

Evaluating the WhizzKids United 'On the Ball' Intervention Special Report



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Acknowledgments

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1. Theoretical Background

Evaluating HIV/AIDS Prevention

The ultimate goal of WhizzKids United (WKU) is to prevent HIV infections amongst youth, and enable those youth already HIV-positive to manage the infection and maintain their health. In order to rigorously evaluate whether the programme is achieving this goal, it would be necessary to conduct a longitudinal randomized controlled trial (RCT) study. This would involve following two groups of adolescents – one which had participated in WhizzKids United and one which had not – over a period of many years, testing them repeatedly for HIV, and taking CD4 counts and viral loads of those who were HIV-positive. The two groups would then be compared to see if HIV incidence and prevalence were lower in the WhizzKids United group than the control group. HIV-positive subjects in both groups would also be compared to see if CD4 counts remained higher, and viral loads lower, in the WhizzKids United group than the control group.

This kind of study would not only take many years to implement; it would require a great deal of expertise and human resources, and would therefore be very expensive. Thus such a study has not been a feasible option so far.

Evaluating Behaviour Change

However, there are other ways to evaluate the impact of WhizzKids United which are far simpler and less expensive. WKU is fundamentally a programme of health promotion through behaviour change. The primary behaviours that the programme seeks to affect are:

- (1) HIV risk behaviours (early sexual debut, unprotected sexual intercourse, and multiple concurrent sexual partnerships)
- (2) HIV counselling and testing behaviours (regular uptake of HIV counselling and testing).

The links between these behaviours and the ultimate health goals are very well-established in HIV/AIDS literature. Young people who engage in HIV risk behaviours are more likely to be infected with HIV than young people who avoid these behaviours. Similarly, young people who undergo regular HIV counselling and testing are more likely to maintain their health (and also less likely to transmit HIV to others). Therefore, if it can be proven that WKU is successful in inducing sustained behaviour change, one can infer that WKU is successful in inducing the ultimate health goals.

Evaluating behaviour change is, however, still not a straightforward task. Getting accurate data from adolescents concerning their sexual behaviour is very challenging, especially when they are surveyed in a cramped classroom setting; and there are also ethical constraints to consider. We have come up with two solutions to these challenges which have been used in our evaluations.

Evaluating Behavioural Predictors

One solution involves taking a step back and looking at behavioural predictors instead of behaviour itself. Behavioural predictors are aspects which behavioural science has identified as determining human behaviour. Traditional theories of behaviour identify knowledge, attitudes and beliefs as major behavioural predictors. More recent theories, including the renowned Social Cognitive Theory, also name self-efficacy (belief in one's own ability to behave in a

healthy, effective manner), risk perceptions, outcome expectations, goals, and social norms among the most important behavioural predictors.

A simple but effective way to measure behaviour change without asking invasive questions about sexual behaviour (and possibly getting inaccurate responses) is to measure change in behavioural predictors. If WKU brings about a change in the factors behavioural scientists believe drive behaviour, then it can reasonably be inferred that WKU brings about a change in behaviour as well.

This is the theoretical rationale behind the evaluation of the WhizzKids United 'On the Ball' intervention which was conducted in January – April 2010.

Mobile Research

A second, more exciting solution to the challenge of ethically collecting accurate data on adolescent sexual behaviour involves the use of cutting-edge field research technology. A South African firm called Clyral has created a research solution called Mobile Researcher which allows surveys to be conducted using mobile phones. Once the subject completes the survey, the data is instantly uploaded to Clyral's secure server. A mobile phone screen is easy to shield from prying eyes, and anonymity and confidentiality are thus much easier to ensure. Respondents also tend to enjoy the mobile research experience much more than the laborious process of filling out a paper questionnaire.

Thanks to the support of the Medical Research Council of South Africa, WKU obtained 50 Nokia mobile handsets to use in programme evaluation. This technology was used to great effect in the Health Behaviour Survey of Edendale Learners in May 2010, in which data was obtained on HIV risk behaviour, HIV counselling and testing behaviour, and many behavioural predictors ahead of the launch of the WKU Health Academy in June 2010.

2. Quantitative Evaluation

Methodology

We designed a questionnaire to be administered to a sample of WKU participants before and after the school-based 'On the Ball' intervention. Besides collecting basic demographic data, the anonymous questionnaire featured 30 questions covering a range of behavioural predictors relating to the behaviours we sought to change (HIV risk behaviour and HIV testing behaviour). Each question represented a hypothetical outcome of the intervention, covering topics such as knowledge, attitudes, beliefs, self-efficacy, use of leisure time, communication, and gender norms.

Some questions were borrowed from other researchers' health behaviour questionnaires (especially those developed by Prof. Seth Kalichman from the University of Connecticut), while others were generated from interviews or discussions with beneficiaries, or taken from the 'On the Ball' curriculum itself.

Classes participating in the WKU 'On the Ball' intervention in four areas of KwaZulu-Natal were randomly sampled, totalling a sample size of 486. These kids filled out the pre-questionnaire immediately prior to 'On the Ball,' and filled out the post-questionnaire (which contained

identical questions) four weeks after completing the programme. The delay of four weeks was so that any changes observed could be said to have some lasting value.

One other challenge that had to be overcome is the language barrier. More than 95% of WKU participants speak Zulu as their first language, and the majority are not fluent in English. The WKU M&E Facilitator, Ms. Zanele Khanyile, is a native Zulu speaker herself and has over five years' field research experience. She translated the questionnaire into Zulu and each question appeared on the questionnaire in both languages. She also read each question aloud in Zulu for the benefit of those respondents who do not read well in either language. By this method we were able to ensure the respondents understood the questions and their responses; thus we can be confident that the data are of high quality.

Results

The pre-questionnaire responses were then compared to the post-questionnaires using correlation analysis to test whether there was a statistically significant change in the responses from pre to post. The results showed that there was a statistically significant improvement in 19 out of 30 questions – that is, 19 out of 30 behavioural predictors were significantly healthier after the intervention than before. None of the 30 behavioural predictors were significantly less healthy after the intervention than before.

The behavioural predictors that showed improvement included physical activity level, school absences, knowledge of HIV/AIDS transmission and testing, communication and outcome expectations about HIV testing, self-efficacy to refuse unsafe sex, communication about sexual health with parents, intention to delay sexual debut, enjoyment of football, and gender norms concerning sports, sexual violence, and equality in relationships.

Graphs comparing 'before' to 'after' responses (as well as demographic data) can be viewed in the appendix.

This represents powerful evidence that the WKU 'On the Ball' intervention is successful at inducing short-term behaviour change!

3. Qualitative Evaluation

One of the limitations of quantitative evaluation is that a lot of valuable information seems to "slip through the cracks" and is lost. An "Agree/disagree" scale can only capture so much. Quantitative evaluations therefore need to be augmented with qualitative evaluations which ask open-ended questions, allowing beneficiaries and stakeholders the opportunity to freely express their experiences and opinions.

Qualitative evaluation also feeds into further quantitative evaluation, because qualitative data generates hypotheses which can then be tested rigorously using a quantitative approach. Interviews or focus group discussions may suggest outcomes (positive or negative) of a programme which the planners never envisioned. For instance, teachers might report that kids were more attentive in class after enrolling in a life skills programme than before. A quantitative evaluation of beneficiaries might then ask a before-and-after question such as, "How easy is it for you to pay attention in class?" (with a Likert scale response – Very easy / somewhat easy / somewhat difficult / very difficult)

Although the Monitoring & Evaluation Officer has a quantitative background, WKU increasingly appreciates the value of qualitative evaluation tools. The organisation recently purchased a digital voice recorder which is used to capture interviews and focus group discussions, normally of beneficiaries. Prior to this we used a video camera, which was more invasive and required a second person to operate, as well as having a short battery life.

Africaid M&E Facilitator Zanele Khanyile conducted a Focus Group Discussion with six WhizzKids United graduates in rural Jozini, KwaZulu-Natal on 8 June 2010, shortly after they had completed the programme. A summary of the discussion follows, with a full transcript in the appendix (note that the discussion was digitally recorded in Zulu, then translated and transcribed into English).

Interviews and focus group discussions ideally follow a semi-structured approach, but as we are still beginners in developing these skills we tend to follow the script rather strictly!

Jozini Focus Group Discussion Summary

(written by Zanele Khanyile, M&E Facilitator)

We conducted a Focus Group Discussion (FGD) with three girls and three boys, so in our FGD it was awesome even though the camera battery ran out in between the process.

The Kids were appreciating the programme experiences especially in football even though it was very clear to them that our programme is based on HIV/Aids Education. The programme that we've provided them through our WhizzKids United Trainers was very helpful; they especially enjoyed the homework booklets and learning new English words.

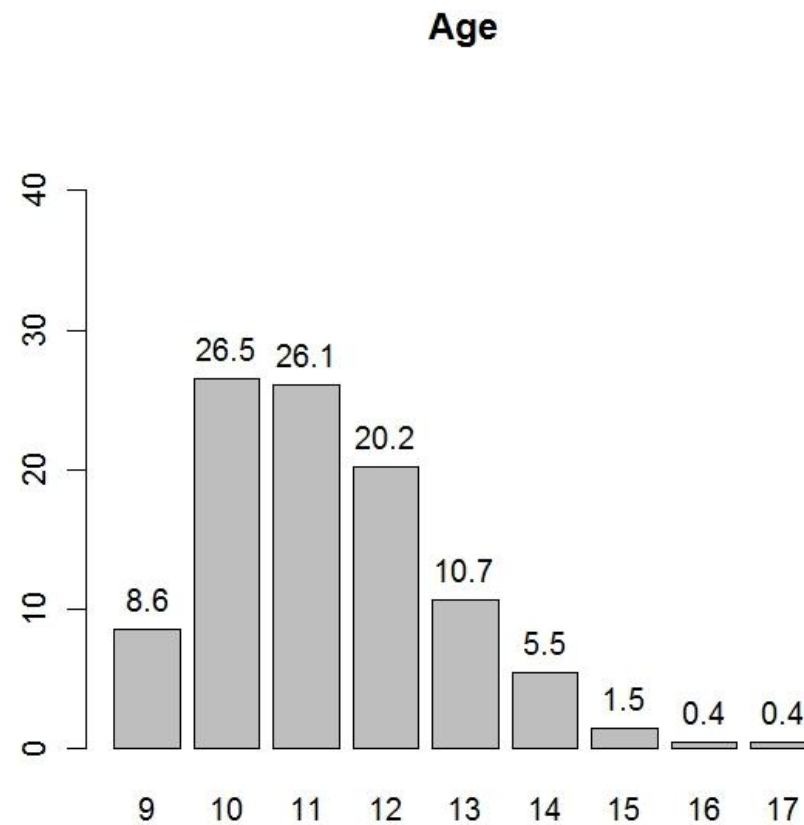
Our tournament I think we need to make big different than the ones we run in urban areas because even though we provide certificates and medals it would be great if we can add something more like T-shirts or caps. According to their responses, these kids were looking forward to get something that they can wear proudly to show that they participated in our programme.

Most importantly, their experiences with the trainers have given them a good understanding of HIV/Aids and they are very happy about WhizzKids United – especially the football drills. This programme is building young people's future goals to be able to care for themselves by making responsible decisions about behaviour even at their young age.

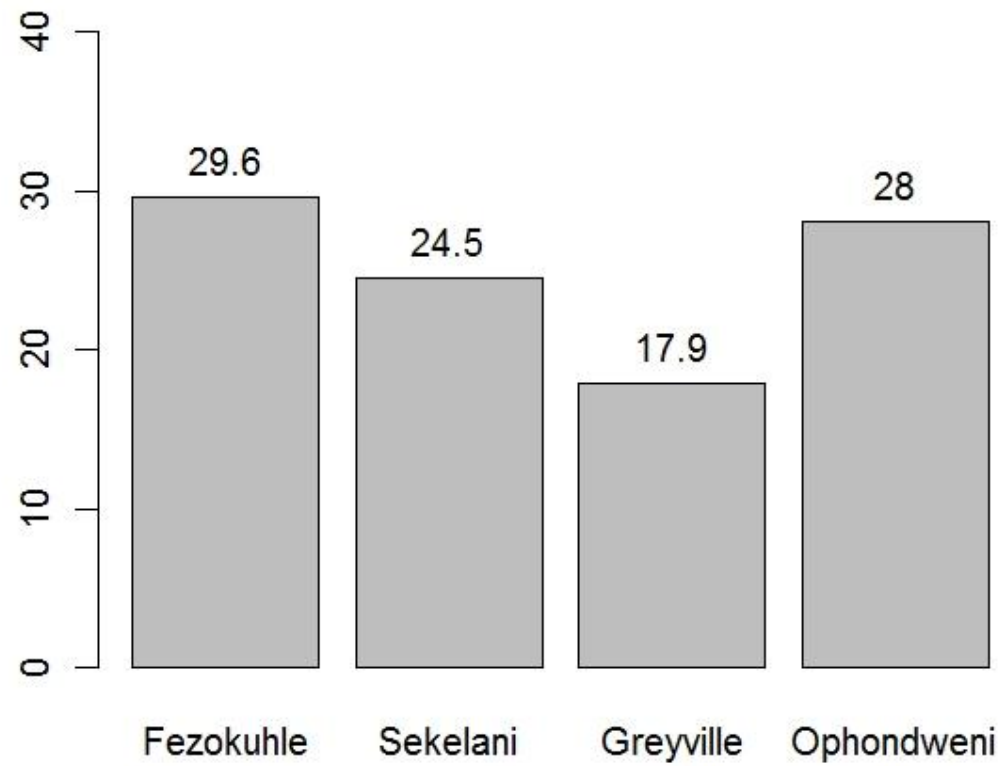
They spoke about the World Cup but were very sad, because they don't have television or Fan Parks to watch the football. They promised to care for their lives when it comes to HIV/Aids but they don't have any information materials to refer to, like pamphlets.

4. Appendix I: Quantitative Graphs

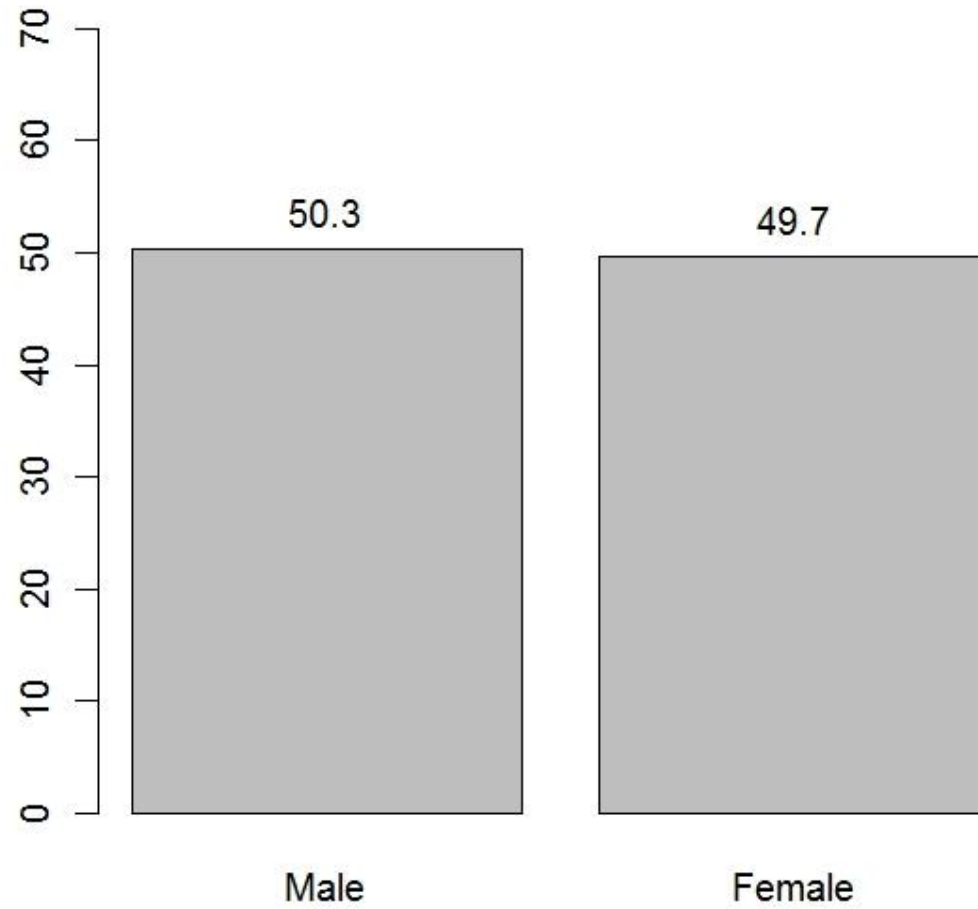
Demographic Graphs:



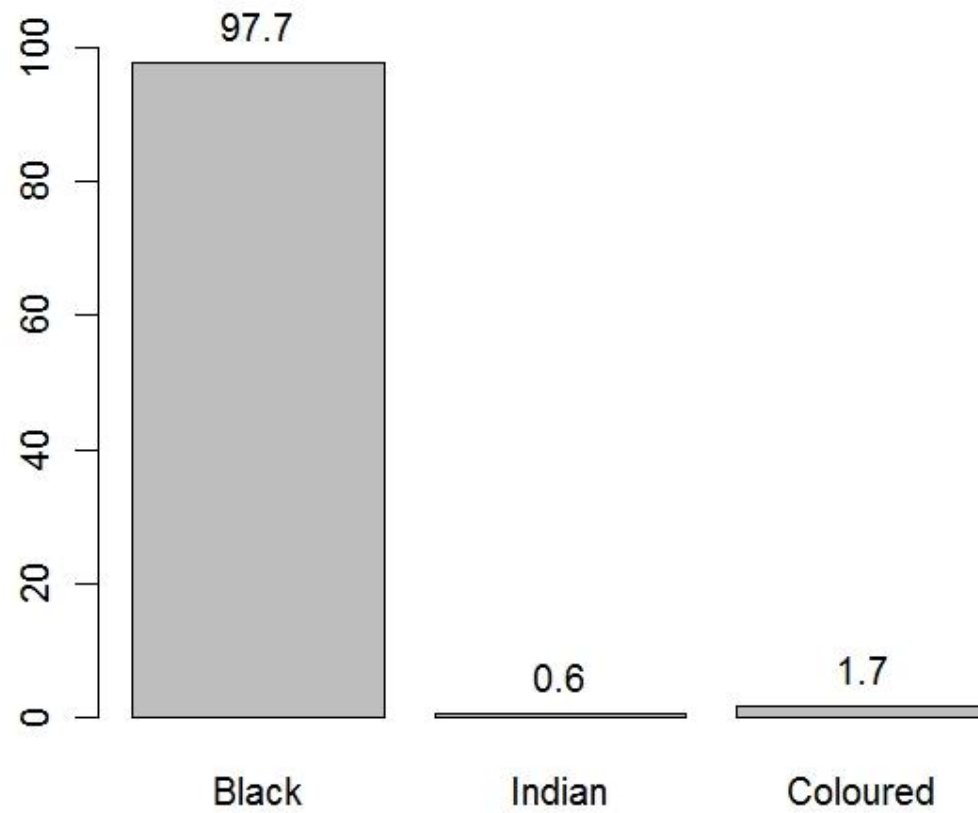
School



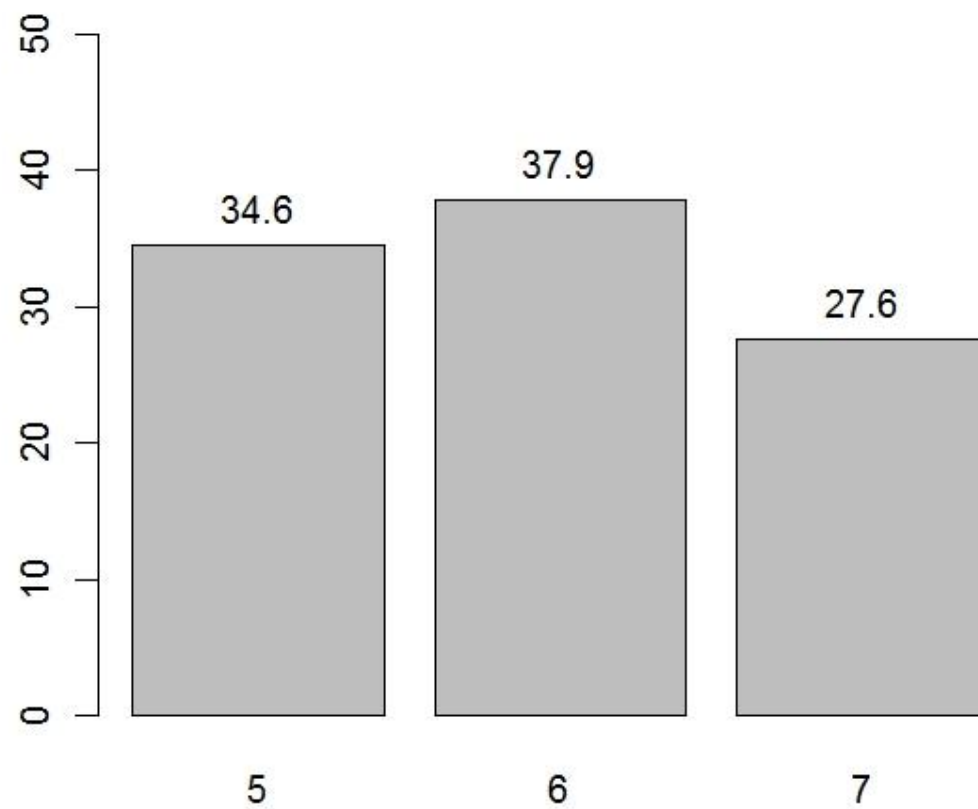
Gender



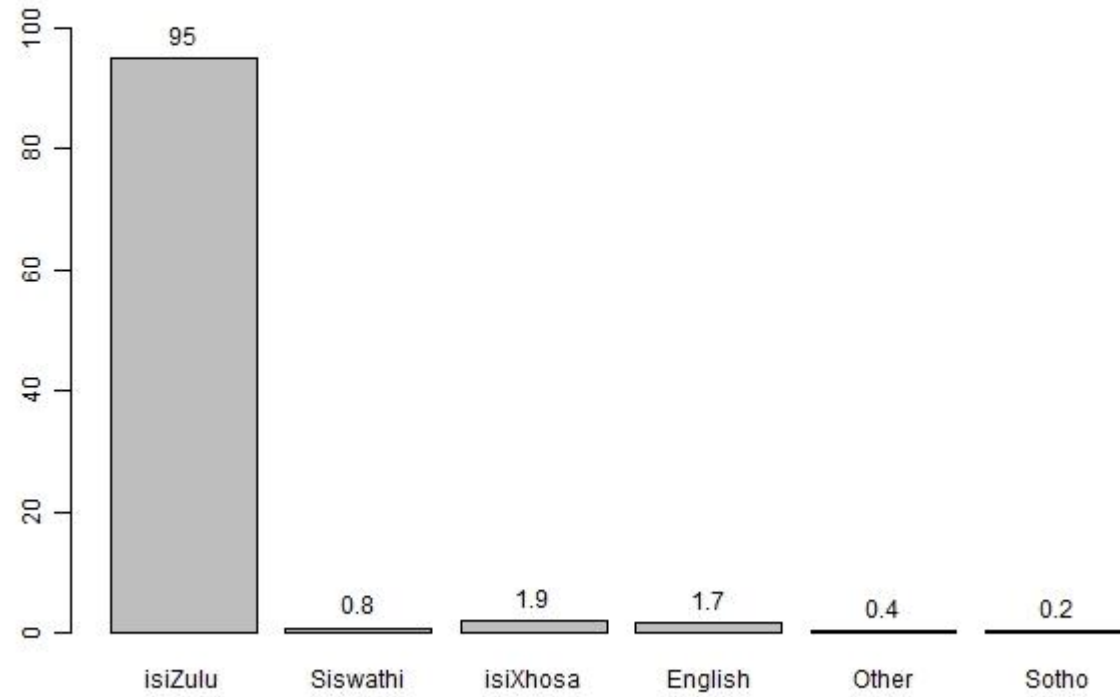
Race



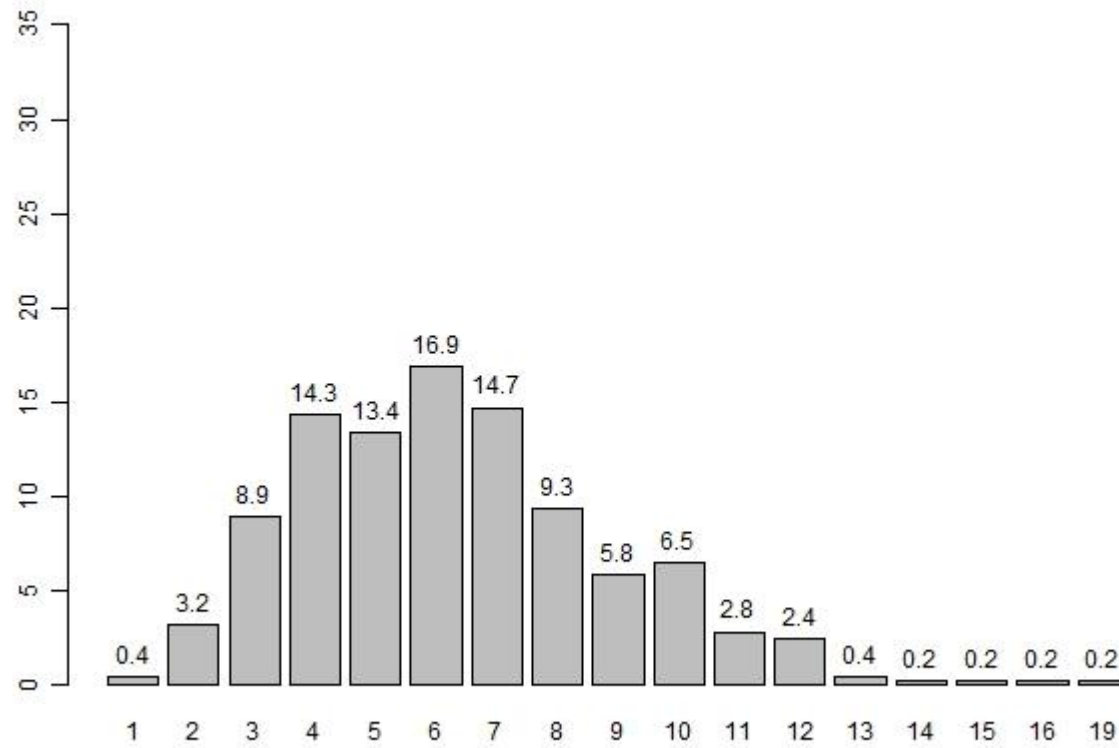
Grade



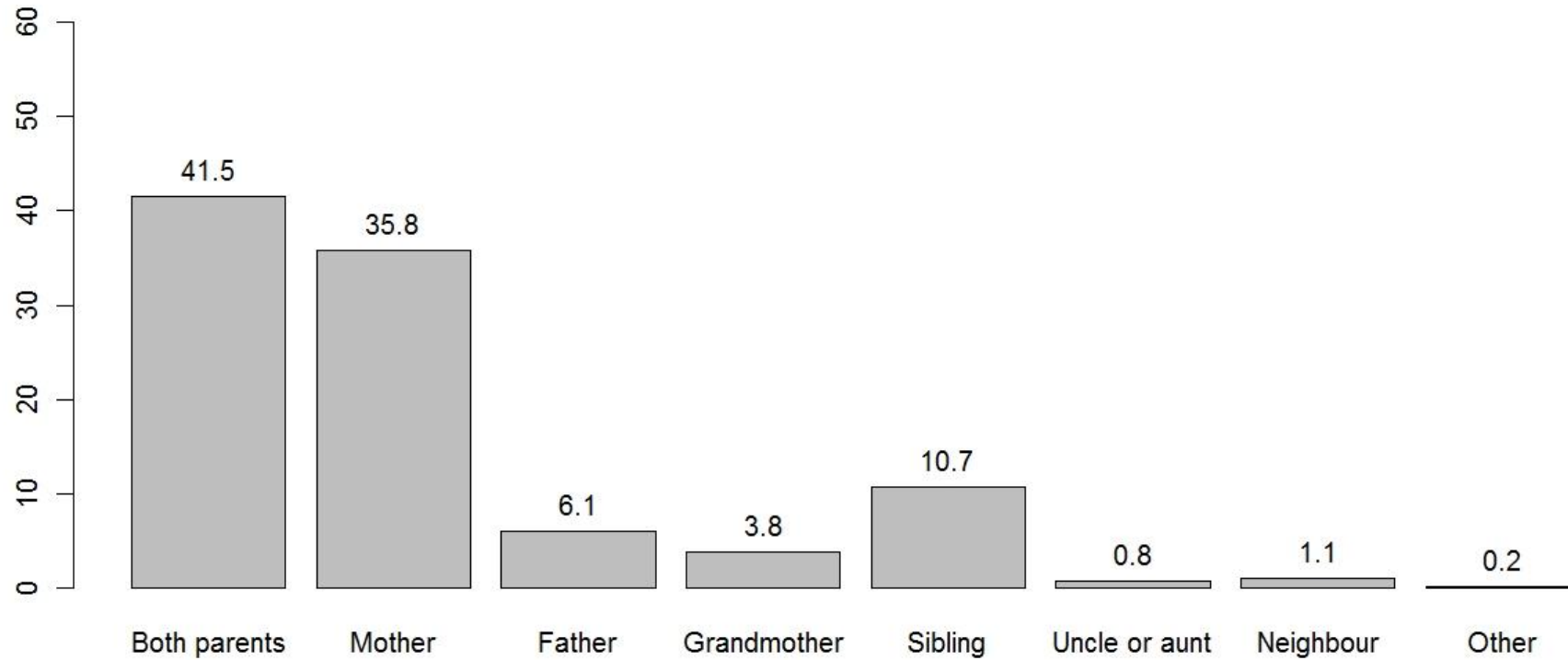
First Language



How many people live in your home?

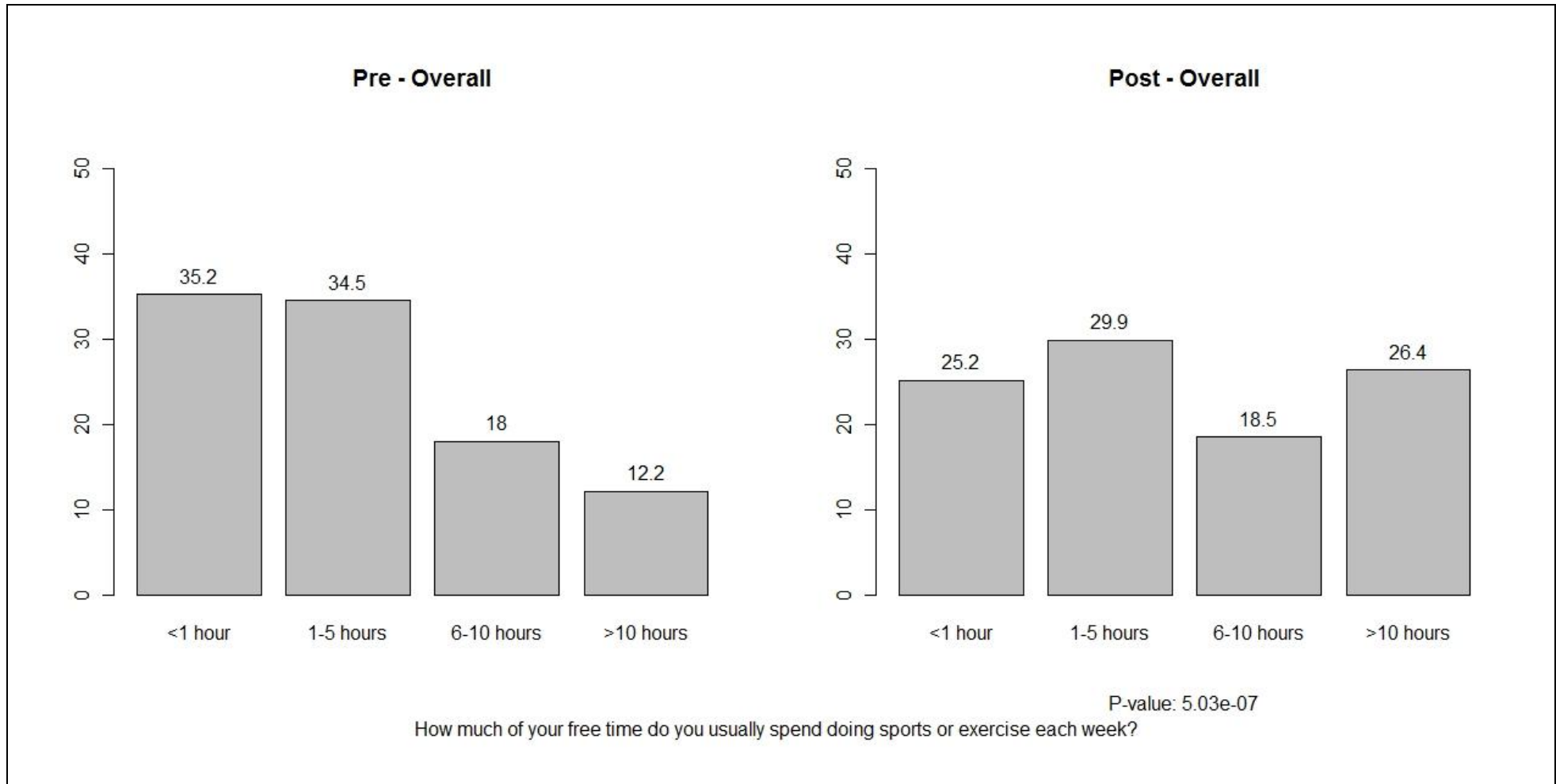


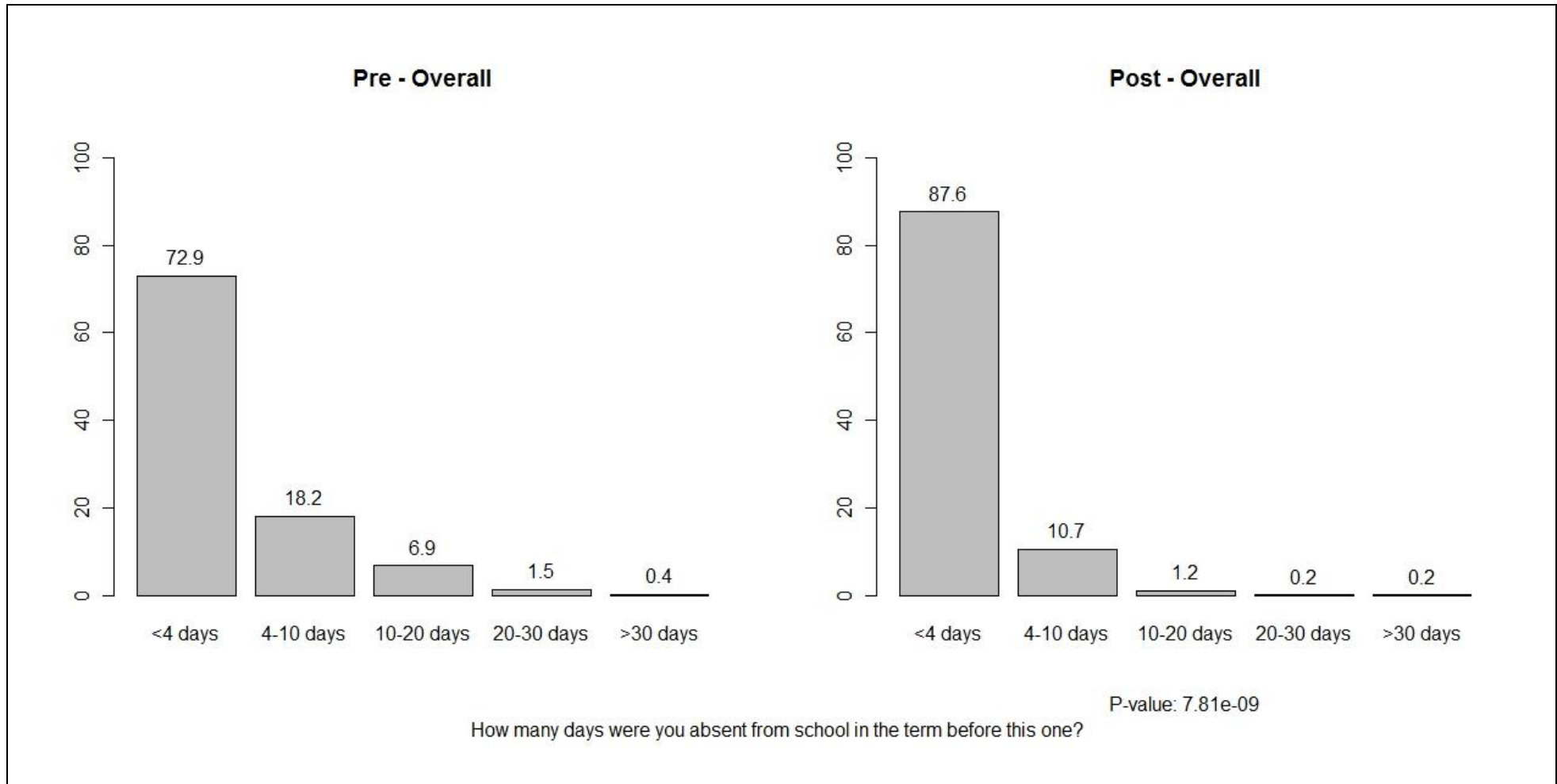
Who takes care of you at home?

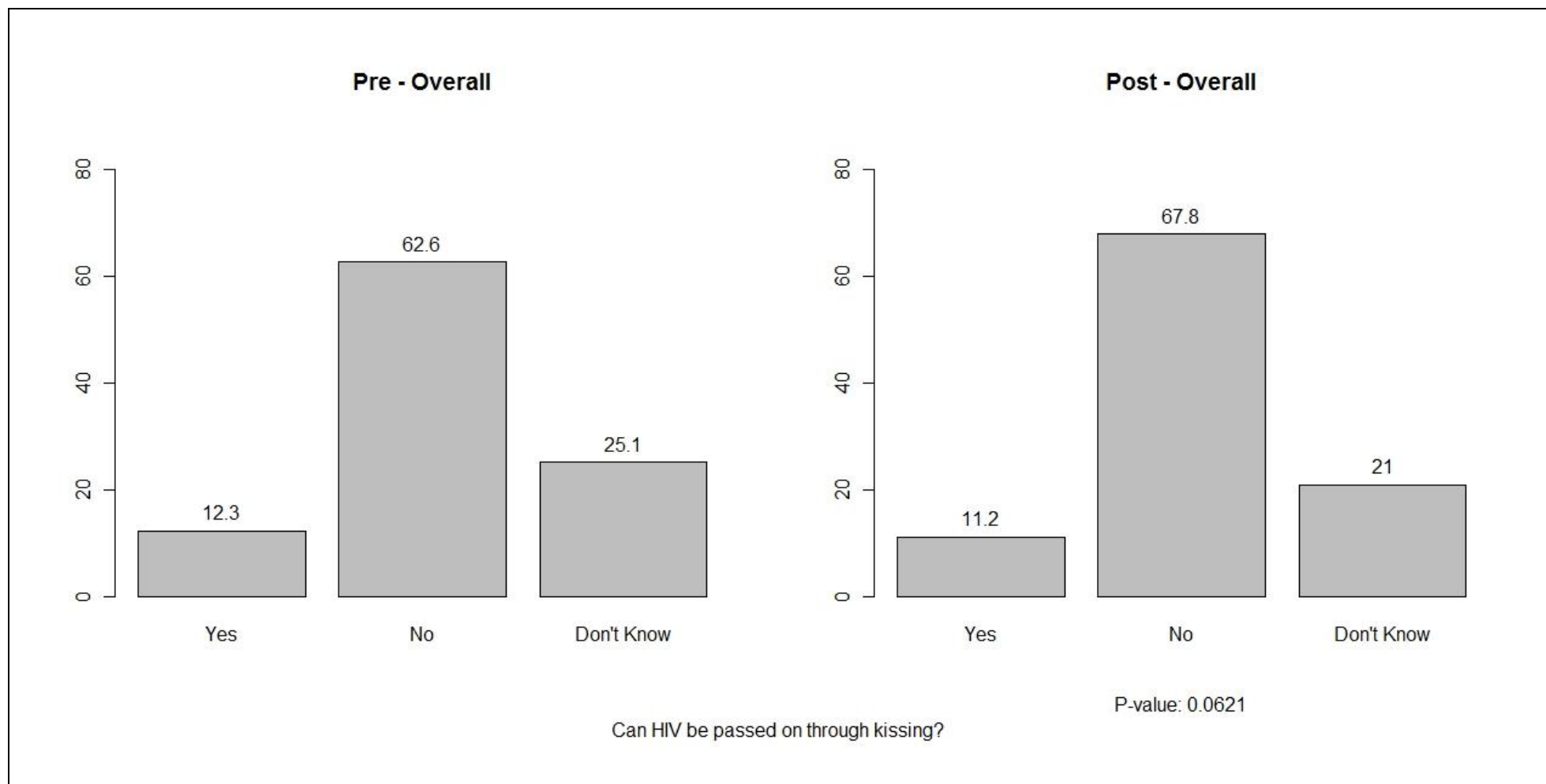


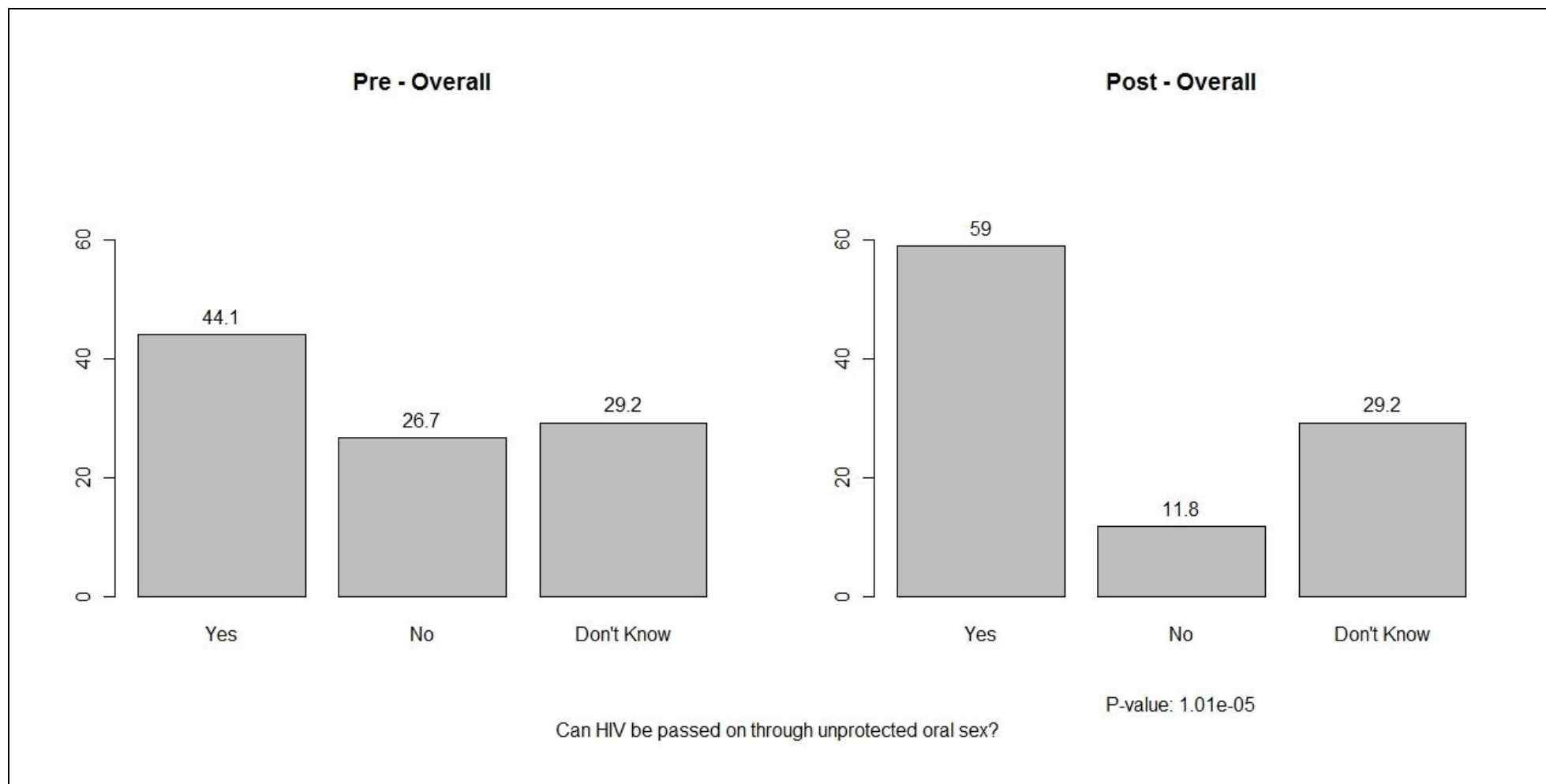
Behavioural Predictor Graphs (Pre vs. Post):

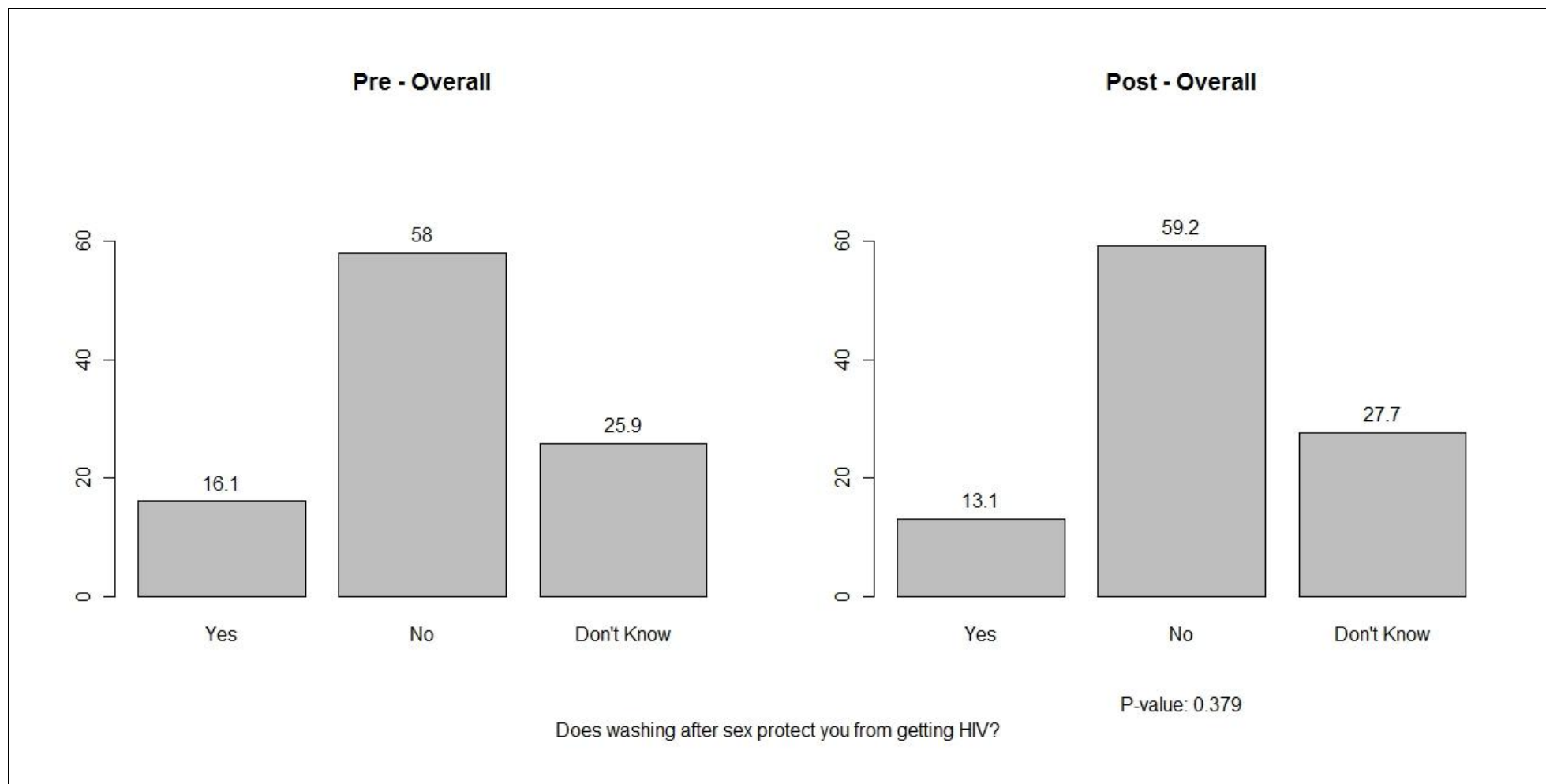
P-values of the Kendall's correlation test are given below the right graph. A p-value of less than 0.05 indicates a significant improvement. Note that small p-values are given in scientific notation, e.g. 5.03e-07 means 0.000000503.

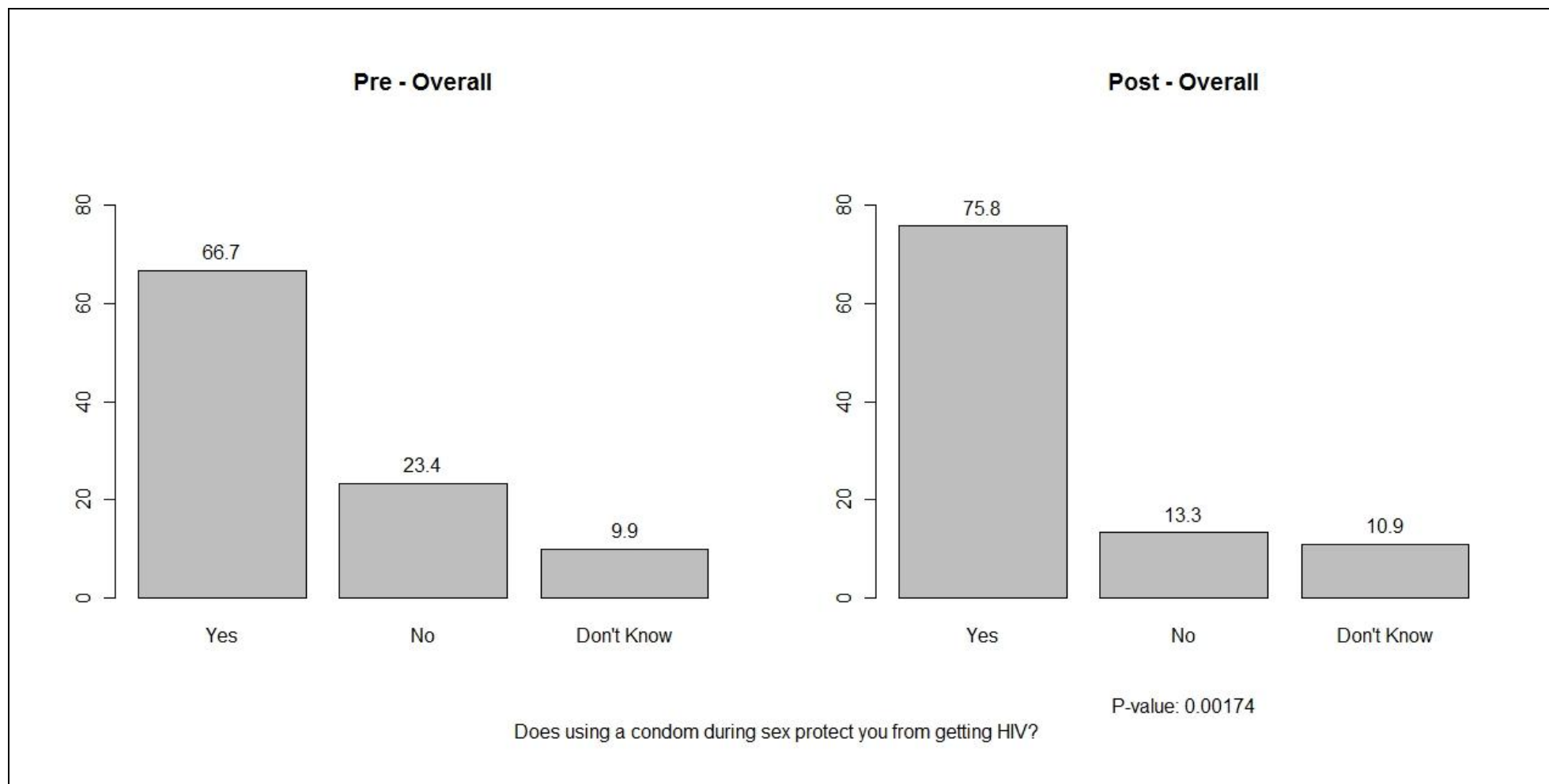


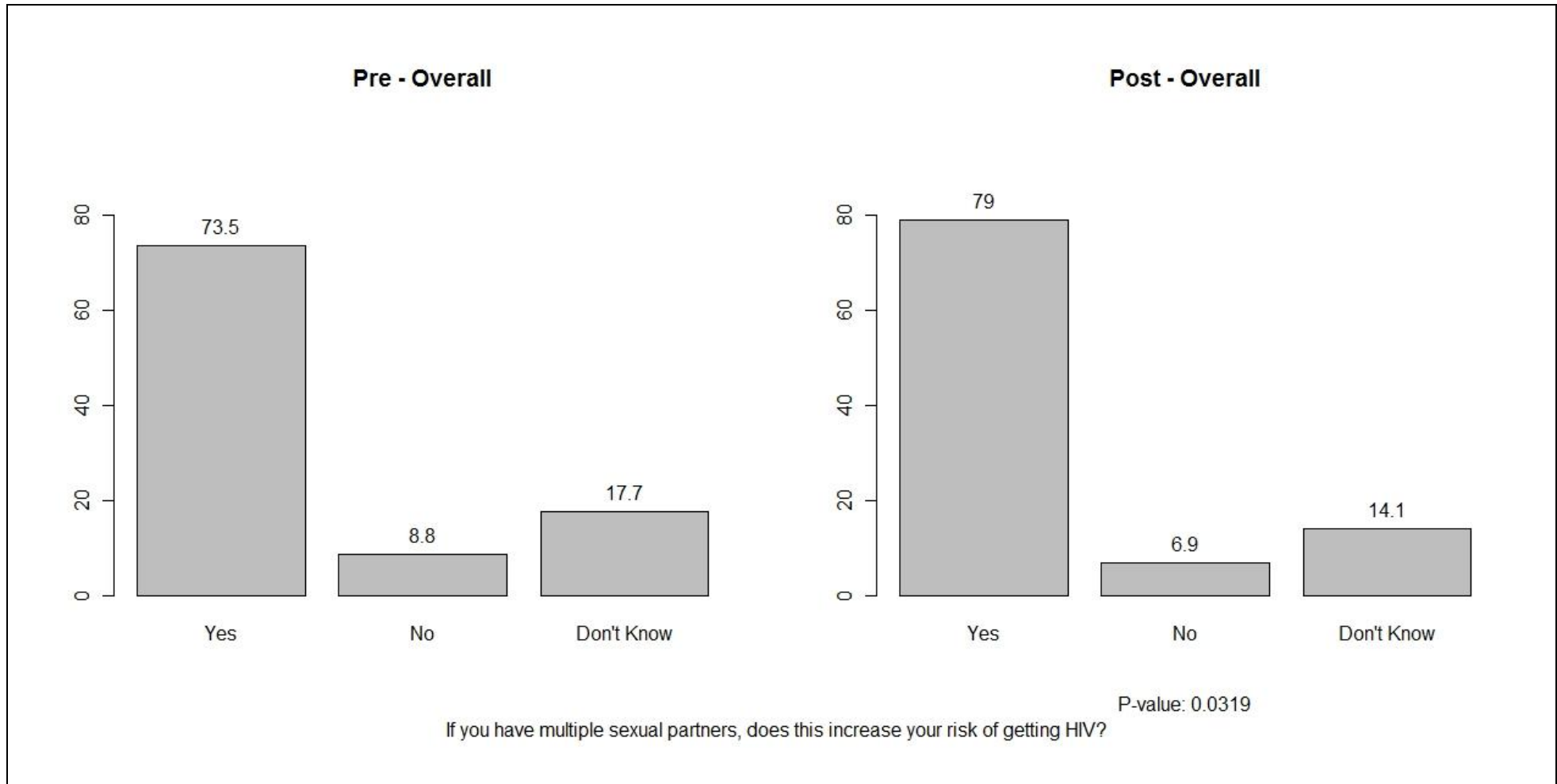


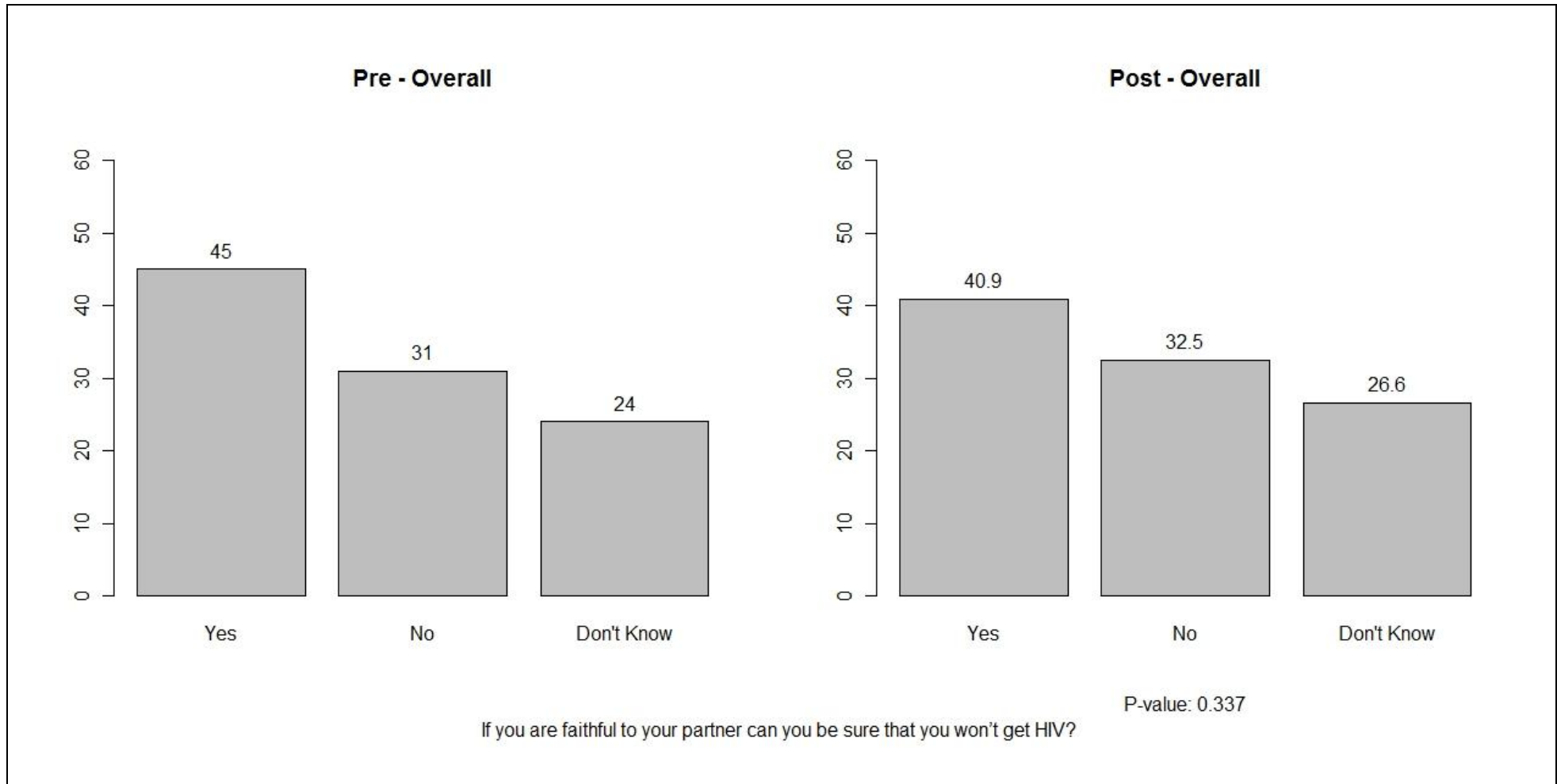


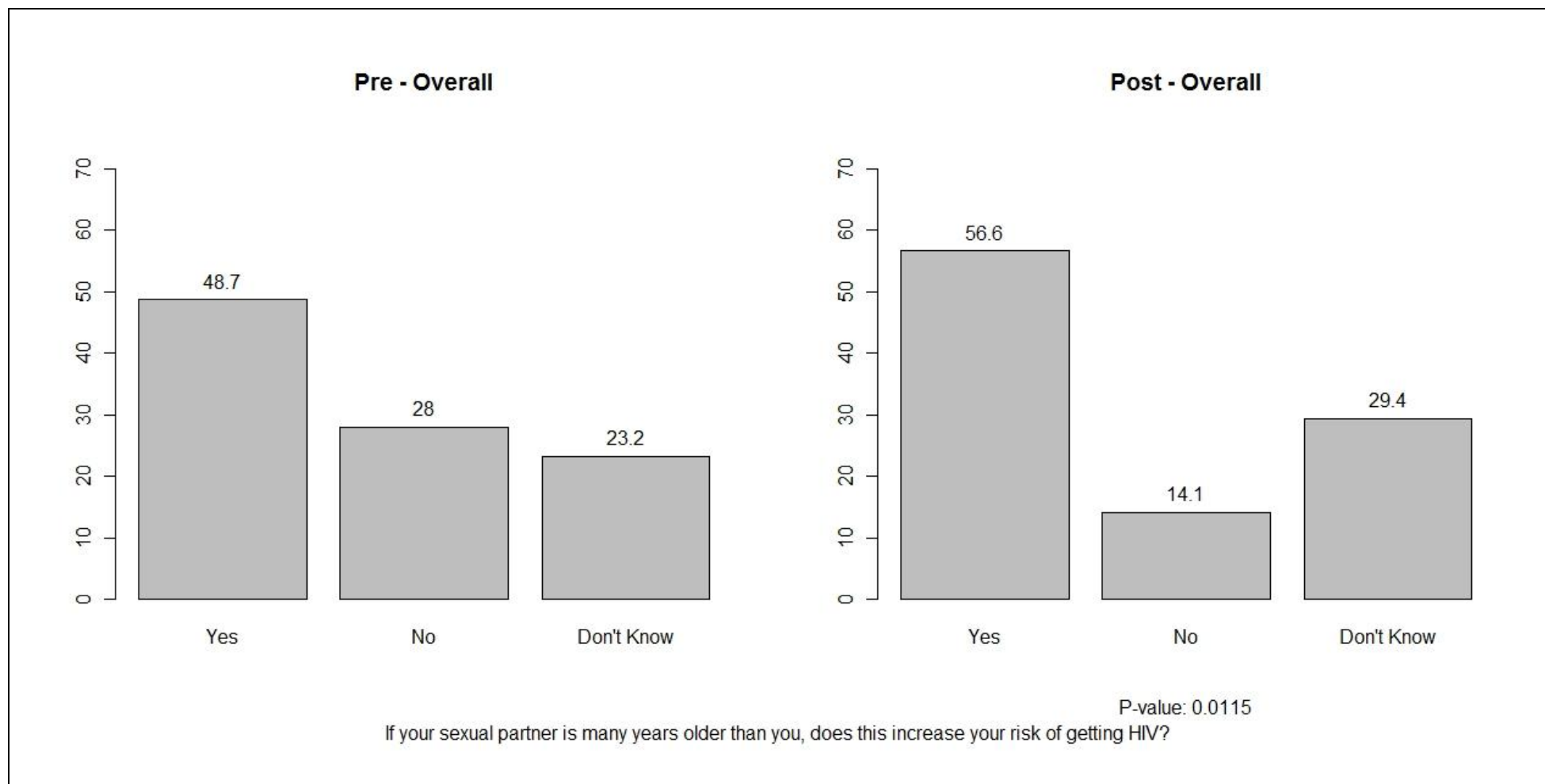


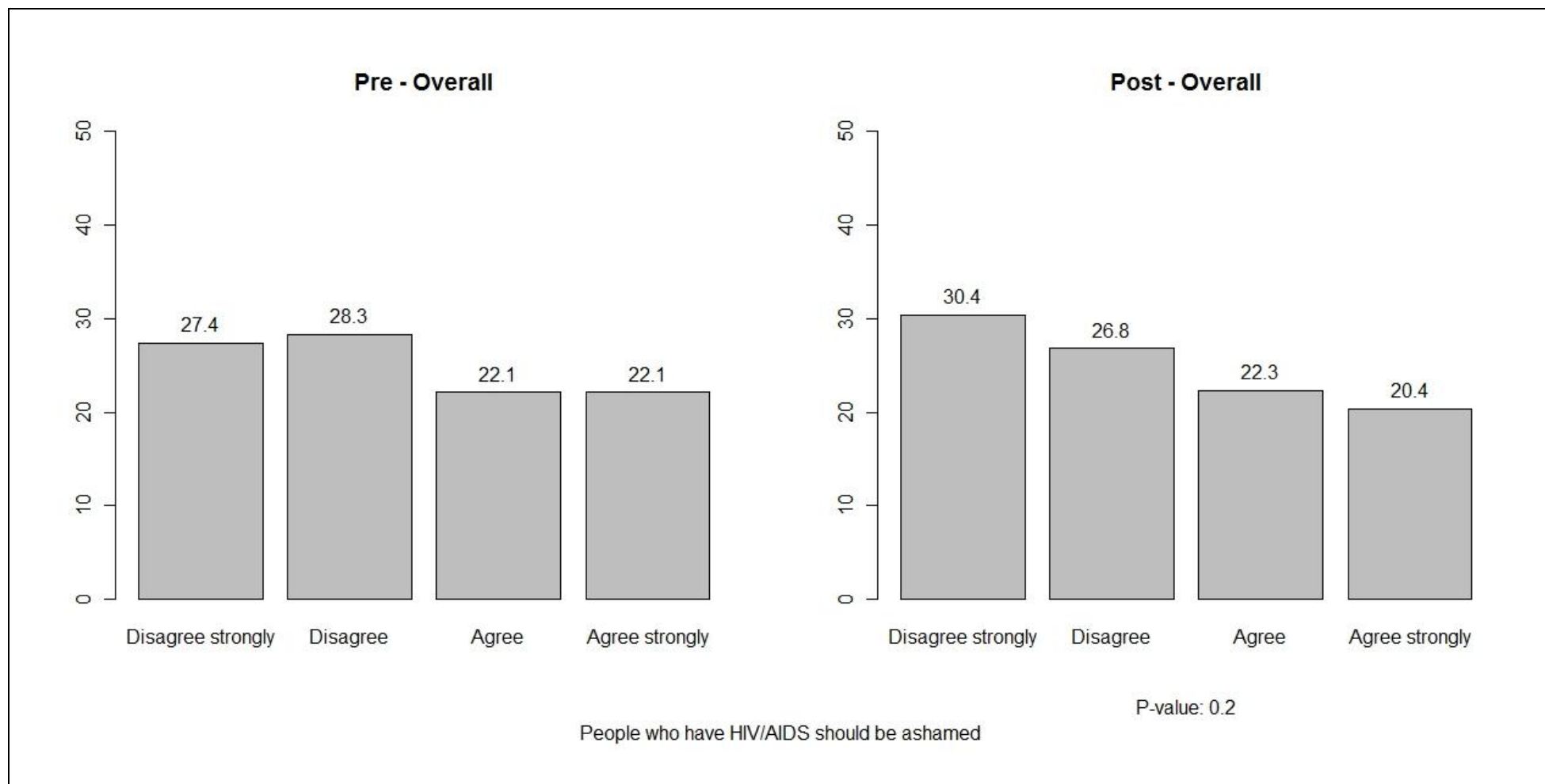


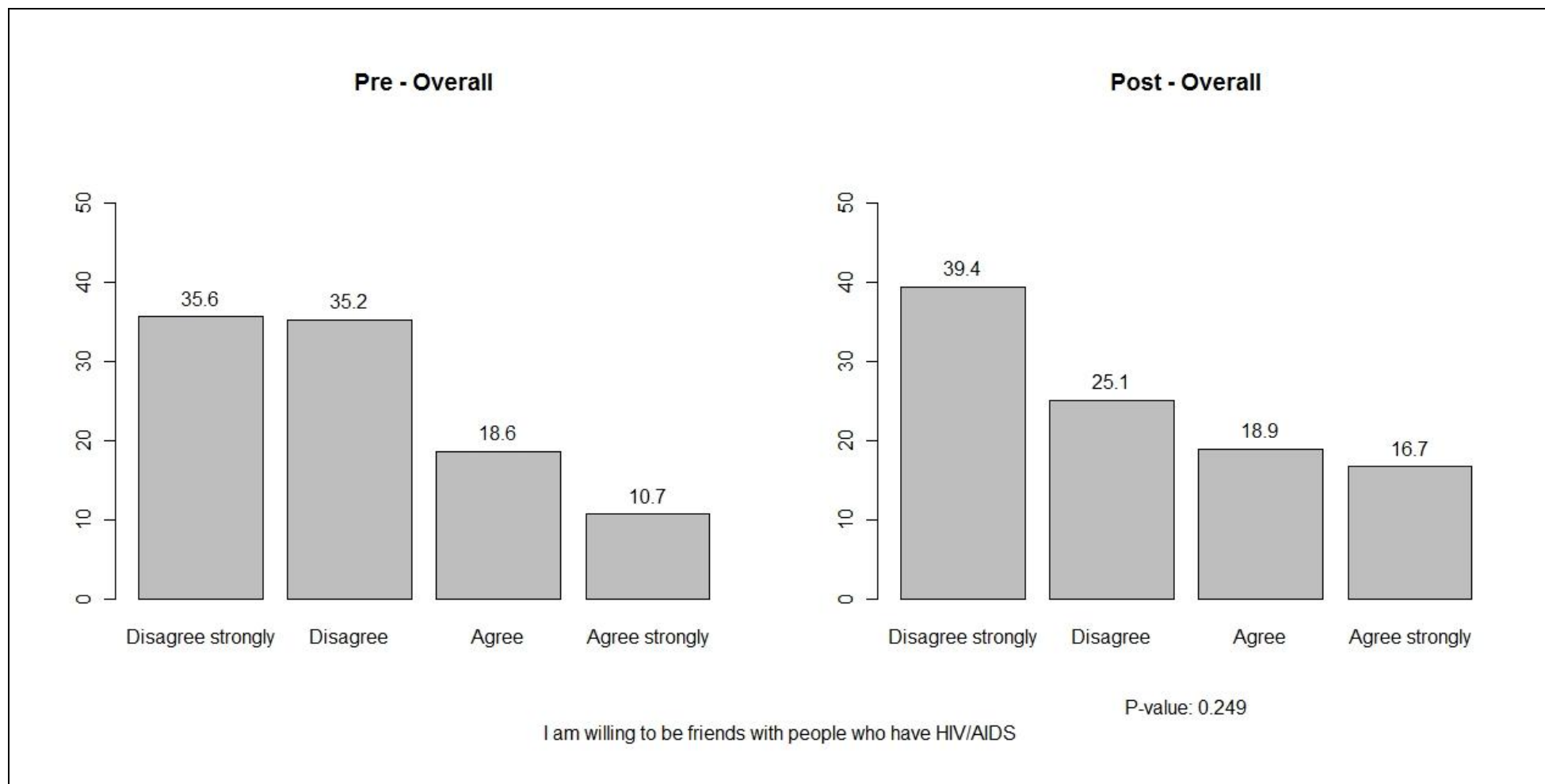


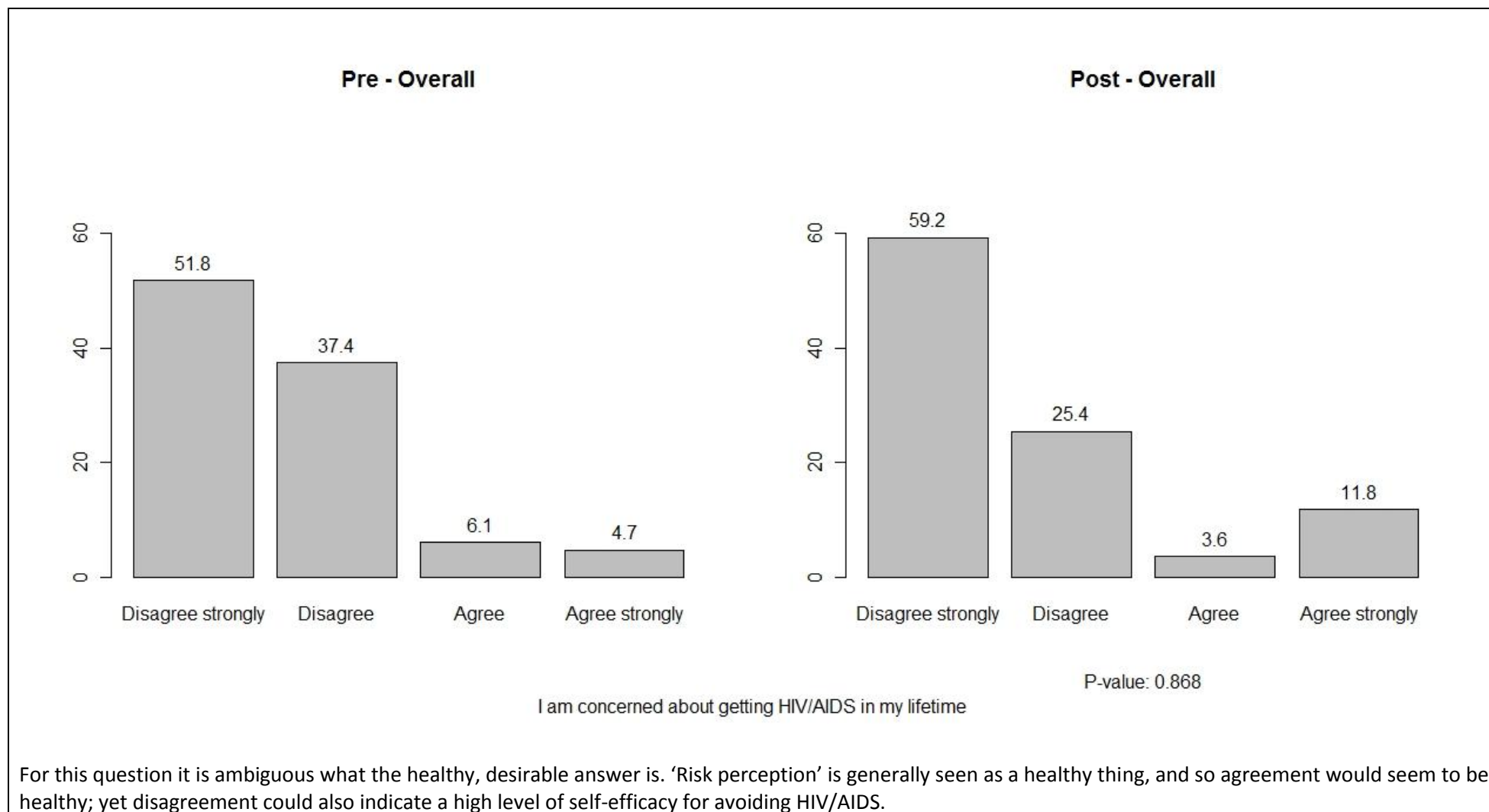


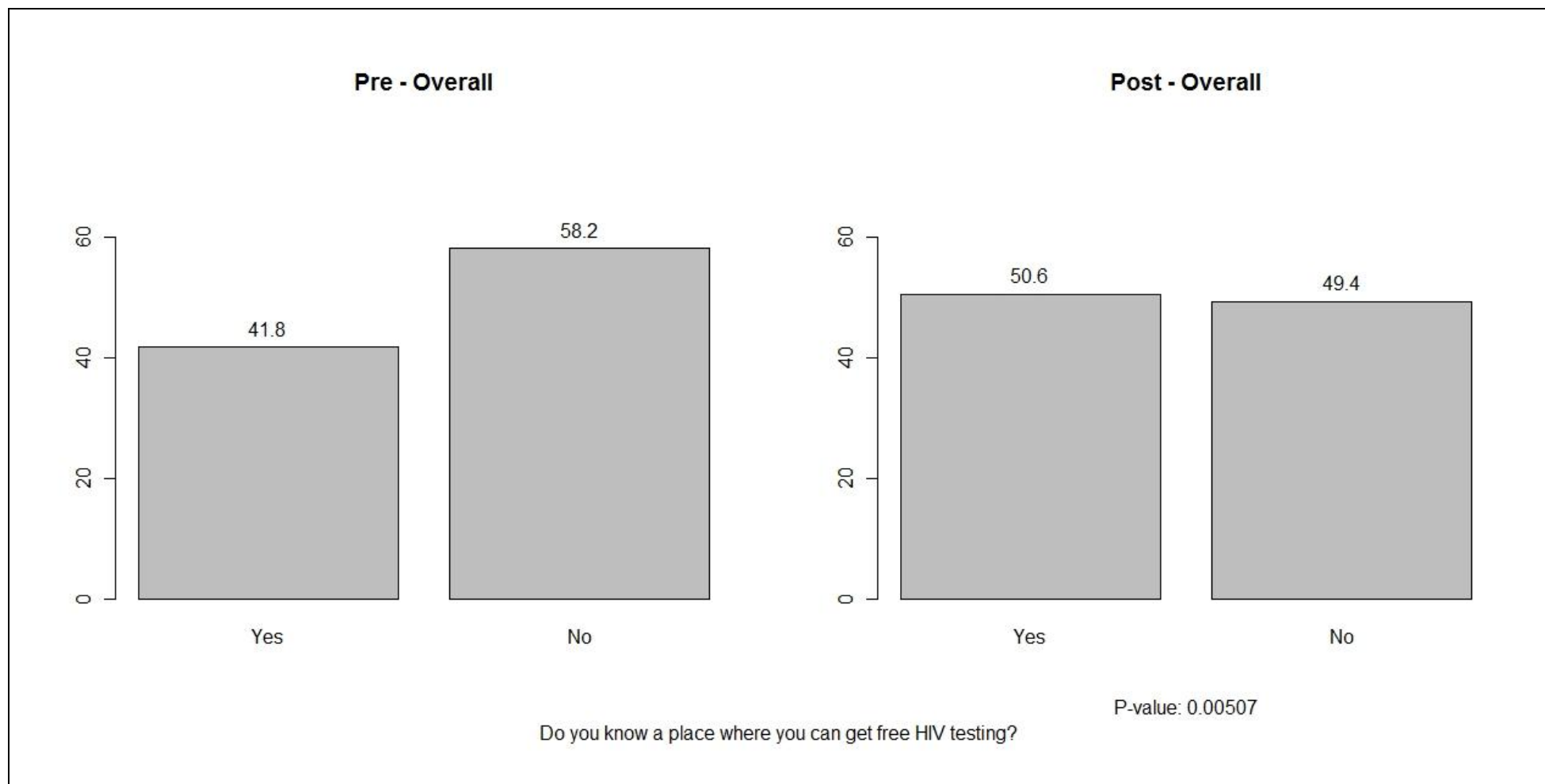


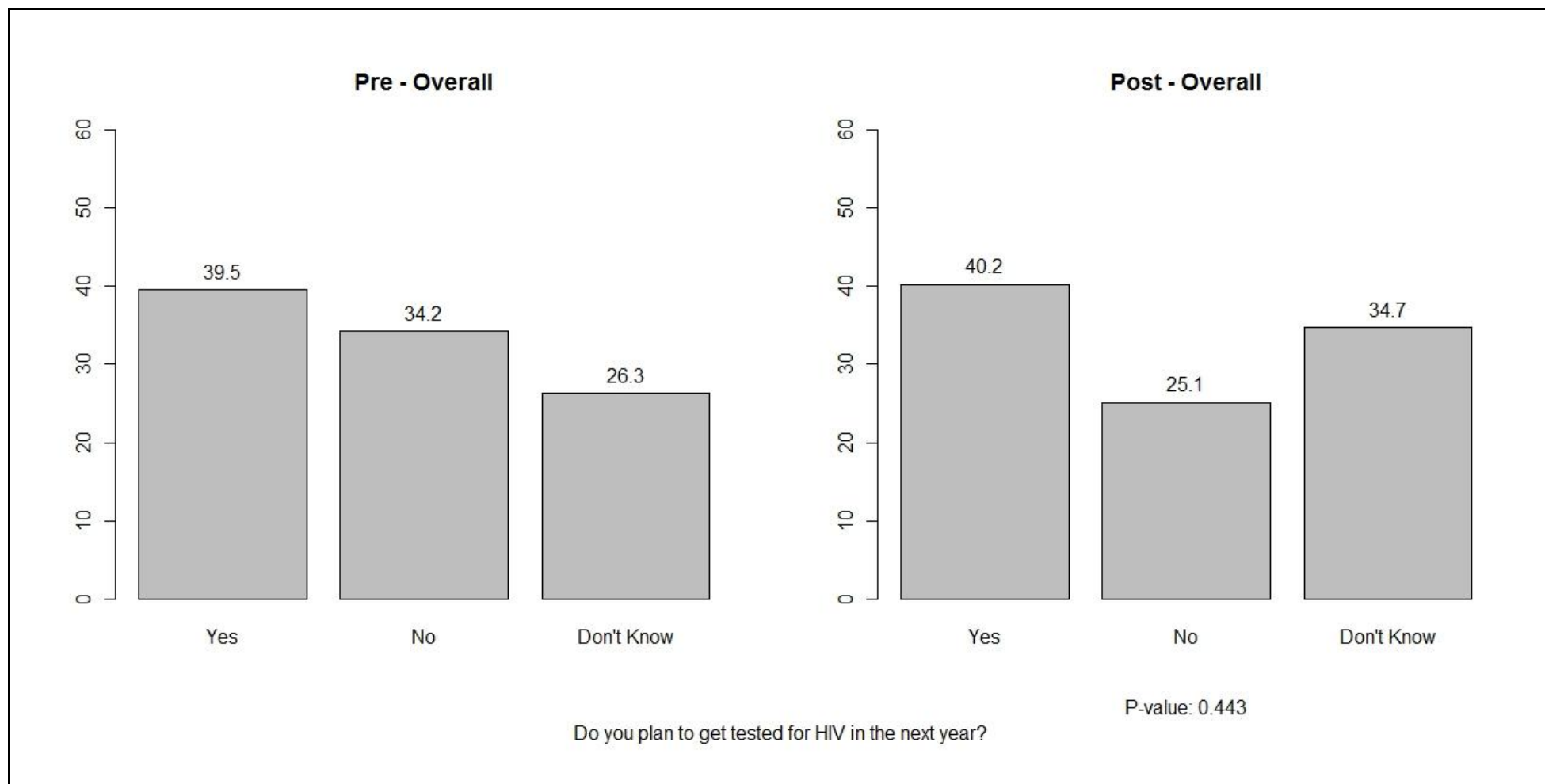


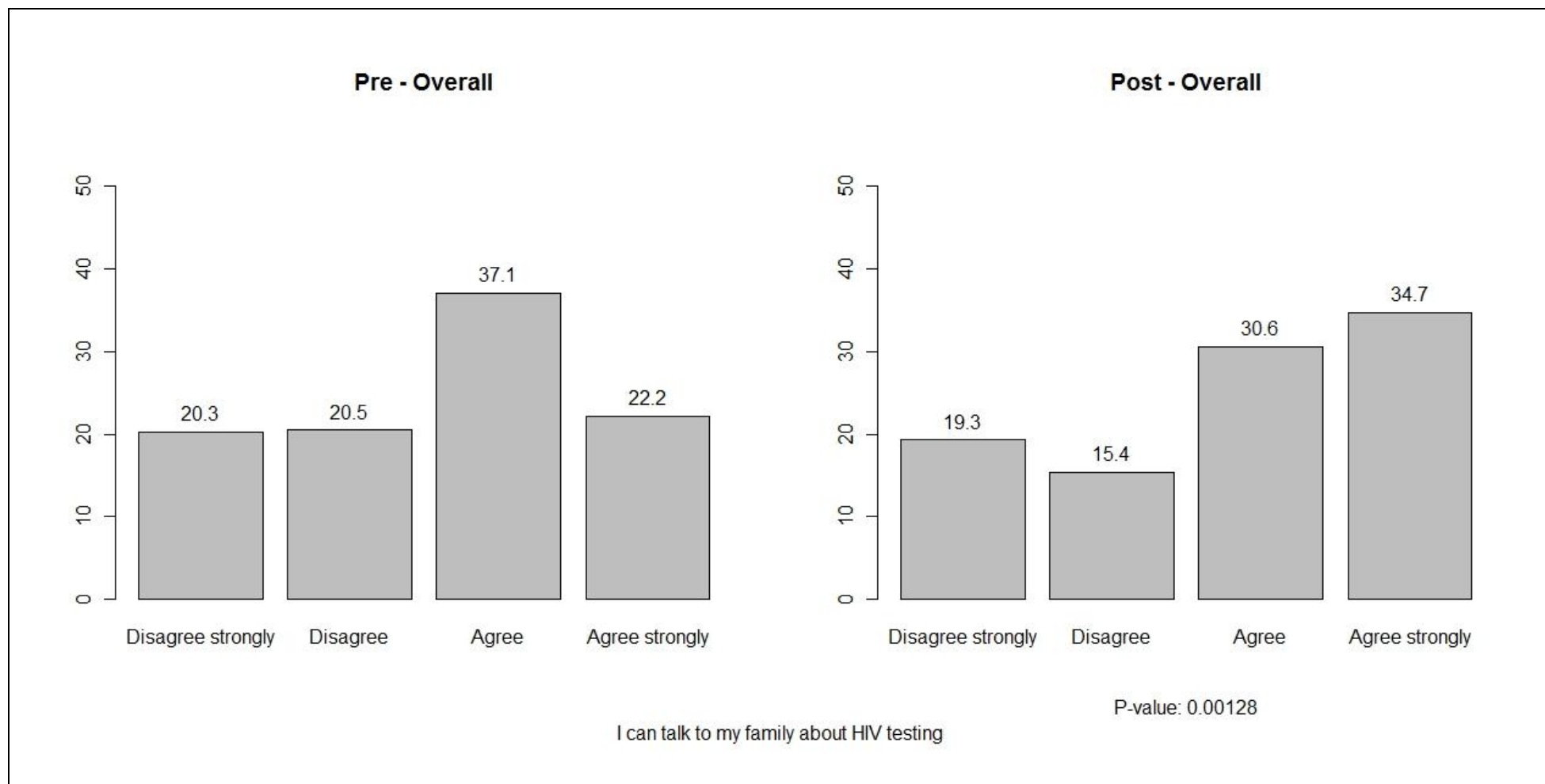


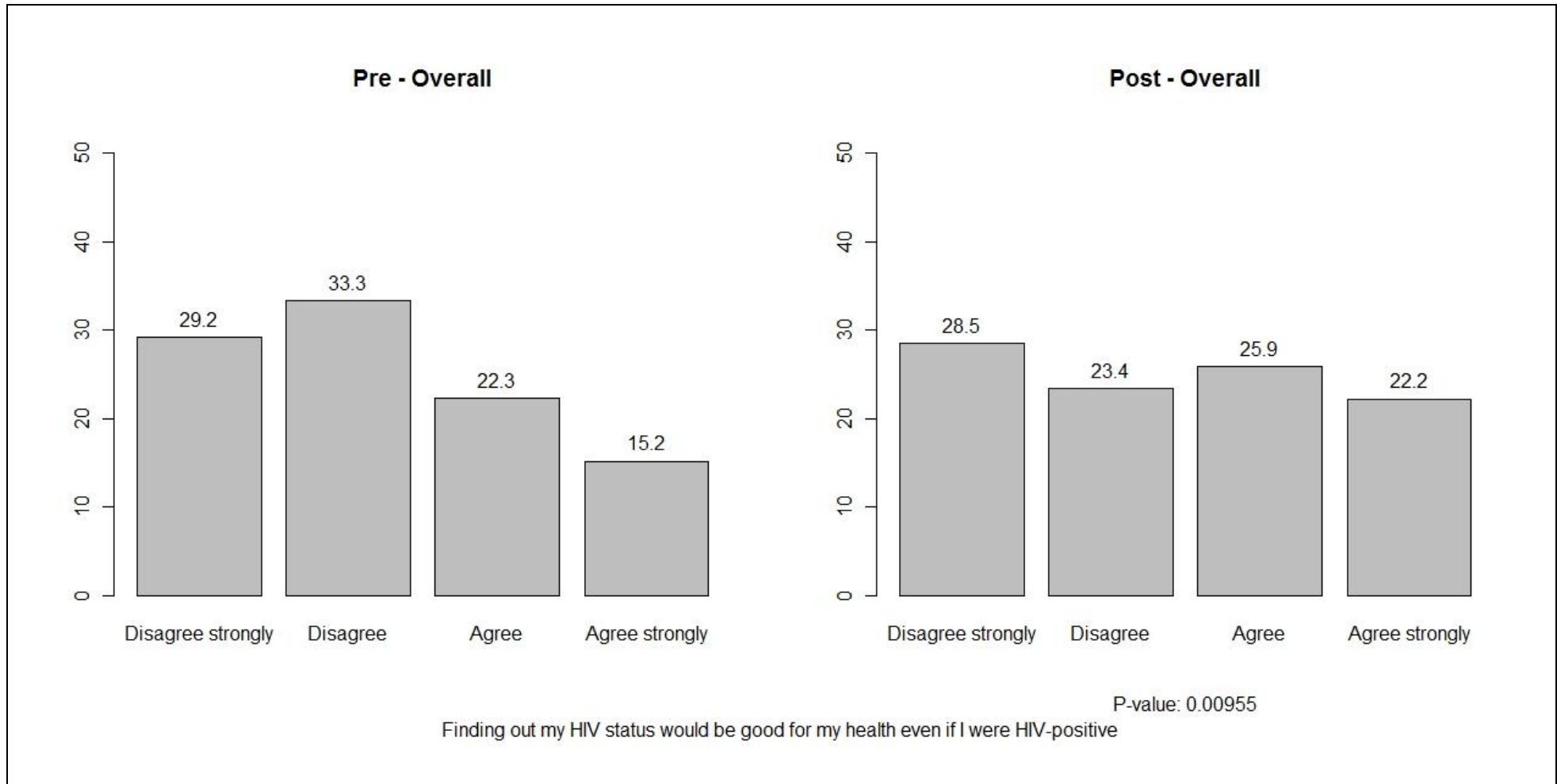


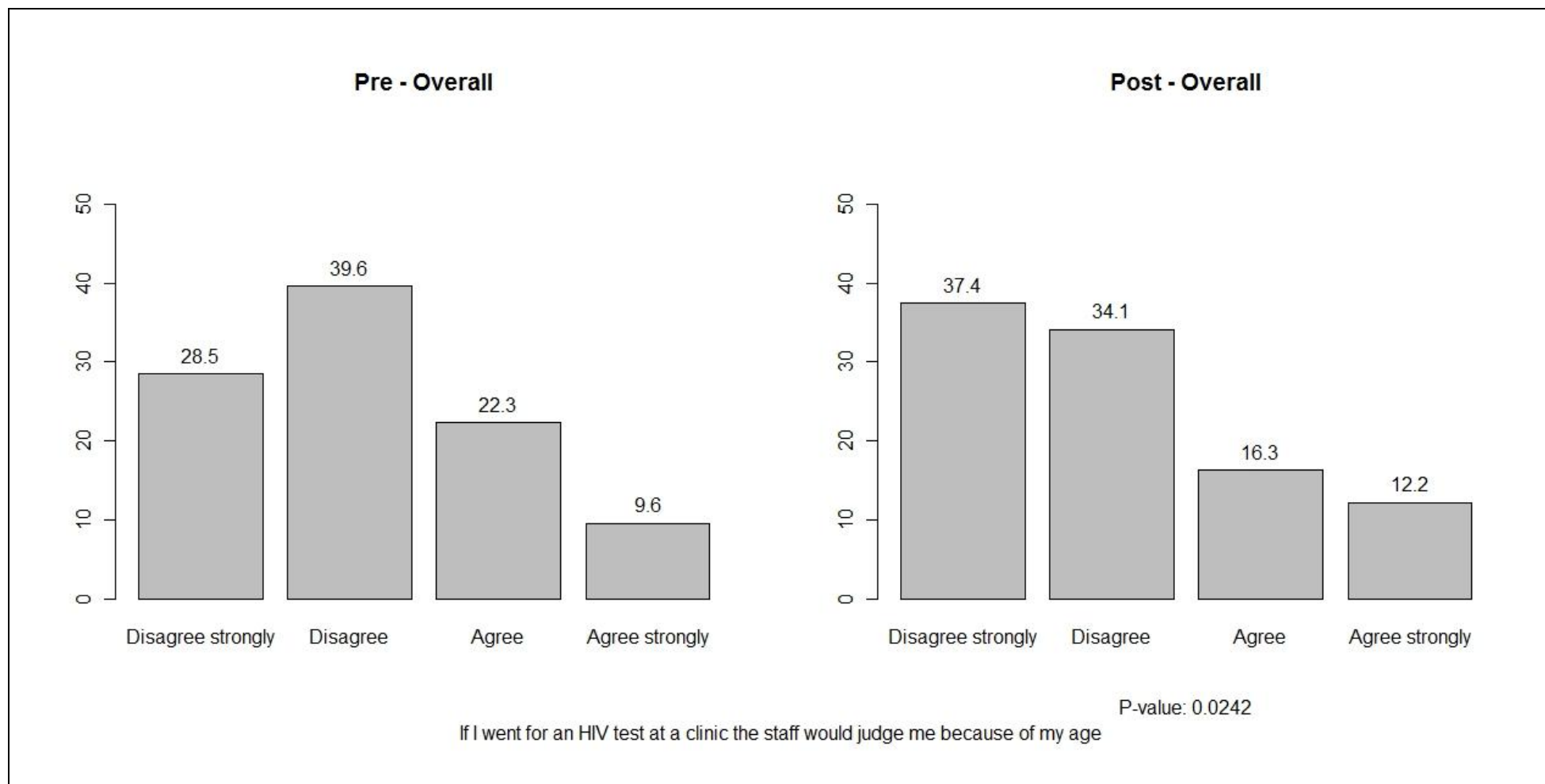


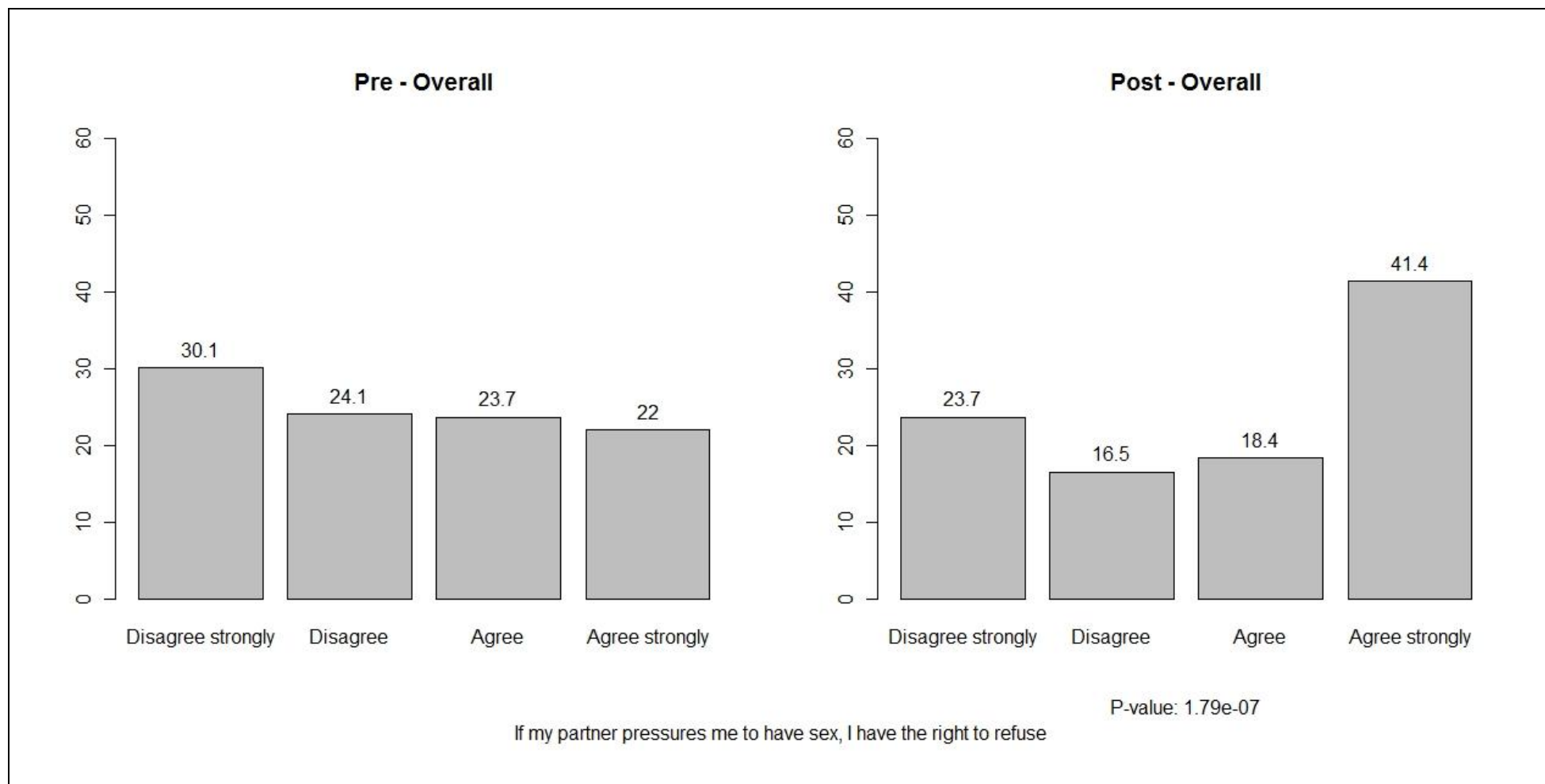


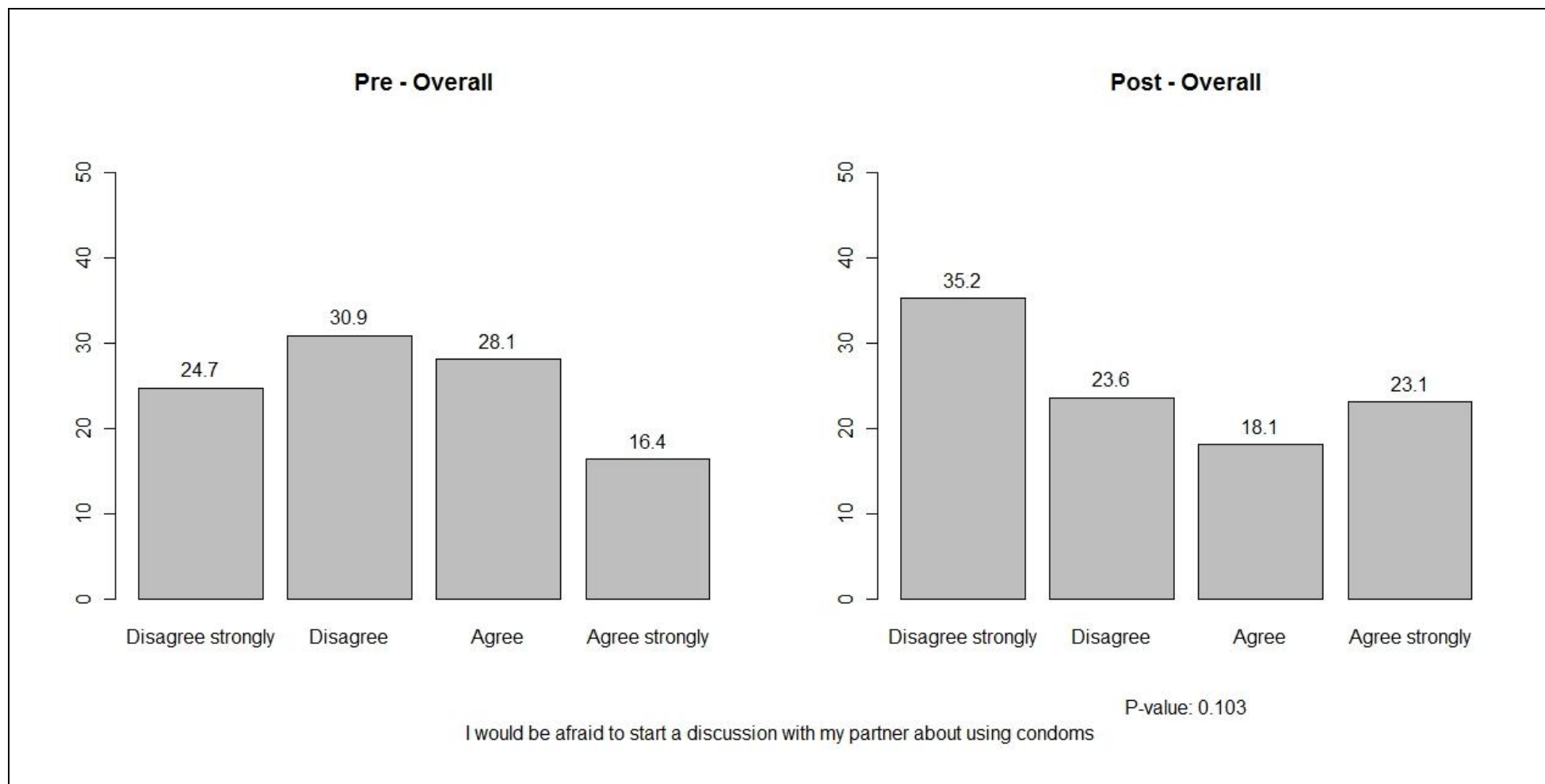


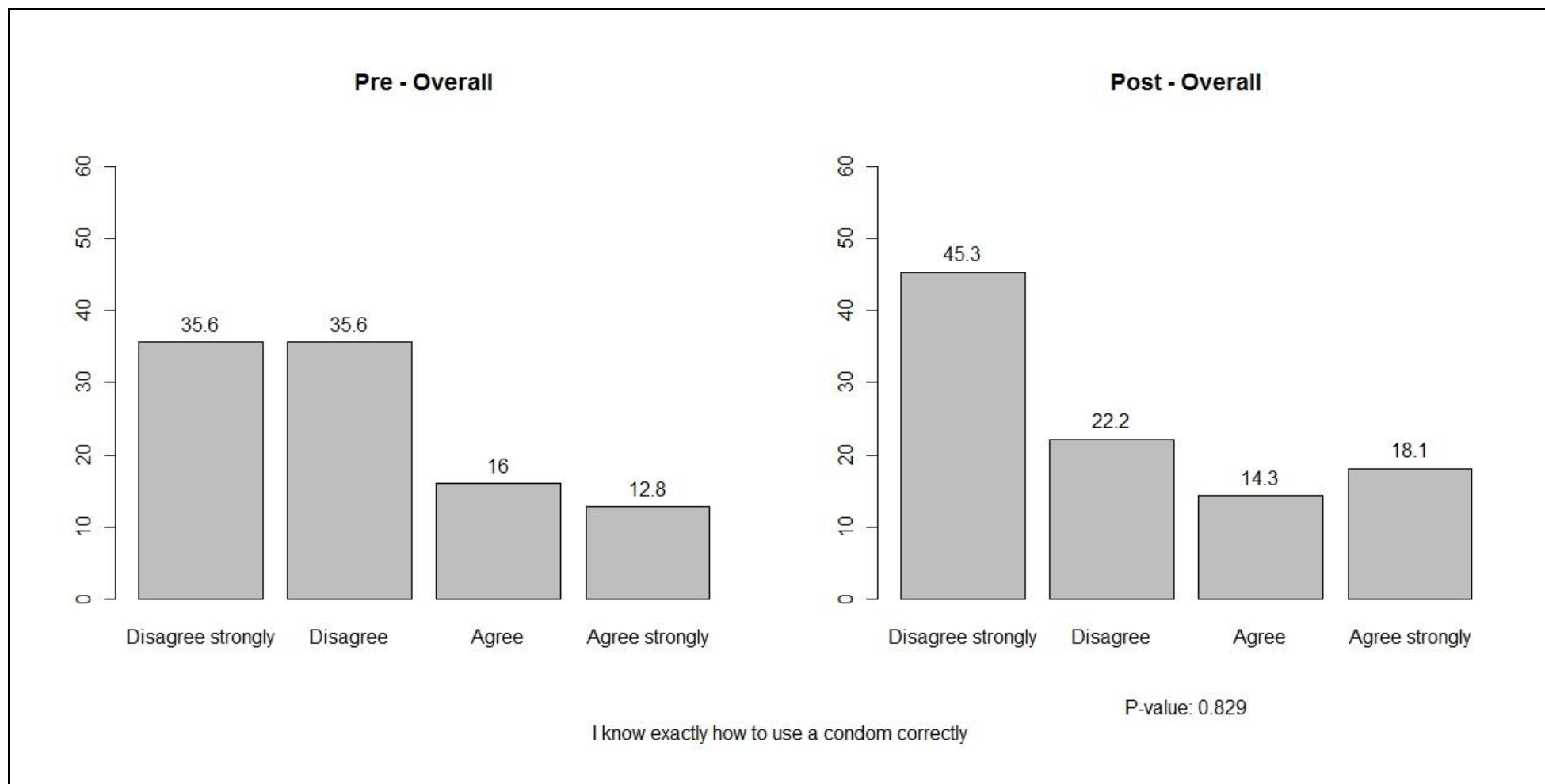


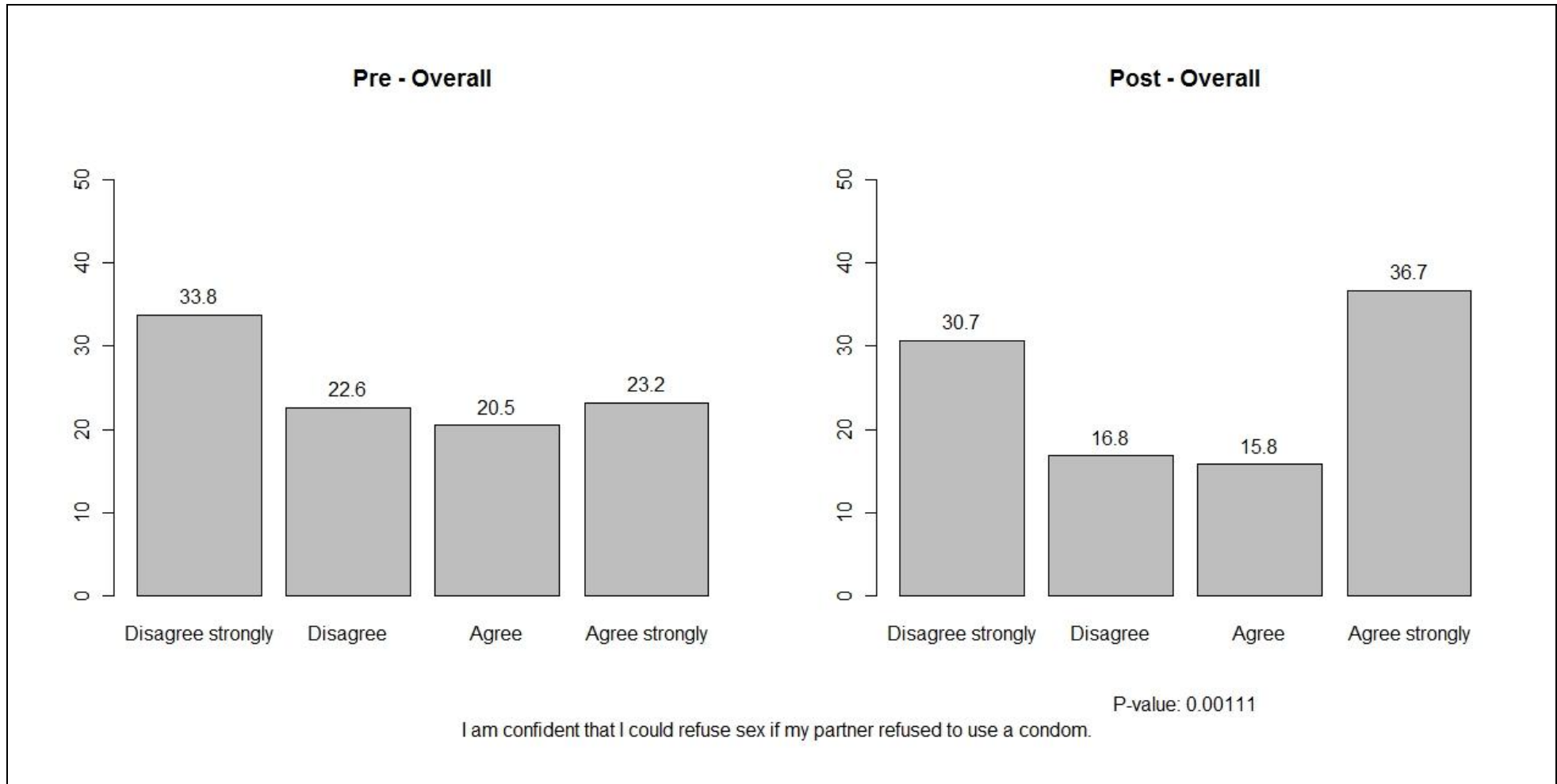


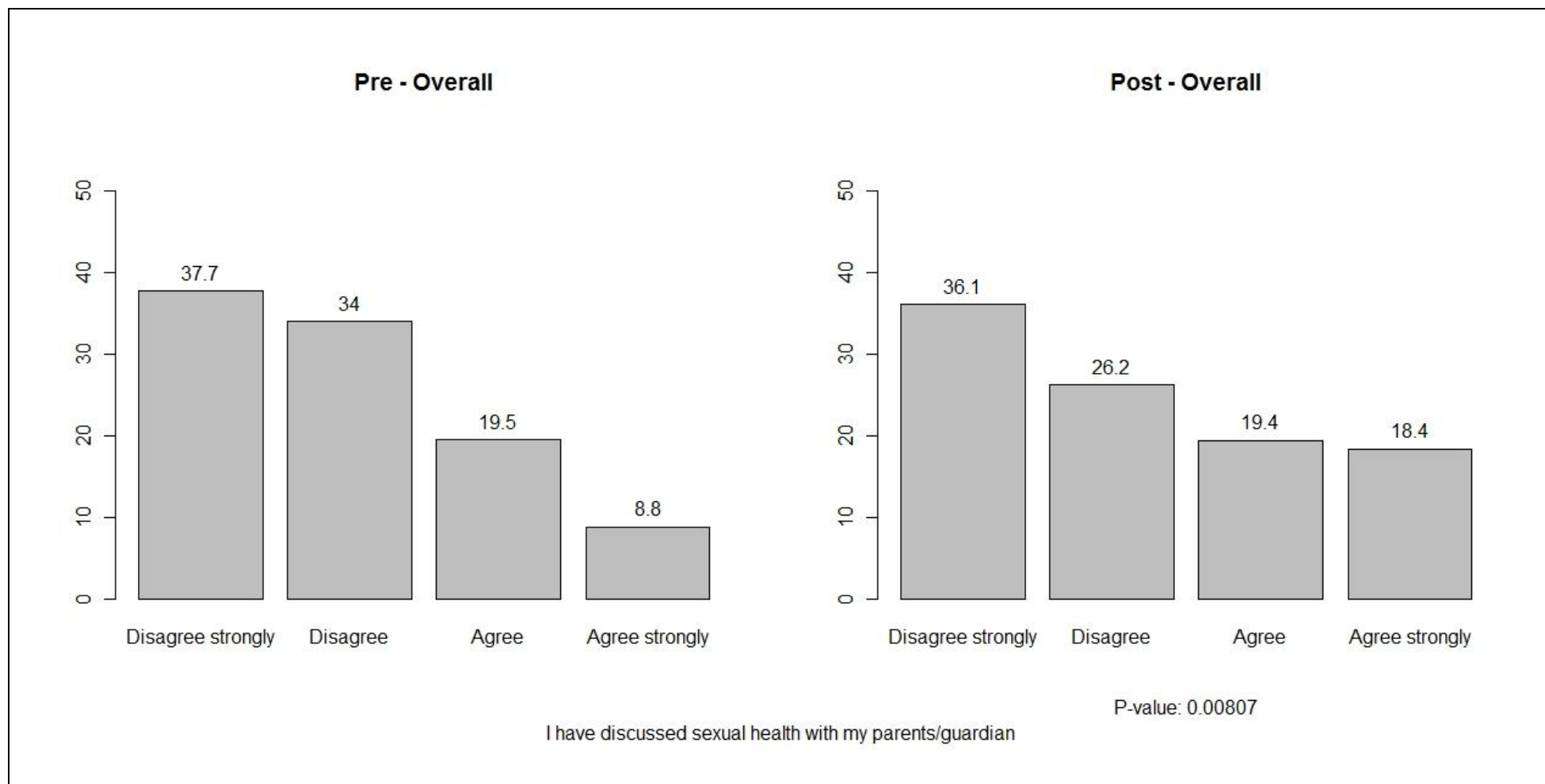


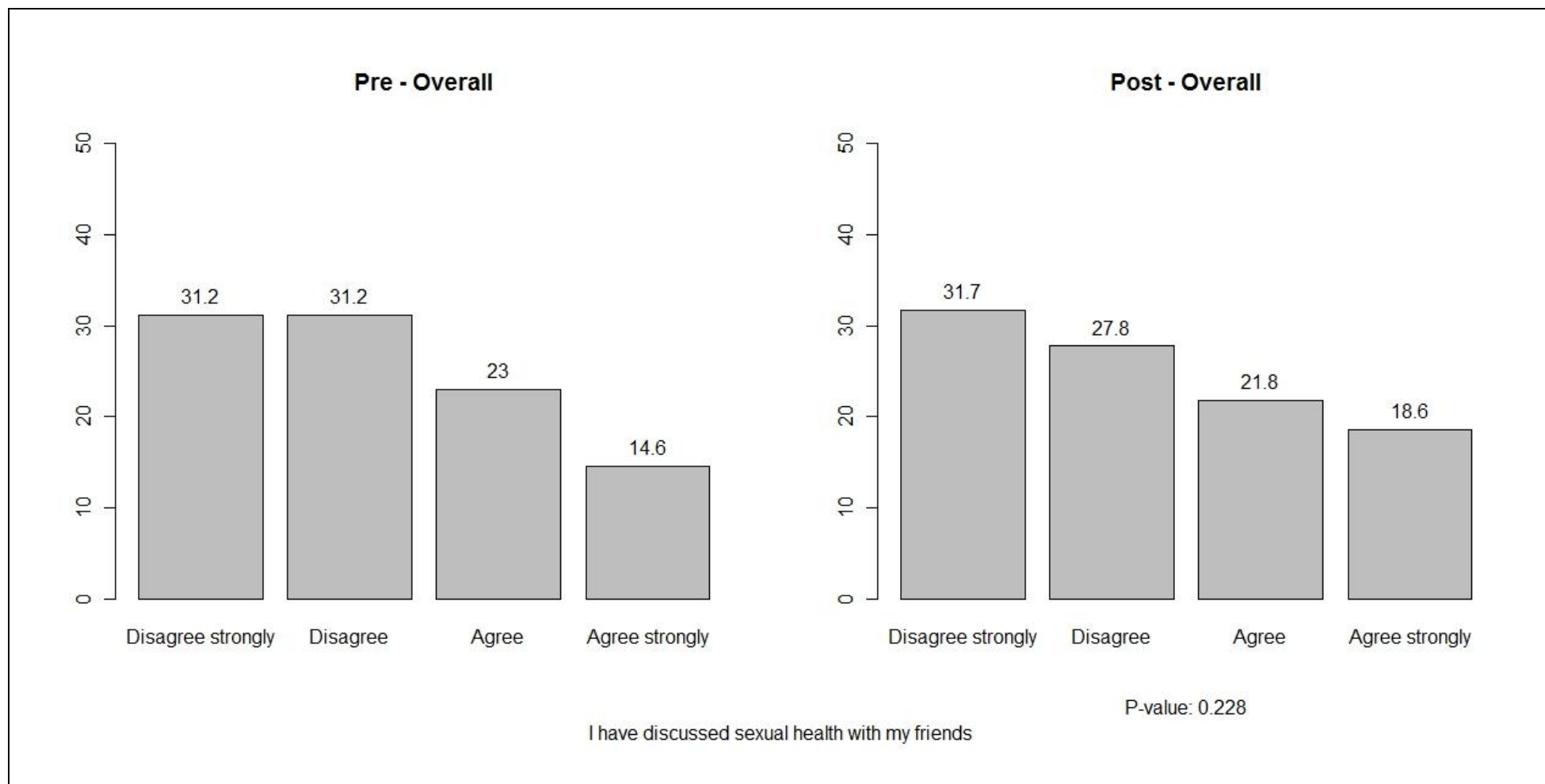


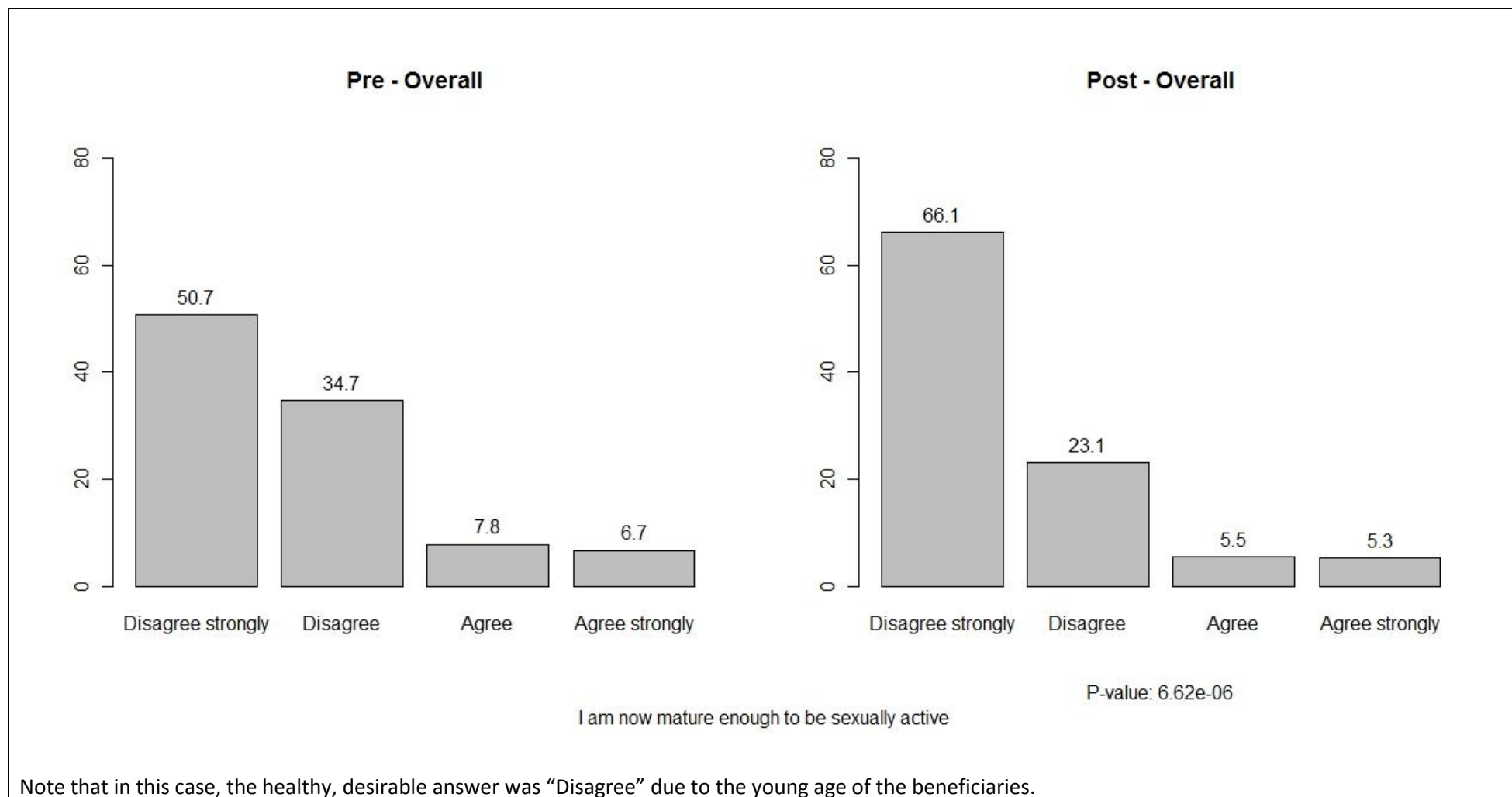


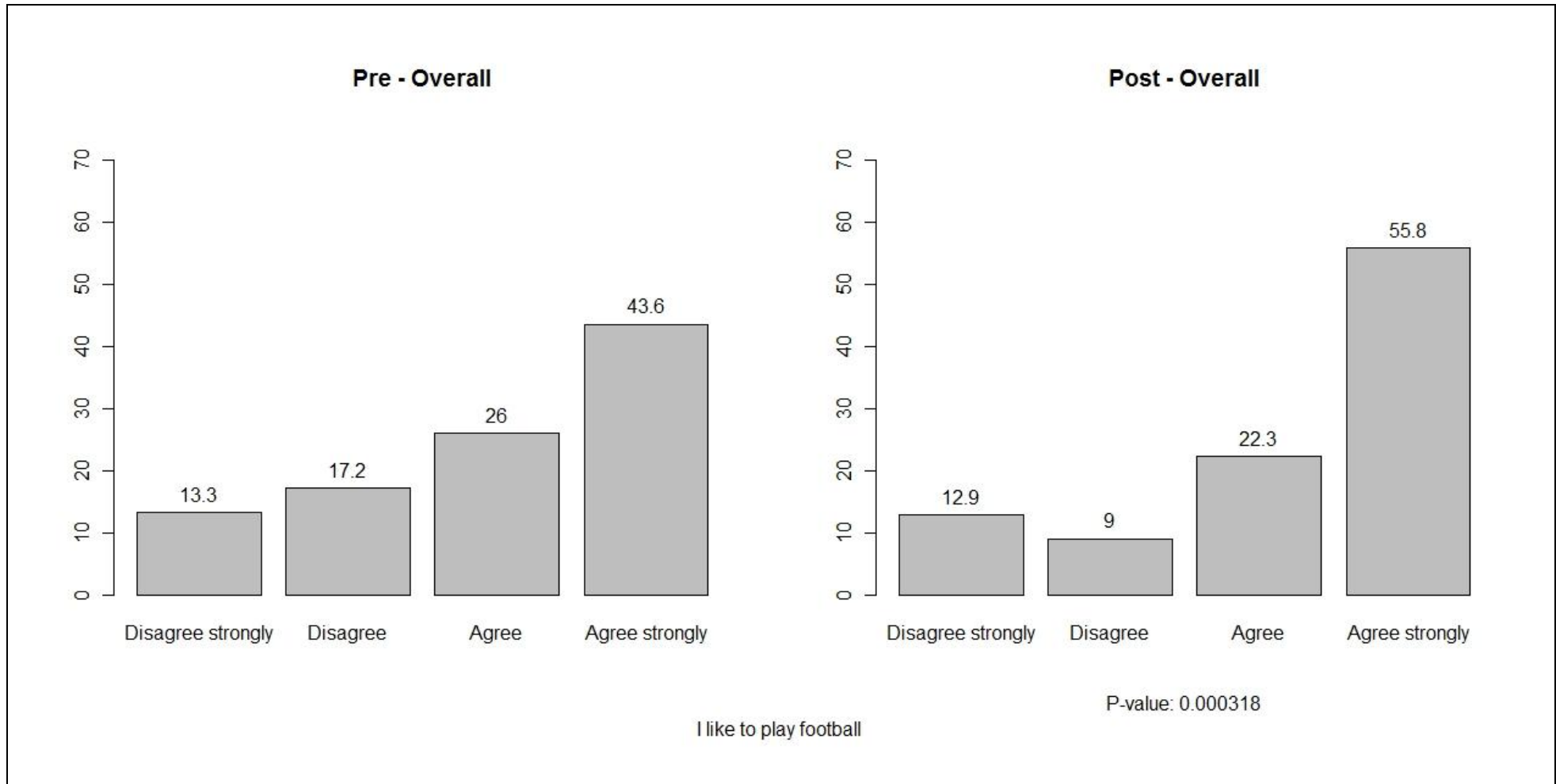


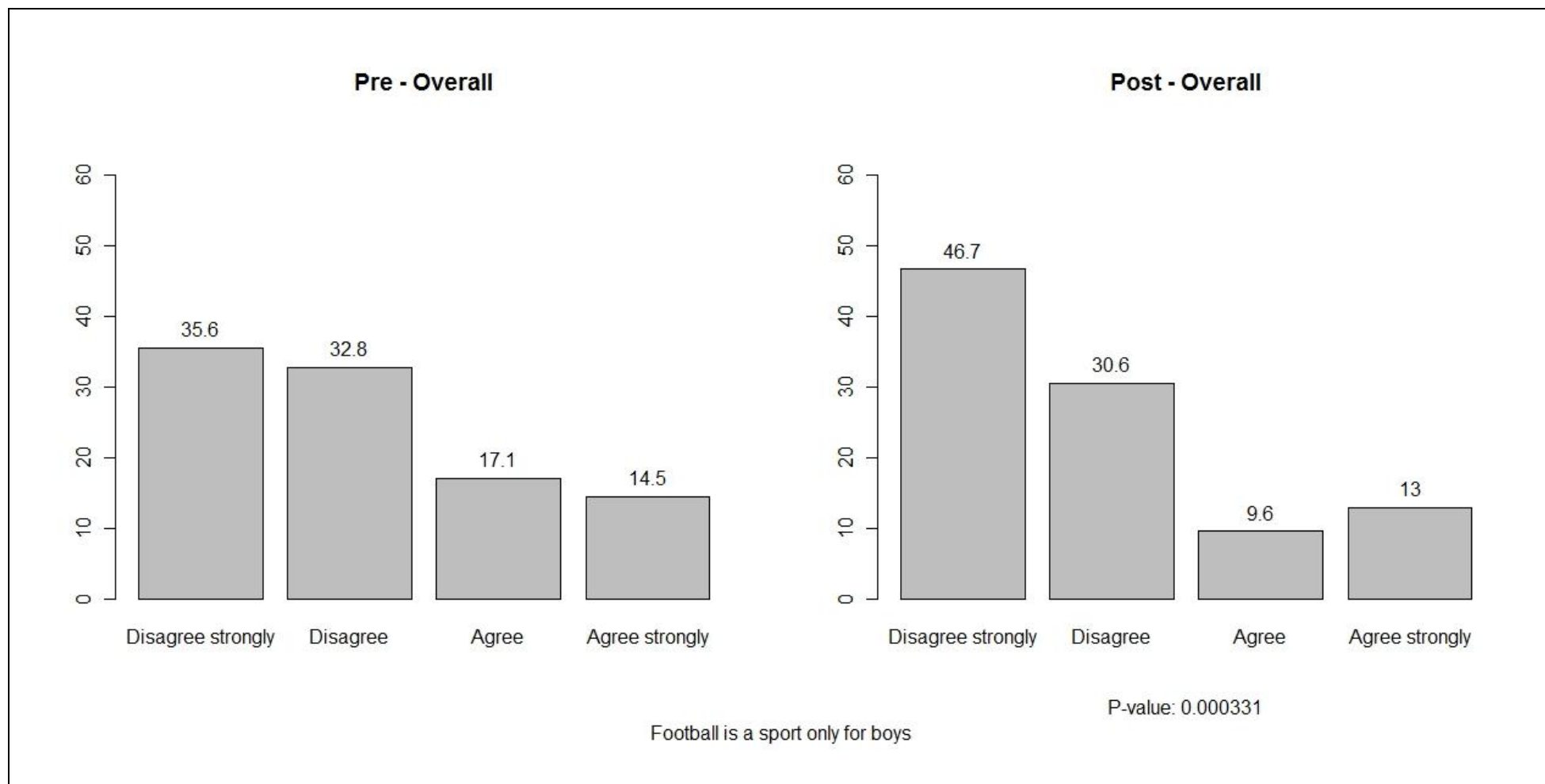


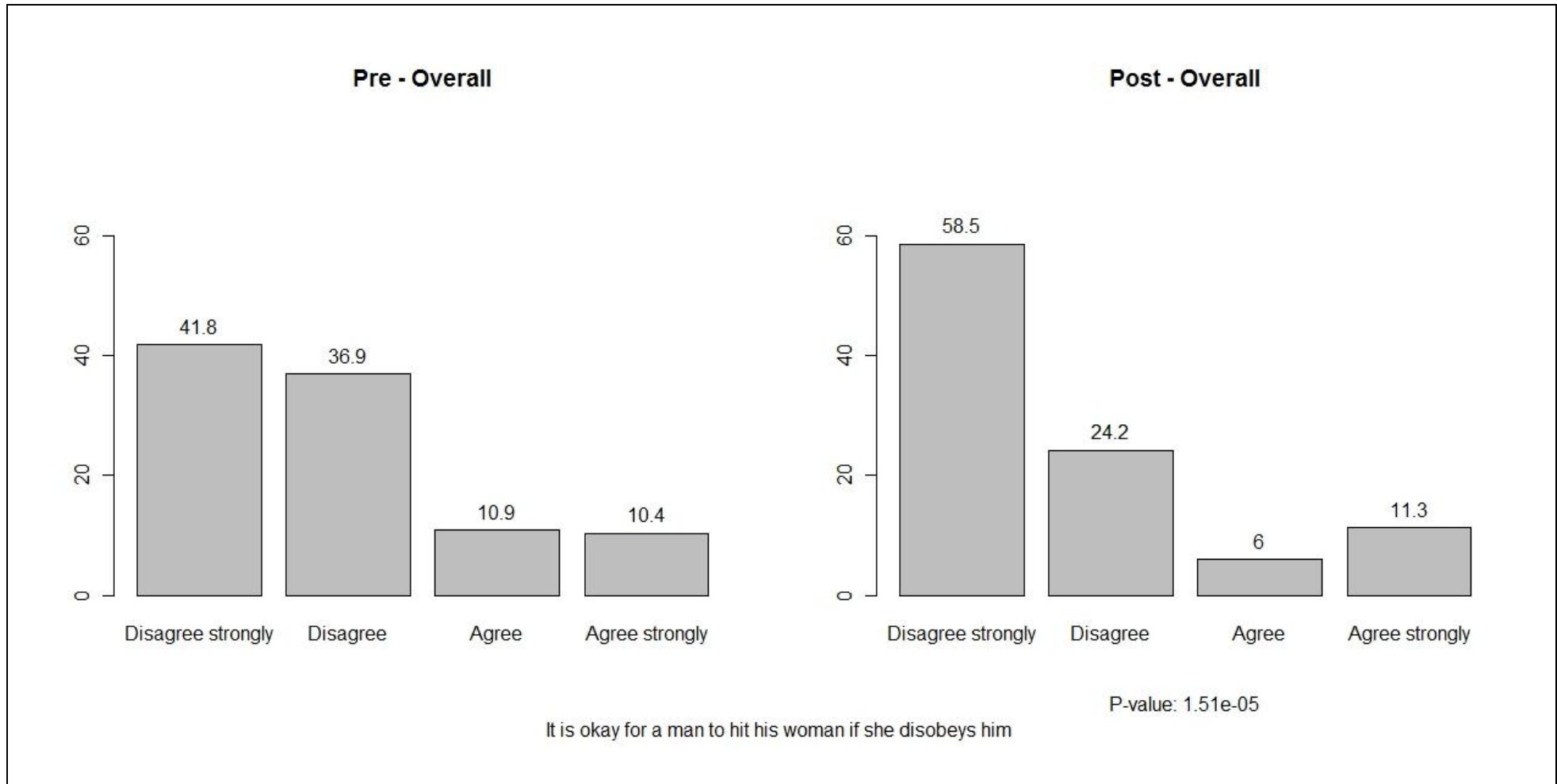


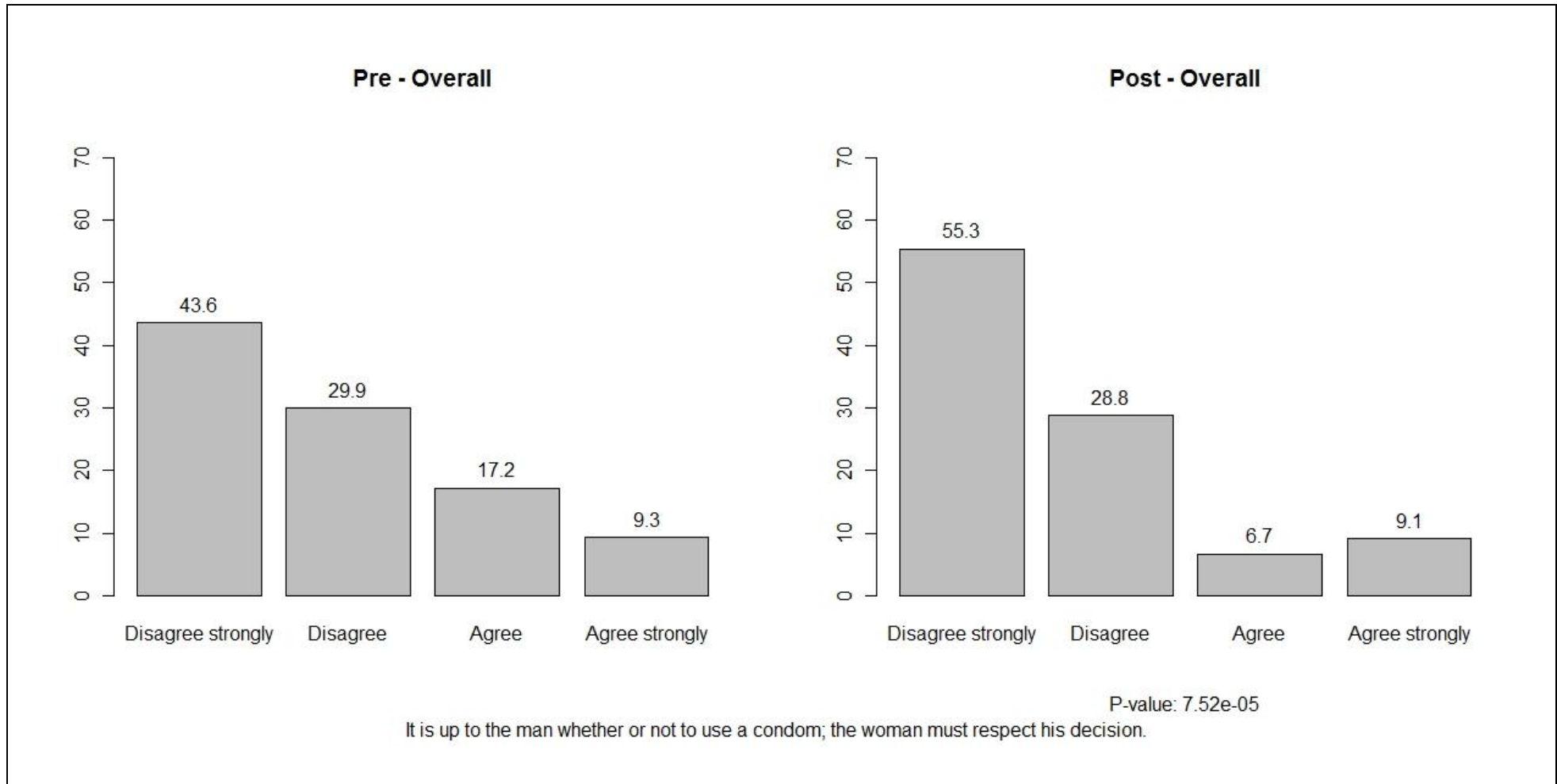


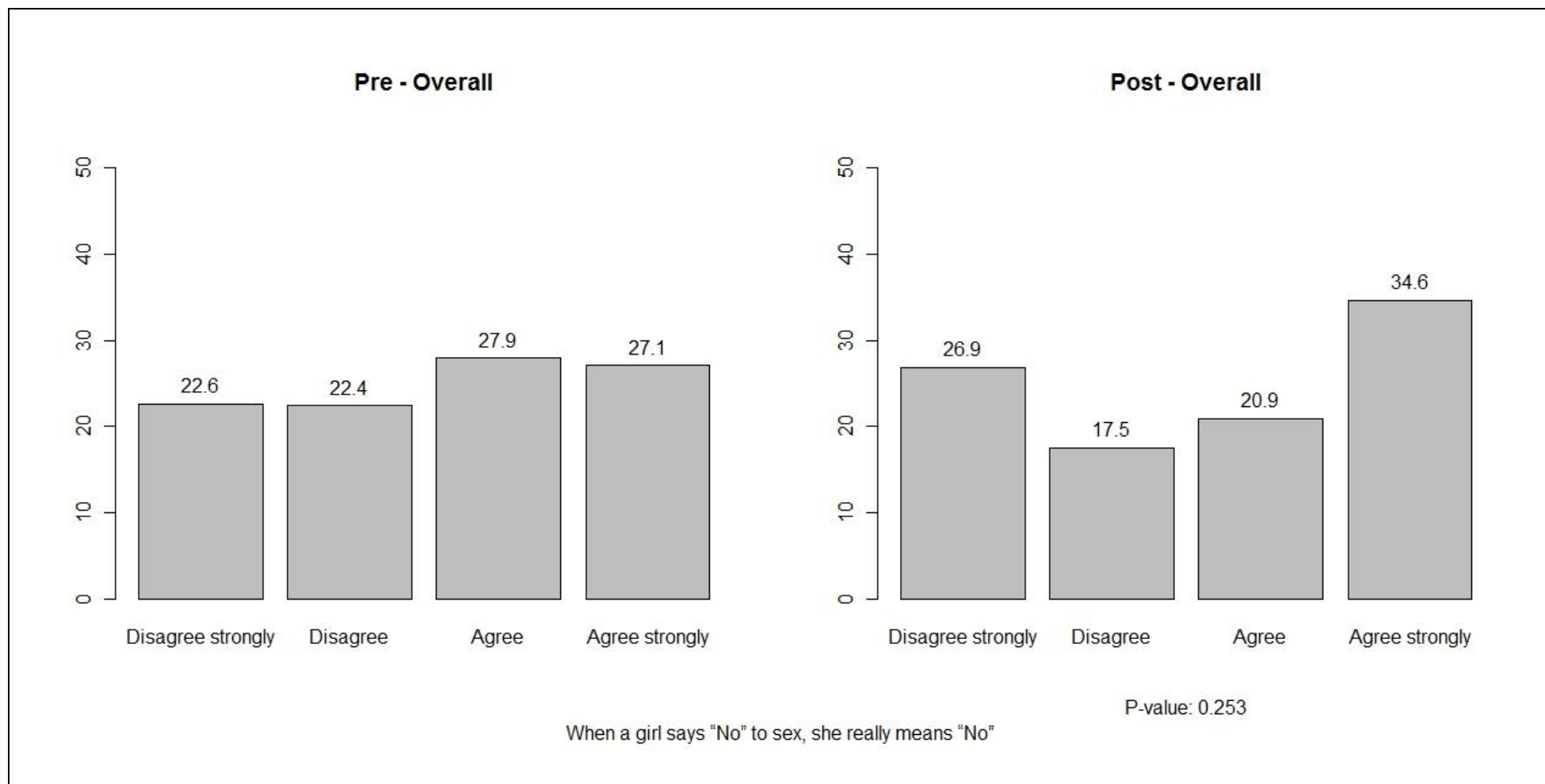


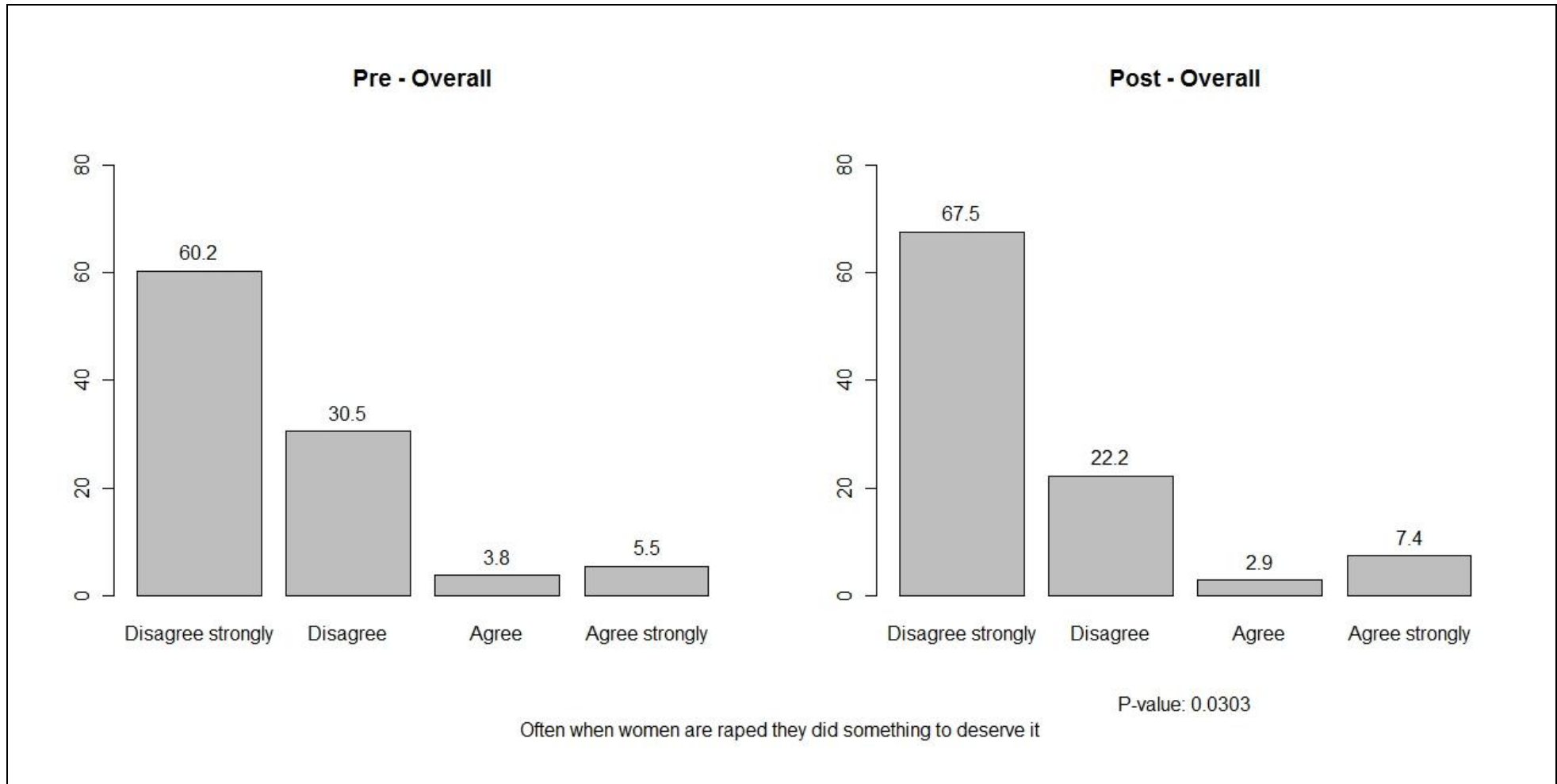












5. Appendix II: Jozini FGD Transcript

Led by: Zanele Khanyile

Translated by: Zanele Khanyile

Transcribed by: Zanele Khanyile

I would like you to tell me about your experience of the WhizzKids United Life Skills programme! Please feel free to tell me what you really think, whether it is good or bad.

1. Please share your experiences of participating in the WhizzKids United programme.

- a. How did the programme make you feel?

1st participant: I was feeling good about the WhizzKids Programme as youth guys we've change our lives to play football.

2nd participant: It was so good to me because WhizzKids supplied us with the Home Work booklets and we did well. They also taught us what we must need to do as friends to prevents HIV/AIDS and helping each other.

- b. How did the programme compare to normal classroom work?

1st participant: Your programmes I've loved when we finished our class work were able to compare my class work refer to my Home Work booklets and also an extra study on Home Work booklets.

2nd participant: The Trainers were taught us how can you achieve and setting our goals in life.

- c. How was the programme different from what you expected?

1st participant: I've never expected anything.

2nd participant: I was looking forward to play and also having Home Work booklets to read.

3rd participant: I was thinking maybe we are going to received something like WhizzKids t-shirts for Bafa Bafana in our schools and other stuff from WhizzKids.

4th participant: I was excepting to receive some medals and trophies like yesterday.

5th participant: I was looking forward to receive Life Skills certificates once we finished, I think is still coming?

Interviewer: Yes you will receive them.

6th participant: If the person won maybe were received balls, certificates and Vuvuzela.

- d. Do you think the programme was too long, too short, or just the right length?

1st participant: I've seen the WhizzKids programme was fine.

2nd participant: Yes, it was so good to me because they help us about the HIV/AIDS.

3rd participant: It was so good to me because they taught us something I wouldn't know or except before like how can I set my goals.

4th participant: It was much better to us because now we are trying to talk English not like before.

5th participant: I would to say was much better, because we taught us something we did have that information before in life.

6th participant: Your programme was longer when I compared with that one's we had before but we've gained a lot.

2. Please share your experience of the football drills.

- a. Which was your favourite?

1st participant: I would like that make a plan work.

2nd participant: A session five was interests me.

Interviewer: What was talking about?

2nd participant: Where they taught us "how can you set your goals in life".

3rd participant: My session was number four where discussed about the obstacles

4th participant: The session that interests me was about meaning of the goal in life.

5th participant: In session one was interested to me, where they show us a list to write down about our goals.

- b. Did you find them easy or difficult to understand?

1st participant: It was very easy seriously.

2nd participant: It was easy to me because they show us and explained what must need to our Home work booklets.

3rd participant: It was difficult to us before, but when time goes on everybody picks up your programme.

4th participant: Was very easy because they gave us some books to refer to them (Homework booklets)

- c. What did you think was the purpose of the football drills?

1st participant: The purpose of these drills it's to having a feel your goal.

2nd participant: The purpose was to try to minimise yourself for paying attention to those people who can be distracting your life.

3rd participant: The purpose of these drills it's to take care for you when you are HIV+

4th participant: A purpose of these drills it's to know HIV/AIDS and stop having stigma to those are HIV+ people.

Interviewer: I would like your answers, fine.

3. Please share your experience of the lessons (when you were sitting and listening to the trainer).

- a. Were the lessons interesting or boring?

1st participant: It was very interesting

2nd participant: Was interesting so much.

- b. Were the lessons too long, too short or just the right length?

1st participant: It was fine to us.

2nd participant: It was good to us like our school work.

3rd participant: It was too short because a time was limited to us.

- c. Were the lessons easy or difficult to understand?

1st participant: Oh no was easy to understand them.

2nd participant: It was easy because we were able to understand them.

3rd participant: It was very easy because when you having a problem you request your sister or brother help you.

4. Please share your experience of the group activities (such as role playing, and scenarios).

- a. How comfortable were you sharing your ideas with your group?

1st participant: I was feeling uncomfortable about your scenario

2nd participant: Oh! To me was making sense.

3rd participant: I've never had the problem about that.

- b. How well did your group work together?

1st participant: We having a good understanding each other.

2nd participant: We have good understanding and learn sometimes.

5. Did you complete the homework booklet? What did you think of it?

- a. Was it easy or difficult?

1st participant: Yes, we were able complete our Homework booklets

2nd participant: It was familiar to complete them.

- b. Was it fun or boring?

1st participant: Wasn't boring us.

2nd participant: We don't have any problem

6. Has the programme changed the way you think? In what way?

- a. Has it changed the way you think about yourself? Your future? Sex? Boys? Girls? HIV/AIDS? HIV testing? Football?

1st participant: Yes, because were able to teach me some of things I haven't in my life.

2nd participant: Nothing to me

3rd participant: I can say yes, to me because I will miss you guys and something changed my life.

4th participant: Yes, we've learned about if you having a sex you need to use condom to protecting yourself.

5th participant: We need to know each other status before having a sex with my partner.

6th participant: I've learned that we must touch someone's blood when is bleeding.

7. Has the programme changed your level of skill in any area? IWW?

- a. Has the programme changed your level of skill in football? Using a condom? Asserting yourself or negotiating? Setting goals?

1st participant: Now a girl knows to play football not like before.

2nd participant: Like a penalty I wouldn't know how set and shooting but now I knew.

3rd participant: We've learned how to use condom.

4th participant: I know how I can protect myself of getting HIV

5th participant: Now I know, what is a goal? Not like before I was blank about that.

6th participant: They taught us about career guidance like if I want to be a doctor which subject must I choose.

8. Who was your trainer in the programme? How did he/she do?

- a. How did he/she do as a teacher? As a football coach?

1st participant: Our trainer was good to us we haven't any problem about her.

2nd participant: Both were teaching us like our teachers at school.

3rd participant: They used to do together with us our corrections

- b. How could he/she improve?

1st participant: We need to get the WhizzKids Kits and have enough played ground.

2nd participant: We need enough goal poles and enough place to play.

9. What do you hear other kids saying about this programme?

- a. What would you say to other kids about the programme?

1st participant: The children were very happy with your programme

2nd participant: Most children were wishes to get a chance to participate even grade -R.

3rd participant: They always with excited if we are going to participating in your programme.

10. What will you remember most about this programme?

1st participant: The times were taught us about how can do to prevent yourself to HIV.

2nd participant: And also how can we do to achieve your goals in foot ball and in life.

3rd participant: They also taught us different types of HIV.

11. If you could change one thing about the programme, what would it be?

12. Please share your experience of this interview.

- a. Were there any questions which were unclear or difficult to understand?

- b. Did any of the questions make you uncomfortable?

1st participant: Unfortunately no, we haven't got uncomfortable questions.

- c. Are there any topics about the programme that you feel we missed in this interview?

1st participant: I think we need to go to other schools having a topic about the WhizzKids Life Skills Programme.

2nd participant: We need to run the WhizzKids tournaments with other neighbourhood schools.

- d. What could we have done to make this interview more pleasant for you?

1st participant: Like today as we are playing we've received medals and support the WhizzKids Programme.

2nd participant: Those who played well must received some Vuvuzela and Bafana bafana jerseys

3rd participant: I was expecting you guys to helping us know better to speaking English at school.

4th participant: I would like to receive medals.

5th participant: I wish you can run your interview with English.

13. Is there anything else you would like to say?

1st participant: This Programme from WhizzKids was fantastic to us

2nd participant: This programme makes our life change because now we know how things happen.

3rd participant: *We were happy with this programme because our trainers were so good to us.*

4th participant: *I wish the WhizzKids Programme is always there for us.*

5th participant: *Thank you very much with WhizzKids Programme.*

6th participant: *Thank you guys*

Thank you so much for your time!