

7. EVALUATING PEER PROGRAMS



A goal without a plan is just a wish.

Antoine de Saint-Exupery
(1900 – 1944)

Introduction

There are many reasons why evaluating a peer program is worth an organization's time, energy, and money. For example, an organization may want to know how effective peers are in enhancing retention of patients in HIV medical care, or what teaching strategies are most cost-effective in peer-led treatment adherence education support groups. The need may be as simple as learning if and how peers successfully meet client needs.

Often when a program attempts to answer these types of questions, it relies on anecdotal evidence and educated guesses from its staff. While staff members' input into program evaluation is important, it is best not to use it as the only evaluation tool. Staff members' impressions can be limited because they usually have a vested interest in program success, and because they provide partial views of program operations. As an alternative, evaluation questions are often best answered by using data from a variety of sources and using proven methods that are user-friendly, unbiased, and based on systematic principles.

This section provides an overview of how to document and measure the activities and results of a peer program. The information is intended for program directors or managers, clinical providers, and peers. It is appropriate for people who are relatively new to the field of evaluation and want to learn how to monitor progress towards meeting peer-related program objectives and goals (process evaluation). It also provides guidance on how to assess the impact HIV-positive peers have on HIV-positive clients receiving services and related outcomes, either at an organizational or systems level (outcomes evaluation). This section is not intended to replace the need for a trained evaluator for more advanced practices, but should equip program practitioners with the tools to conduct some basic evaluation activities to measure the effectiveness of a peer program.

The information in this section will position the organization to build upon existing systems using proven evaluation methods. Essential information will be provided in the text with links to more advanced information, examples of tools, and references as needed.

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TIP

Please note that your funder or other key stakeholders may have required evaluation guidelines. Any suggestions in this guide are not meant to replace what is required for your particular program. Be sure to check with your funding agency or project officer to get specific guidelines that fulfill your contract.

This section will help to answer the following questions:

- What do we want to measure with our peer programs? ([Subsection 7.1, Choosing the Outcomes to Measure](#))
- How do we design evaluation questions? ([Subsection 7.1, Choosing the Outcomes to Measure](#))
- What is a logic model and how can we apply it to peer programs? ([Subsection 7.2, Introduction to Logic Models](#))
- What data collection methods can we use to monitor and evaluate peer programs? ([Subsection 7.3, Data Collection](#))
- How can we analyze and use the results to shape program improvements, inform policy, and obtain future funding? ([Subsection 7.4, Analyzing and Disseminating Evaluation Results](#))
- What resources, including staff, do we need to implement an evaluation system? ([Subsection 7.5, Evaluation and Resource Planning](#))
- How can we ensure that the program evaluation safeguards patient confidentiality? ([Subsection 7.6, Protection of Human Subjects and Evaluation](#))
- Where can we go for additional resources and information? ([Program Resources](#) for [Section 7, Evaluating Peer Programs.](#))

Consider using this section to build upon what is already in place for evaluating program within the organization. If one is developing a new peer program, think about how existing monitoring systems within the organization can be adapted to track peer activities. Finding ways to integrate a peer program evaluation with overall agency evaluation is a best practice. This can save time and energy and prevent duplication of effort. Some of these systems may be labeled within an organization as Quality Improvement or Quality Assurance. See the [Read More: Differences Between Program Evaluation and Quality Assurance...](#) for distinctions between the two.

A first step is to contact the person(s) responsible for program activities and discuss how evaluating a peer program can be integrated into the current evaluations system for HIV services. For example, if a primary care clinic is currently monitoring the frequency of patient visits, then the peer program evaluation can compare number of visits by those patients with a peer and those without. Or if patient satisfaction surveys are conducted, one may want to include questions on that survey regarding interactions

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with peers. A user-friendly database tracking system that could incorporate peer program information may already exist. Staff may conduct chart audits for HIV-positive patients, and a peer program could utilize these audits to obtain information on clients participating in the program. Lastly, there may be resources to conduct a written questionnaire but the staff is unsure if the questions are unbiased and asked in an accurate way to capture the desired information and understand and measure the impact of the peer program.

The field of evaluation is based on scientific principles and practices that, when followed consistently, will prove useful and dependable. The selection of particular methods should represent the optimum balance between scientific rigor and practical feasibility, given the program's evaluation goals and real-world constraints.

► FOR MORE INFORMATION

Read More for Section 7

- Differences between program evaluation and quality assurance and improvement

Additional Evaluation Subsections

- 7 Evaluating peer programs: Introduction
- 7.1 Choosing the outcomes to measure
- 7.2 Logic models for peer programs
- 7.3 Data collection methods
- 7.4 Analyzing and disseminating evaluation results
- 7.5 Evaluation and resource planning
- 7.6 Human subjects protection and evaluation

Resources for Section 7

- Sample forms for documenting peer work
- Logic Model Brainstorm (The Lotus Project)
- HIV primary care quality assurance program summary (Kansas City Free Health Clinic)
- Process evaluation plan (People to People)
- HIV patient satisfaction survey-English and Spanish (Kansas City Free Health Clinic)
- Treatment adherence survey (Kansas City Free Health Clinic)
- Communicating and reporting plan (Kansas City Free Health Clinic)
- Focus group guidelines (Kansas City Free Health Clinic)
- Peer focus group guide (Massachusetts Department of Public Health)
- Example of a qualitative study design and interview guide
- Additional evaluation resources and websites
- Validated evaluation instruments

This section is part of the online toolkit *Building Blocks to Peer Program Success*. For more information, visit http://peer.hdwg.org/program_dev