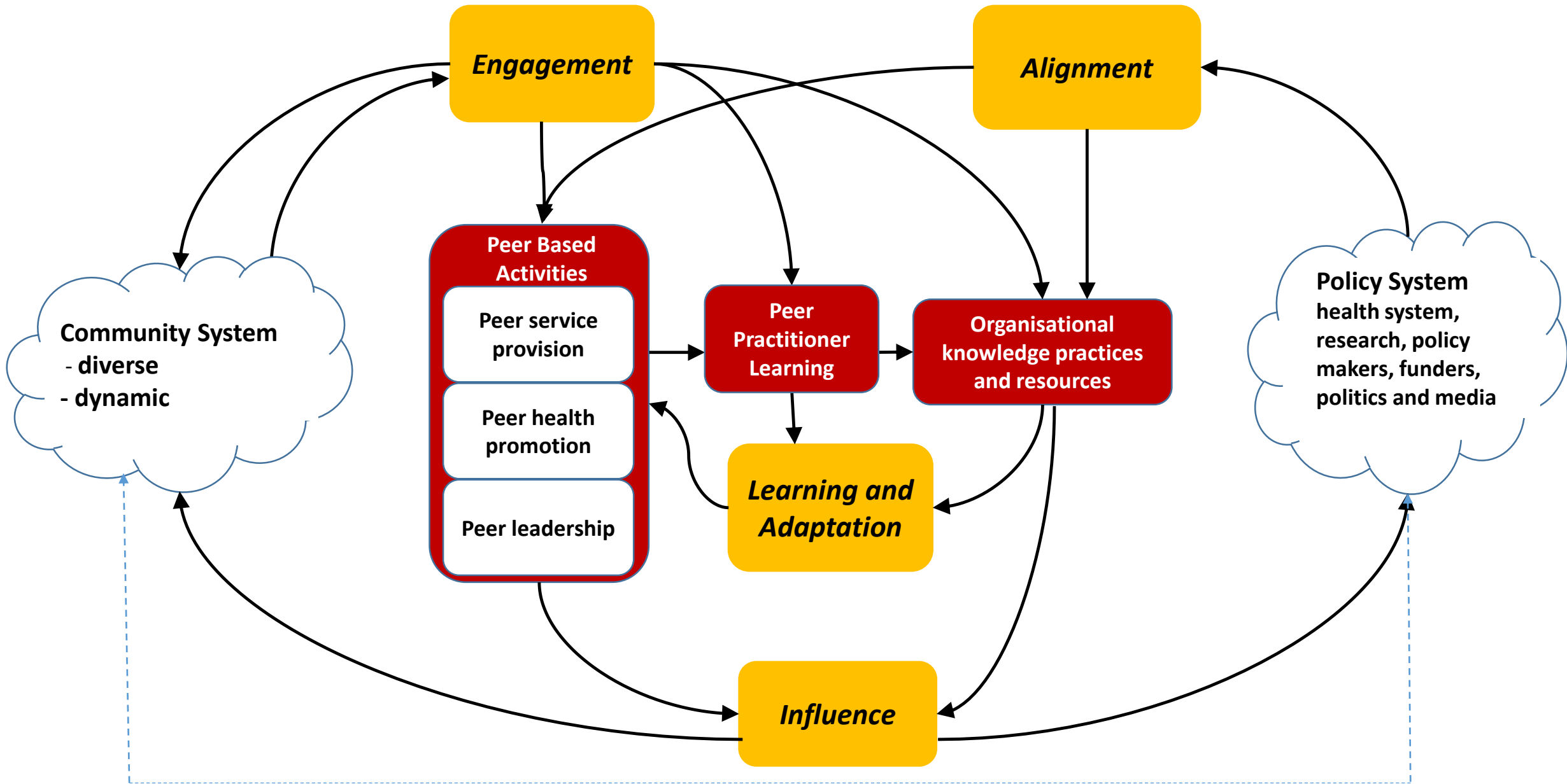


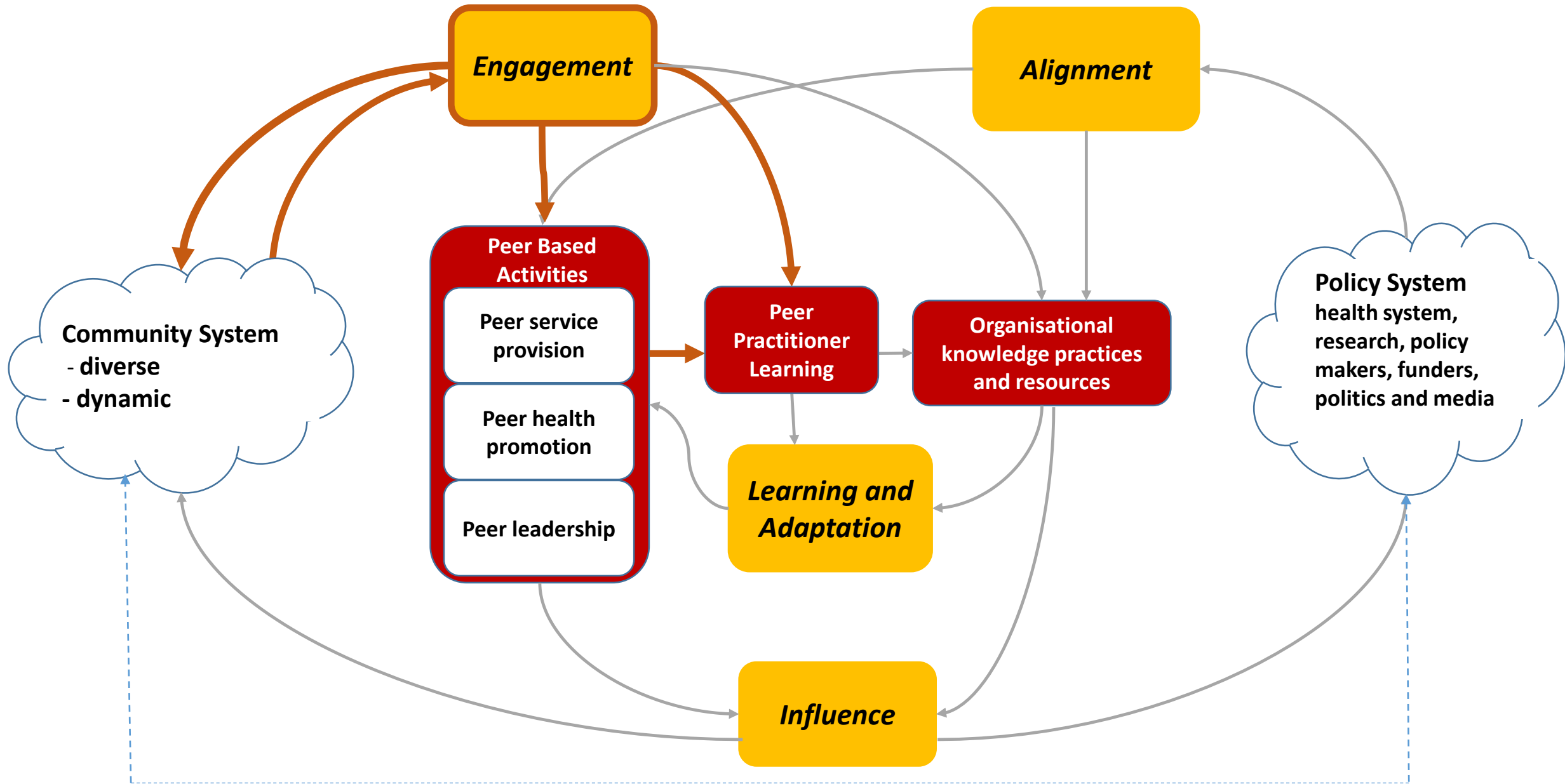


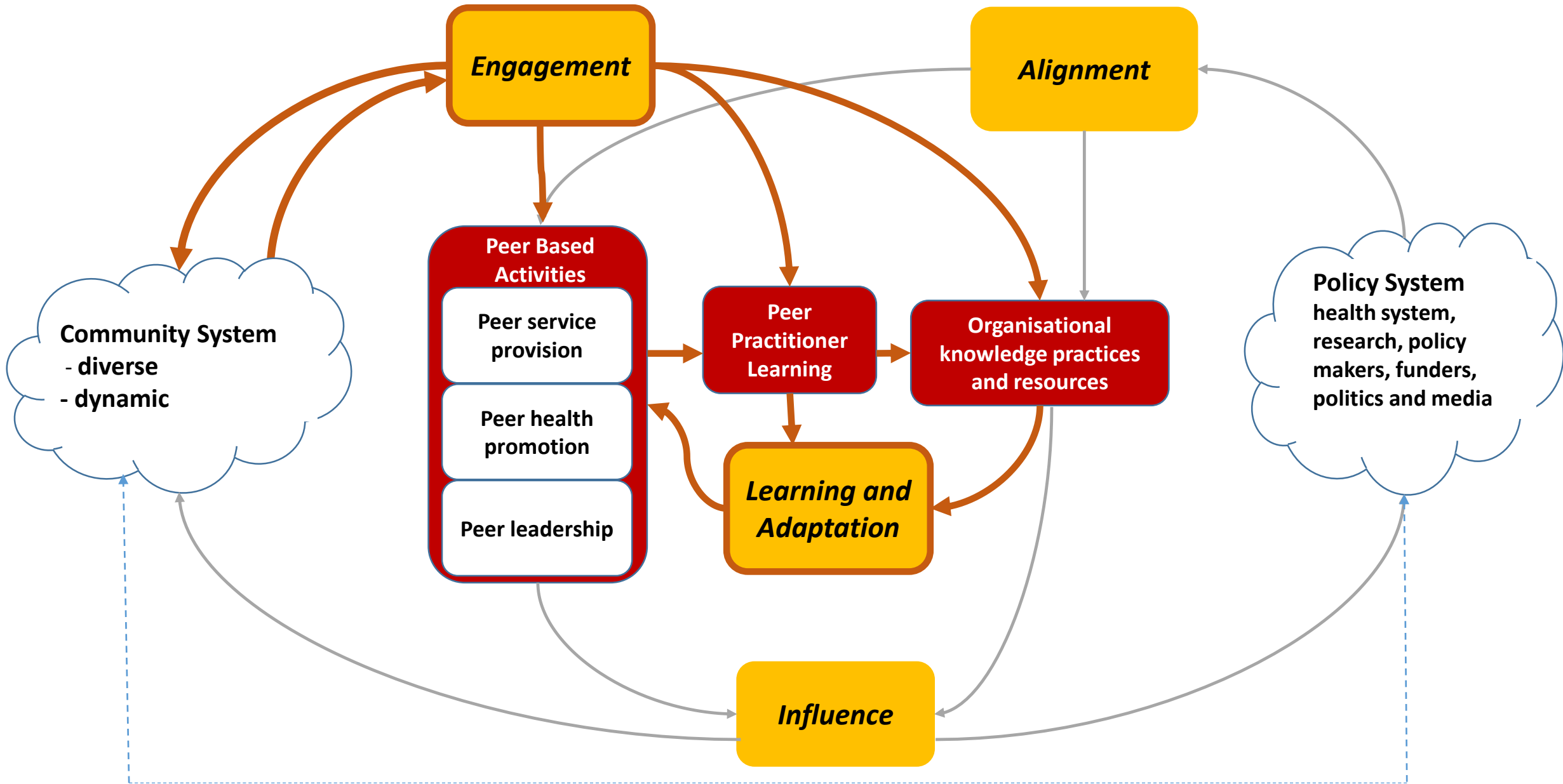


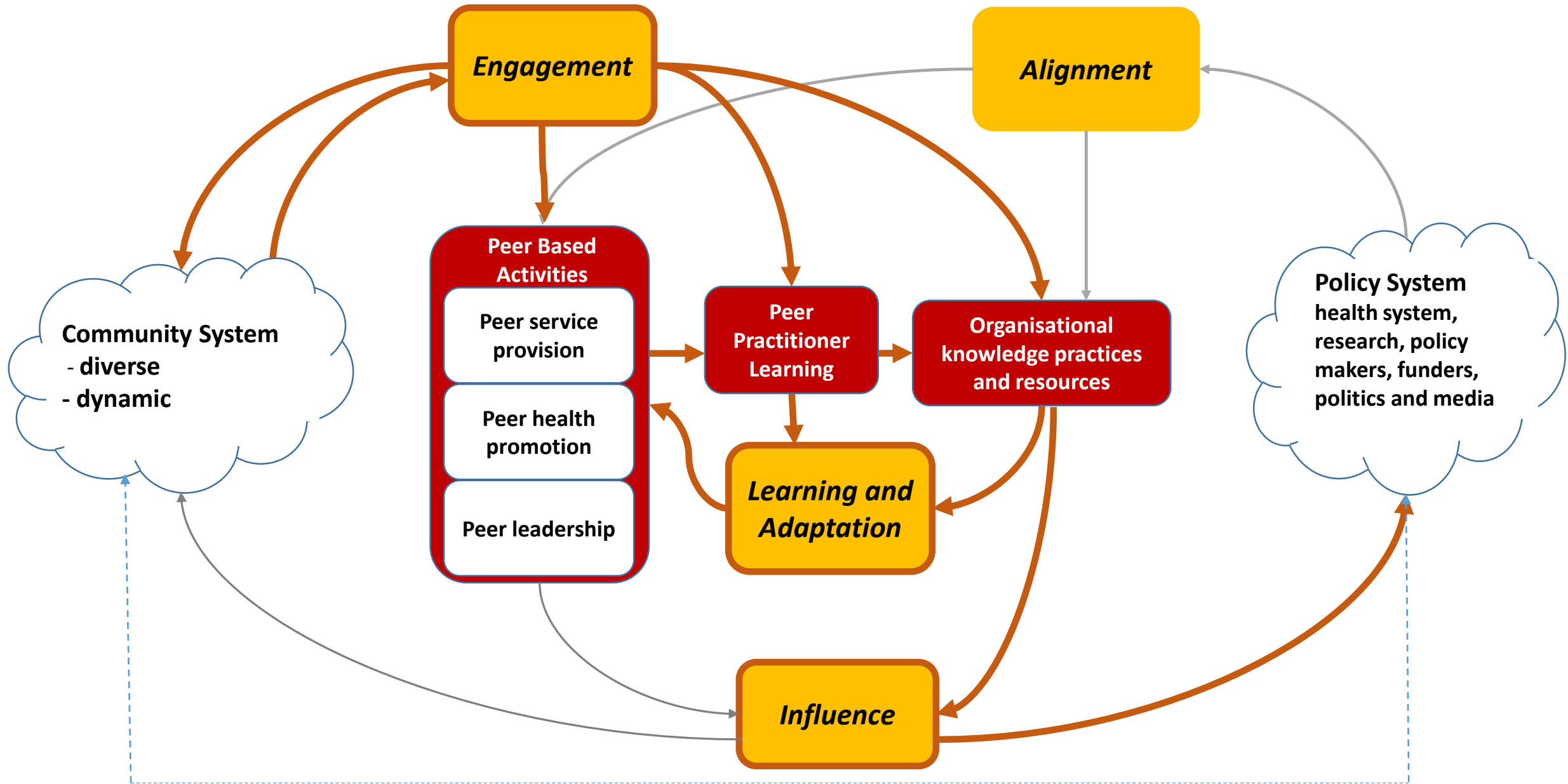


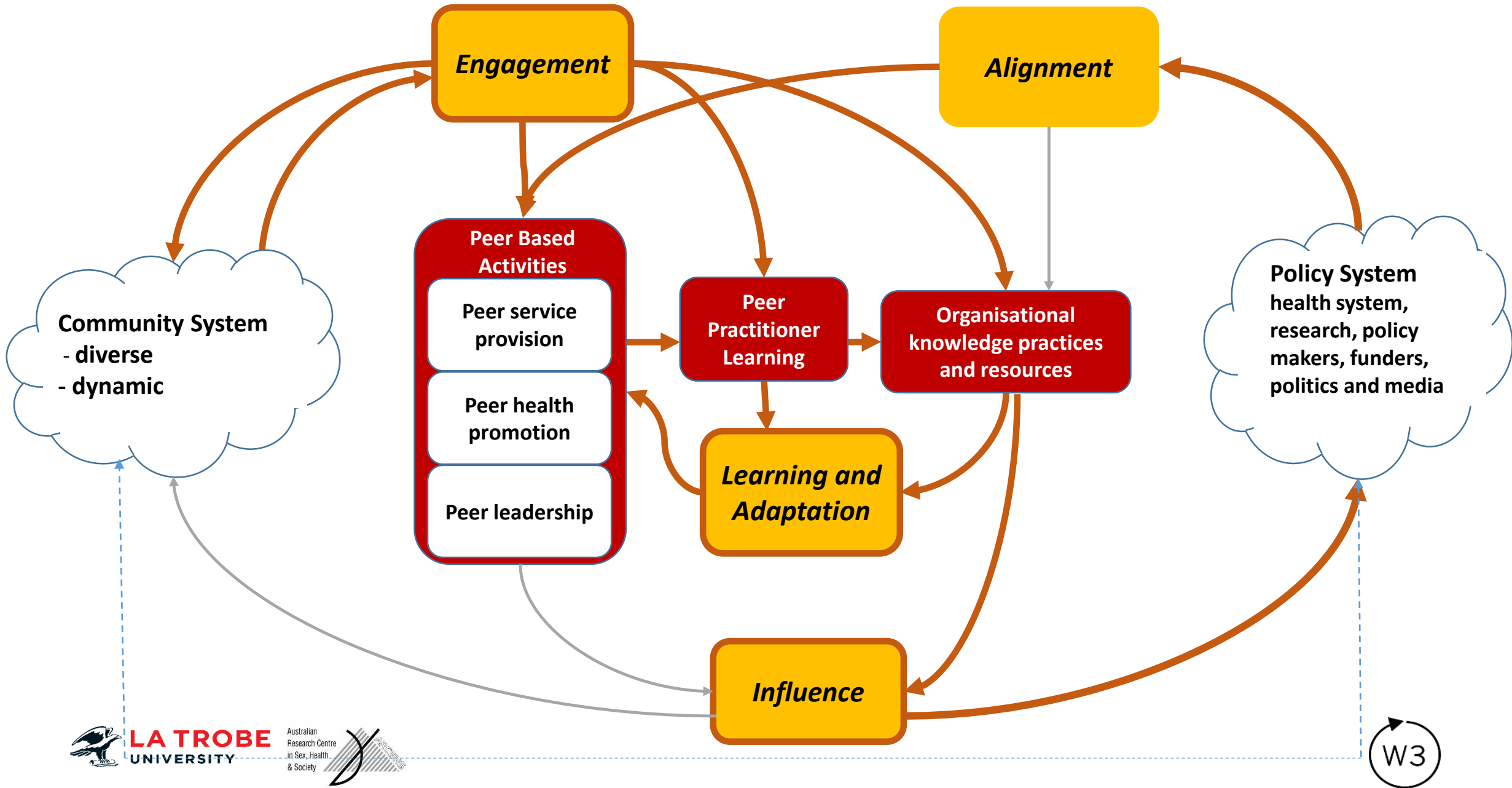












The four key functions are things that need to be happening for a program to be effective and sustainable in a constantly changing environment.

Function	Definition	
Engagement	How the program engages with community to maintain its understanding of the diversity and dynamism of needs, experiences and identities in its target communities.	
Alignment	How the program picks up signals about what's happening in its policy environment and uses them to achieve stronger alignment, synergy and partnerships.	
Learning and Adaptation	How the program uses peer skill to change and refine its approach according to new insights from engagement and alignment.	
Influence	Community	How the program participates in the community's existing ways of doing things to promote new ways of doing things.
	Policy	How the program achieves or mobilises influence on processes and outcomes within its policy environment.

Functions

↳ Indicators that the function is occurring
(quality and impact)

↳ tools and practices for monitoring
that are practical and sustainable in
small peer organisations

In closing.....

In a rapidly changing landscape, timely and persuasive community insights will be key

Recognise peer-led organisations as active participants and drivers within community and policy systems

Evidence that values this will more clearly demonstrate the role of peer and community led organisations.



Open access journal paper

- Brown, G., Reeders, D., Cogle, A., Madden, A., Kim, J., & O'Donnell, D. (2018). A Systems Thinking Approach to Understanding and Demonstrating the Role of Peer-Led Programs and Leadership in the Response to HIV and Hepatitis C: Findings From the W3 Project. *Frontiers in Public Health*, 6(231). doi:10.3389/fpubh.2018.00231
- Go to google scholar and type “W3 Project Graham Brown”

Thank you

- Australian Federation of AIDS Organisations
 - Australian Injecting and Illicit Drug Users League
 - Harm Reduction Victoria
 - Living Positive Victoria
 - National Association of People Living with HIV/AIDS
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 - Thorne Harbour Health / Victorian AIDS Council
- **W3 is funded by the Australian Government Department of Health**



Living Positive Victoria – Peer Navigator Program

	Outputs / Process	Outcomes
Engagement	<ul style="list-style-type: none"> • Peer Navigators are identifying changing experiences of newly diagnosed. • Clients are offering suggestions for improving peer navigator program or clinical services. • Increasing word of mouth and referral to peer navigator program. 	<ul style="list-style-type: none"> • Analysis of client data identifies who is being reached and who is currently not represented.
Alignment and Partnership	<ul style="list-style-type: none"> • 70% of clinic staff report peer navigator program is an asset to their clinical practice. • Case examples of health service adaptation or reorientation with the support or participation of the peer navigator program. 	<ul style="list-style-type: none"> • 70% of clinics demonstrate culture, environment and referral protocols that support an effective peer navigator program.
Learning and Adaptation	<ul style="list-style-type: none"> • Peer insights are collected are regularly collated and packaged to refine program and support peer leadership advocacy efforts. 	<ul style="list-style-type: none"> • Indicators of quality peer interaction and peer skill are maintained across 80% of client sessions.
Influence	Community <ul style="list-style-type: none"> • Increase in clinical engagement indicators for peer navigator clients. • Increase in endorsements or referrals to peer navigators within social media. 	<ul style="list-style-type: none"> • 60% of clients report increase confidence with health providers, disclosure,, resilience and quality of life.
	Policy <ul style="list-style-type: none"> • Increased interest from non-participating clinics in the peer navigator program. 	<ul style="list-style-type: none"> • Clinics seek and act on community insights from Peer Navigator program.

Living Positive Victoria – Phoenix Workshop

Function	Indicator	Source/data
Engagement (process/quality)	<ul style="list-style-type: none"> Diversity of PLHIV participating Baseline resilience, health literacy and QoL Quality of peer interactions 	<p>Participant pre eval</p> <p>Facilitator completed quality feedback</p>
Alignment and partnership (process/quality)	<ul style="list-style-type: none"> Organisations referring to Phoenix Alignment of messages on key topics 	<p>Profile monitoring</p> <p>Participant feedback</p>
Learning, Adaptation and peer skill (Process/quality)	<ul style="list-style-type: none"> Changing dominant topics Peer interaction, relevance, experience Facilitation and peer skill Tracking of emerging topics raised in workshops 	<p>Facilitator feedback</p> <p>Participant feedback</p>
Influence (Impact)	Community <ul style="list-style-type: none"> Resilience, health literacy and QoL Word of mouth referral 	<p>Participant post eval</p> <p>Community profile monitoring</p>
	Policy (Leadership) <ul style="list-style-type: none"> Collation of peer insights shared within LPV, and with partner organisations in sector Partner orgs seeking advice/insights 	<p>Phoenix monthly/annual reports</p> <p>Policy / advocacy</p>

Please Rate the Workshop on the Below Factors

Group Factors		
1. Participants report being satisfied with workshop		
2. Observed participants engaging with workshop activities		
3. Observed supportive dialogue between participants (validation, sharing experiences)		
4. Group agreements observed by participants		
5. Tensions positively resolved by participants (if any)		
6. Participants were inclusive during workshop activities		
7. Participants appear to have improved confidence (body language, talking about HIV)		
Program Content Factors		
8. Observed participants engaging with workshop activities		
9. The "anxieties and wishes" participants expressed were covered by workshop		
10. Participants appear to have improved confidence (receiving/giving feedback, talking about HIV, stigma and community engagement and volunteering).		
Facilitator Factors		
11. You had enough knowledge + experience as a peer		
12. You had enough skills + capacity as a facilitator		
13. Your rapport with participants		
14. You felt supported as a facilitator		
15. Your sense of satisfaction/accomplishment in delivering the workshop		

quality of peer interaction between participants

Peer relevance and engagement with content

Peer skill and facilitator skills

Facilitator Completed

- Example open questions for note
- Were there any particular areas of interest from participants?
- Did any new/ emerging issues from participants come up during the workshop?
- What were the significant events/problems encountered?