Glossary

Term	Definition
Activities	Actions taken to achieve goals and objectives.
Aims / Goals	The results we are trying to achieve; a goal is the terminal point or what you aspire to do; organisational goals are strategic and SMART (Specific, Measureable, Attractive, Realistic and Time bound).
Capacity Building	Increasing the ability of a person, group or organisation to perform certain tasks or respond to certain situations; includes increasing knowledge and skills as well as changing perceptions, attitudes and behaviours.
Charter	A document listing basic norms that are agreed across boundaries.
Epidemiology	Study of the causes and distribution of infections, diseases or health problems in populations and the application of this study to their control.
Epidemiological data	Statistical information about the incidences and distribution of HIV (surveillance); analytical and behavioural studies on health determinants, health promotion and HIV prevention.
Evidence	Often published in peer-reviewed journals and generated according to scientific standards, often using randomised control trials, with a focus on quantifiable, measurable effects; may change in light of new evidence (see practice-based evidence).
Evidence-based practice	Choosing the approaches, interventions and methods most appropriate to a given situation and implementing them at the highest possible level of quality; traditional scientific evidence is not always available or conclusive, especially for structural, social and behavioural interventions; a lack of availability of what is regarded as scientific evidence does not mean an approach or method is ineffective, nor should it stifle innovation; in addition to scientific evidence, other forms of knowledge are valuable, such as local cultural knowledge and practice-based evidence.
Goals / Aims	The results we are trying to achieve; a goal is the terminal point or what you aspire to do; organisational goals are strategic and SMART (Specific, Measureable, Attractive, Realistic and Time bound).
Key populations	Those people at higher risk of infection and to involve in the response (people living with HIV are also a key population in HIV prevention); distinct from, but may also include, vulnerable and at risk populations; those who are disproportionally at risk of contracting HIV are identified by the WHO as men who have sex with men, transgender people, people who inject drugs, sex workers and people in prisons and other custodial settings.
Kit	A set of useful tools, instruments or other practical components that are combined in order to assist with carrying out a particular task or to serve a particular purpose.
Objectives / Sub-goals	Shorter (than aims / goals) term measureable targets to achieve the long term or strategic goal.
Participation (a key principle of Quality Action)	Important as no single point of view can give an accurate picture of the context in which a HIV prevention activity operates; target group participation is especially significant and a key element of the Quality Action tools; if the project/programme does not respond to the needs and context of the target groups it is less likely to be effective; involves stakeholder involvement, communication, consultation and facilitation, team and group work, and empowerment.
Practical Application	The use of an approach, theory, tool, instrument or process in the course of ordinary, day-to-day professional practice (in this case practically applying the tools to HIV prevention projects / programmes / activities).
Policy	An agreed or imposed direction governing action in a certain area; it can apply to and be enforced in a particular jurisdiction (such as a nation, state, region, county, or municipality) or self-imposed as a more or less binding guideline by any organised group of people (institution, NGO, club or association).
Practice-based evidence	Derives information on the effectiveness of interventions from the structures and logic of the practical work; indications for the effectiveness of interventions are tested in a particular context, at a particular point in time and at a particular location; this localising of evidence has the potential to produce new insights which can be immediately integrated into practice and contribute to a process of on-going improvement; evidence and practice inform each other in a continuous cycle of quality improvement (see evidence-based practice).
Programme	Combinations of interventions and/or activities that work together to achieve a change in health status such as reducing new HIV infections; examples are national or regional HIV prevention action plans or a comprehensive service (e.g. incorporating testing, counselling, outreach, needle exchange and condom distribution).

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Project	A single intervention with a beginning and end or regular cycles (e.g. a health promotion campaign or an outreach intervention); projects are usually designed to influence a particular determinant of health (e.g. increasing health knowledge or improving access to condoms and lubricant).
Quality	Achievement of desirable goals in health outcomes in a manner consistent with current professional knowledge and standards.
Quality improvement	Quality improvement formally identifies, implements and evaluates strategies to maximise the potential of an activity, including increasing its capacity to fulfil and exceed quality standards. It can be used at any stage of an activity and always aims for improvement, no matter what the starting point is. Quality Improvement may include quality assurance, which formally monitors the quality of services and activities against standards (where they exist), including review, problem identification and corrective action. Quality assurance processes are particularly suitable where standardised services are offered, such as medical and clinical procedures (e.g. testing and counselling). Quality improvement highlights what we are doing well while offering clear steps to improving quality, aims to ensure that decisions about what to do and which methods to use are based on the best available evidence, knowledge and experience, and ensure that the chosen activities are planned, implemented, monitored and evaluated to maximise their potential affect.
Self-reflection (a key principle of Quality Action)	Stepping back to critically examine how well our efforts actually work; reflections are rarely structured, rarely look at all aspects of a project/programme, rarely include all relevant stakeholders, are rarely documented and rarely lead to systematic changes; rigorous self-reflection is a prerequisite for improving quality because the assumptions we protect most fiercely are often the most rewarding to question; cannot be imposed by or on others; it is a voluntary process which may require courage and a supportive environment; important to document that we have and will continue to do our best with our interventions.
Stakeholder	A person representing a group or organisation with an interest in a particular activity; the interest may arise from having responsibility for, actively contributing to, benefitting from or being impacted by the activity.
Standards	Set of criteria against which an intervention is compared or measured; normally based on general consent or established by custom or authority as being the benchmark for quality; in the wider quality field they are used where activities can be described in detail and reproduced accurately and repeatedly; HIV prevention is very context-dependent and the rigid transfer of standardised methods from one context to the next may not work in the same way; standards that emerge during local quality improvement practice can be documented to provide practice-based evidence; they may be specific to an individual project or they may be useful for a particular method across a range of contexts or for a variety of methods within a single context.
Target groups	Those who serve as the focal point for a particular project/programme; two categories (some people may belong to both) - beneficiaries (those you directly want to target) and intermediaries (those you involve in the project/programme because they can effectively reach the beneficiaries); may convey a non-participatory or top-down approach (participation is a key principle of Quality Action).
Tool	We use the word "tool" to describe a structured, documented approach to quality improvment using a practical, step-by-step process. Tools can be paper-based or electronic and often consist of: ➜ check lists ➜ questionnaires ➜ facilitation guides for stakeholder input
Vulnerable populations	Those who are more vulnerable to HIV in specific situations or contexts, such as societal pressures or social circumstances; includes migrants, adolescents or prisoners.