Success and quality can be planned

As an activist in the field of HIV in Germany, Holger Pauly took part in the training courses on Participatory Quality Development (PQD) in Dublin. Here he answers questions about the tool, its benefits and possible uses.

Holger, how exactly should we think of the training courses in which you took part?

The participants could choose one of five instruments of quality development and quality assurance. I was in the Participatory Quality Development group, or PQD for short. We learned about twelve different, scientifically tested methods. These methods are in fact not so new; to some extent they are familiar from economics, for example the so-called SMART criteria.

According to this method, which originates from project management, the objectives of a programme should be *specific*, precisely *measurable*, *appropriate*, *realistic* and clearly *time-specific*.

Right. Using the SMART criteria, you can define the objective for a project clearly and neatly. It guards against problems arising in the implementation because not enough thought had been given to this beforehand. All the tools dealt with in the training course were adapted to the requirements of HIV prevention. For example, we also added an E for "ethical" to the SMART criteria.

Why was that necessary?

If for example I formulate the objective that the HIV infection rate should be drastically reduced, I could achieve this objective with compulsory tests, but this way of achieving it would not be justifiable in ethical terms.

Could you give us another example of a PQD instrument?

The so-called ZiWi method – "Zi" stands for "Ziele" or "goals", and "Wi" stands for "Wirkung" or "effect" – helps us to derive, from a clearly defined goal, the measure that is necessary in order to achieve that goal. A few weeks ago, we used this method in the working party of full-time HIV-positive staff. We brought together all our goals for 2015 and then with ZiWi, we designed all the steps that will have to be taken before the next two meetings.

What are you going to do with this newly acquired specialist knowledge?

We shall now slip into the role of trainers and disseminators and pass on our knowledge in national training courses, for example. Deutsche AIDS-Hilfe planned at least one nationwide workshop for that for 2015.

The great thing about it is that these tools are essentially all very easy to understand and to apply. That means that if, for example, I use the ZiWi method in my everyday work, I can also pass it on to my colleagues at the same time. All the participants in the working party of full-time HIV-positive staff have learned this method and taken this knowledge home with them, in order to be able to use it in their daily work. For three of the five instruments, the project has also developed <u>E-Learning</u>, in other words a method for "electronically supported

learning" which, with a certain amount of prior knowledge about how to work with groups, one can try out for oneself.

We have already mentioned that these methods are familiar from business management and project management. Does that mean that in future, HIV projects are increasingly to be planned and implemented from the perspective of (business) economics?

These tools are ultimately only there in order to enable one to maintain a better overview in project planning and project implementation. But above all, the intention is to strengthen the willingness to work in a participatory way in the first place. After all, this way of thinking first has to be accepted by people and organisations: am I really prepared to bring the key population or target group in question – and that can include colleagues – on board? Do I not only want to hear their opinions, but also perhaps let them in on making decisions? In the training course, time and again there were example of organisations that think they are already working in a participatory way, but do not really do so.

Is that because they give people the opportunity to make suggestions, but then don't take them up?

That's right. To illustrate it with a made-up example: let's say I am organising a Positive breakfast in my AIDS service centre, and ask beforehand whether the guests would prefer sausage or cheese. But then I serve fruit salad, because it's better value for money and I have to keep an eye on the costs. The point of failure is often that people think they are doing everything for their target group, but they do not take note of their actual needs. Or that because of supposedly unchangeable structural obstacles, you feel that you are not in a position to benefit from the experience and knowledge of the target group.

I can just hear volunteers and paid workers, particularly long-serving ones, groaning out loud: "If everyone involved is allowed to have their say and be part of the decision-making, we won't make any progress on anything!"

It's not necessary to upset the applecart right away. With PQD, I can for example pick out part-projects in which I use the methods in question. So I think about projects in which I would like to include the target group entirely or within a predetermined framework. Sometimes it is not necessary or desirable to include people down to the last detail.

By way of assistance, there are the so-called levels of participation. This nine-step ladder helps me decide how far I will include the target group. Do I just want to inform them about the project, or do I want to listen to them first? Do I want to include them in the decision-making, or hand over the decision-making powers to them entirely? Sometimes it does help just to look at what step I am currently at with my group. Perhaps I can manage to bring them one or two steps higher up in terms of participation. Sometimes that's enough. The goal does not always have to be to get right to the top of this ladder. The DAH advisor for quality development, Karl Lemmen, has expressed this concisely: "We do not claim to be perfect, but to get a bit better day by day."

You will now be bringing your knowledge into the community and into the AIDS service centres. Won't some people say: "I don't need this modern claptrap. I have managed perfectly well for the last ten, twenty years without lists, ladders and modules"?

Terms like quality development always sound very much like theory and even more like forms that have to be filled out. But it's not like that. Rather, it's about strengthening our participatory self-image and recognising the benefits that participation brings for our own work – namely that it may become easier and better. Another thing is that the PQD instruments are very easy to understand and use. We already use many of them in our everyday work in any case. But now I have these methods to hand, reduced to a simple formula which I can use to go through point by point to check whether I have considered everything important in my project. That helps me to do my work faster, more efficiently and more easily.

Thank you for talking to us!

Questions: Axel Schock