



## Quality Action CASE STUDY

### 1. Name and country of the organisation

*(Please state the name and the country of the organisation that implemented this practical application of a QA/QI tool as part of Quality Action. We do not publish this information unless you agree. You can remain anonymous by adjusting the settings at the end of this form).*

STI AIDS Netherlands (Soa Aids Nederland)  
Ethnic Minority Program  
Keizersgracht 392  
1016 GB Amsterdam  
The Netherlands

### 2. Authors of the case study and contact details

*(Please provide then name of the author(s) of this case study and any contact names, Email address or websites where readers can access more information about this practical application of a QA/QI tool).*

Bertus Tempert  
Program Officer Ethnic Minorities/ Project Manager Diversity Website  
Keizersgracht 392  
1016 GB Amsterdam  
The Netherlands  
btempert@soaaid.nl tel. +31 20 8511776

### 3. External support (facilitators/partners/technical assistance)

*(Please list the names of other organisations and/or people who were involved in this practical application of a QA/QI tool, e.g. project partners, technical assistance, external stakeholders etc..).*

- Hub & Spokes STI AIDS Netherlands: advice, planning, implementation, funding
- Program Manager: responsibility, funding, advice, advocacy
- Communication & Policy Officer Ethnic Minorities: advice, planning, implementation, networking, research
- Secretary of the Ethnic Minority Program: communication, contacts
- Community Based Organisations: advice, assessment, referral, linking
- Project Positieve Krachten Bundelen (Mara Foundation Rotterdam): assessment, referral, linking
- Ethnic minority media organisations: advice, assessment, sponsoring, linking
- National Institute of Public Health, Stichting HIV Monitoring, HIV Association, Municipal Health Services
- Gilead: sponsoring, funding
- Translation agencies

### 4. Project/Programme and key population/target group addressed

*(Please describe the project/programme to which you applied the tool and the key population/target group addressed).*

Project: Website [www.soaaid.nl/diversiteit](http://www.soaaid.nl/diversiteit)

The website was built on the outcomes of desk research and focus groups done in 2012. The outcomes were used to choose the content and the layout (look & feel) of the website. This sub-website 'Diversity' is part of the general online strategy of the organisation. We use the hub & spokes-model (Forrester Research) to carry out the online activities and there are regular meetings to discuss the process, the outcomes and content of the website.

Training on content management and community management were followed by the project manager. In the project plan, targets are mentioned and monitored. Once a year, the results of the project are measured.

Number of visitors and other data on how long and what pages were visited are available monthly.

Key populations/target groups:

Ethnic Minorities (EM) living in The Netherlands, and especially:

- 1) Dutch nationals of Surinamese and Antillean heritage (higher prevalence of STIs and HIV)
- 2) Dutch nationals from Sub-Saharan Africa (higher prevalence of HIV)
- 3) Men who have sex with men (MSM) from ethnic minority backgrounds (higher prevalence and bigger taboo)
- 4) Ethnic Minorities living with HIV (bigger taboo and outdated image of PLWH)

## 5. Goals/aims of applying the QA/QI tool

*(Please list the goals you wanted to achieve with the practical application of the tool).*

- 1) To provide ethnic minorities (EM) living in The Netherlands with online information on STIs, including HIV, and sexual health
- 2) To encourage EM living in The Netherlands, who are at risk to do an HIV test or STI test, and, if necessary to get treatment.
- 3) To break the taboo and fight prejudices that surround (living with) HIV
- 4) To provide additional information on STIs, HIV and sex focussing on the specific needs of EM and their different backgrounds, like religions, cultural habits, gender issues, honour-based violence, circumcision (male and female), stigma and myths around HIV and sex, and the healthcare system in The Netherlands. Specific groups like asylum seekers, illegal immigrants, men who have sex with men and young people from ethnic minority background
- 5) Increasing the number of EM having access to online information on STIs, HIV, and sexual health
- 6) increasing the number of EM who are at risk, doing an STI or HIV test
- 7) Increasing the number of EM who have an STI or HIV get treatment
- 8) Fewer people from ethnic minority background living with HIV experience stigma and taboo 9) 1.500 visitors per month

## 6. Tool and methodology used

*(Please indicate which of the five tools you used (Succeed, QIP, PQD, PIQA, Schiff) and briefly sketch out the steps and measures of how you applied it).*

Succeed

I filled out the questionnaire. Next step will be a meeting with most important stake holders.

In the questionnaire, the next steps on improvement (on the quality and the effect ) of the website are described. Roles of the different partners and stake holders are more clearly mentioned as well as a time-frame.

## 7. Results and benefits of applying the QA/QI tool

*(Please describe what resulted from applying the tool and if and how your project/programme benefitted).*

By applying the tool, the strengths and weaknesses of the project became more clear. It became very clear that at this point it is difficult to measure the effects and that we have to focus more on this.

- 1) A greater involvement this year of (representatives from) ethnic communities and ethnic media. (The last focus groups were held in 2012).
- 2) To update the content on the website
- 3) To use more illustrations, pictures and videos
- 4) More active linking to other websites, both from CBO, ethnic media and professionals
- 5) Research on needs and challenges for MSM from ethnic minority backgrounds
- 6) To find tools/ways to measure the effects and outcome of the website more clearly.

## 8. Recommendations

*(Please describe the lessons learnt from positive and negative experiences during the process of using the tool itself and about the quality of projects/programmes like yours).*

Lessons learnt:

Positive:

- 1) The research on the needs of the project (desk research and focus groups) and the initial phase of launching the website
- 2) Involvement of target groups in choosing content and layout (look&feel) of the website
- 3) Great involvement of target groups in making the short films on healthy living with HIV
- 4) Increasing the number of unique visitors each month (especially in comparison with the formal website Life2live)
- 5) Project fits within and is part of the general online strategy of STI AIDS Netherlands (hub & spokes model)
- 6) Filling out the questionnaire gave a clear picture of what is needed in order to make the project more effective/successful

Negative

- 1) Status quo in involvement of target groups. Has to be renewed.
- 2) Limited involvement of stakeholders and therefore (too) big a responsibility on one person. Recommendation: shared responsibility, greater involvement of others
- 3) It is difficult to exactly measure the effects and outcomes of the website. (how many more people got tested, how many more got treatment, was stigma on HIV reduced) Recommendation: develop clearer measuring tools

**Please indicate how you want this case study to be published:**

- ☒ *I want this case study to be published mentioning the names of countries, organisations, people and contact details/websites in the text above.*
- ☐ *I want this case study to be published anonymously, meaning that names of countries, organisations, people and contact details/websites in the text above will be removed by the editors before publishing.*
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*Please return the filled in document to your country contact  
(who will then forward it to their WP 6 contact).*

**Thank you!**