

PROJECT EVALUATION OF THE STEPPING STONES HIV PREVENTION PROGRAMME HELD IN THE COMMUNITY CENTRE WALUNGU, SOUTH KIVU.

Presented by:

Justin Sheria Nfundiko and Vindicien Murhabazi Tchubaka

Executive Summary

The United Nations 'Inclusive Growth and Sustainable Development'
Programme has organised this study in order to appreciate the progress that has been made by this project and to determine the level achieved, using project indicators.

The present study chose the following specific objectives:

- To describe the knowledge, attitudes and practices of a sample that is representative of the direct beneficiaries of the project and their relatives on:
 - Sexually transmitted infections (STIs) and HIV infection (modes of transmission of HIV and measures of prevention against transmission)
 - The utilisation of services of prevention and treatment of HIV and AIDS.
 - Sexual behaviours
 - Gender relations / women's rights
 - Relations with people living with HIV (stigmatisation/ discrimination)
- To compare the current data with data from the baseline study in order to verify level of achievement on project indicators.
- To collect the opinions of participating members of the community about the Stepping Stones Training Programme and its implementation.
- To provide guidelines for the UNDP and the national programme in order to make strategic choices for the next Stepping Stones project (priority activity).

The evaluation process was conducted in four phases:

Preparation Phase:

- Development of terms of reference for the results of a study into the Stepping Stones Project,
- o Recruitment of consultants,
- Signature of contract by chosen consultants.

Research Phase:

- Research about the Stepping Stones methodology and implementation,
- o Development of study protocol by the consultants,
- o Determination of indicators,
- o Reading of Monitoring and Evaluation plan,
- o Analysis of the results of the baseline study,
- Development of a data collection plan.

Fieldwork Phase:

- o Implementation of work plan for data collection,
- o Development of tools for data collection,
- o Data collection in health facilities and BCZS,
- o Training the interviewers,
- o Pilot test the questionnaire,
- Administrative organisation of the written questionnaire and interviews,
- Organisation of focus group sessions.

Summary Phase

- o Analyse and process the collected data,
- o Report writing.

Phase de dissemination and monitoring :

- o Return the report findings to the community of Walungu,
- Validation of the report by the UNDP and PNMLS (Multisectoral National Programme for the Fight against AIDS),
- o Release of the final report,
- Publication of the report by the UNDP.

Methodology.

Our study is a descriptive, cross-sectional study.

The target groups for our study are:

- Beneficiaries of the Stepping Stones project activities are of various age groups and socio-professional categories. They include bikers, butchers, secondary school students, police, spiritual leaders and religious leaders, health workers, people living with HIV, voluntary blood donors, traders, journalists, administrators and local NGO staff,
- People that have relationships with the beneficiaries of the Stepping Stones Training (mother, father, husband, etc.)
- o Married men, working in mines;
- Key informants (leaders of religious denominations, community leaders, political administrative officials, feminist associations and people living with HIV)

The location for this study is The Walungu Centre, Head of the territory of Walungu in the South Kivu province. The results have been collected by an anonymous and confidential self-administered questionnaire, supported by closed question interviews.

The survey targeted people who have been trained in the Stepping Stones approach and family members who were able to access information from those who had been trained. The sample size is 183.

To determine the qualitative and quantitative indicators to effectively understand the situation in regards to HIV and other sexually transmitted infections, gender based violence and the discrimination of people living with HIV in the designated site; we chose to combine three research techniques:

- Using a written questionnaire: A questionnaire on knowledge, attitudes and behavioural practices in relation to HIV and gender was completed. This questionnaire was disseminated. The interviewer met with the respondent to collect the answers to different questions. The interview was conducted door to door in the households of Stepping Stones training participants, members of their families and their loved ones.
- O Survey Documents: The literature review was conducted by collecting data on the use of services for HIV prevention and care at the point of service delivery (Health Centres and General Referral Hospital Walungu) and from data collected at the central Bureau of Health Zone. Only the period from 2009 to 2012 was considered. A comparative analysis of collected data for the period before the implementation of Stepping Stones training and for the period afterwards has been completed.

The consulted tools are the records of the health facilities and activity reports. We have, equally, drawn upon the report of the quick survey on gender and HIV in the community of Walungu that was made in 2011 before the implementation of Stepping Stones.

The Monitoring and Evaluation plan for the implementation of Stepping Stones was also used in the literature review to enable better understanding of the indicators of this project.

 The focus group: The emphasis for this focus group, which is a qualitative method, was to gather small groups from the study population to talk about the above topics.

In the study, the focus groups approach was used to respond to the following objectives:

- To collect information on organisational problems in their response to HIV in the community of Walungu.
- To collect opinions and attitudes regarding the implementation of Stepping Stones as a community based HIV prevention project.

• To collect feedback from participants on the achievements and the results of the UNDP project.

For the realisation of this study, the team comprised of:

- A principal consultant
- A supporting consultant
- A Head Interviewer
- 10 interviewers
- 2 Data encoders

Main Conclusions

The UNDP, by means of their Programme for 'Inclusive Growth and Sustainable Development' is supporting the implementation of this community based HIV prevention project in Walungu to respond to its mandate under the UNAIDS technical division of labour.

The results obtained show progress in terms of knowledge, attitudes and behavioural practices of the target groups in the context of HIV/AIDS, knowledge of gender-based violence and the rights of women. Thus, UNDP has contributed to the achievement of four objectives from the Millennium Development Goals: MDG 3, MDG 4 and MDG 5 MDG 6.

Considering these aspects and having demonstrated our results, we can affirm that the introduction of the Stepping Stones Methodology as a community based HIV prevention has contributed to behaviour change among community members. The role models and other key actors in the community have expressed an appreciation of the Stepping Stones approach as part of a process of effective change.

Improvement was recorded in the sharing of information on HIV / AIDS, reducing stigma and discrimination related to HIV, combating violence based on gender, and the identification of cultural barriers and customs that correspond with increased HIV transmission.

Religious leaders should be encouraged to talk about the issue of HIV in their respective churches. We believe that these churches, in terms of their influence on their followers who are residents of Walungu, can help to change attitudes and practices that can make them vulnerable to HIV and which cause them to stigmatise people living with HIV.

In light of the improvements shown by the results after the implementation of this project in Walungu, we propose to encourage the UNDP DRC to expand its use of community based HIV prevention by integrating the Stepping Stones

approach in other communities and territories of South Kivu, and even to other provinces of the DRC where UNDP operates.

Strengthening the community based response in the fight against HIV / AIDS contributes to the effectiveness of the national level response to HIV / AIDS in the DRC. Therefore, resources must be mobilized so that the extension of the implementation of this project to other communities is a priority for the UNDP DRC's 'Inclusive Growth and Sustainable Development' Programme.

Recommendations

For the United Nations Development Programme in the DRC:

- Mobilisation of resources for the implementation of a collaborative project with other agencies such as UNICEF, WHO, WFP, FAO, UNFPA according to the UNAIDS technical division of labour in order to improve access to HIV treatment and prevention services as offered by health facilities and community based organisations. PMTCT services deserve special attention.
- Create mutual solidarity between the beneficiaries of the Stepping Stones training and the people living with HIV in Walungu to strengthen community cohesion.
- Develop a Stepping Stones approach for young people within the Information Centre for Peace.
- Support the organisation at quarterly intervals for a joint monitoring mission by the Project PNMLS, NAP, the Central Bureau of Health Zone Walungu and local management committees.
- Expand the use of community based HIV prevention programmes through the use of Stepping Stones in other administrative territories of South Kivu and in other provinces.
- Clearly establish links between the HIV component of The Access to Justice Project and the 'Inclusive Growth and Sustainable Development' Programme.

For the National Multi-sectoral Programme against AIDS (PNMLS) and the national AIDS Programme (NAP):

- Provide advocacy for maintaining adequate provision of condoms and organize the best method of distribution to improve access to condoms and to promote increased and consistent use.
- Ensure input into the provision for HIV screening health facilities, to avoid discontinuities in provision.
- Organize mobile VCTs for mass and community screening services to improve access to screening services.

- Train and/or re-train the service providers around ethics and moral code to ensure the confidentiality of results of the clients and / or patients.
- Reinforce education and information aimed at men regarding the importance of testing for HIV.
- Reinforce education and information about the advantages of having discussions about HIV and AIDS within a family environment.
- Organize quarterly meetings for consultation between all of the actors of the project, the community leaders and the management committee for coordination and monitoring of the project.
- Demand that the local management committee share information on the project with the Central Bureau of Health Zone Walungu.

For all the development partners and community leaders:

- Reinforce sensitisation about human rights.
- Educate and train members of the community on equal rights and gender.
- Ensure the involvement of women in every aspect of community life.
 Make a marked contribution to familial dialogue concerning issues of HIV.

Testimonies from participants of the Stepping Stones Trainings

1) Testimony of a pastor, participant of Stepping Stones training and resident of Walungu.

In our Christian community, we did not tolerate the use of condoms. We were convinced that it encouraged sexual practice and promoted debauchery among members of the church.

Indeed, one Monday morning when I awoke and went to the toilets I found an unused condom hidden in the toilet. I went back to my bedroom to collect a machete in order to pick up this daemon thing carefully. I asked myself which one of my children would have had the nerve to put this condom in the toilet and risk not only their faith but my reputation as a pastor in Walungu. My suspicions went to my 20-year-old son.

I was very angry. I went to the door of my son's room with my well-sharpened machete in hand. I was ready to punish this son who would use a condom in the pastor's house who is the man God. The young boy heard me shouting insults and threats. He left the room in tears after promising not to reoffend. To appease my anger, I cut the condom into pieces in front of him.

After this event, a Stepping Stones facilitator invited me to a workshop. After two weeks, I had learned a lot about the importance of using condoms and about HIV in general.

All the myths I had believed around condoms have now been dispelled. You will understand that I now speak easily of condoms. They can be used in my rooms without any shame and I can demonstrate its use to all of you: Youth, women and old.

It protects us against unwanted pregnancies, sexually transmitted diseases etc. Moreover, as part of the Community of Baptist Churches in Central Africa (CEBCA), I have requested that they hold Stepping Stones training workshops once a week in order to reach more worshippers and so that condom use is tolerated by other community, spiritual leaders.

2) Testimony about Stigma, of which she has been a victim from her family and her community.

After the death of my husband and following on from the economic difficulties, I presented with some medical symptoms including weight loss, stomach pain and a constant headache. Rumours about me being HIV positive were circulated around the community and I was taunted for this same reason. My family and friends abandoned me. I consulted the hospital for heath care after having almost convinced myself that all my symptoms and suffering was a sign that I really was HIV positive. I was very scared and started to secretly expect my own death.

It was only after completing the Stepping Stones training that I was made aware of the only way to find out your HIV status: that is by going for an HIV test at a health centre.

I decided to access the voluntary testing and counselling services. Here I was informed that I am HIV negative and therefore my weight loss was not a sign of AIDS. This screening process has now been integrated into the community via community meeting. I am healthy again and have regained my weight.