

ICASA 2017

MONITORING & EVALUATION REPORT

Society for AIDS in Africa

Organizer of the International Conference on AIDS and STIs in Africa





The Government Of Cote d'Ivoire

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I. INTRODUCTION

The 19th ICASA was held in Abidjan, Cote d'Ivoire from the 4th to the 9th of December, 2017. Pre, onsite and post-conference assessments were conducted for the ICASA 2017. This report include results from these assessment. Recommendations for the improvement of the ICASA conference were also made. This report was put together by Dr. Yaya Bocoum supported by volunteers and ICASA International Secretariat.

II. OBJECTIVE OF EVALUATION

The objective of the ICASA 2017 evaluation was to identify the strengths and weaknesses of the conference and assess its immediate outcomes for quality improvements in planning and delivery of future conferences.

III. METHODOLOGY

The evaluation used mixed methods to collect a range of quantitative and qualitative data. The data were triangulated to provide understanding of the ICASA 2017 participants 'views. Main activities of the evaluation included:

- Review of ICASA 2015 report to report trends overtime.
- Consultation with members of relevant ICASA 2017 Committee and with staff of the Conference Secretariat.
- Survey of participant sat ICASA 2017 namely scholarship recipients, paying delegates, exhibitors and volunteers.
- Focus groups discussions with exhibitors, scholarship recipients and volunteers.

III.1. Data Collection

Questionnaires were designed to gather detailed information from delegates, volunteers, scholarship awardees and exhibitors before, during and after ICASA2017. Quantitative data were collected through questionnaires administration while qualitative data were collected through focus groups discussions. The survey instruments were administered in English and French.

The survey questionnaires were administered during the pre and onsite conference activities. Post conference evaluation data were collected through emails with clear instructions to help respondents complete the form. Hard copies of the questionnaires were also made available on the last day of the conference.

Focus group were conducted during the conference with exhibitors (community village and exhibition area), scholarship awardees and volunteers. In addition informal discussions were conducted at the lounge for people living with HIV.

III.2. Data analysis

Data from questionnaires were entered with Epidata and analysis with SPSS 20. Descriptive analysis was performed in order to compare trends over time. Analysis outcomes were compared with results from ICASA 2015. Focus groups were recorded and notes were taken. Records were transcribed then coded using QDA miner lite. Content analysis was conducted.

IV. KEY FINDINGS

IV.1. PRE ACTIVITIES SURVEY

Three hundred questionnaires were filled in French (54.3%) and English (45.7%). The respondents were female (38%), male (52.7%) and transgender (4.3%). The majority of respondents were between 26 and 40 years old (60%). Most of them were activist (19.3%), clinician (16.3%), researcher (15%), other health worker (14.3%) and program manager (10.7%).

V. 1.A. Visit to the Society for AIDS website:

Before ICASA 2017, 56.7% visited the conference or Society for AIDS in Africa's (SAA) website. The most frequent source of information about ICASA 2017 was the ICASA website (48.6%).from colleagues (46.6%), word of mouth (26%), social media (21.3%) and SAA website (13.9%). The least identified source of information was flyers/ posters (5.1%) and through ICASA marketing team (6.8%). Other sources of information were (9.1%) friends, email, call for scholarship from donors and announcement during other HIV events.

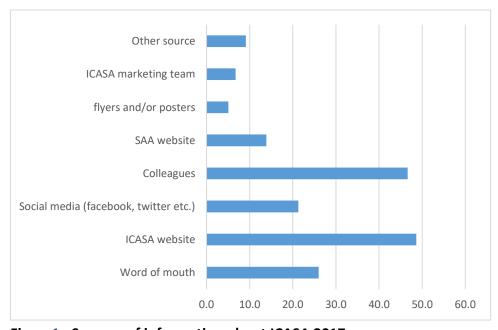


Figure1: Sources of information about ICASA 2017.

IV. 1.B. Ease of submitting proposals

The following proportion of respondents found it easy to use the online service for the following services: online registration (54%) ;submitting abstracts (45.7%), booking accommodation (29.3%) and obtaining documentation for visas (27.3%). Finding and adequate track and information from ICASA 2017 website were reported easy by 50% and 59.3% respondents respectively. Access to information from the conference secretariat was reported easy by 36.7% and difficult by 24.3% respectively (figure 2).

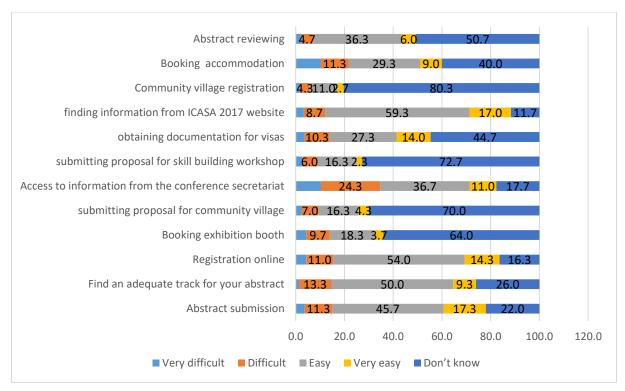


Figure 2: Respondents rating of quality of services received prior to the conference

Respondents were asked to indicate how various information on the website were useful. As showed in figure below, most of information were found useful and very useful. ICASA online program was reported useful by 51% and very useful by 31.3%. Information found in preliminary program and program outline were also reported useful by 47% and 46% of respondents.

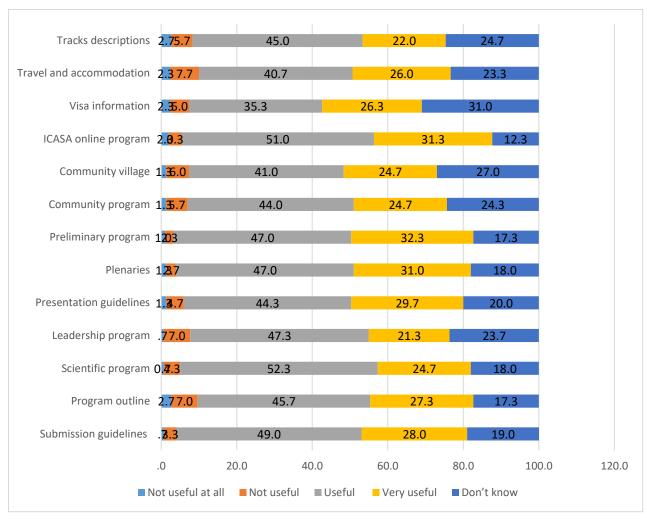


Figure3: Respondents rating of usefulness of information on the ICASA 2017 website

IV. 1.C. Adequacy of time for abstract submission and notification: Majority of respondents noted that the time was adequate for submission of abstracts (62.7%), notification for acceptance of abstracts (54%) and reviewing abstracts (51.3%). Only 16% and 11% reported that the time for notification and reviewing of abstracts were long (figure 4).

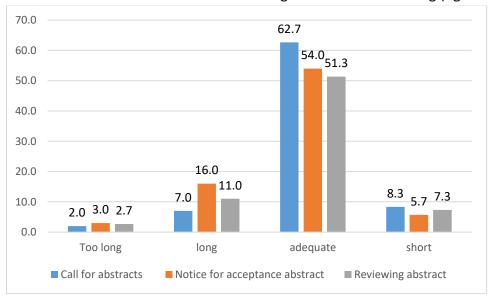


Figure 4: Respondents appreciation of time procedures for abstracts

IV.2. ONSITE ACTIVITIES SURVEY

Questionnaires were filled by delegates (68%), exhibitors (20.4%), and scholarship recipients (11.7%) in either French (53.8%) or English (46.2%) Respondents were male (53.8%), female (33.8%) and transgender (1.2%). Other respondents did not disclose their gender. Also, 49.1% respondents were between 26 and 40 years of age, and 39.9% were between 41 and 60 years of age.

IV.2.A. Quality of service received during the conference:

Figure 5 below shows that most respondents felt it was either easy or very easy to find the exhibition/community village hall (72.3%), find information at the conference venue (60.41%), find rooms for the sessions (54.9%), get accommodation (51.4%) and collect conference bag (50%). However getting meals (55.8%), and onsite register (40.7%) were difficult People also found meals sold at the food court expensive. The distribution of conference bags was delayed for two days due to late delivery.

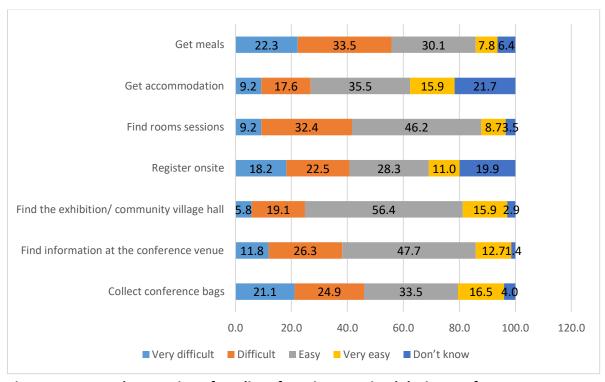


Figure 5: Respondents rating of quality of services received during conference

IV. 2.B. Rating of information received from information desk, volunteers, conference book and map of site. Majority found the information provided through these channels useful and very useful. Only 14.5 % found information from map of site not useful (Figure 6).

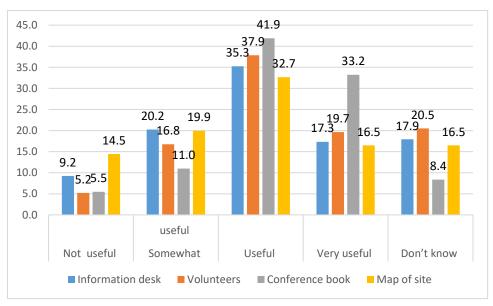


Figure 6: respondents rating of sources of information during conference

IV. 2.C. Usefulness of mobile application:

The majority of respondents (75%) did not use the mobile application. The most frequent reasons for not using the application were lack of awareness about the availability of the application and lack of internet access at the conference site. Among those who used the mobile application, 44.8% reported that information provided was useful, 25.3% very useful and 19.5 % less useful (Figure 7).

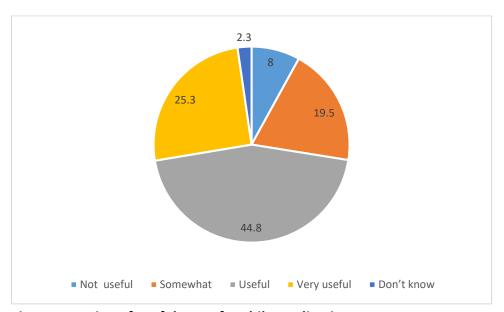


Figure 7: rating of usefulness of mobile application

IV. 2.D. Comprehension of Conference Objectives:

Most of respondents (92.8%) reported that they comprehended the objectives of the conference. Also, 88.7% were satisfied with the location of the conference. Respondents expected to gain benefits by attending to ICASA 2017. Figure 8 highlights the expectations of

participants: acquire knowledge on HIV/STIs (80.6%), meet potential partners (67.9%), and meet peers (34.7%), meet potential employers (20.8%) and meet clients (14.5%).

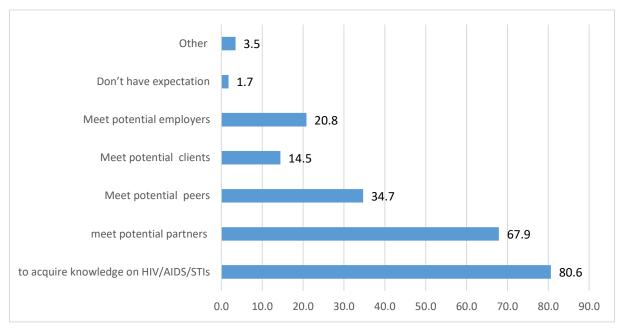


Figure 8: Respondents expectations during conference

IV.3. VOLUNTEERS' SURVEY

IV.3.A. Procedure for Volunteer Recruitment and Training:

The questionnaire was filled by174 of the 246 volunteers. Respondents were male (55.2%), female (40.2%) and 4.6% did not disclose their gender. The majority (50%) was between 26 and 40 years old and the others (50%) were below 26 years. Most of the respondents (81.6%) were not a member of HIV association. Most of them were students (57.5%).

Before ICASA 2017, majority of respondents (54.6%) reported that they never heard about ICASA. Among those whom heard about ICASA 2017, their sources of information were social media (57%), television (39.2%), radio (24.1%) and other sources (39%). This implied that most volunteers were not aware about the profile of participants they could meet. This was corroborated by the findings of the FGD where volunteers revealed that they were not prepared to meet various profile of participants.

Their most frequent sources of information for recruitment were colleagues (68.4%), relatives (23%) and ICASA website (12%) (Figure 9).

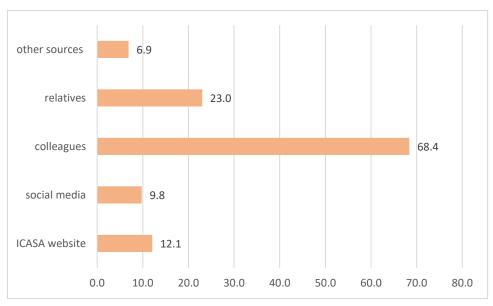


Figure 9 : sources of information for recruitment of volunteers

IV.3.B. Seven things appreciated about the conference:

Respondents identified the following as easy or very easy activities: filling recruitment form (69.5%), their work at ICASA (64.3%), the interview conducted during recruitment procedure (53.4%) and use of site map (52.3%). However certain activities were difficult or very difficult activities such as getting their perdiems (62.1%) registration and withdrawing of tag (49.4%), and find rooms sessions (47.7%)(Figure 10).

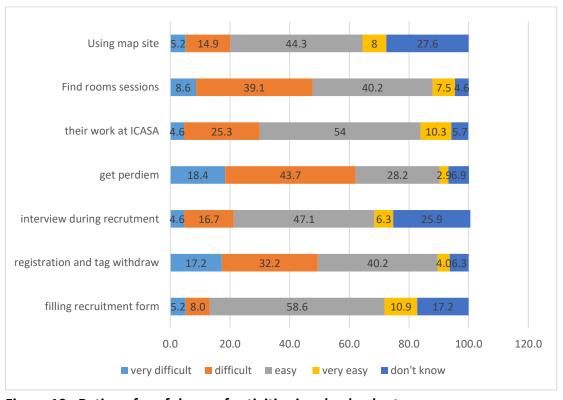


Figure 10: Rating of usefulness of activities involved volunteers

IV.3.C. Training received:

Training for volunteers is very important. Training was received by 68.4% of respondents. Almost all of those who received training found it useful or very useful (93.3%) (Figure 11). During the FGD, respondents noted that that the duration of training was too short for them to become familiar with their tasks and conference site map. Also, only a few of them were bilingual. It is important for there to be adequate plans for volunteer training during the next ICASA to address the gaps identified at ICASA 2017.

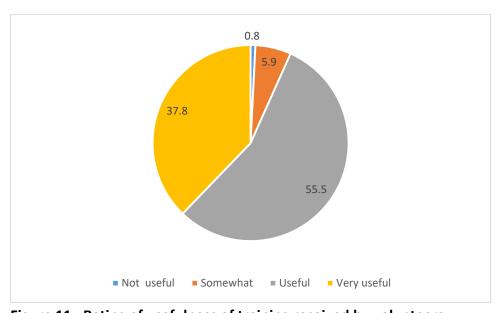


Figure 11 : Rating of usefulness of training received by volunteers

IV.3.D. Use of Mobile Application:

The mobile application was not used by 67.2% of volunteers. This was mainly because of the difficulty in downloading the application. Other reasons include inability to access the internet access and poor awareness of the availability of the application.

IV.3.E. Expectations of the Volunteers:

Figure below shows the expectations of volunteers. They were expected to acquire knowledge in HIV (87.9%), meet potential partners (64.9%), employers (63.8%), peers (34.5%) and clients (27%).

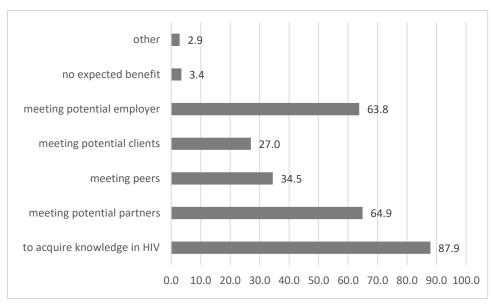


Figure 12: Volunteers expectations during conference

IV.4. POST CONFERENCE SURVEY

Post conference assessment was conducted through both onsite and online surveys. There were 268 questionnaires received – representing less than 5% of the conference participants. Most of the assessment (60.1%) online.

IV.4. A, Extent to Which the Conference Programme achieved its Objectives:

Figure 13 shows that more than 70% of respondents agreed that the conference programme achieved its objectives. Most (86.1%) respondents felt that the objective of promoting efforts to Integrate approaches for sustainable responses towards ending AIDS, TB, Hepatitis and associated diseases was achieved

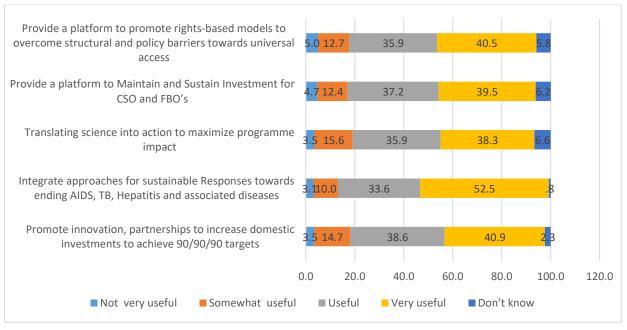


Figure 13: Respondents rating conference programme in achieving its objectives

IV.4. B, Main Tracks and Activities of Interest:

Respondents rated the Track C as the main track of interest. Track A received the lowest rating. This was similar to the report of the ICASA 2015. Also, Track C received the highest quality rating on a scale of 1 to 10; 1 being the worst and 10 the best. As shown in Figure 14, track C received the highest rationing: 76% of respondents indicated that the quality of the sessions was good, very good or excellent. Track A was rated poorest with only high rating reported by 54.5% of respondents. The rating of the tracks was poorer in 2017 when compared with ICASA 2015.



Figure 14: Respondents' rating of main tracks

IV.4. C, Non-Scientific Abstract Session:

Majority of respondents (75%) rated the community village as the non-scientific session which attracted their interest most. This was followed by the community programme (71%) and the leadership programme (65%). The ratings were lower than that of ICASA 2015. Figure 15 below represents the respondents' opinions.



Figure 15: Respondents rating of non-scientific session or activity of interest

IV.4. C, Rating of Various Conference Sessions:

Surveyed respondents were asked to rate the relevance of the various sessions and activities at ICASA 2017 in the context of their work. The survey findings are presented in Figure 16 below. 82% of respondents found the plenary sessions most relevant while the rapporteur session was found relevant by the least number of respondents (42.9%). At the ICASA 2015, the least relevant session was the skills building session.

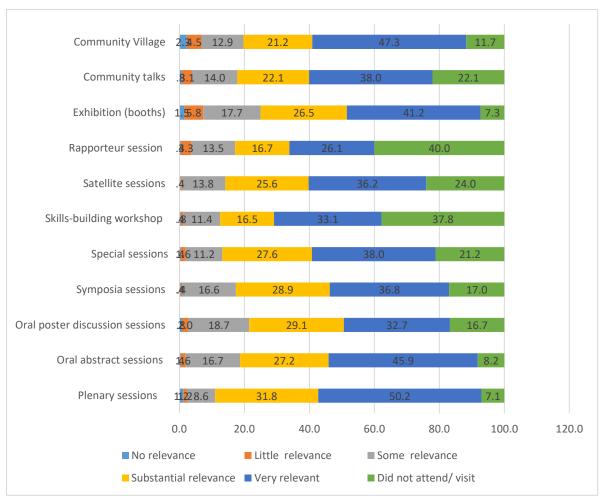


Figure 16: Respondents' rating of relevance of conference sessions and other activities

IV.4. D, Quality of Information Presented at the Conference:

As shown in Figure 17, most of respondents (85.7%) found the quality of information useful or very useful. Only 2.7% found it not very useful.

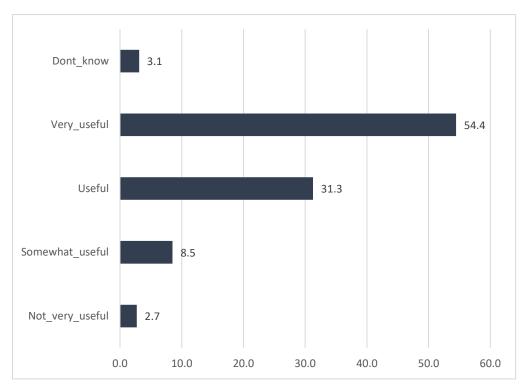


Figure 17: Usefulness of information presented at conference sessions

IV.4. E, Quality of Conference Programme:

The quality of the conference was rated by the quality of the presentations, discussions and debates; as well as the range of topics covered and usefulness of information received. The highest rating (77.2%) was for the range of topics covered at the conference. The lowest rating was for the quality of discussions and debates (68.5%). That rating is similar to 2015 ICASA.

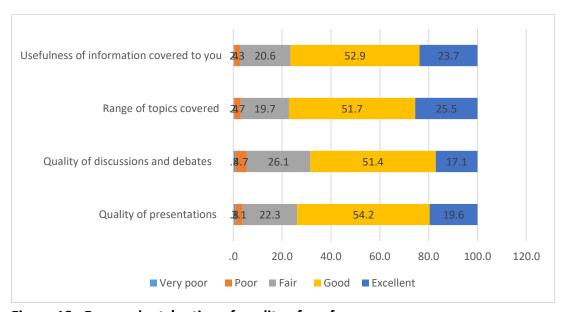


Figure 18: Respondents' rating of quality of conference programme

IV.4. F, Intention to Attend Future ICASA Conferences:

Majority of respondents (89.5%) intend to attend future ICASA conferences. This rating was

higher than the ICASA 2015 rating. Only 1.9% of respondents noted they were not interested in attending future ICASA mainly due to lack of finance, and poor organization of the conference. The organizational challenge on the first day of the conference left a negative impression with some participants

IV.4. G, Willingness to Recommend ICASA Conference to a Peer:

Despite the difficulties associated with the implementation of the ICASA 2017, the conference was still recognized as an important event. Majority of respondents (92.7%) expressed their willingness to recommend ICASA to their peers. This rate is similar to the ICASA 2015 rating.

IV.4. H: Added Value of ICASA Compared with Other Scientific or Health Conferences:

Majority of respondents (52.3%) felt the conference had additional value when compared with other scientific or health conferences they had attended. Reasons for response were:

- Wide range of clinical and epidemiology experiences in HIV/AIDS
- Style and arrangement of the plenary and specific presentations
- Networking and interaction with people from difference social, professional and cultural background
- Community village and interaction with stakeholders involved in ending HIV.
- Highlights of human rights issues and participation of key populations

IV.4. H, Direct Benefits of Attending ICASA 2017:

Respondents were asked to identify what they considered were direct benefits of attending the conference from a list of option. The highest ranking benefits were: "New contacts and opportunities for partnership and collaboration" (69.4%); "Ideas/directions for new project(s)" (65.9%); and "Increased understanding of the challenges to achieving treatment access in Africa" (63.2%). See Figure 19). The third benefit was among the three most cited in 2015. Only 2.7% of the survey participant's responded that they did not gain any benefit from the conference. This is in contrast with ICASA 2015 where no respondents noted they did not benefit from attending the conference.

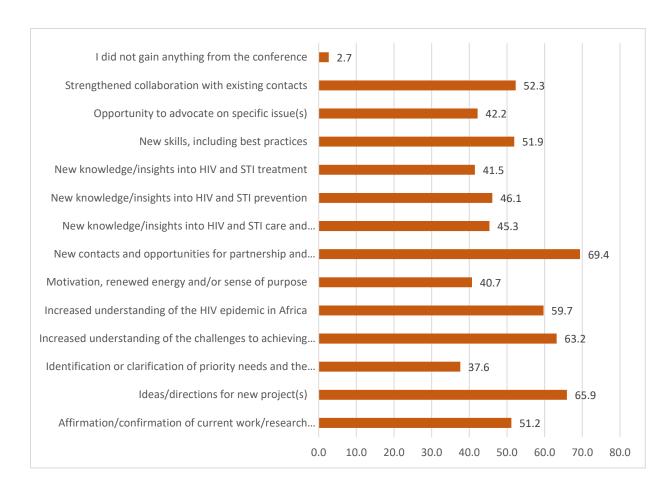


Figure 19: What respondents' gained professionally from ICASA 2017

IV.4. I, Opportunity to Build Professional Relationships:

Majority of the respondents (87.7%) indicated that they had opportunities to build professional relationships with other delegates. This is more than what was found during ICASA 2015.

IV.4. J, Anticipated Use of the Benefits Derived from Attending ICASA 2017:

Respondents were asked to select from a list of 15-action point how they anticipate to use the benefits derived from the conference. Figure 20 shows the result of the survey. The most cited use of the conference (75.3%) was to « build capacity within my organization/network ». In addition the majority indicated that they would undertake actions such as sharing information with colleagues, peers and/or partner organizations (61.8%); develop new collaborations (58.6%); Motivate colleagues, peers and/or partners (55.8%); and initiate a new project/ activity/ research (51%). Only 2% of respondents noted they will do nothing, while 2.8% were unsure of what to do. These responses were not ticked by respondents in 2015.

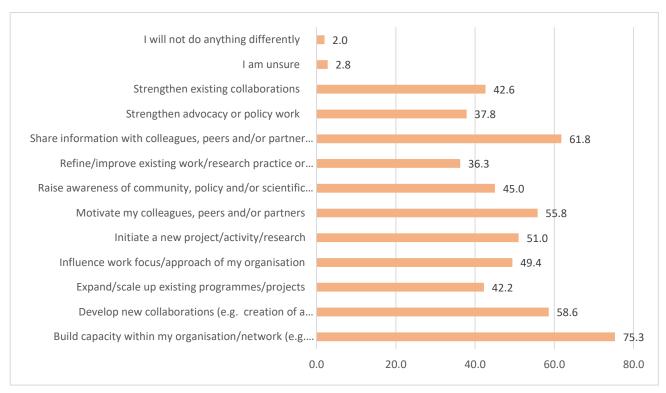


Figure 20: Respondents' intentions to use the Benefits Gained from Attending ICASA 2017

IV.4. K, Attendance at Past ICASA:

Most of respondents (66.8%) had attended previous ICASA conferences. Attendance was as far back as the ICASA 2001. There were two participants who had attended 8 ICASAs. Between 9.3% and 11.2% of those who had attended previous ICASA conferences attended the conferences organized between 2008 and 2015 (figure 21).

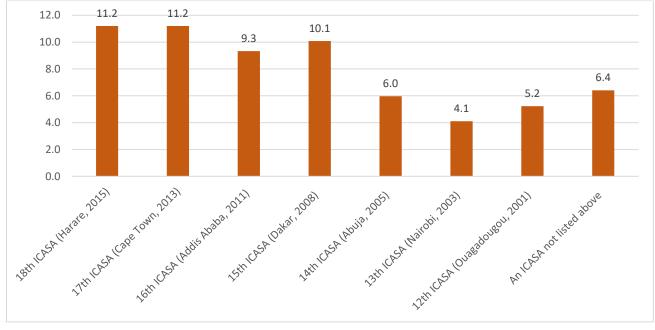


Figure 21: Attendance of respondents to previous ICASA conferences

IV.4. L, Comparison of quality of previous ICASA conferences:

The quality of registration, visa procedures, delegates information, programme, exhibition and satellites sessions was rated by respondents, and compared with previous ICASA. As shown in Figure 22, the visa procedures received the highest rating by 60.6% of respondents. Other rating were for the quality of the programme (48.5%), registration process (42.4%) and delegate information (40.9%) More than 36% indicated that logistic was poor Overall the quality of the ICASA 2017 conference was adjudge low when compared with prior conferences.

During focus group with exhibitors and organizers of the community village, participants reported dissatisfactions about logistic such no access to internet connection. In the words of an exhibitor « access to the Internet is non-existent, so it becomes difficult especially when you come from a different country, you do use the WhatsApp to discuss. So these are the details that could still improve the quality.... ». In addition, participants found the access to delegates' information, registration and poster exhibitions challenging.

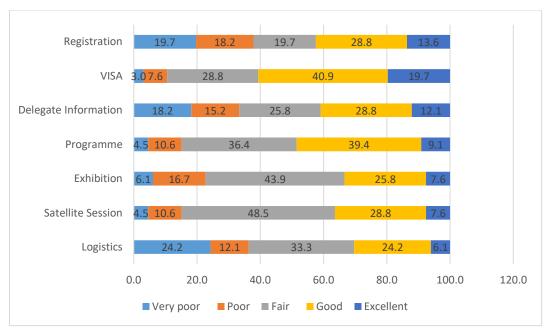


Figure 22 : Rating of compared quality of activities and services rendered in ICASA 2017 and previous ICASA

IV.4. M. Impact of Previous ICASA:

Respondents were asked to select from a list of 12-items options that best illustrates how attendance at past ICASA conferences had influenced their work Majority noted they created new partnerships (56.7%), shared information, best practices or skills gained from attending previous ICASA with colleagues, managers and partners; affirmed current work focus/strategy and motivated them, colleagues, managers, and/or partners in the work they do on HIV (52.2%). Only 4.4% indicated that the conference did not influence them to do anything different (figure 23).

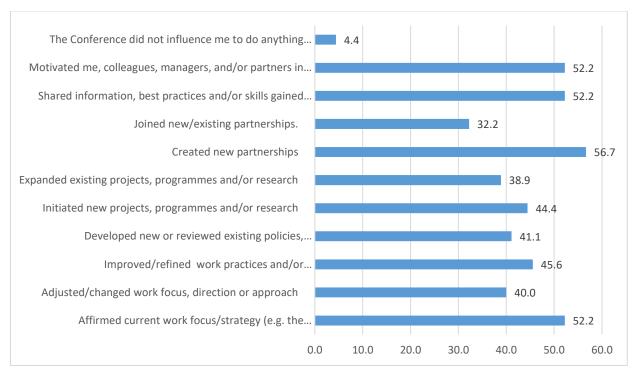


Figure 23: Impact of attend previous ICASA on respondents' work or organization

IV.4. M. Maintain contacts with new friends made at ICASA:

Respondents were asked if they were still in contact with new acquaintances made at previous ICASA. Most participants responded in the affirmative (79.8%). In addition, 55.7% of respondents identified that the established new partnerships with other participants.

VI. RECOMMENDATIONS

All the respondents were asked recommendations on how to ensure ICASAs' relevance in changing global health priorities. About half of the respondents (50.5%) agreed that ICASA needs to be improved. Some of the recommendations identified for conference focus were:

- Assessments of the three 90 in order to accelerate the achievement of the target
- HIV/AIDS supply chain issues
- More issues related to social sciences and implementation science
- More place for youth engagement and other issues related to youth

In terms of ways to improve the logistics, the following were recommended:

- Provide free access to internet connection
- Improve organization of posters exhibition by choosing an accessible and quiet place with enough space for posters, and preparing in advance the place.
- Improve communication to allow general population to participate
- Provide variety of foods at positive lounge
- Improve onsite registration, delegates communication, and financial payments.