

EVALUATION of the SPEAKING OUT Initiative

Findings from the Pilot Stage: 2011-2012

NOVEMBER 2013

EXECUTIVE SUMMARY

Introduction

The Global Forum on MSM and HIV (MSMGF) was founded in 2006 as an advocacy organization devoted to promoting equitable access to effective HIV prevention, care, treatment, and support services for men who have sex with men (MSM), including gay men and MSM living with HIV, while promoting their health and human rights. The MSMGF is an expanding network of advocates and other experts in health, human rights, research, and policy, working to ensure an effective response to HIV among MSM.

The MSMGF designed the *Speaking Out* Initiative in 2010 as a technical and funding assistance program to support HIV advocacy efforts and leadership development at the grassroots level. *Speaking Out* has 3 programmatic goals:

- ① Identifying, naming, and mapping stigma, discrimination, injustice, and violence targeted toward gay men, other MSM, and transgender people in a specific city or region, with a particular focus on how these factors undermine the AIDS response. The MSMGF facilitates this process by supporting the development and finalization of local *Speaking Out* advocacy toolkits simultaneously with Training of Trainers (ToT) for community-based advocates.
- ② Supporting the development and implementation of locally generated advocacy initiatives to address the issues identified and, more broadly, to influence structural factors that impinge upon the ability of MSM and transgender people to access HIV services and fulfill their human rights.

- ③ Supporting the self-realization and empowerment of MSM and transgender communities through community education and organizing for advocacy, including support for leadership development.

Several donors funded the Initiative's pilot phase, including the Levi Strauss Foundation (LSF), Hivos, ViiV Healthcare's Positive Action Program, and UNAIDS. Through the pilot period (2011-2012), the MSMGF implemented *Speaking Out* in the Middle East and North Africa (MENA), Central America, and Asia (Viet Nam). A total of 65 MSM and transgender advocates graduated from the *Speaking Out* ToT, based on the global *Speaking Out* advocacy Toolkit adapted locally and translated into French, Spanish, and Vietnamese. In Honduras, the MSMGF took *Speaking Out* a step further, funding Breakthrough Advocacy Initiatives that address stigma and discrimination based on skills and tools learned from the ToT process.

This independent third-party evaluation was conducted at the transition from pilot phase to full implementation, and aims to determine (1) how effective the *Speaking Out* process is for communities engaging in advocacy initiatives, and how closely implementation met the stated plan; and (2) the Initiative's impact toward identifying, naming, mapping, and conducting advocacy on issues that impinge upon the ability of MSM and transgender people to access HIV services and fulfill their human rights. In addition to literature review, the consultant conducted 20 key informant interviews with ToT participants, implementation partners, donors, and MSMGF managers.

Major Findings

The MSMGF was founded as an advocacy organization. Initially, the MSMGF's advocacy efforts were focused solely at the global level. In response to requests from community advocates on the ground, the MSMGF began to complement global advocacy with support for grassroots advocacy at the local level. Today, MSMGF-supported grassroots advocacy has linkages back to the MSMGF's global advocacy efforts, allowing local voices and experience to influence global spaces and bodies that shape health and human rights policies.

Speaking Out, as a grassroots community advocacy program, builds capacity at 3 levels: (1) the *individual* level, by training in-country advocates; (2) the *community organization* level, both by building skills among partner organizations and by ToT participants bringing lessons learned back to their home organizations; and (3) at the level of *the MSMGF* itself, whose own internal ability to implement and manage a program such as *Speaking Out* is enhanced with each activity.

From the Logic Model / Theory of Change (below), there are clear interconnections and intersections between capacity building (inputs), toolkits developed and trainings held (outputs), and proactive changes (impact) resulting from Breakthrough Initiatives at the community level, all of which contribute toward improved communications and dialogue.

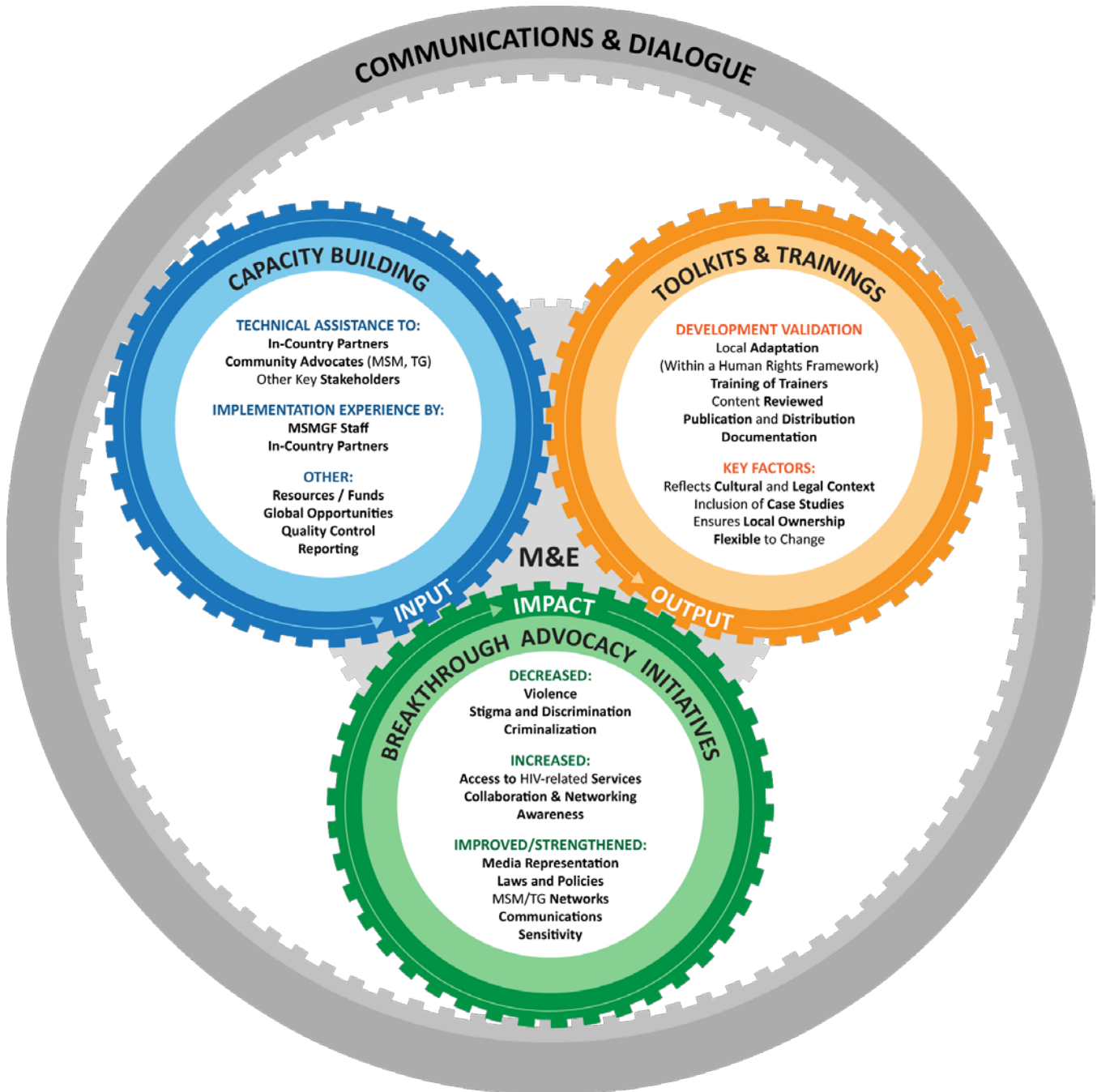
It is important to highlight the fact that key informants interviewed during this evaluation were overwhelmingly positive in their discussions of *Speaking Out's* impact. The main recommendation for improvement was the need for enhanced monitoring and evaluation (M&E) to capture all manner of achievements and impact. Informants cited impacts ranging from personal to professional and local to national - resulting from improved capacities through tools and skills learned, as well as the far-reaching benefits of the Initiative's overall process. Key findings include:

➤ **Partnerships** with community organizations to implement the Initiative facilitated the process of building local capacity, local ownership, and

dedication in the process and the outcomes, as well as sustainability of the Toolkit and advocacy messages. The partnership model allowed the MSMGF a greater degree of involvement in the implementation of *Speaking Out* as a guiding partner and technical advisor rather than as a funder. *Suggestions: maintain the current schedule of regular and frequent communications, and increase site visits with in-country partners to maintain sufficient access and ensure adequate technical support.*

- **Funding** for advocacy is challenging to find and secure. Advocacy is difficult work to do and hard to measure or attribute conclusively to positive changes. It is also sometimes difficult to balance stakeholder expectations with grassroots realities. The MSMGF faced challenges in documenting and demonstrating potential return on investment to current and prospective donors. At the implementation level, the MSMGF worked closely with partners to develop realistic budgets to cover the different implementation costs. *Suggestions: maintain transparency and open communications at current levels to ensure good working relationships, particularly concerning funding, and improve documentation to demonstrate impact.*
- **Staffing** within the MSMGF fell short of the needs of the Initiative, and budgeting for staff time fell even shorter. Ultimately, 1 field manager coordinated most of the Initiative activities, which facilitated sharing of experiences and important lessons between the 3 implementation regions, but strained some aspects of implementation and strategic planning. *Suggestions: consider additional staff, including an M&E consultant and regional field managers.*
- **Reporting** to donors was relatively straightforward and mostly narrative of quantitative indicators. *Suggestions: pursue more rigorous M&E to meet future donor requirements, capture the innovative and transformative impact of Speaking Out on the ground, and link findings and achievements to media and other communications.*

Logic Model / Theory of Change with *Speaking Out* Initiative Key Inputs, Outputs, and Impact



➤ The **Global Toolkit** was developed as a generalized model of high-quality advocacy strategies to be used as the basis for regionally adapted toolkits and ToTs, ensuring that participating individuals and organizations are equipped with the skills and techniques necessary to advocate effectively for sexual

minority health and human rights issues. Community members and local advocates were involved in all stages of the Global Toolkit’s development, validation, and adaptation. *Suggestions: as a living document, the content of the Global Toolkit should remain flexible to change and be periodically reviewed and revised.*

- **Selection processes** varied by site depending on local context and opportunities.
 - Selection of *locations* was opportunistic, targeting countries where: (1) the need for attention to sexual minority health and rights was high yet largely neglected, (2) the MSMGF already had meaningful partnerships with local organizations, and (3) the greatest impact could be achieved.
 - Efforts to select local *partners* targeted MSM-led organizations or groups with experience working with MSM, using open calls or prior association with the MSMGF as a basis for selection. Local partners were engaged to manage implementation through multiple stages, from adapting the Global Toolkit for local use, to conducting ToTs, to publishing the final toolkit, to supporting Breakthrough Initiatives. Assessments of capacity and site visits allowed the MSMGF to tailor technical assistance and capacity building for partners.
 - *Consultants* were recruited to work with local partners through a multi-step process involving a written expression of interest, interviews, and word-of-mouth recommendations.
 - *ToT participants* were selected through open calls or direct invitations to submit expressions of interest. As with consultant recruitment, this was a multi-step process. Selection criteria dictated that participants exhibit an interest in advocacy, demonstrate leadership qualities, and be willing to teach further Toolkit skills to their colleagues. Compared to direct invitations, open calls seemed to result in participants that were more proactive and willing to invest their time and energy in *Speaking Out*.

Suggestions: establish requirements for expressions of interest and assign review percentages to each category to facilitate selection by committee. Selection or recruitment criteria should link experience and qualifications with motivation and leadership. Maintain transparency in selection at all times.

Additionally, communications with donors and MSMGF Steering Committee members must remain clear and consistent, ensuring competing interests do not supersede those of the Initiative.

- **Toolkit adaptation** was led by local partner organizations and intended to ensure alignment with the realities on the ground in each region, respect for cultural nuances, and accountability to local context and legal frameworks. Multiple revisions and reviews were conducted, with an end result very much owned by the stakeholders involved. *Suggestions: conduct in-depth assessments of local advocacy capacity, laws, and policies affecting MSM and TG in terms of HIV prevention, care, treatment, and support. Ensure guidelines and steps for adaptation are loose and flexible.*
- **Toolkit content** was unique in that it contributed to identifying, naming, and mapping stigma, discrimination, injustices, and violence targeted specifically toward MSM and transgender people, within a human rights framework, and with a particular focus on how these factors affect the HIV/AIDS response. *Suggestions: remain flexible and open to content changes based on grassroots needs, and in particular consider expanding sections on advocacy tools and techniques. Continue to incorporate local case studies and examples as essential to ensuring participant ownership in the Toolkit. Include such additions in a way that does not make the Toolkit unreasonably long.*
- **Trainings of Trainers** generally lasted 5 days, and involved between 15 and 20 participant advocates and other allies. The methodology was highly participatory, practical, and interactive, which was new to most participants and proved extremely effective. In addition to imparting invaluable skills and tools, ToTs served as safe spaces to network, share and discuss ideas, and plan future collaborations. Trainings also served as validation procedures for Toolkit adaptations. *Suggestions: support ToT facilitators to ensure common understanding and some degree of ToT uniformity, while maintaining flexibility and accounting for the local context. Facilitators*

should receive feedback toward self-learning and growth. Carefully consider the length and number of trainings, as the current 5-day length was insufficient to cover adequately all components of the Toolkit.

- **Breakthrough Initiatives** and other activities occurred both intentionally and spontaneously following ToT participation (see Box, below). Honduran participants were the only *Speaking Out* graduates who formally applied and received funding for Breakthrough Initiatives, yet *Speaking Out* contributed to dozens of examples of proactive change - individually

and organizationally, nationally and regionally. Unplanned and unfunded activities were a significant outcome, demonstrating the immediate benefits of participation and the sustainability of the skills and tools learned through *Speaking Out*. *Suggestions: ensure Breakthrough Initiative proposals follow a standardized template and are awarded via an unbiased review committee. Ensure regular reporting on Breakthrough Initiatives, both funded and spontaneous, via qualitative and quantitative methodologies. Link reporting to donor and other M&E processes.*

Successful Breakthrough Advocacy Activities: Planned and Spontaneous

In 2011, Colectivo Violeta from **Honduras** received funding for a Breakthrough Initiative called Diverse Action. This Breakthrough Initiative aimed to examine human rights and HIV law at the national level, effecting changes to social protection laws and the criminal code. Diverse Action forced the National Congress to debate discrimination and sexual diversity concerning Articles 321 and 27 of the Penal Code. As a result, the Penal Code now includes language on sexual diversity, and there are strong penalties against people who engage in crimes of discrimination. Additionally, MSM are now included under “vulnerable populations” in the Penal Code, following the recommendations of a human rights review. Activities included public forums at the national university on sexual diversity, sexual discrimination, sexual orientation, and gender identity. The UN and the National Observatory of Violence now consult Colectivo Violeta regarding their own advocacy actions.

In **Tunisia**, ToT graduates were able to advocate and effect changes to the National AIDS Strategic Plan, in order to put as an objective for the near future the decriminalization of homosexuality.

In the summer of 2012 in **Lebanon**, a large gay pride protest was organized by ToT graduates and others, around which an advocacy campaign about sexual freedom was launched. Following the arrests of gay men at a cinema in Beirut, *Speaking Out* participants from the region immediately began discussing and sharing information via e-mail and social media. Together and in solidarity they strategized press statements, media involvement, and other joint actions as advised by the Toolkit, leading to the men’s release. Additionally, Lebanese participants are collaborating with Moroccan participants to improve clinical services for MSM. Following the ToT, they shared tools for monitoring, ensuring anonymity, and following up with medical records, and they are currently working together to plan joint trainings.

In **Viet Nam**, ToT graduates are in the process of developing a Breakthrough Initiative to create a national MSM network for improved communications among key stakeholders to address the challenging issues of criminalization, social stigma, and to refocus advocacy efforts. Additionally, 3 ToT participants from the same province had been engaged in small local self-help groups prior to their participation in *Speaking Out*. After the ToT, these individuals were able to mobilise their self-help groups to advocate successfully with the local government, assisting the government to run health-related events and operationalize a mobile VCT clinic. The government now provides the self-help groups with assistance to support their service provision work.

Conclusions and Recommendations

The objectives of the Initiative were found to match the stated plan, and all objectives were met both from the technical perspective and from the output/outcome perspective. Toolkits were adapted for 3 languages and regions, ToTs were implemented, advocates were trained, technical assistance was provided to partner organizations, and Breakthrough Initiatives were funded in Honduras. Additionally, *Speaking Out* had a concrete impact on local advocacy, as participants named, identified, and mapped out issues to target at the ToT and following graduation, ultimately pursuing largely successful planned and spontaneous advocacy actions. Participants also collaborated successfully across countries and regions with other participants to respond to human rights violations and strategize advocacy actions.

This report's overarching recommendation is to **design and implement a rigorous, global, and structured M&E system. This system should utilize complementary qualitative, quantitative, and appreciative methodologies at multiple levels, to assess the effectiveness, impact, and sustainability of Speaking Out, and inform the Initiative moving forward.**

Immediate Next Steps

- ① **Hire a dedicated M&E consultant to lead the M&E system development process** (~0.5 FTE).
- ② **Identify, map, and analyze M&E frameworks and systems** from other organizations and programs.
- ③ **Develop a new M&E framework and guidelines.** This includes all tools, templates, timelines, processes, and procedures for data collection, case study documentation, good practices and lessons learned, and various tracking systems to identify proactive legal, policy, and media changes.
- ④ Develop **M&E training materials** based on the new guidelines, for both MSMGF staff and managers and implementation partners and participants. Modules will be included in future trainings or used as a standalone training package.
- ⑤ **Implement the new M&E system** including data collection, case study development, analysis,

This recommendation for an improved M&E system is contingent upon several secondary and interlinked recommendations:

- ① **Include a needs assessment** (of the beneficiaries) **and mapping exercises** (of the context and key stakeholders) **to the Toolkit adaptation process.**
- ② **Tap into other Initiative data collection processes through structured and standardized data collection mechanisms.** To include pre- and post-ToT surveys, selection process documents, and rapporteur notes.
- ③ **Utilize a variety of techniques to capture both process- and results-oriented M&E findings.** To include input and output achievements against targets, case studies, tracking system findings, good practices, and lessons learned.
- ④ **Develop a two-way communications strategy to disseminate information and respond to media.** To include press releases and op-eds, regularly updated Web sites, and use of social media.

drawing conclusions, compiling and drafting reports and internal learning materials. Linking findings with social and web-based media will be integral to implementation.

- ⑥ **Conduct a late-2014 follow-up evaluation** to document steps completed towards the recommendations in this pilot phase evaluation, adding information on new countries and regions.
- ⑦ **Recruit and reassign human resources to manage the multifaceted M&E and communications requirements.** This will include a director (50% of the director of policy's time), regional field managers (1.0 FTE each for Central America and East Africa; MENA, West Africa, and the Middle East; and Eastern Europe, Russia, and Southeast Asia), and dedicated time from other support staff, including the director of communications, grants managers, and others as necessary.