

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 We do not publish this information unless you agree.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.)

Volunteer Unit

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.)

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.)

Technical Assistance was provided by two people from a partner organisation.

4. Project/programme

(Please briefly describe the project/programme to which you applied the tool.)

The Volunteer Unit supplies the HIV programmes and units with volunteers for their projects. Every year, we run an assessment of the needs of each unit in the organisation regarding volunteers. We, in parallel, record the skills, interests, availability and ideas of our volunteers. These skills vary from being able to provide medical or psychological support for the beneficiaries projects, translating documents into several languages to offering various lessons (tutorials, dance classes etc) to the beneficiaries.

One of the projects of the programme on HIV/AIDS is to support the needs of HIV positive homeless people staying at a halfway house, using volunteers. The needs assessment at the house revealed that this year, there was a need for a physiotherapist and for private tutorials for lessons in the main and foreign languages (a very common activity in our culture, which usually is expensive) for the children of homeless HIV positive people living in the house. We contacted our volunteers (about 250), 4 of who responded positively regarding the lessons. A physiotherapist at first offered to provide his services, but because of stigma and discrimination, when he realised that the beneficiaries were HIV positive, he denied his services, even though both the staff of the Volunteer Unit as well as the staff of the halfway house offer training and information regarding HIV, transmission etc.

The goals of this programme are to engage volunteers in settings where they can both offer help to HIV positive people, but also learn more about HIV and social stigma. Hence we hope that stigma against HIV positive people may be eliminated.

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

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

To evaluate our project and identify areas that need improvement.

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.)

One of the group members of the project was trained on the national level in the *Succeed* tool. This member presented the tool to the other members of the team and, when the tool had become clear to all members, we filled in the questionnaire of the *Succeed* tool.

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.)

We identified areas that needed improvement, such as the need for more team building activities aiming to engage the stakeholders more.

There is also a need to create a training programme for the volunteers, which should involve more experiential activities regarding the social stigma and discrimination that HIV positive people face.

Finally, we considered measuring knowledge and attitudes of our volunteers toward HIV before and after their work with HIV services.

We also identified the strong points of our programme. For example, we collaborated with the legal unit of our organisation and various NGOs to create legally binding confidentiality agreements for volunteers who work with HIV positive people.

We did not consider engaging the volunteers in the application of the tool. *Succeed* is a plan-do-check-act activity that we aim to incorporate in our everyday work, and in the next phase we will make sure the volunteers also have the opportunity to participate.

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.)

The tool helped us clarify our programme goals and specific methods for its improvement. It also made us feel confident about the strong points that arose from the using the tool. It was a very time-consuming process and often we found that parts of the tool were not applicable to our project, however we realise that a single tool cannot be 100% useful for every possible HIV-related project. The members who had not received training in the tool found it more frustrating than the member who had received the training. Overall it was a useful experience.

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Please send the filled in case study to carolin.vierneisel@dah.aidshilfe.de

Thank you!