

# IMPLEMENTING STEPPING STONES



A Practical and Strategic Guide for  
Implementers, Planners and Policy Makers

ACORD, December 2007





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# Acronyms

AAI	ActionAid International
ACORD	Agency for Co-operation and Research in Development
AIDS	Acquired Immunodeficiency Syndrome
ARVs	Anti-Retrovirals
FGD	Focus Group Discussion
GEM Scale	Gender Equitable Men Scale
HASAP	HIV and AIDS Support and Advocacy Programme
HIV	Human immunodeficiency virus
KAPB	Knowledge, attitudes, practices and behaviours
MRC	Medical Research Council
MSM	Most Significant Change
NGO	Non-governmental organisation
PRA	Participatory Rural Appraisal
PRHP	Pacific Regional Health Project
RCT	Random Controlled Trials
SCF	Save the Children
TB	Tuberculosis
STI	Sexually transmitted infection
VCT	Voluntary Counselling and Testing



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# A

## A. INTRODUCTION

*Uganda*



*Angola*



*Angola*



# A. INTRODUCTION

ACORD is an international non-governmental organization (NGO), working to promote social justice and gender equality throughout sub-Saharan Africa. Our headquarters are in Nairobi, Kenya and we work in close collaboration and partnership with local communities and other like-minded organizations. Recognising and addressing HIV and AIDS is seen as a critical and essential part of all our work, whether this is primarily aimed at addressing its immediate effects and consequences or at recognizing its impact in the work we do in relation to conflict, governance, livelihoods and all other areas.

ACORD's approach to HIV and AIDS also recognizes it as an issue that is fundamentally linked to and shaped by gender power relations. Hence, ACORD's long-standing interest in the Stepping Stones approach that puts gender at its heart. ACORD first started using Stepping Stones in its programme in Uganda back in 1994/5. Since then, it has been used in other regions of Africa where ACORD works, including Mozambique, Angola, Sudan, Rwanda, Burundi and Tanzania.

The idea for the development of this Guide grew out of an ACORD project aimed at assessing the impact of Stepping Stones in reducing the vulnerability of young girls and women, which was implemented in 3 countries – Angola, Tanzania and Uganda – between 2004-6<sup>1</sup>. This project culminated in an international conference on Stepping Stones hosted by ACORD in July 2006, which was attended by users of Stepping Stones and others with an interest in the approach<sup>2</sup>. One of the recommendations from the conference participants was for ACORD to develop some guidelines drawing on its own and others' experiences of using Stepping Stones in order to help others to implement the approach to promote the highest possible standards wherever it is used.

## A.1 What is Stepping Stones?

Stepping Stones is a training and education process that involves working with people over a period of 12 to 18 weeks<sup>3</sup> during which time they undergo a process of group exploration and develop the ability to look critically at the societal norms and values influencing their own attitudes and behaviours. As the process moves on, they identify ways in which these attitudes and behaviours may need to be changed in order to protect themselves and others from HIV and associated risks and, to bring about more general life changes and improvements, such as improved communication with partners and children, more understanding and caring for others and increased self-respect.

Stepping Stones evaluations, ranging from personal testimonies provided by individual participants to rigorous large-scale surveys using scientific research methods, indicate that Stepping Stones has transformed the lives of many individuals and whole communities in very positive ways and has helped people and communities to be better equipped to face the challenges of HIV and AIDS and to

1 For a full description of the project, see 'Joining Hands: Integrating Gender and HIV/AIDS' in the ACORD website, [www.acordinternational.org](http://www.acordinternational.org)

2 See the full-length report and/or highlights of the conference on ACORD's website and/or in the Stepping Stones website: [www.steppingstonesfeedback.org](http://www.steppingstonesfeedback.org)

3 The time taken varies depending on the frequency of meetings and the number of sessions included

work together to support each other and care for those already infected by the virus.

The training process was developed by a British Social scientist, herself HIV positive, Dr. Alice Welbourn in Buwenda village; in Southern Western Uganda in 1994. This process culminated into publication of the original stepping stones manual and video in 1995 which were co published by Action Aid and Strategies for Hope.

Some of the unique characteristics and guiding principles of Stepping Stones that account for the popularity and effectiveness of this approach include:

- Recognising that behaviour change does not necessarily follow a rational path: it is a process that requires time to develop and must be led from *within* each of us
- Recognising the power of the group dynamic which reinforces change at the level of the individual
- Recognising that community ownership is key to any behaviour change
- Using participatory methodologies to enable all community members, including those who are not literate, to participate on an equal basis
- Recognising that individual change is strengthened and reinforced by the group dynamic and collective change
- Recognising that HIV/AIDS can not be addressed without challenging unequal gender relations and opening up communication and dialogue about the taboo subjects of sex and death
- Working with both men and women and with different age groups, both separately and together

For more information about Stepping Stones, the places where it has been used, the ways in which it has been used, the things people have said about it, the results of evaluations studies and other relevant articles and information, you can consult the Stepping Stones website on: [www.steppingstonesfeedback.org](http://www.steppingstonesfeedback.org)

In addition, ACORD has produced a number of reports. These include “Joining Hands”, the report of a 2-year project using Stepping Stones in Angola, Uganda and Tanzania and “Stepping Stones: Looking Forward – Looking Back”, the report of an ACORD conference held to report on the findings of the 2-year project. These can be found on ACORD’s website: [www.acordinternational.org](http://www.acordinternational.org) as well as on the Stepping Stones website: [www.steppingstonesfeedback.org](http://www.steppingstonesfeedback.org)

## A.2 Purpose of the Guide:

In a nutshell, the basic purpose of this Guide is to enhance the quality and impact of Stepping Stones so as to achieve the best possible result within programmes.

The following extract from the Stepping Stones website provides a useful analogy, which explains the essential purpose behind the Guide:

*“In the language of drugs, there is a difference between the efficacy of a drug and its effectiveness. A drug might perform excellently under ideal laboratory conditions, but how easily can it be used in the real world, where a huge range of factors may influence whether and how people might be able to take it? It is the same with Stepping Stones. Under the initial “laboratory” conditions of a community in rural Uganda, with highly experienced facilitators, trusted by a well-mobilised*

*and motivated community, the village participants reported some remarkable changes after the workshop. But how much are these changes replicable elsewhere in different cultures, with less able facilitators, with less locally suitable adaptations, with more fluid or urban residential units, with people of different sexual orientations...? A huge range of different factors can influence the transfer of a package such as this from one context to another". ([www.stepsstonesfeedback.org](http://www.stepsstonesfeedback.org))*

ACORD first started using Stepping Stones in some of its programmes in around the mid-90s. A great many of the large international organizations, including ActionAid International (one of the original promoters of Stepping Stones), Oxfam, Care International, Christian Aid, CAFOD, Concern, Save the Children, PLAN and countless other organizations, both large and small, are also using Stepping Stones. Yet, despite the fact that Stepping Stones has been so widely used over so many years, no Guidelines on Implementation drawing on this extensive experience have to date been developed.

Thus, the Guide seeks to fill this gap by drawing on ACORD's own accumulated experience over the last 5 years of using Stepping Stones, as well as the experiences of a number of other organizations with a view to providing both *practical* and *strategic* guidance on how to go about preparing and implementing the Stepping Stones process<sup>4</sup>.

### ***Why are guidelines needed?***

Stepping Stones is a complex and comparatively elaborate development intervention. The Stepping Stones Manual explains the process and provides a description of each exercise, along with the aims and directions for the facilitators. It also provides notes for facilitators on facilitating feedback and discussion and includes some suggestions on issues, like the qualities required by facilitators and some ideas for monitoring and evaluation. However, the successful implementation of Stepping Stones goes beyond the facilitation of the training process itself. It also requires:

- The adaptation of the content and process to suit a wide range of different contexts
- The development of a strategic vision for the integration of Stepping Stones into existing programme strategies
- The development of monitoring and evaluation methods suited to the specific purposes in each context.
- The development of follow-up plans and networking strategies to enhance sustainability

A recent review of Stepping Stones reviews<sup>5</sup> highlighted the wide variations and uneven quality of the way in which Stepping Stones has been implemented by organizations. Poor implementation of Stepping Stones adversely affects its effectiveness and, as such, seriously undermines the great potential of Stepping Stones to bring about radical and lasting change.

The review also highlighted serious weaknesses with respect to the monitoring and evaluation of Stepping Stones. This limits the ability of the development community, policy-makers and others to understand what works and why and what can go wrong and the consequences.

It is vital that lessons are learnt from past mistakes and successful practices are disseminated in order to enhance the effectiveness of how Stepping Stones is delivered, thereby contributing in a small, but

4 For reports consulted, see list of references at the end of this Guide

5 Evaluating Stepping Stones by Tina Wallace, 2006 (see [www.stepsstonesfeedback.org](http://www.stepsstonesfeedback.org) for this and other documents relevant to Stepping Stones cited here)

significant way to strengthening the global response to HIV and AIDS.

### ***What the Guide is not***

- This Guide is not intended to substitute for the existing Stepping Stones Manual. It is intended to **complement** the Manual and should be read hand in hand with it.
- The Guide is not intended to provide comprehensive guidance on all issues. That would require several volumes!! Instead, it is focused on those issues that emerged most strongly from ACORD's own experiences and those of a small number of other organizations (see References at the end of this Guide for details of other Stepping Stones reports consulted).
- The Guide does not claim to have the 'right' answers. On many issues, there are no right answers and/or the answers are likely to differ depending on who is asking the question! The Guide simply attempts to provide guidance based on ACORD's experience and that of others
- The Guide does not go into the **conceptual framework** of Stepping Stones – that is to say, the philosophy underpinning the content and the approach, such as the analysis of gender relations, behaviour and attitude change, and so on.[These issues are dealt with in a recent Spanish language Trainer's Guide produced by the South American Regional office of Plan International<sup>6</sup>].

## **A.3 How the Guide is structured and who it is aimed at**

The Guide draws heavily on the experiences of 3 ACORD programmes involved in a Comic Relief funded project aimed at testing the effectiveness of Stepping Stones as a tool for reducing HIV and AIDS vulnerability of girls and women. Examples from the 3 countries are used throughout. As noted above, the thinking behind the Guide rests on the belief that it is important to learn from our failures, as well as successes. Thus, in the interests of sharing and learning, the Guide draws on examples of what has gone wrong, as well as what went well in these ACORD programmes. No criticism is intended.

The Guide covers a lot of ground and has sought to vary the way information is presented as much as possible by, for example, using boxed examples and tables summing up the issues. At the beginning of each section, there is a summary of key issues to be addressed.

### ***Topics covered by the Guide***

The Guide aims to go through all the stages involved in the implementation of Stepping Stones from the planning stages through to the final evaluation and follow-up. It is divided into 5 main sections:-

- Planning and preparation
- Implementation
- Adaptation and Translation of the Manual
- Monitoring and Evaluation
- Enhancing sustainability of Stepping Stones

6 'Escuela de Paso a Paso: Guía Didáctica para facilitadores', Plan International, June 2007

### ***Who is the Guide for?***

The Guide is primarily aimed at development practitioners within NGOs in particular, those people within NGOs who are responsible for the delivery and implementation of Stepping Stones. These include: programme planners, field officers, training officers, researchers and information officers.

### ***How to use the Guide***

As well as providing useful practical guidance that can be referred to and applied during the process of implementing Stepping Stones in communities, the Guide also deals with strategic planning and follow-up, as well as developing appropriate links and partnerships with others in the locality. In order to allow sufficient time for such plans to be discussed and drawn up and for adequate reflection on the range of issues raised, it is advisable for organizations to consider organizing a Workshop for staff to go through the guide, section by section. Other NGO staff and/or other partners could also be invited to participate, thereby helping to jumpstart the process of developing partnerships and networks.



# B

## B: PLANNING AND PREPARATION

*Angola*



*Tanzania*



*Tanzania*



## B: PLANNING AND PREPARATION

Careful planning and preparation for the implementation and subsequent follow-up of Stepping Stones are critical to the success of Stepping Stones. Too often, organizations rush into it without having fully considered all the implications in terms of staff time and resource requirements and this can seriously undermine the outcome, sometimes even doing more harm than good in the community. This section identifies all the issues that need to be considered and other ways in which organizations need to prepare themselves prior to introducing Stepping Stones.

### KEY QUESTIONS TO BE ADDRESSED IN THIS SECTION

- ⇒ Is Stepping Stones the right strategy for my organization and the community we are planning to work in?
- ⇒ What level of commitment is required?
- ⇒ What are the costs involved in implementing Stepping Stones?
- ⇒ Should the facilitators be paid?
- ⇒ Should participants be paid?
- ⇒ Is it fair to pay facilitators, but not participants?
- ⇒ How do you decide where to implement Stepping Stones?
- ⇒ What do you need to know before you start?
- ⇒ How do you go about collecting this information?
- ⇒ How do you know if people are giving you honest answers? Is there any way you can find out?

### B.1 Clarifying aims and objectives

#### *Why do Stepping Stones?*

Before embarking on the Stepping Stones journey, those involved in strategic planning for the organization need to be clear about what they hope to achieve at the level of the community and why they think that Stepping Stones is the best strategy for achieving those objectives. In order to reach a decision, it is important to ensure that all those involved understand the nature of Stepping Stones and take on board the fact that Stepping Stones is not just a one-off activity, but requires a significant and long-term commitment on the part of the organization<sup>7</sup>. Similarly, for Stepping Stones to work, the community must be prepared to take on the commitment and to follow it through. So, there is a need to discuss it beforehand with the community prior to taking it on.

<sup>7</sup> See also Section F on Enhancing Sustainability where the question of longer term follow-up is discussed.

### *Be prepared to be flexible!*

Stepping Stones is not like other message-focussed approaches, such as dramas, distribution of leaflets, seminars, and so on. It involves a relatively open-ended process that may move in various, unpredictable directions depending on the interests and responses of the participants. Efforts to control the outcomes run in the face of the spirit of participation. It is important therefore to be aware of this and be ready to follow in the direction in which the participants want to move.

## **B.2 Organisational and community capacity and commitment**

### *Organisational capacity*

Before deciding whether to go ahead with Stepping Stones, it is also important to consider whether the organisational capacity exists. A key question to be asked is whether the organisation has the necessary human and material resources for the implementation of the process (staff capacity, time, transport, training capacity, funding, and so on)? To answer this question, it is important to have a clear understanding of what the resource implications are and to take on board the fact that resource requirements are not limited to the implementation of the process itself, but must also extend beyond that to include monitoring and subsequent follow-up.[See next section ‘Resources Planning’].

### *Organisational commitment*

Even where the capacity exists, it does not necessarily follow that the commitment is there. It is important to secure organization-wide support before embarking on the Stepping Stones process because the successful implementation of Stepping Stones requires the cooperation of all staff, from the top management down, including those working in the logistics, funding, communications, advocacy departments and so on. There are *practical*, as well as *strategic*, reasons for this.

On the *practical* level, transport is needed to get facilitators to and from sessions, to ensure all the necessary training materials are available and so on. Funding support is needed to cover all the expenses; communications support to share and disseminate the lessons learnt; advocacy to promote policy and services demands arising and so on. And, in *strategic* terms, it is important for Stepping Stones to be integrated into the overall HIV and AIDS strategy to ensure, for example, that strategic advocacy demands arising from the process are properly disseminated and supported.

### *Community commitment*

The community must also be committed to the process based on a clear understanding of what it entails. In particular, there must be a commitment to regular and active participation in the process.

## **THINGS THAT CAN GO WRONG WITHOUT ORGANISATIONAL AND COMMUNITY COMMITMENT AND SUPPORT FOR THE PROCESS**

- ⊙ **Stepping Stones is seen as a separate activity from all others resulting in competition over scarce organisational resources (staff, cars, IT support, etc).**
- ⊙ **Staff may be required to meet report deadlines, attend meetings or conferences when they have scheduled Stepping Stones activities**
- ⊙ **Cars not available when they are needed, so sessions start late, participants are kept waiting and attendance starts to fall**
- ⊙ **Some participants do not show up to the sessions and others start to drop out as well**
- ⊙ **In the case of funding shortfalls, expenditure on training, monitoring, facilitator support, follow-up in the community, may be cut with adverse consequences in terms of the quality of the outputs.**
- ⊙ **The outcomes of Stepping Stones are not documented and disseminated through organisational channels, such as the website, newsletters and other reports.**

### **B.3 Resource Planning**

The Stepping Stones training itself is usually implemented over a period of approximately 3 months. However, the process begins well before the start of the training. Thus, resource planning needs to include the planning, as well as the implementation stage. Furthermore, experience in ACORD and other organisations has highlighted the importance of including funds for monitoring and follow-up from the outset.

## **RESOURCES CHECKLIST**

### ***During planning stages***

- Facilitator training costs (trainer fees, hire of venue, training materials (including manuals), transport to and from venue, per diems, etc)
- IT support for data-inputting and analysis, including fee for external consultant if required to carry out a baseline survey, including setting up data-base, data-inputting and analysis
- Stipends and transport for research assistants who may be needed to undertake interviews during the baseline data collection process or to help with data-inputting, etc
- Planning meetings involving community representatives and local leadership (refreshments, transport)

### ***For implementation***

- Transport (cars, fuel, drivers)
- Catering (refreshments for the participants during Stepping Stones sessions)
- Training materials (copies of Manual, flip chart paper, marker pens, etc)
- Incentives for facilitators (in the form of stipends, T-shirts or satchels)
- Staff time (supervision of process, support for facilitators)
- Planning and organization of open meetings (all 4 peer groups) and special community requests (additional staff time for organizing these events, transport and catering to get people there and provide them with refreshments during the events, some translation/interpretation facilities, and so on)
- Review and/or advocacy meetings involving local leadership

### ***For monitoring and evaluation***

- Monitoring meetings with facilitators (staff time, transport and fuel)
- Development of monitoring forms, monitoring process, etc (staff time and materials)
- Collection and processing of monitoring data (staff time)
- Evaluation process (transport costs, evaluator fees, staff time)

### ***For follow-up***

- Support for follow-up Stepping Stones training undertaken by facilitators and/or others trained in the Stepping Stones process.
- Funds for development and dissemination of advocacy demands.
- Funds for follow-up meetings between community representatives and local health service providers
- Support for activities of new groups or structures emerging to continue working on issues arising from the Stepping Stones process
- Funds for Stepping Stones training for health workers
- Seed funds for income generating activities for community groups

## **The ‘incentives’ question**

During the resource planning process, the issue of whether incentives need to be paid to those involved in Stepping Stones and what these should be needs to be considered and resolved.

## Incentives for facilitators

The issue of whether community facilitators should be given incentives (such as a stipend/subsidy and/or a T-shirt) is a very fraught question that most organisations implementing Stepping Stones grapple with. Different organizations have different views and policies on this and there is no *right* answer. The table below shows the different arguments that have been put forward either for or against. At the end of the day, it is up to each organisation to weigh up these arguments and arrive at its own policy decision on the matter.

**Table 1: Arguments for and against incentives for facilitators**

FOR	AGAINST
The hours are long. Each session lasts approximately 3 hours and time is also needed for preparation and review of each session, as well as subsequent monitoring and follow-up.	Other types of community work not paid, so danger of creating confusion and/or undermining the voluntary efforts of others.
Lack of compensation can give rise to resentment and undermine the level of commitment of the facilitators.	Rewarding such work runs the risk of reinforcing the ‘dependency syndrome’ and undermining the sense of community responsibility.
Community-based facilitators are often viewed as a ‘resource’ (for information, access to facilities, etc) outside the sessions, so their job does not end when the sessions end.	The introduction of monetary or other monetary incentives may take precedence over the genuine commitment to work together to address HIV and AIDS
Other organizations provide stipends so facilitators often expect one.	Differences in the stipends paid by one or other organization often contribute to a sense of competition, rather than co-operation between .

## Incentives for participants

The question of incentives also comes up in relation to the participants. Regular attendance at the sessions, which are usually about 3 hours weekly, also requires quite a significant time commitment. The most compelling argument in favour of compensation of participants for their participation is the one relating to lost income-earning potential. Most NGOs tend to work in communities where poverty is prevalent and people’s day-to-day survival may depend on what they can sell in the market. In addition, if participants become aware that facilitators are being paid, they may feel a sense of injustices when they are expected to attend on a voluntary basis. If you are able to explain to participants why facilitators are paid an incentive, but not participants, they are usually satisfied and prepared to accept the decision. Some of the arguments that can be applied include:

### BOX 1: The incentives question: differences between facilitators and participants

- ❖ A fundamental principle underlying the Stepping Stones process is that HIV is everyone's concern, not just the concern of those directly infected and/or affected. Participation in Stepping Stones helps people to understand this principle and to play their part in taking responsibility for addressing HIV in their community. The payment of a stipend runs counter to the spirit of shared responsibility because it implies that participation in the process is a chore or obligation and should, therefore, be compensated
- ❖ Although regular attendance on the part of participants is a requirement, the time commitment is less than that required from facilitators who also have to undergo training, attend meetings for preparing, reviewing and monitoring purposes, as well as getting involved in follow-up work
- ❖ In line with best practice, the timing of the sessions should take account of participant commitments so as to avoid clashes between the sessions and essential activities in the field, the market place, and so on.
- ❖ As a rule, participants should be given refreshments during the session, in partial recognition of potentially lost income

None the less, it is important to ensure as broad participation as possible. NGOs should remain diligent and if it appears that only the better off people in the community are attending, then it may be necessary to consider the need to provide some sort of stipend.

## B.4 Site Selection

Selecting where to implement Stepping Stones is difficult as potentially all communities could benefit. Some criteria that can be applied to assist the selection process:

- ❑ **Agency implementing Stepping Stones is already working with the community:** This is important for 2 reasons: first, it helps to establish a relationship based on trust and openness, if the agency is already known to the community. Second, where an ongoing relationship exists, it is more likely that the agency will be in a position to continue supporting community efforts after the end of the Stepping Stones process, which is critical to ensure sustainability.
- ❑ **The community has requested HIV and AIDS support:** Clearly, such communities are more likely to be receptive to Stepping Stones, but, even so, it is important to ensure they know what Stepping Stones is about before assuming they are ready to take it on.
- ❑ **Reasonable access to community:** being able to ensure reasonable access to the community is critical given that Stepping Stones usually involves weekly sessions over a 3-month period. However, every effort should be made to access, even those groups who are not as easily accessible as others. Ways of getting around access difficulties, may include having staff based in the vicinity during the duration of the process or, if working with nomadic or other mobile populations (such as seasonal fishermen), selecting the time of the year when they are not on the move.
- ❑ **Availability of support services in the area:** The Stepping Stones process raises awareness

of HIV and AIDS issues, the need for prevention, testing and so on. With this in mind, it is important to ensure that services, such as VCT, condoms, treatment, and comprehensive sexual and reproductive health services<sup>8</sup>, are available or at least not too difficult to access elsewhere. However, if it is decided to work in an area where there are very few services, then the following should be done:

- In the first place, be transparent about what can be achieved; do not create unrealistic expectations
- Develop a clear strategy, including advocacy for increased access to services and resources
- Make the most of existing local resources and provide guidance to Stepping Stones participants on what these are and how they can be accessed

### *Selecting the participants*

Stepping Stones is a voluntary process, so no-one should be forced to go through the process unless s/he has independently opted to. That said, some organizations believe that some selection is needed in order to ensure that Stepping Stones selects the participants who are most 'in need' and hence likely to benefit from the process. For example, the evaluators of the SCF Stepping Stones Project in Harrar, Ethiopia, argue participants should be strategically selected in order to enhance impact and as part of an effective scaling up strategy. It is suggested that criteria could include: vulnerability (based on prior 'risk assessment') and/or membership of a range of different 'social networks'<sup>9</sup>

### *Male participation*

In most places, there is a tendency for more women than men to participate in Stepping Stones training. However, Stepping Stones works best when both men and women are involved as illustrated in the following example.

<sup>8</sup> See ICW manual for training health staff on this: [www.icw.org](http://www.icw.org)

<sup>9</sup> Bhattacharjee and Costigan, 2005

In Fiji, men have an overwhelming impact on local level decision-making. Thus, without men's involvement, decisions taken by women during the Stepping Stones training are not likely to have any impact. Conversely, male involvement can make a difference as was demonstrated by the fact that in the one (and only) village where both men and women were involved in the Stepping Stones process, the evaluation found strong evidence of an increase in positive and respectful relationships with the opposite gender more so than in the other villages. (Fiji Evaluation: 41-2)

### *Should you allow both members of a couple to take part?*

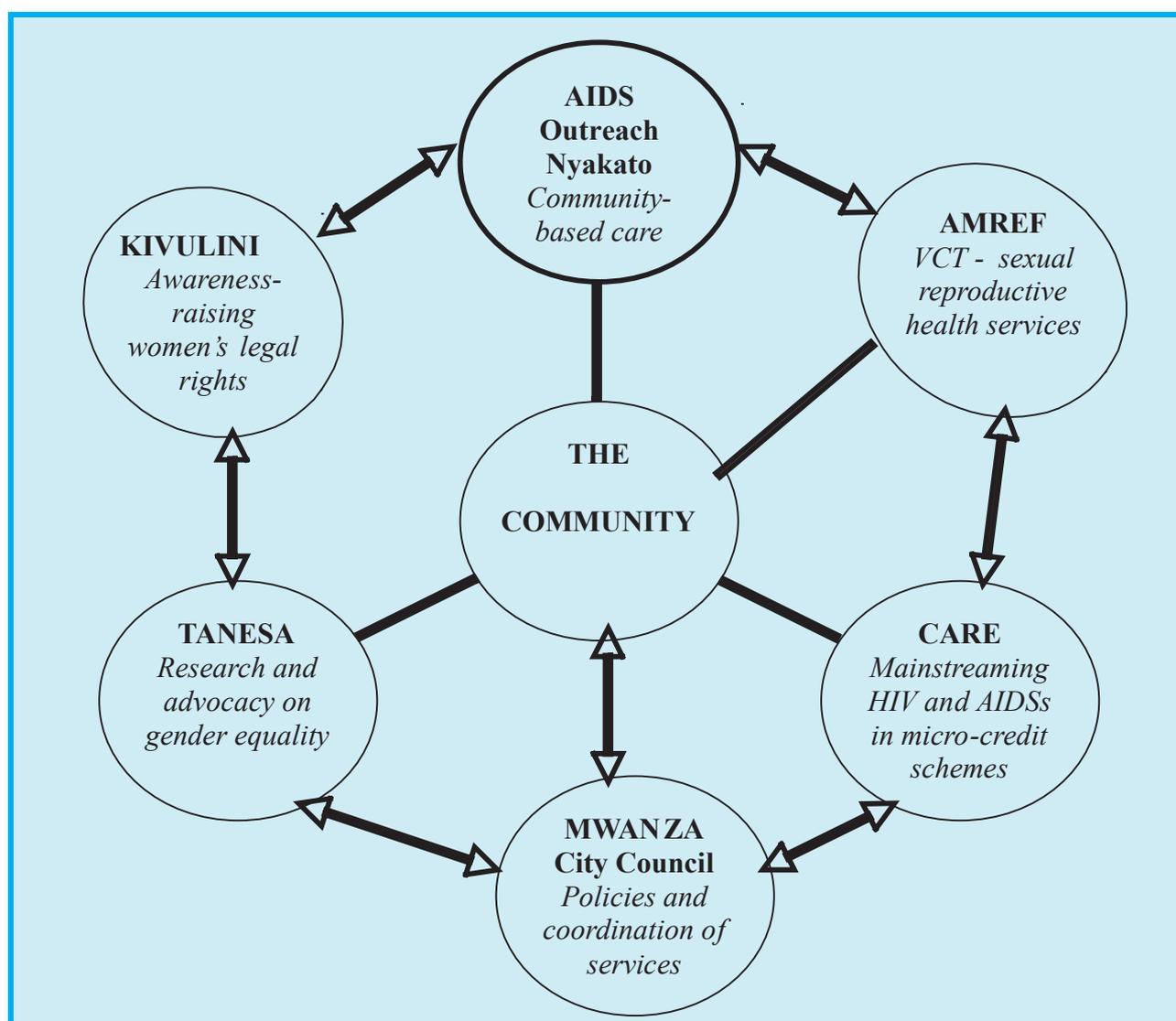
There are both advantages and disadvantages attached both partners to be part of a Stepping Stones process at the same time. On the plus side, many of the issues discussed relate to ways of improving communication between couples and changing patterns of thinking and behaviour. Facilitators should encourage participants to share what they learn in sessions with their partners. But, in reality, many women find it difficult to share information about certain topics (such as use of condoms, their right to refuse sex and not to be beaten). On those grounds, it could be considered essential for both parties to undergo the process simultaneously. This was found to be the case in the Fiji evaluation (PRHP, p.30). But, on the other hand, the presence of a husband or wife, albeit in a separate peer group, may inhibit the other partner from speaking as freely or openly and there is a risk that the one who is excluded could sabotage the involvement of the other. So, once again, there are no clear answers to this question and it is probably best left to the discretion of participants themselves.

## B.5 Developing local partnerships

The development of partnerships with local structures and the local leadership is a critical part of the project design. Involving and working with others has many significant advantages:

- Complementing the work of Stepping Stones through the provision of complementary services
- Adding credibility and community support to the process, especially when the local leadership is involved
- Strengthening the level of commitment and responses to advocacy demands emerging, such as those linked to the 'special community requests' formulated at the end of the Stepping Stones process

**Diagram 1: Local Level Networking: ACORD Tanzania Example**



## Establishing a Project Advisory Committee

The establishment of a Project Advisory Committee is one practical way of promoting local level collaboration and the involvement of all stakeholders in guiding the implementation and management of the Stepping Stones process and linking it with other HIV and AIDS services and activities in the area. The membership of such a Committee will vary depending on existing networks and relationships between local structures and other local organizations. The box below provides an example from ACORD in Tanzania.

### **Local Advisory Committee membership: ACORD Tanzania (Mwanza)**

- ⊙ ACORD staff (including the Country Director)
- ⊙ Community representatives
- ⊙ Stepping Stones facilitators
- ⊙ A member of TAWOLIHA, an organization of Tanzanian Women Living with HIV
- ⊙ Representatives of the project partners
- ⊙ Representatives of the AIDS Control Unit at District level

In ACORD, the establishment of Local Advisory Committees was found to have many benefits, such as:

- \* Providing a forum for discussion and analysis of the issues arising at different stages of the project (from the planning, implementation, monitoring and evaluation and subsequent follow-up)
- \* Providing a platform for sharing of different stakeholder perspectives
- \* Promoting and reinforcing collaboration and coordination between different actors
- \* Enhancing local ownership of the Stepping Stones process
- \* Strengthening advocacy and follow-up outcomes

## B.6 Baseline data collection

Strictly speaking, baseline data collection forms part of the Monitoring and Evaluation strategy in that it is required, primarily in order to be able to monitor and evaluate behavioural and attitudinal changes and other types of change, including changes in the wider environment, resulting from the introduction of Stepping Stones. However, the actual process of data-collection needs to take place before the implementation of Stepping Stones and this why, it has been included here as part of the planning and preparation stage.

### *KAPB Surveys*

Knowledge, Attitude, Practices and Behaviours (KAPB) surveys are often used for the purposes of guiding and informing interventions relating to HIV and AIDS. They help to gain understanding of a community. In particular, they may serve to find out about the kinds of myths or stereotypes that exist in relation to HIV and AIDS and/or misconceptions about condoms and family planning, people's attitudes towards people with HIV, and so on. Conducting such a survey is, however, quite a major undertaking, requiring specific skills and considerable resources and it is important, therefore, to consider carefully whether your organization is sufficiently equipped to undertake one. Here, the Guide seeks to offer some advice about how to go about conducting a KAPB – the questionnaire design, the resources required, common problems encountered and some limitations of such surveys.

## *Gender-focus*

Given that one of the main aims of Stepping Stones includes changing gender norms and behaviours, it is important to ensure that the KAPB survey has a clear focus on gender issues, such as how women are treated and viewed by themselves and others, the impact of gender norms on men's self-image, who decides when to have sex, how to have sex, whether to use a condom and so on.

## *Gaining community consent before starting*

It is important to explain to the local leaders and community representatives what you plan to do and get their consent before starting. This entails explaining the purpose and objectives. The community leadership may also be able to assist with the sampling process.

## *The survey sample*

Selecting the appropriate study population is critical. Ideally, it should be the prospective Stepping Stones participants. However, it is not always possible to know who is going to participate before the process actually starts. In that case, the questionnaire can be applied to a random selection of people living in the community where Stepping Stones will be implemented, preferably equally numbers of older men, older women, young men and young women.

## *How many?*

There is no hard and fast rule about the number of people to include in the survey. In the case of mall-scale, qualitative surveys, it is usually thought there should be a minimum of between 30 to 50 people to make the findings meaningful<sup>10</sup>. But, in the case of KAPB surveys, a larger sample is required in order to measure change in a community.

## *Is it necessary to have a 'control' group?*

A 'control' group is a group of people where you are NOT planning to implement Stepping Stones in the short term. This is important for the purposes of impact evaluation: where you have two population groups and all the same conditions apply except for the fact that one group underwent Stepping Stones training and the other did not, it is likely that differences in knowledge, attitude, practices and behaviour may be due to the impact of Stepping Stones.

However, when using control groups, there are important **ethical considerations** to be taken into account. For example, it is important not to 'use' the people in the control merely for your own research purposes and allow their expectations to be raised if you do not intend to develop interventions responding to issues raised. Thus, it is best to do the control survey with a population where it is planned to introduce Stepping Stones at a later stage.

## *Sharing the findings of the survey with the community*

It is important to feedback the survey findings to community members, not only on principle, but also because it can provide a useful springboard for discussion and also helps to reinforce the community's engagement in the process.

10 See, for example, 'Social Survey Methods: A Fieldguide for Development Workers' by Paul Nichols, Oxfam, 1991

### Box 2: Challenges and pitfalls of baseline data collection and analysis: some lessons from ACORD

- ⊙ It is important to be clear about what changes you would like to see and ensure the survey questions cover all these areas (see also E 2 about identification of ‘core’ impact indicators)
- ⊙ Pay special attention to wording of the questions; make sure the question is clearly phrased and avoid ‘leading’ questions – ones that implicitly encourage respondents to answer in a particular way<sup>1</sup>
- ⊙ Keep the questionnaire as short as possible by avoiding duplication and/or unnecessary questions (this just adds time and cost to the data analysis process)
- ⊙ For small samples where you just want to get a ‘snapshot’ – it is possible to analyse the data manually. But, for larger samples (50 or over), you need a data-processing programme. Once you have inputted the data into a database, you can also do cross-analysis of variables. For example, you can find out how many men said they have used a condom and compare this to how many women said they have, and so on.
- ⊙ Make sure that someone on the team knows how to use the data-processing package (if a Consultant has been employed to undertake the KAPB, get her/him to provide a set of simple instructions and/or train a member of the staff team)
- ⊙ Make sure there is enough money in the budget to employ a consultant and ‘buy’ in the expertise for data-processing and analysis

**BOX 3: Things that can go wrong with baseline data:** In the ACORD Gulu programme (N Uganda), a KAPB questionnaire containing over 50 questions was developed and the questionnaire was administered to over 1000 respondents in the camps. The consultant hired to undertake the survey inputted the questionnaires using a little known data processing package. Owing to the volume of data generated, his time ran out prior to the data-analysis being undertaken. No-one on the team understood the package and the consultant had not provided any instructions on how to use it. Consequently, the ACORD Project Coordinator was forced to manually analyse all the data. As a result, the survey report was not completed for well over 3 months after the survey was carried out. This caused problems both in the community and with the Advisory Committee who were waiting for the findings and could not understand the cause of the delay.

## Some limitations of KAPB surveys

ACORD’s experience of undertaking KAPB surveys as the basis for assessing the impact of Stepping Stones highlighted two key limitations, characteristic of, but not limited to quantitative surveys:

- (i) **Difficulties with interpretation of findings:** Often, the answers provided give rise to more unanswered questions. For example, the KAPB findings may show that very few young people use condoms or that people rarely go for HIV tests. However, what this information does not tell you are the *reasons* for these trends. For example, is condom use low because the supply is low? Because they are too costly? On religious grounds? Other reasons? Or, in the case of HIV testing – is it because of stigma – people do not want to be seen going for a test? Because of lack of information: people do not know where to go? Or because there are no services provided for people who test positive? Or a combination of all these factors?

- (ii) ***Doubts about truthfulness of responses:*** For the purposes of HIV and AIDS work, it is often necessary to delve into people's personal sex lives or behaviour in their own home. For example, you might want to ask: Do you always use a condom? Do you have extra-marital affairs? Do you beat your wife? There are obviously question marks about the extent to which people answer such questions honestly. More truthful answers can be gained by 'de-personalising' the questions. For example, rather than asking 'do *you* always use a condom?', you could ask: 'do people in this community always use condoms?'

## Need for qualitative in-depth information to supplement quantitative data

These shortcomings of quantitative survey data can be offset by collecting more in-depth qualitative data using participatory methods and developing data-collection methods that enable participants to give honest replies without having to fear judgment by outsiders.

⊙ ***Focus group discussions (FGDs):*** These are usually fairly open-ended discussions around a set of 'key' issues involving a small group of people representing a particular sector of the community. This may be an age or sex group, for example, young girls or young boys; it may be an occupational group, for example, sex workers; or a professional group, such as health workers or teachers; people linked in other ways, such as people living with HIV, or any other relevant grouping of people. FGDs are commonly used to get more in-depth information on a particular issue. By grouping people together who have something in common, they often feel able to talk more openly and the comments made by one person can act as a springboard for more from the rest. The facilitation of such discussions is quite a skilled job. It requires experience with participatory approaches and principles to avoid 'leading' the group in a particular direction and to ensure that everyone has their say and the discussion is not dominated by a vocal minority. Discussions must also be skillfully led to avoid the tendency for people to repeat the norm, rather than what they really think or do!

⊙ ***The polling booth methodology:*** This method was used in a recent Impact Assessment of a Save the Children project using Stepping Stones in Harrar, Ethiopia. People are given a series of questions to which they must answer 'yes' or 'no' with a cross in the appropriate place, rather like voting. They enter a closed 'booth' like a polling booth and they place the completed sheets into a box so no-one knows what answer they have given. Someone subsequently goes to collect the answers. The 'yes' and 'no' replies are counted. Afterwards, the respondents sit in a group and they are informed how many people responded either positively or negatively to each question. The main attraction of this method is that people are able to answer sensitive or potentially embarrassing questions anonymously and then the group can sit together and probe more deeply into the issues. The disadvantage is that it requires literacy, unless the questions are read out. Rather than use a random sample, this tool could be used with the Stepping Stones peer groups very early on in the process and then repeated again at the end.

⊙ ***The secret ballot:*** This technique, originally invented by a Gambian anti-circumcision NGO, was used for evaluating Stepping Stones by the Medical Research Council (MRC) in the Gambia<sup>11</sup>. Peer group members are given ballot papers. The facilitator reads out a question and the participants are told to mark a triangle for 'yes', a circle for 'no' or nothing for 'don't know'. They then fold their ballot sheet and put it in a hat. Like the polling booth method, it has the advantage of being anonymous. At the end of the Stepping Stones process, the same process is repeated and the answers

are compared. Examples of the kinds of questions asked are included in Annexe 2. In the Gambia case, it was found that there was a strong tendency for people to answer ‘yes’ to every question. So, it is important to explain to people that there is not right or wrong answer, it is just a case of saying what you really think!

### *Analysis and discussion of data*

Once all the baseline data has been collected (both qualitative and quantitative) and the findings have been recorded, a summary of the main findings should be prepared and shared with key stakeholders: other NGO staff, the community, local partners and the members of the Project Advisory Committee. All these stakeholders need to be involved in the process of analyzing the findings and their implications. These findings will also form the basis of the project indicators which need to be developed at this stage. (The development of indicators is discussed in Section E on Monitoring and Evaluation).

Having completed all these steps, you are now ready to embark on the Implementation stage of the process!



# C. IMPLEMENTATION

*Tanzania*



*Tanzania*



*Angola*



## C. IMPLEMENTATION

### KEY QUESTIONS TO BE ADDRESSED IN THIS SECTION

- ⊙ What qualities and skills are required for facilitation of the process?
- ⊙ Should local leaders be encouraged to train as facilitators?
- ⊙ Should facilitators always be from the same community where Stepping Stones is being implemented?
- ⊙ Can people who are not literate be trained as facilitators?
- ⊙ What kind of training is needed?
- ⊙ What happens after the training, do you have to continue supporting the facilitators?
- ⊙ What can be done if people don't show up to the sessions?
- ⊙ How can regular attendance be enhanced?
- ⊙ Is it ok to bring outside speakers in to the sessions?

### C.1 Selection of Facilitators

The facilitation of Stepping Stones is one of the most critical factors affecting the outcome of the process. The role of facilitators is to facilitate the Stepping Stones journey allowing the process to flow smoothly and spontaneously. If facilitation is approached rigidly or mechanistically, this spontaneous flow will be stopped in its tracks and the fundamental spirit of Stepping Stones will be squashed and prevented from taking off. So, choosing people with the right skills and qualities as facilitators is of paramount importance.

### THINGS THAT CAN GO WRONG DUE TO POOR FACILITATION AND/OR INADEQUATE ATTENTION TO FACILITATOR QUALITIES AND SKILLS

- ⊙ Facilitators do all the talking and don't allow the participants to express/explore their views
- ⊙ Facilitators tell people what to think
- ⊙ Facilitators rush through the session and participants are not able to explore the issues fully
- ⊙ The purpose of specific sessions is not understood and the discussion completely misses the point (see examples below)
- ⊙ Sessions that facilitators do not feel comfortable with (for example, those dealing explicitly with the language of sex, sexuality and different sexual practices or death) are omitted
- ⊙ Prevailing discriminatory gender norms are not challenged and/or reinforced

## Selection criteria

There are no fixed criteria, but based on the experience of ACORD and others, there are certain types of personal qualities and basic skills that are required to ensure good facilitation of the process. These are listed below<sup>12</sup>.

### *Personal qualities required:*

- \* Being gender-aware, personally committed to gender equality and ready to challenge one's own sexist attitudes and values
- \* Being able to talk at ease about sex and sexuality
- \* Being able to listen and show empathy and awaken empathy in others<sup>13</sup>
- \* Being able to see others as equals, not domineering
- \* Being open-minded, not prone to pre-conceptions
- \* Being prepared to explore one's own attitudes and beliefs and to change own behaviour<sup>14</sup>
- \* Motivation and interest<sup>15</sup>

### *Basic skills:*

- \* Good communication and facilitation skills: emphasis on participation, not didactic approach
- \* Ability to manage conflict constructively
- \* Ability to lead community discussions
- \* Basic knowledge of HIV and AIDS issues
- \* Ability to speak local languages (so as to communicate with participants in their own language)
- \* Ability to read English (or local language if Manual exists in that language)

#### **BOX 4: Training for non-literate people who are members of non-literate communities: ACORD's experience in Angola**

The requirement for facilitators to be literate is dictated by the need for them to be able to read the Manual. However, this criterion can be discriminatory against certain minority groups, including women who tend to have far lower literacy levels than men. This was discovered by ACORD when it was implementing Stepping Stones in Namibe Province, a pastoral region in Southern Angola. One of ACORD's main aims had been to test the feasibility of implementing Stepping Stones in a mobile community. But, in the event, it was illiteracy, rather than mobility in these communities that turned out to be the major obstacle. On account of the literacy requirement, no pastoralists were trained as facilitators, with the result that no pastoralists participated in the Stepping Stones process. When this issue was subsequently debated by ACORD and partner staff, a recommendation to develop Stepping Stones training suitable for non-literate peoples was put forward in line with the original aim of making Stepping Stones accessible to all.

12 Most of the qualities listed are those mentioned in 'Stepping Stones: life skills and sexual well-being: a desk-based review' by Gill Gordon with Alice Welbourn, USAID Interagency Gender Working Group, June 2002, [www.unicef.org/lifeskills/?les/ReviewSteppingStones](http://www.unicef.org/lifeskills/?les/ReviewSteppingStones) 2001. doc,

13 According to Colette Harris, "Empathy is the ability to deal with other people's pain as if it were one's own and thus to be sensitive to how it is produced and the kinds of changes necessary to minimise it." (Harris, 2007: 13-14)

14 See also next section on Training of Facilitators where this point is further explored

15 The importance of motivation and interest on the part of facilitators was highlighted a key selection criterion in the Fiji evaluation

The issue of non-literate facilitators also arose in relation to the Gambian experience of Stepping Stones where the possibility of producing a ‘talking book’ in which the instructions for the exercises are recorded on audio cassette in local languages was discussed as a way of opening the door to non-literate facilitators<sup>16</sup>. The use of illustrations could also be explored.

### **Other criteria:**

- ⊙ **Gender and age:** Ideally, there should be 2 men and 2 women – one younger and one older to work with each of the peer groups, respectively. If both criteria can not be satisfied, finding someone of the right age is less important than it is to ensure that the women’s groups are facilitated by women and men by men.
- ⊙ **Being HIV positive:** The recruitment of people who are HIV positive to facilitate the process has many significant advantages. These include: -
  - a) Bringing direct personal experience and understanding of what it means to be HIV positive to the discussions
  - b) Helping to dispel fears and myths associated with HIV/AIDS/ (especially if the facilitator is able to be open about her/his sero-status)
  - c) Reducing HIV-related stigma – still a very widespread phenomenon in most communities all over the world
  - d) Encouraging others to declare and/or find out their own status
- ⊙ **Ability to understand the thinking behind Stepping Stones:** While there is obviously room for different interpretations and approaches in keeping with different cultural and social contexts, each individual session has a clear set of objectives and these should be clearly understood by the facilitators in order to guide the participants along each step of the way. In particular, facilitators need to understand that Stepping Stones is not simply a vehicle for passing on factual information about HIV and its transmission. It is, primarily intended as a tool for setting in motion a process of critical questioning and change at the level of individuals, groups and communities. It is based on respect for the rights of every individual, regardless of her/his sex, position, level of education, HIV status or any other difference. In particular, facilitators must have an understanding of concepts linked to **gender and power relations** and to be able to grasp the ways in which Stepping Stones can lead to changes in gender dynamics in order to reduce HIV and AIDS vulnerability. – both in terms of prevention and in terms of the consequences of living with the virus.
- ⊙ **Prior experience with participatory processes:** The principle of participation – which entails promoting and valuing the participation of all participants on an equal basis – is fundamental to the Stepping Stones process. Facilitators must be able to understand the distinction between participation and more conventional didactic methods.
- ⊙ **Respected and respecting:** It is important for facilitators to be respected by members of the community. But, equally important is the need for facilitators to respect participants
- ⊙ **Local leaders – pros and cons:** As regards whether it is good or bad if community leaders should be trained as facilitators, there are mixed experiences on this front.

### Box 5: Local leaders as Stepping Stones facilitators: pros and cons

In one village in Southern Angola, the traditional chief facilitated the Stepping Stones process in the community and this had a very powerful impact on community participation. It also had other significant advantages in that it raised his awareness of, and ability to respond to gender violence, a major issue in that community that he had previously been unaware of. By contrast, in one of the villages in Fiji where the local village headman was trained, it turned out not to be beneficial as he was too busy to follow through at the implementation stage. (PRHP p.28-9) On the other hand, in another village, the involvement of the village headman was critical, especially in the absence of male community participants (PRHP, P.42)

- ⊙ **Resident in the community:** It is argued by some that facilitators should be resident in the community, but others argue that it is preferable that they come from outside (See table 2 below for the arguments used for and against). Yet others, suggest that it is best for facilitators to come from a nearby village with the same language or culture, but not the same village<sup>17</sup>.

**Table 2: Arguments for and against recruitment of facilitators within the community**

FOR	AGAINST
Knowledge and understanding of community needs, language and culture	Personal biases (in relation to or on the part of the community members or groups within the community) may undermine openness and honesty in the process
May be viewed as an ‘insider’ – thereby helping people to open up and speak openly	May be viewed as too close for comfort and people may not talk for fear of gossip
Proximity and availability to community as an information resource <sup>2</sup>	Lack of adequate skills (eg in participatory methodologies) and knowledge/understanding (eg of gender dynamics, group dynamics, technical understanding of facts relating to HIV transmission, prevention, and so on)
Ongoing resource within community facilitates follow-up processes	May be difficult to find someone with all the required skills and qualities
Knowledge and skills remain within community	If facilitator is paid and participants are not, this may create feelings of resentment that could interfere with the process

The Training Guidelines<sup>18</sup> recommend that it is best to start with paid staff so as to ensure the quality of the training process and, where participants prove keen and able, they should be offered the chance to undergo training and become facilitators themselves. This has been the experience of a number of ACORD programmes, such as in Gulu (N. Uganda) where members of the Pabbo Camp for Displaced Persons who participated in SS, subsequently became facilitators themselves and eventually also trainers of other facilitators.

17 Harris 2007, p.14

18 See Stepping Stones website [http://www.stepsstonesfeedback.org/downloads/SSTraining\\_Guidelinesoct02.pdf](http://www.stepsstonesfeedback.org/downloads/SSTraining_Guidelinesoct02.pdf)

## Selection of Trainers

Trainers are those who train the facilitators. By and large, trainers require the same personal qualities and basic skills as those required by facilitators.

Additional considerations include the organization/s represented by the trainers. Sometimes, a large organization will run a training primarily for its own staff, as for example, ACORD which organized training for staff from several programmes – Tanzania, Uganda, Ethiopia and Sudan. It can also be beneficial to involve other organizations and/or health workers or workers from government health districts. The advantage of this is that it may help to build up local networks. Another advantage is that it can increase the level of cooperation between the NGO and government sectors and lead to more coordinated responses to the issues and demands of community participants arising from the Stepping Stones process itself.

### The selection process

Appropriate ways of identifying people with these skills have to be developed in line with the local context and reality. In the case of the personal attributes, recommendations can be made by local leaders who are usually well informed about the personal reputation of people residing in the community. However, there is a risk that only friends or relatives of the leaders will be selected in this way! Another, possibly less biased method is to ask each peer group to choose a facilitator from the community. As regards the basic skills, these can more easily be tested and assessed by the appropriate agency. Given the importance of the facilitators, it is recommended that agencies conduct some form of interview (could be formal or informal involving some group work) for potential candidates as part of the selection process.

## C.2 Training of Trainers and Facilitators

As noted in the previous section, both facilitators and trainers require a wide range of personal qualities and skills. Few people are born with such skills and it is the training process itself that plays a key role in helping such skills and qualities to be developed. This calls for a whole new concept of training – completely different from the traditional ‘transfer of knowledge’ approach, but one that itself, sets in train a process of transformatory change within those being trained. Such a process has been described by Colette Harris in a recent paper based on her experience of working with groups in Tajikistan:

*“..the role of the facilitator ..is to ..act as a stimulus for the development of new ways of thinking. ...In order for facilitators to be able to do this, they need themselves to have undergone a similar form of transformation”.* (Harris, 2007: 13)

In recognition of the critical role played by training, PLAN Latin America has even developed a special Stepping Stones Training Centre where teams of facilitators from different NGOs are brought together to be ‘trained’ in the spirit of Stepping Stones and they have developed a Training Manual for this purpose (Escuela de Paso a Paso: Guia Didactica para Facilitadores, 2007).

### Selection of trainees

The personal qualities required of trainers are the same as those required by facilitators (see above). As with facilitators, it is important to ensure that an equal number of men and women are trained. Ensuring that people trained include those who will be implementing Stepping Stones on the ground

is also important as highlighted in a recent evaluation of a Stepping Stones programme in Sierra Leone implemented by CAFOD:

#### **Importance of selecting female field workers for training: CAFOD, Sierra Leone**

As part of a Stepping Stones programme run by CAFOD partners in Sierra Leone, only 2 out of 10 trainees were women. A recent evaluation (2006) carried out noted that the lack of female staff and the prevalence of office, rather than field-based staff posed “serious limitations” on the implementation of Stepping Stones as the approach “relies heavily on the participation of women as facilitators”.<sup>3</sup>

### *Core training guidelines*

The actual content of the training provided is likely to vary from one place to the next. Depending on the time available, some training curricular will cover all the Stepping Stones sessions, while others will only cover a selection. Whichever the case, certain ‘core’ or fundamental approaches have been identified that must be adhered to in every training process developed:

- The training **must cover all the main sessions and the four ‘themes’** of the Stepping Stones journey
- The training approach must be based on and provide guidance on the use of **participatory** methods and principles
- Training should include discussion and analysis of **gender** concepts and principles
- Both facilitators and trainers must be **ready to learn and change** as they undergo the training process. – as must all of us involved at whatever level in the Stepping Stones journey.

### *The training process*

It is recommended that the training be run as a Stepping Stones workshop. This means working in peer groups, based on age and sex and coming together as a ‘community’ to exchange special requests.

### *Focus on gender*

Challenging gender norms and behaviours is absolutely fundamental to the Stepping Stones process. Yet, many NGOs report that facilitators and trainers, who are themselves subject to the same norms and traditions as the participants, often mistakenly think their job is to reinforce, rather than challenge such stereotypes<sup>19</sup>. Thus, gender training must constitute a central focus of the Training provided for Trainers and Facilitators. Moreover, as pointed out by Colette Harris, gender training, by virtue of its own transformatory potential, also has the greatest potential for bringing about change in others:

*“Gender training has been... the most powerful motor for change...It was working through gender-related issues that brought the staff...to start interrogating their own norms and thus to realize how little they differed from those by which their project participants lived.” (Harris, 2007:14)*

### *Additional areas to cover*

In addition to going through the process, the training must allow time for reflection on the process and discussion about appropriate facilitation methods. The following additional sessions can also be included:

<sup>19</sup> See, for example, discussions at the International Conference on Stepping Stones ‘Looking Forward – Looking Back’ hosted by ACORD in July 2006, that can be found in the Stepping Stones website.

- \* Monitoring and evaluation tools
- \* Theatre for development skills
- \* Development of creative ideas that can be applied for adapting or inventing new exercises (see next section on Adaptation of Stepping Stones)
- \* Participatory learning approaches, such as PRA
- \* Conflict management techniques
- \* Post-Stepping Stones support for communities
- \* More emphasis on ethics, confidentiality and safety
- \* More on sexuality, sexual reproductive health, HIV treatments, and so on.
- \* Information about legal rights, such as property and inheritance rights and about international conventions, such as the Universal Declaration of Human Rights, Convention on the Rights of the Child, the Convention on the Elimination of Discrimination against Women, and others.

### ***Trying out sessions in the community***

When ACORD Tanzania organized training of trainers, they also organized some sessions with a local community. This gave trainees the opportunity to experience first-hand the impact of the process in a community context and this was considered by many in the training evaluation comments to have been one of the most appreciated aspects of the training. It should be noted, however, that these sessions took place with community groups that previously had a relationship with ACORD and were receiving training and support in other areas. Unless such a relationship already exists with the community, it is NOT recommended that trainees should try out Stepping Stones with communities as this could be very intrusive and exploitative. Even where such a relationship exists, the Stepping Stones exercise used needs to be carefully selected. It would clearly not be appropriate to expect community members to engage in a highly emotionally charged discussion with no prior preparation or subsequent follow-up.

### ***Post-training follow up support***

Even after receiving training, it is likely that facilitators will need close supervision and support before they feel confident enough to run a Stepping Stones process at the community level. One way of off-setting this problem is to minimize the gap between the completion of the facilitator training and the implementation of SS. The longer the gap, the more facilitators are likely to lose confidence as was noted in the Fiji evaluation (PRHP, p.40) In the words of Alice Welbourn: *“Many of the Stepping Stones exercises are like strong medicine – they can be very beneficial when used under the right conditions – but can be dangerous for those who take them on an empty stomach, or irregularly or without proper preparation. They need to be treated with respect”*<sup>20</sup>.

#### **Box 6: Need for follow-up support for facilitators**

The Pacific Regional HIV/AIDS Project (PRHP) trained 35 facilitators over 10 days. The training included a planning exercise to plan the implementation of Stepping Stones in their communities. However, of those only 6 went on to implement SS. Another two implemented a partial Stepping Stones process. The main reason given by the others for not implementing Stepping Stones in their communities was lack of confidence.

### ***Ongoing supervision and support for facilitators***

The Stepping Stones training is very intensive, covering a lot of ground in a relatively short space of time. In most cases, the topics covered are very new for facilitators, many of whom may have no prior

experience of anything similar. Thus, provision of ongoing support and supervision of facilitators is very important. This should take various forms:

- **Support with facilitation:** there are various options. Before being left to take on facilitation alone, newly trained facilitators can co-facilitate alongside more experienced facilitators. Another option is for newly trained facilitators to work in pairs. Alternatively, experienced facilitators can accompany the more newly trained to provide help and guidance during the process.
- **Regular meetings between trainers and facilitators:** Where possible, NGO trainers should meet with supervisors prior to each new Stepping Stones session in the community to ensure they fully grasp the purpose of the exercises and the steps in the facilitation process. These meetings can also be used to discuss what went well or badly in the previous session.

**Box 7: Some practical constraints:** ACORD tends to work in difficult to reach communities where access by road may be quite difficult. For example, in Angola, some of the Stepping Stones localities were several days away from the ACORD office. In these situations, weekly meetings with supervisors are not feasible and supervision was necessarily less frequent. Regular supervision was also problematic in Northern Uganda where strict security clearance had to be sought for people entering the area of the displaced camps where Stepping Stones was implemented.

### C.3 Implementing the Stepping Stones process within the community

The Stepping Stones Manual provides very clear and detailed guidance on how to conduct each session, so this section of the Guide is limited to issues that are linked to implementation, but are not directly addressed in the Manual itself.

#### **Timing of sessions:**

The question of timing is addressed in the Manual, but it has such importance that it deserves an additional mention in this Guide as well. The timing of the sessions should be discussed at the first open meeting in the community in order to ensure that sessions are held at times convenient to those planning to participate. When discussing timing, it is important to ensure that the times agreed are convenient for everyone, not just those who have the confidence to speak up. The consequences of failing to do so are illustrated by examples provided in the Box below.

### **Box 8: Importance of the timing of sessions: examples from various countries**

In *Angola*, the times of sessions clashed with market opening hours and the young people who had stalls in the market did not show up to the sessions. In the event, only the older men and women went through the process.

Similarly, in *Uganda* where the timing of sessions overlapped with market times, only the better off people who did not work in the market were able to attend.

In *the Gambia*, it was originally planned that the sessions would run during the dry season. However, a PRA exercise showed that many people migrate to the urban areas during this period, so it was agreed to run the sessions during the harvest season.

In *Fiji*, many male community members are seasonal workers (sugar cane farmers) and they were not in the village when the women planned to commence the Stepping Stones training. This further demotivated other potential male participants.

It is also important to stress the need for punctuality. If people stroll in at different times, this can be distracting for the rest or, if those who arrive on time have to hang about waiting, they sometimes get bored and leave.

## **Providing refreshments**

Each Stepping Stones session lasts approximately 3 hours. Thus, provision of refreshments should be considered. Moreover, as previously noted, some participants may be foregoing other income-generating activities in order to participate, so the provision of some refreshments would go some way towards compensating them in kind (see Box 9). However, as the example in the Box illustrates, this can sometimes cause problems!

### **Box 9: “We’re only here for the food!” – the experience of ACORD Angola**

Initially, ACORD Angola decided to serve a hot meal for all participants. But, when the food arrived, crowds of children and others flooded in to the area where the food was being served and claimed to be participants (even though their names were not on the register). This caused havoc: the start of the sessions was delayed; some participants were left without food; others felt ‘cheated’ because they had to ‘earn’ their food through participating in the sessions, while others did nothing. Another problem was that some people who had not initially signed up for Stepping Stones, when they realized that food was available, decided to sign up. Eventually, ACORD decided to make up little ‘snacks’ to hand out to participants and adopted a strict register to ensure that only those who participated got them.

## **Non-attendance or irregular attendance**

Irregular or non-attendance are common problems encountered with Stepping Stones. Attendance on a regular basis over a 2-3-month period is a major commitment and not everyone who, initially shows up, is ready to make that commitment. As already noted, the timing of sessions may be a factor. Other factors, may include poor facilitation as in the example below.

### **Box 10: Poor quality facilitation leading to poor attendance: Angola example**

In Angola, ACORD implemented Stepping Stones in 3 communities. In two, attendance was regular, but in the third, despite a good initial turn-out, attendance fell steadily. When staff looked into the problem and compared the situation with other communities where attendance was very good, it was noted that the facilitation was very poor. Facilitators behaved like school teachers and the sessions were very dull. Unlike well facilitated sessions where participants laugh and have a lot of fun, even when talking about serious issues, there was little fun and laughter.

So, first and foremost, it is important to check on the facilitation and, if such problems emerge, facilitators should be given some additional training and support. If the difficulties persist, it may be necessary to select a different facilitator.

### ***Use of local dance groups***

In Tanzania, local dance groups are often invited to start the session with some music and dance. As well as attracting many people to the sessions, it creates a dynamic and positive atmosphere. In addition, local cultural dances have been used to enhance messages, such as the enjoyment of sex, which are integral to the Stepping Stones process.

### **Bringing in external speakers during the sessions**

In principle, external speakers should not be invited to Stepping Stones sessions because Stepping Stones is a process, not a lecture or seminar. However, on occasion, there may be justification for inviting speakers in for specific purposes. In particular, where the facilitator is not someone living with HIV, it is good if a member of a local group of people with HIV is able to attend, for example, during a session focusing on issues, like stigma, HIV testing, access to treatment and so on, so as to share her/his personal experiences with the group. Other cases where an external speaker might be justified are when a session is dealing with an important issue that the facilitator does not feel equipped to discuss. For example, in Angola, where TB is very prevalent, one session is devoted to TB and a doctor was brought in to explain the treatment. And in Mwanza (Tanzania), specialists were brought in to talk about family planning. There are also instances where it might be appropriate to use a Stepping Stones session to raise local awareness of existing services and/or legislation as illustrated in the example below:-

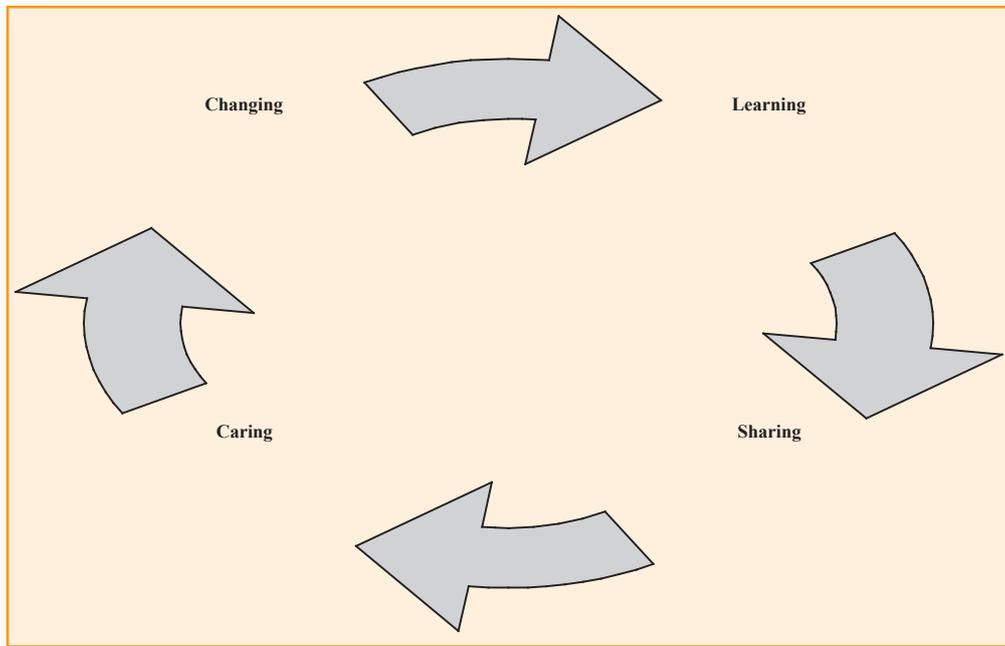
### **Box 11: Head of Provincial Women's Affairs Office brought in to talk to women about support services available to victims of gender-based violence in Angola:**

At the time that Stepping Stones was being implemented in ACORD's programme in Matala, the Angolan government had just introduced new legislation providing increased protection for women facing domestic violence and was running a nation-wide awareness-raising campaign on the issue. So, the head of the Women's Affairs Unit in the province was brought in to talk to the women in the village about the initiatives being taken. This occurred after the session on Domestic Violence in which women were exploring the issues and discussing ways of defending themselves better. Her visit served two purposes: on the one hand, she got a 'taste' of Stepping Stones and a different way of discussing problems, like gender-based violence and, at the same time, the women were told about the kinds of help available to them from state institutions.

## Focus on the Stepping Stones Journey

While such external interventions may be justifiable on an occasional basis, they should never detract from the main business of Stepping Stones, which is about accompanying people on a safe journey across the sometimes treacherous 'river of life' and guiding them through the progress stages of the journey involving learning together, sharing, caring and eventually changing:

### Wheel of Change<sup>21</sup>



21 Alice Welbourn, 1999, 'Gender, Sex and HIV'



# D ADAPTATION AND TRANSLATION OF THE MANUAL

*Tanzania*



*Tanzania*



*Tanzania*



# D ADAPTATION AND TRANSLATION OF THE MANUAL

Stepping Stones can be implemented in a great many different places and, as such, it needs to be adapted to reflect the social, economic, religious and cultural realities of each setting. The Manual has also been translated into other languages so it can be used in countries all over the world where English is not spoken. This section provides some guidelines on adaptation and translation of the Manual. They are chiefly based on the Translation and Adaptation Guidelines which can be found on the Stepping Stones website<sup>22</sup>.

## QUESTIONS TO BE ADDRESSED IN THIS SECTION INCLUDE:

- ⊙ Why would you want to adapt
- ⊙ Do you have to do everything just as it appears in the Manual?
- ⊙ Can you add in sessions on issues not covered in the Manual?
- ⊙ Can you leave out sessions?
- ⊙ Do you have to follow the exact same sequence?
- ⊙ Is it possible to do a 'speeded up' version of Stepping Stones?
- ⊙ What if you don't have access to a video or DVD player?
- ⊙ Can the Manual be translated into other languages?

## D.1 Adaptation

Stepping Stones is a process and, like all processes, needs to be **flexible** and **fluid**. While it is very important to understand that each of the main 'blocks' or sessions follow on from each other in a progression, there is room for flexibility in the number, focus and ordering of the exercises within them. In fact, it is quite rare for the Manual to be rigorously followed from beginning to end.

### *The case for adaptation*

There are many reasons why it is important to adapt the Manual. These include:

- \* Making it more relevant to the cultural context
- \* Responding to local priorities
- \* Increasing local participation and sense of ownership
- \* Encouraging critical thinking about the aims and what you want to achieve

### *Examples of adaptations:*

Here are some examples of the different ways in which the Manual has been adapted:

- (i) **Adding in additional sessions:** This is the most common way in which the Manual has been adapted to suit different contexts. For example:-

22 "Translation and Adaptation Guidelines (1998, revised 2002), [www.steppingstonesfeedback.org](http://www.steppingstonesfeedback.org).

- \* In South Africa: new sections on domestic violence and rape have been added and the session on HIV has been expanded and updated to include ARVs, testing and other more recent developments in treatments available.
- \* In the Gambia a new session was added to show the link between HIV status and fertility, highlighting the link between non-condom use, STIs and lowered fertility. This was done in order to address fears that Westerners were promoting condoms in order to reduce fertility in the Gambia. A new session on body mapping of sexual ‘turn-ons’ and ‘turn-offs’ was also added to enable discussion of the difficult subject of female circumcision and orgasm<sup>23</sup>.
- \* In Angola, ACORD included additional sessions on STIs and teenage pregnancy, both of which are priority concerns in the localities where they work.
- \* In Ethiopia, Save the Children added in sessions on Social Mapping, HIV Timeline and a Risk Matrix in order to help facilitators understand the community better.<sup>24</sup> Information on voluntary counselling and testing (VCT) has also been included.
- \* In Mozambique, CAFOD supported programmes have adapted Stepping Stones for use with secondary school pupils in boarding homes.

**(ii) *Removing sessions:***

- \* In the Gambia: the session on alcohol was removed because, the Gambia is almost 100% Muslim and alcohol is far less of an issue than in other non-Muslim communities.
- \* In Cambodia, the final session on death and will-writing was removed on the grounds that it was culturally inappropriate. In other countries, however, such as Zimbabwe and the Gambia, this exercise was subsequently reinstated, on reflection of its key importance in addressing something which happens to us all, but for which we are often hardly prepared. It also enabled discussion of lack of property and inheritance rights for women in many parts of the world, a problem which can especially badly affect women and children when their husbands and fathers die.

**(iii) *Changing emphasis***

In the Angolan army battalion where ACORD was implementing SS, there have been few cases of people known to have died of AIDS-related illness. However, it is very common for people, especially men, to be away from home for long periods of time, especially those serving in the army. Thus, it was decided to change the emphasis of the session called The Long Journey, which deals with the importance of will-writing in preparation for death. Instead, it deals with will-writing in the context of long absence from home.

**(iv) *Changing the sequence of the sessions:***

As noted below, it is important to be very careful when changing the order of sessions to ensure the progression of the process is not disrupted. However, it is possible to change the order if, for example, a particular exercise seems to fit in well with a new exercise. For example, in Angola, ACORD introduced a new session on Domestic Violence and decided to insert the exercise on Statues of Power in that session because it was thought that this would work very well as a tool for helping women to challenge violence in the home or elsewhere.

**(v) *Fewer drawings:***

ACORD Tanzania felt that participants would be unable to do the exercises that involve drawings and chose to use other methods instead, such as singing or simply talking. However, see Box 11 below.

23 In the Gambia, the male and female circumcision is widely practised.

24 Bhattacharjee, P and Costigan, A (2005), p.21

## Caveats: things to watch out for when adapting Stepping Stones

- (i) ***Be faithful to core themes:*** Linked to the main blocks of sessions in the Stepping Stones process, there are four basic ‘themes’. It is very important that each of these themes is retained.

The four ‘themes’ of SS:

- ⊙ **Group cooperation**
- ⊙ **HIV and Safer Sex**
- ⊙ **Why we behave in the ways that we do**
- ⊙ **Ways in which we can change**

- (ii) ***Respect the sequence:*** People may decide for one reason or another to change the sequence of the exercises. Up to a point, this is ok, but it is important to bear in mind that the activities are not arranged in a chance sequence, but one that has been carefully thought through:

*“Stepping Stones progresses from easier sessions with less emotional content, to more challenging sessions, addressing taboos such as gender and age norms, and death. It was never intended as a manual into which people might dip and pick: therefore, it works most effectively where the road map of the progressive exercises has been closely followed.” (Alice Welbourn, 2007:126 )*

- (iii) ***Do not lose all the ‘fun’ bits:*** The process should be entertaining, as well as serious. Try to make sure you keep in some of the exercises that help people laugh and have a good time as this is a critical part of the learning process. Also, often the “fun” games carry a deeper message on analysis and are there for a purpose.
- (iv) ***Maintain participatory approach:*** If you invent new sessions to deal with specific issues, such as teenage pregnancy, be sure to apply the core participatory principles that lie at the heart of the Stepping Stones process.
- (v) ***Do not make hasty assumptions of what participants can or cannot do:*** The subject matter covered by Stepping Stones and some of the activities involve talking about topics that are not normally discussed openly, such as issues relating to sex. Sometimes, facilitators themselves are not happy with discussing these topics and, as a result, they look for ways of avoiding the need to! One way is by convincing oneself that the participants will not be prepared to engage in such a discussion. Below is an example of such a case that recently occurred when ACORD was implementing Stepping Stones in a small village in Southern Angola.

**Box 12:**

**Making wrong assumptions of what participants can or cannot talk about: Session on non-penetrative sex in Kanjanguite village and the Angolan army:** During the Stepping Stones process in Kanjanguite, it was found that the discussions of sex had been too focused on condoms, so the idea of steering the discussion towards ways of having non-penetrative sex was discussed by the two women facilitators – one a young school teacher and the other an older woman, very active in the church. Surprisingly, the younger of the two was adamant that such a discussion could not take place in the village while the older lady was prepared to give it a go. The male facilitators had similar doubts about the men. As it happens, the older women in the community became very animated during the discussion and shared with each other loads of useful ways of satisfying a man without penetration, and it turned out to be one of the liveliest discussions in the village! Likewise the soldiers also shared information about the importance of satisfying a woman to help her reach orgasm even after penetration has ended! So, the moral of the story is: be sure not to project your own fears onto others and be prepared to take risks!!<sup>4</sup>

### *Sensitivity to religious differences*

Many of the themes discussed as part of the Stepping Stones process are subject to different religious interpretations. Religion plays a central role in the lives of most individuals and the communities they are a part of. Thus, the way in which themes are discussed needs to take account of religious sensitivities, especially where there are several different religious groups within a single community.

In Harrar, which is a largely Islamic city, religion was found to have a strong influence in terms of what was acceptable and not acceptable to community members who participated in the SCF Stepping Stones programme. The evaluation recommended that sessions on religion be included in Stepping Stones and religious barriers to safe sex be identified and addressed.

Issues of gender inequity in the context of religion should also be addressed. But facilitators have to be very skilled to facilitate these sessions as religion can be a very sensitive issue.<sup>25</sup> The original video implicitly addressed the role of religion in people's lives with scenes shot both in a mosque and a church. Unfortunately, if the video is not used, it can be easy to overlook the key role that religion plays in the lives of most participants. Therefore, it is important to find ways of encouraging facilitators to include discussions of the influence of religion on attitudes towards sex, HIV, condom use, gender and marginalized groups in other ways during the workshop.

### *Using Stepping Stones without the video/DVD*

The Stepping Stones Manual is accompanied by a video showing parts of the process being acted out. The video was made in Buwenda, Uganda, the first place where Stepping Stones was implemented. One benefit of the video is that it attracts a lot of people to the sessions. In addition, the video clips serve various purposes. These include:

- ⊙ To challenge traditional attitudes and behaviours (eg men being violent and women being submissive)
- ⊙ Providing positive role models. For example, The Long Journey shows a positive example of a couple preparing for death
- ⊙ To stimulate discussion on key issues, such as alcohol and its detrimental effects
- ⊙ Encouraging participants to take part in the process: videos are a great magnet!

25 Bharracharjee and Costigan, 200, p.38

However, sometimes the video can not be used for practical reasons, such as lack of electric power. Other reasons for not using it might include:

- Working with non-literate communities/inability of people to speak language of the video and/or read sub-titles.
- Too culturally specific: The video was made in Uganda and, as such, people from other countries in Africa or elsewhere may not be able to identify with the people in the video, thereby weakening its impact<sup>26</sup>.
- Avoiding undue influence: people may imitate what they see on the video/DVD rather than develop their own, culturally appropriate responses.

One way of achieving the same results is to get participants to perform a drama or role play depicting a particular situation linked to the topic of the session. This can be equally powerful and engaging. There are guidelines in the manual about how to run the workshop without the video. Alternatively you can make your own video. This is what PLAN, for example, has done in Latin America.

## Steps in adaptation process

The Adaptation Guidelines<sup>27</sup> outline the following stages in the process of adapting Stepping Stones for different contexts. These are:

1. **Experiencing all stages of the Stepping Stones process:** before being able to make adaptations, facilitators must experience for themselves the Stepping Stones process as developed in the original Manual in order to understand individual reactions to the exercises based on personal experience. That then provides the basis for adaptations.
2. **Working together with others** to develop a draft adaptation. *Either* (a) by making changes as you go along; *or* (b) by making the changes beforehand.
3. **Testing the adapted draft:** either in the community or with a group of facilitators.
4. **An ongoing process:** The adaptation of Stepping Stones, like Stepping Stones itself, is an ongoing process and should be viewed as ‘work in progress’ (Gordon, 1998). There is no ‘perfect adaptation: one that works in one place at one time, may not work again in the same place at a different time or in a different place at the same time!
5. **Reviewing the experience:** the Stepping Stones process should include bringing participants together after 6 months to review the process. That is also a good opportunity for reviewing any adaptations made.
6. **Recording and documenting the changes:** it is important to keep track of changes and to clarify the process and objectives of each exercise in the same way as the existing Manual does. Similarly, subsequent changes and the outcomes of any reviews of the adaptations made should be recorded and made available to share with others. This is important so as not

26 In Angola, this view led ACORD to commission the making of a new film made in Angola released in September, 2007 called ‘Condom Commandos’

27 Gill Gordon, 1998, 2002

to go back to square one each time you embark on a new Stepping Stones experience!

7. **Subtle themes.** There are subtle themes which are not spelt out in the text, but which run through the whole workshop process. These include the fundamental equal human rights of all of us – whether these be to do with sexual and reproductive rights, rights to be involved in decisions which affect our lives and those of our communities, right to property, goods and produce, inheritance, rights to mutual respect, rights to peaceful co-existence free from violence and/or fear of violence and so on. These are not spelt out publicly on purpose, because those who have power in a community often feel threatened if they hear this sort of talk – threatened that they may be about to lose this power. However these themes are very strongly woven through the workshops and it is useful for facilitators to be aware of them and keep them in any adaptation.

## D.2 Translation

Stepping Stones has been used in over 100 countries around the world. The original Manual was produced in English and French, but over the years, many organizations have independently translated the Manual into other languages.

### *In what languages has it been translated?*

There is no central databank for all the translations of Stepping Stones. However, it is known for a fact that it has been translated into all the following languages:

- ⊙ French
- ⊙ Portuguese
- ⊙ Spanish
- ⊙ Singhala
- ⊙ Ki-Swahili
- ⊙ Luo
- ⊙ Khmer
- ⊙ Vietnamese
- ⊙ Russian (underway)
- ⊙ Amharic
- ⊙ Kinyarwanda
- ⊙ Bengali
- ⊙ Hindi
- ⊙ Nepali
- ⊙ Afrikaans
- ⊙ Bahasi Indonesian

There are even several versions of translations of the manual in some languages. For example, there are at least 3 Portuguese language versions (Pedras Caminhantes, Alpondras, Caminhando de Maos Dadas).

### *Are these translations accurate and reliable?*

Unfortunately, in the absence of any system or means of resources to carry out any ‘quality controls’, it is not possible to say with certainty how accurate and true to the original these versions are. Before using a translated manual, trainers should ideally read it through and compare it with the original manual, to check that it flows well and has been well translated. One method that has

been used by some is to collect feedback from participants and make changes subsequently, based on the feedback received.

In some translations, it has been found that if the translator is unfamiliar with facilitation techniques, instructions such as “might” and “could” have been translated as “must” and “should” – which are very different words. Similarly if a translator is unfamiliar with HIV and gender issues, translations can talk about “catching AIDS”, can confuse “sex” and “gender” and can use “he” throughout, instead of “s/he”. So the quality of the translation is key and is far more complicated than is often realized.

### ***Can I use a translation produced by another NGO?***

As applies to adaptations of the Manual, each translation is to some extent likely to reflect the particular cultural realities in the specific location where Stepping Stones is being used. Thus, for example, the Spanish version was developed in Panama and, if used in a different Latin American context, may need to be adapted to reflect differences in the forms of expression and uses of language in that country. This has occurred in Angola where ACORD took the Portuguese version produced by Mozambique and adapted it to the Angolan context. Likewise, ACORD Tanzania adapted the existing Swahili version to reflect the Tanzanian context.

### ***Can you use colloquial terms to translate words and concepts linked to sex and the sexual organs?***

Every society has its own words for talking about sex and sexual organs and there is a vast range. This can also vary within a society, according to the age and gender of the speakers.

In Buwenda, where the first workshop took place in Uganda, the word used for penis” by the young men in the video was considered a rude word by the women and they initially objected to its use in the video. However the young men reasoned that since this was the word in common use by them, that it was important to show the use of this word in the condom exercise in the video. The women respected the young men’s reasoning and this word and this scene stayed in the video.

It is important to ensure the right words are used: ones that people understand, but also do not cause too much offence (see box). This should be discussed during the Facilitator training and also with participants during the sessions as local people usually have their own words that those from outside the community may not be familiar with. Helping people to be comfortable with the language of sex is an important part of the Stepping Stones process and is essential for achieving some of the core objectives, such as the promotion of increased communication and dialogue around sex and relationships between partners and between adults and youth and parents and children.



# E. MONITORING AND EVALUATION

*Tanzania*



*Tanzania*



*Tanzania*



## E. MONITORING AND EVALUATION

Monitoring and evaluation is often regarded as an optional ‘add on’ and/or a cumbersome procedure that has to be undertaken, primarily to satisfy donors. However, as discussed in this section, monitoring and evaluation should be regarded as an integral part of the Stepping Stones process itself. That said, the record to date in relation to the monitoring and evaluation of Stepping Stones leaves a lot to be desired.

The uneven and mostly very poor quality of existing reviews and evaluations of Stepping Stones was highlighted in a recent report of a ‘review of reviews’ of Stepping Stones, commissioned by ActionAid International (AAI)<sup>28</sup>. As highlighted by this review, one of the greatest challenges posed by the evaluation of Stepping Stones lies in the participatory nature of the process, which calls for a very different approach to evaluation, one that is rooted in the principles of participation and respect for the local ownership of the process and its outcomes.

This report also highlights other reasons for the poor quality of reviews and evaluations, which include: the low priority attached by many NGOs to M&E; lack of skills and/or tools in this area; lack of funds; limited staff time and resources; lack of clear objectives; and poor documentation of the process itself.

These inadequacies in the area of monitoring and evaluation have had a number of adverse consequences. For example, funding for Stepping Stones was recently withdrawn on the grounds that there is not sufficient evidence that the approach works<sup>29</sup>. Moreover, an effectively implemented participatory M&E process has the potential to empower beneficiaries by involving them in self-evaluation of their own processes and the development of recommendations for improving the delivery of Stepping Stones on the ground. Thus, the lack of attention to quality M&E constitutes a missed opportunity, both for those implementing Stepping Stones and for those at the receiving end.

28 Wallace, 2006

29 Following the recommendation of a mid-term review of the Support to the International Partnership against AIDS in Africa (SIPAA) project, the Department for International Development (D?d) decided to withdraw funding for the Stepping Stones work of AAI in Rwanda, Burundi, Ethiopia and Ghana under the SIPAA programme. Other countries were also affected as DFID decided to suspend all funding for Stepping Stones work by other NGOs as well. (Wallace, 2006, p.7)

## KEY QUESTIONS TO BE ADDRESSED IN THIS SECTION

- ⊙ Why is it necessary to monitor and evaluate?
- ⊙ Who needs to know and what do they need to know?
- ⊙ What does monitoring entail and what tools can be used?
- ⊙ Why do impact evaluation?
- ⊙ Are there any fixed or standard indicators that can be used?
- ⊙ How do you take account of cultural and other contextual differences?
- ⊙ What methods can be used for M&E and what are the comparative strengths and weaknesses of each?
- ⊙ How do you deal with problems, like contradictory information, issues around reliability of data, difficulties accessing data, and so on?
- ⊙ What kinds of criteria can be applied when developing an M&E strategy?

## E.1 Monitoring: purpose and tools

Unlike evaluation, which tends to occur at the end of the process, monitoring is an ongoing process. In addition, its focus is more concrete and practical. Among the key aims of monitoring are:

- ⊙ To ensure that Stepping Stones is running smoothly
- ⊙ To identify any constraints or problems experienced by the participants and/or facilitators during the implementation of Stepping Stones (for example, poor attendance, unequal participation/ male domination of discussions in the sessions, etc)
- ⊙ To be able to make changes or adaptations as required (examples of changes might be the timing of the sessions, the language used, the style of facilitation and so on)
- ⊙ To enable the local leadership and local partners to follow the process, thereby promoting and reinforcing local ownership of the process.
- ⊙ To enhance sustainable behaviour change by encouraging reflection on changes during the process<sup>30</sup>

In line with these various purposes, monitoring can take a variety of different forms and involves a range of different actors in the process, including the participants themselves, the facilitators, agency workers and other local actors, including those represented on the Project Advisory Committee, if there is one in place.

### *What tools can be used?*

The following are some examples of tools developed and used by various organisations:

#### ⊙ *Participant monitoring of process impact*

Monitoring forms that can be applied at specific stages in the process were developed by Stepping Stones practitioners in Zimbabwe to track attitudinal changes using a simple questionnaire format. At the end of specific sessions, participants are asked to reply to a set of questions by ticking one of 3 boxes – ‘yes’ ‘no’ or ‘don’t know. As in the case of the Polling Booth method (see Section B – Planning and Preparation), participants can submit their answers anonymously, so they do not have to worry about others knowing what they say on the form. The questions<sup>31</sup> relate to the core themes/ issues that Stepping Stones deals with, namely:

- Communication within the family
- Having sex
- Stigma and HIV

<sup>30</sup> Harrar evaluation, Bhattacharjee and Costigan report, 2005

<sup>31</sup> The precise questions asked can be found on the Stepping Stones website: [www.steppingstonesfeedback.org](http://www.steppingstonesfeedback.org)

- Condoms
- Control over money
- Expenditure patterns
- Domestic violence
- Preparing for death

The main advantage of this kind of ongoing impact monitoring is that it can help people to formalise the learning, and recognize and *own* their own progress, as they move through the successive stages of the process, thereby enhancing longer-term sustainability of the resulting changes. This can also be done on a more informal basis by asking participants at the end of each session how they are going to use what they have learnt before the next session. At the start of the next sessions, participants can be asked to share with others their experience of doing this.

○ **Record-keeping by facilitators:** The facilitators are required to keep records as follows –

- a) Maintaining a register of participants so as to see keep track of attending levels.
- b) Noting down any ‘important’ issues/discussions that arise during the sessions; this is rather subjective, but is a way of keeping a record of some significant comment or reaction on the part of a participant
- c) Recording difficult questions that the facilitator did not know how to respond to, unexpected reactions on the part of participants, and so on.
- d) Keeping track of stories described in participants’ role-plays

It is important to provide facilitators with clear guidance of the kinds of issues, dialogue, or comments by participants that it is worth recording otherwise there is a danger of collecting too much information that no one has the time to read! This is what happened in the Gambia.

**Box 11: Risk of information ‘overload’: The Gambia**

In the Gambia, facilitators were asked to record the output of the weekly sessions, but no guidance was provided. So, they recorded almost everything. This had a negative impact on the facilitation and also resulted in far too much information to process. Consequently, the next time Stepping Stones was implemented, the exercises where it was important to record things were clearly identified.

The selection of exercises thought worth recording may vary from one place to the next and should be discussed among agency staff and facilitators.

○ **Regular meetings with facilitators:**

ACORD staff meet once every week or two weeks both before and after the sessions. This provides an opportunity for facilitators to raise any concerns or questions they have about a session, but also for ACORD staff to monitor the progress of the process and discuss with facilitators possible changes or adaptations required.

○ **Advocacy and review meetings with local level stakeholders**

It is also important to involve other actors in the monitoring process. As previously noted in Section B,

the strategy employed by ACORD programmes was to establish local Advisory Committees, bringing together various local actors, such as health service providers, local leaders, traditional leaders, church leaders, etc. These Committees met on a quarterly basis throughout the Stepping Stones process and were given progress reports by ACORD staff and local facilitators. The meetings were also used as an opportunity to discuss the advocacy and policy implications of issues arising from the process. Thus, besides their contribution to the smooth running of the Stepping Stones process itself, the involvement of these Committees or other similar fora also plays a key role in enhancing the level of local ownership and longer-term sustainability of Stepping Stones

## E.2 Evaluation aims and key steps in the process

Besides the ongoing monitoring of the process that is needed to ensure it remains on track, there is also a need for reviewing and evaluating the impact of Stepping Stones in the longer term. The focus of impact evaluation and the range of tools and approaches that can be adopted are discussed below.

### *The aims of evaluation*

The motivations and primary focus of impact evaluation vary widely reflecting the different priorities and perspectives of different stakeholders involved. Although there is a great deal of overlap between the motivations of stakeholders, the emphasis given to different motivations may differ. So, for example, it could be said that, for the most part:

*The professional HIV and AIDS community* want better evidence so they can improve practice on the ground.

*The donor community* wants ‘proof’ that Stepping Stones works and their money is being put to good use

*The policy makers* want to know that their politically driven prevention targets and objectives are being met

*The academic community* wants to produce convincing evidence that satisfies their own rigorous criteria

*Women’s rights and HIV activists* want to ensure that women’s rights and the rights of people with HIV are upheld; and that fewer people experience violence or HIV as a result of their position in society

*Local level practitioners* want to see changes at the community level, such as a reduction in gender violence, increased awareness of HIV, more open and equal relations, and so on.

*Participants* may have a range of interests, including increased self-confidence among women, better sexual relations between couples, more respect and understanding between parents and children, and so on.

For NGOs, the interests of practitioners and participants should be paramount. However, NGOs also have to engage with other actors, such as policy-makers, who they may wish to influence, donors from whom they seek funding, the professional HIV& AIDS community who influences service delivery, activists and the academic community with whom they sometimes collaborate. Thus, to some extent, NGOs have to try to satisfy the demands of all or most of these different actors.

Thus, for most NGOs, the aims of evaluation are likely to include any or all of the following:-

- ⊙ To assess the extent to which the programme objectives have been fulfilled
- ⊙ To find out from participants the extent to which individual and community aims and priorities have been addressed
- ⊙ To provide convincing evidence of the effectiveness of Stepping Stones for donors
- ⊙ To identify and share lessons learnt with others relating to the implementation of Stepping Stones training process

### *Steps involved in the evaluation process*

Evaluation does not just happen at the end of the process. It needs to be thought about before even starting, as well as during and after the process. Four main steps or stages in the process can be identified:

**Step one: Identifying ‘core’ impact indicators**

**Step two: Developing context-specific indicators**

[An interim step is Baseline data collection – already discussed in Section B]

**Step three: End of workshop review (short term)**

**Step four: Impact evaluation (longer term)**

#### ⊙ **Step One: Identifying ‘core’ impact indicators**

Before embarking on the process of implementing and evaluating Stepping Stones, it is important to have a clear idea of what you are trying to achieve. Clarity about the main aims of Stepping Stones in the context in which it is being implemented is needed, both in order to guide the programme strategy and design, but also as the basis for programme monitoring and evaluation.

Despite variations reflecting socio-cultural differences from one place to the next, there are a certain number of ‘core’ issues (e.g. gender inequities, physical, sexual, financial and psychological gender violence, lack of communication, lack of equitable decision-making or shared responsibility for household tasks or expenditure, lack of safer sex practices, lack of property and inheritance rights for women, ignorance-based myths, stereo-types and discrimination linked to HIV, etc) that the Stepping Stones training process has been designed to address. These ‘core’ issues constitute the focus of impact evaluation. The Box below lists the six ‘core’ issues identified by ACORD in the 3 different country settings where the project was implemented.

### **CORE IMPACT INDICATORS (identified by ACORD):**

- 1. Increased level of understanding of HIV AND AIDS**
- 2. Reduction of HIV AND AIDS -related stigma**
- 3. Reduction in unsafe sex and other risky sexual practices**
- 4. Improved communication between the genders and the generations**
- 5. Increased gender equity**
- 6. Mobilisation of community-based responses**

Other agencies may, however, have slightly different priorities not reflected in this set of core indicators, so every organisation needs to undergo its own process of developing indicators in line with its own aims and objectives.

#### **○ Step two: Developing context-specific impact indicators**

The Core Indicators are like ‘umbrella’ indicators: they determine the general direction of change. However, more ‘context-specific’ indicators are required that take account of different cultural contexts, including different understandings of sex, sexual behaviour, gender and family relationships, age hierarchies and cultural beliefs and practices. More specific indicators are also needed to allow impact or change to be measured.

For example, if the ‘core’ indicator is to ‘increase gender equity’, specific indicators are needed as a basis for assessment of the extent to which gender equity has increased or decreased. The first step is to formulate clearly the specific aspects of gender relations you want to see changed. Thus, for example, if the KAPB survey showed that gender violence and sexist attitudes are very prevalent in the community where Stepping Stones is being implemented, your context-specific indicator might be : “ to *halve* the number of men who think that a wife who disobeys should be beaten.”

### **Key steps and questions to consider when identifying the context-specific indicators:**

#### **○ *Involving the community and other local actors***

Community involvement in the identification of specific indicators is crucial for two main reasons:

- to ensure that the indicators are relevant and reflect community priorities and concerns
- To enhance community ownership of the process, thereby enhancing longer-term sustainability of impact.

In addition, other local stakeholders, like the local and traditional leadership, church leaders, service providers, policy makers, and so on, should be involved for similar reasons.

#### **○ *Reviewing the findings of the baseline KAPB Survey***

The KAPB Survey should provide baseline data relating to each of the Core Indicators and highlight issues of particular relevance to each setting. The input of the community and other local actors in this process can be facilitated by calling a meeting of community members and other local representatives to present and discuss the KAPB findings. Other agency staff working on HIV and AIDS should also be involved in the process. The Box below provides some examples showing how the findings of the KAPB can help to guide the process of developing context-specific indicators.

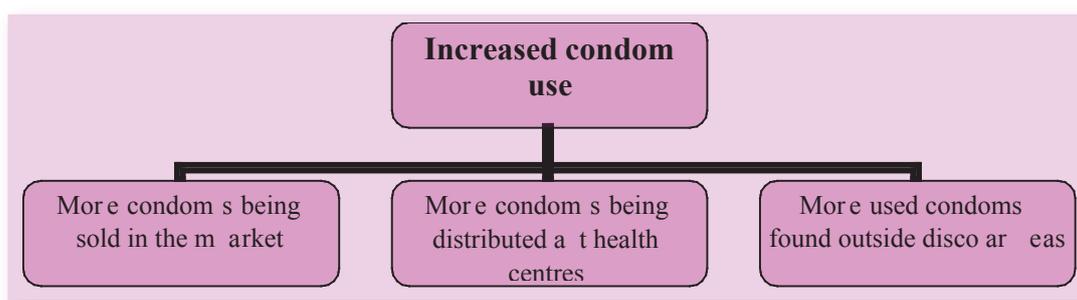
## BOX 12: Using KAPB baseline data in order to develop context-specific indicators

- ⊙ **Increased level of understanding of HIV and AIDS (Core Indicator 1):** The Gulu survey found that in one of the camps, only 11% of respondents knew that unsafe sex can lead to HIV and AIDS. Thus, a specific indicator relevant to this camp would be an increase in the percentage of people who know how HIV can be transmitted.
- ⊙ **Reduction of Stigma (Core Indicator 2):** The Gulu survey found that 55% of women and 60% of men view HIV positive women as ‘prostitutes’ (whereas, in fact, most women are infected in marriage). Thus, a country-specific project indicator might be to see a change in such attitudes, both towards people with HIV and sex workers.
- ⊙ **Improved communication (Core Indicator 4):** The Mwanza KAPB Survey found that women rarely discuss sex with their partners: 83% of respondents said that it is men who initiate discussions about sex within couples. Thus, a specific indicator relating to communication between couples might be an increase in the percentage of women who initiate discussions about sex.

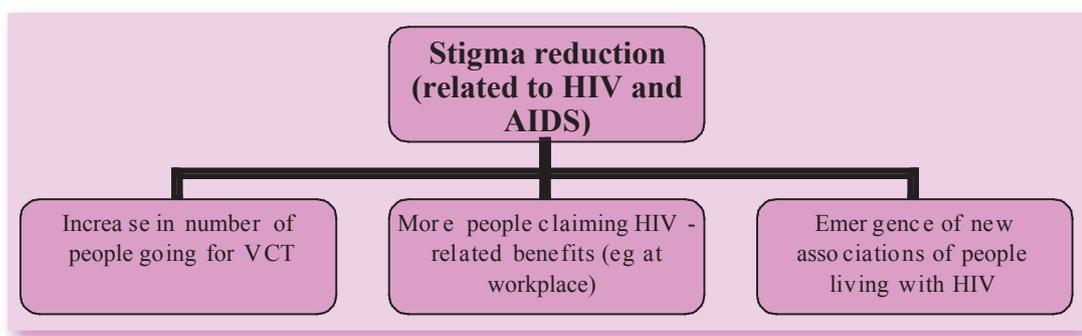
### ○ **Identifying means of verification**

This is a critical part in the process of identifying specific indicators. There’s no point in identifying a specific indicator unless there is some way of verifying it (within reason!). For example, if you choose ‘reduced wife beating’ as an indicator of ‘gender equity’, you should first ensure that you are able to access information about the prevalence of wife beating – and compare this to the trend prior to the implementation of Stepping Stones.

Sometimes, it is not possible to get information about a specific indicator, so instead you need to use a **proxy indicator**. For example, it is not possible to verify with certainty whether people who claim to always use a condom do in fact use one, but you could get information about the level of demand for condoms from health centres, market stalls or other places where condoms are distributed to people.



In the case of **subjective** indicators, like stigma reduction, it may also be necessary to use a proxy indicator, such as the number of people willing to disclose their HIV status, number of people claiming HIV-related benefits at the workplace or elsewhere, the emergence of new Associations of people living with HIV and other such indicators.



### ○ Step three: end of workshop review (short-term)

The final stage of the Stepping Stones process itself, which takes place after the presentation of the Special Community Requests, entails getting participants themselves to undertake a mini-review of the process. Each participant is asked to remember the hope and fear expressed at the outset of the process and to review whether this has materialised or not and to make a general comment about their experience of the workshop. This provides participants with an opportunity to express in their own words what they feel they got out of the workshop and/or what they feel was lacking and what changes they would like to see.

### ○ Step four: impact evaluation (longer-term)

Impact evaluation takes place at least six months after the end of the Stepping Stones process, although the precise interval can vary widely. In some cases, follow-up evaluation is carried out after six –nine months, in others a year or even two years. As already noted, the focus and purpose behind impact evaluation differs depending on the aims of the evaluation whose agenda takes priority. There are a correspondingly wide range of methods and approaches that can be used and these tend to reflect the different priorities and agendas. Thus, for example, the donor and policy-making communities tend to favour more rigorous quantitative ‘evidence-based’ approaches, such as large-scale surveys or randomised control trials (RCTs) while practitioners and participants favour more qualitative, participatory approaches. The ideal is perhaps to do both, but donors rarely provide sufficient funding for this.

The characteristics and strengths and weaknesses of various approaches are discussed in the next section.

## E.3 Impact evaluation methods

As mentioned above, the evaluation methods used vary according to the purpose and can be roughly divided into two broad types: quantitative and qualitative. In many cases, a mix of both is used. Some of the main methods and tools that have been used for the purposes of evaluating Stepping Stones are described below:

### (i) Quantitative methods

#### □ ‘Before’ and ‘after’ surveys

ACORD and others have attempted to produce evidence of the impact of Stepping Stones using a questionnaire-based survey in 2 stages: before the implementation of Stepping Stones and six or

twelve months after.

In Uganda, a **Trend Diagram** was used plotting changes that occurred at the 3 different points: immediately after Stepping Stones; 6 months later; and 12 months later. This showed clearly that early changes were not maintained. Upon further analysis, it was also found that changes were affected by season and by access to cash.

If a baseline KAPB survey has been undertaken prior to the implementation of Stepping Stones, then a repeat survey should be undertaken, asking the same or very similar, questions, some time after the end of the Stepping Stones process so that the answers given by people *before* and *after* the process can be compared.

There are a number of key issues to consider when planning and implementing a repeat KAPB. These are:

- ***When should the repeat KAPB be undertaken?***

Besides providing evidence of change, the purpose of the repeat KAPB is to show the extent to which changes in reported behaviours and attitudes on the part of Stepping Stones participants are sustainable over the longer term. Thus, the repeat KAPB should not be undertaken for **at least 6 months after the end of Stepping Stones**. Ideally, impact evaluation should be repeated after 3-5 years to determine whether prior changes have been sustained and/or further changes have taken place in these areas<sup>32</sup>

- ***Who should be included in the survey?***

Deciding who to include as respondents in the repeat KAPB is not as straightforward as may at first appear. There are different possible approaches, each giving rise to different sets of issues that need to be considered when deciding on which approach to opt for. These are summarised in the Box below:

**Table 3: Sample selection for repeat KAPB survey**

Sample to be targeted	Issues to consider
Baseline survey respondents	Good for comparison purposes, but may not be possible to include all the original respondents as some may no longer reside in the community/not be contactable
SS participants only	Repeat survey will show how those who go through the process have been affected, but it will not tell you if others have been influenced as well
SS participants plus other household members	The advantage of including other household members is that it will show the extent to which the Stepping Stones experience can be shared by partners and other family members, not just the participants themselves. This obviously has implications in terms of funding and policy considerations as it affects the way in which 'beneficiaries' are counted.

32 Wallace, Evaluating Stepping Stones, p.27

Non-SS participants or 'control' group	Besides being able to compare people's attitudes and behaviour 'before' and 'after' Stepping Stones, it is also useful to compare these to a group of people who have not been exposed to Stepping Stones and have had no contact with the Stepping Stones participants. In order to be able to make valid comparisons, it is necessary to select a control group with as many similarities as possible to the participant group in terms of socio-economic characteristics, religion, culture, and so on, so as to ensure that differences are not primarily due to these other differences as opposed to differences linked to Stepping Stones.
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### ◉ **GEM (Gender Equitable Men) Scale**

The GEM Scale questionnaire was first developed as a gender training tool in Latin America in 1999 and was subsequently adopted for the purposes of research into the links between gender norms and HIV vulnerability in Brazil<sup>33</sup>. The questionnaire used comprises a series of statements (35 in all) covering all these areas with which respondents can either agree, partially agree or disagree. A shorter version of the GEM scale (17 questions) was applied by the Pacific Regional HIV and AIDS Project for the purposes of evaluating the Pilot Stepping Stones Programme in Fiji (See Annexe 1). The tool was effectively used to identify changes in male attitudes and behaviour. Male respondents found the tool easy to use and some respondents even welcomed the opportunity to consider their attitudes on a range of gender-related issues. However, one criticism of the tool from a trainer in Nigeria is that a similar tool should be developed to examine female attitudes, rather than focusing on men alone. Some of the questions could also be further adapted to better reflect the Stepping Stones process.

#### **Box 13: Some additional points to note relating to survey methodologies**

- The wording of questions is very important. Special attention should be paid to ensure questions are not leading interviewees to answer in a particular way.
- The size of the sample is important: on average, surveys should be based on no less than 50 people to have validity.
- Evaluation studies should be carried out by someone/or a team who has a good understanding of Stepping Stones, but is independent of the implementing agency to avoid bias and add credibility to the findings.
- People recruited to undertake survey questionnaires should be given some basic training on interview techniques
- Where possible, anonymous surveys, like the polling booth, should be used on ethical grounds. But, where questionnaire surveys are used, including personal questions, relating to sex life and so on, the person conducting the interview should preferably be the same gender as the person being interviewed.

### ◉ **Randomised control trials (RCT)**

RCTs are large-scale surveys using rigorous research methods, including a control group, in order to provide convincing scientific evidence of impact. The first and only such study of Stepping Stones is a recent study undertaken by the South African Medical Research Council, which involved a sample of 2,783 young men and women. The study was based on a lengthy questionnaire administered in 35 communities and also used medical standards of evidence to test claims of behaviour change, including HIV testing<sup>34</sup>. Such studies are very expensive and require the involvement of highly qualified researchers and are not, therefore, appropriate for NGOs with more limited resources.

### ◉ **Use of quantitative data:**

Quantitative data is also usually needed on ‘measurable’ indicators, such as take-up of condom supplies; the rise/fall in STIs reported at clinics; increased use of services and VCT, and others. But, due to poor or non-existent record-keeping procedures in the public services, collection of such data presents significant challenges as illustrated in the example below.

In Namibe province, a predominantly nomadic region in Southern Angola, ACORD wanted to confirm reports of increased requests for condoms from members of pastoralist groups. However, this was not possible because no records of condom distribution are kept by the local health post, despite the fact that ACORD had previously requested this information to be kept. In discussion, it emerged that the staff had no previous experience of record-keeping and did not know how to go about it.

This example shows that access to quantitative data can not be taken for granted and capacity-building within the public sector, including training in areas, such as record-keeping should be included in the Stepping Stones strategy.

### (ii) **Participatory qualitative approaches:**

Most evaluations of Stepping Stones use participatory approaches. There are a great many that can be used, such as participant observation, interviews with key informants, focus group discussions and others. Many have also used a range of PRA (Participatory Rural Appraisal) methods, such as mapping, flow charts, diagrams, trends, role play, day plans, time lines, income and expenditure pie charts, mobility maps, problem analysis ratings, venn diagrams, problem trees, and others.

### ◉ **Most Significant Change (MSC)**

A method recently used by the PRHP for the evaluation of the Fiji Pilot is called the Most Significant Change (MSC) method. This method, which has been widely used for the purposes of monitoring and evaluating social change programmes<sup>35</sup> involves the use of a semi-closed questionnaire where participants are asked to recount in their own words what they feel has been the most significant impact of Stepping Stones on their life and why. This tool provides greater insights into the changes arising from the process and has the advantage that the changes mentioned reflect the lived experiences of the participants and are not influenced by the questions of the researcher/s. (See Story-telling guide used in Annexe 3).

34 ‘A cluster randomised controlled trial to determine the effectiveness of Stepping Stones in preventing HIV infections and promoting safer sexual behaviour amongst youth in the rural Eastern Cape, South Africa: trial design, methods and baseline findings’. Tropical Medicine and International Health. Raches Jewkes and a research team from MRC, Pretoria, 2006.

35 The ‘Most Significant Change’ (MSC) Technique: A Guide to Its Use by Rick Davies and Jess Dart (2005). 104 pages.

## E.4 Key Challenges

The Table below highlights a number of additional challenges relating to monitoring and evaluation and suggested ways of addressing them.

**Table 4: Challenges of M&E**

Challenges	Ways of addressing them
Baseline data collection is costly and time-consuming	Needs to be built into the project timeline and the budget. Be selective about what data is collected and keep it to the bare minimum.
People may not reply honestly to questionnaires. What can be done about this?	Use methods, such as the polling booth method or anonymous GEM scale questionnaires, which allow people to reply anonymously. Always ‘triangulate’ information from various sources to see if information given is consistent.
Evaluation findings can be contradictory and/or difficult to interpret	When this occurs, you need to critically analyse the methods used for each and/or undertake more in-depth research using, for example, a few in-depth case studies
Difficult to access data from government institutions in order to track trends in condom use, STI treatment, and so on.	Develop partnerships with these structures and provide staff training, HIV and AIDS awareness-raising and build up support and understanding of Stepping Stones work

## E.5 Summing up: guidelines and principles

As previously noted, there are no fixed rules or recipes for undertaking M&E. However, some practical guidelines and principles can be set out to help programmers and practitioners when planning their M&E strategy:

- ⊙ Evaluation methods should be of benefit first and foremost to the *participants* and information should be *owned* by them
- ⊙ **Mix and match:** Ideally, a range of methods should be used, including some quantitative and some qualitative in order to capture the advantages of both methods.
- ⊙ It is important to be clear about *who* the evaluation is for: it may be for different stakeholders (donors, policy-makers, academics..) but, in all cases, **participants** will be among them
- ⊙ Evaluations should meet some *minimum standards*, which should include proper use of methodologies, adherence to ethical standards and clearly documented<sup>36</sup>
- ⊙ Need for *realistic and manageable M&E methods* based on NGO capacities and resources<sup>37</sup>

36 Wallace, 2006, Evaluating Stepping Stones, p.27

37 Some useful guides include the one by Chris Roche (2000) and Frances Ruben (1995)

- ⊙ Chosen methods should be based on *what it is really important to know* and *at what cost* in terms of intrusion, ethics, time and money
- ⊙ ***Setting impact indicators and collection of baseline data are critical:*** In order to assess impact, you need to be clear about what kind of impacts you are interested in. You also need to have a baseline against which to compare changes at the individual/community level.
- ⊙ ***Community involvement*** is essential at all stages of the process to ensure the validity of the findings for the community, as well as the implementing organisation. Feeding back findings to the community is also critical and reinforces the empowerment process.
- ⊙ ***The process, as well as the outcomes should be documented :*** The process itself can also have a critical impact on the outcome and should, consequently, also be fully documented.
- ⊙ ***More resources*** need to be devoted to M&E and the costs, for baselines, etc. should be included in the ***budget***
- ⊙ ***Monitoring skills*** for NGO staff need to be developed and strengthened
- ⊙ The M&E strategy should include ***training and support for local structures*** to enhance their ability to provide quantitative data required for monitoring purposes.
- ⊙ Stepping Stones is designed to promote ***long-term processes of change***, such as the transformation of gender relations, changes in long-standing cultural practices and traditions, etc. The long-term nature of such changes should be recognised in the M&E methods used and in the timing of M&E.
- ⊙ Need for more in-depth research to go into issues more fully and get a deep understanding of the more fundamental questions, such as whether gender relations have undergone radical, as opposed to merely superficial change.



## F. ENHANCING SUSTAINABILITY OF STEPPING STONES

*Uganda*



*Tanzania*



*Tanzania*



## F. Enhancing Sustainability of Stepping Stones

*“Of course, people cannot be expected to change their approach to life on the basis of nine weeks’ work. This workshop can only be seen as the starting point for changes within a community.”* (Alice Welbourn, 1999)

*“The training is like cultivating a field. You look after it well and it will always be there for future generations to draw benefit from”.* (Angolan Army Officer, trained in Stepping Stones, 2006)

As with most community development interventions, the issue of sustainability is paramount. Most of the evidence available to date indicates that Stepping Stones can and does have a dramatic impact on the lives of individuals and communities. But how sustainable is it? The aim of this final section of the Guide is to look at some of the ways in which the impact of Stepping Stones can be sustained in the longer term.

### QUESTIONS TO BE ADDRESSED IN THIS SECTION

- ⊙ How can you support people to maintain changes in their behaviour and avoid slipping back into previous (undesired) patterns of behaviour?
- ⊙ How can a small number of people influence the majority?
- ⊙ What happens after Stepping Stones?
- ⊙ How can communities best be supported to build on and continue the process?
- ⊙ How long should NGOs stay after Stepping Stones is over?
- ⊙ How can one find out if Stepping Stones is sustainable in the long term?

### F.1 Ongoing reflection during the Stepping Stones process

At the beginning of each new session, participants are asked to review the previous session and to share something good that happened to them since then. In this way, the ongoing learning process is encouraged and supported throughout the Stepping Stones process itself. This helps to reinforce any changes initiated by the process. As already noted in section E (Monitoring and Evaluation), there is a further opportunity provided at the very end of the process to review the outcomes. Moreover, the special community requests themselves are another way in which new awareness gained can be crystallised and shared with others. These are all an important part of the process of enhancing sustainability of changes brought about by the Stepping Stones process.

### F.2 Sharing lessons learnt with others

One of the questions sometimes raised about Stepping Stones is whether changes that happen within the Stepping Stones sessions can spill over into people’s day to day lives and the life of the community. For example, how easy is it for a woman who acquires assertiveness skills to practise them in her relationship with a violent partner? And how easy is it for a woman whose partner gets drunk every evening and has unprotected sex with other women to get him to change his behaviour and/or use a condom? The answer is, it is not easy at all! However, there are some things that can be done to help:

These include:

- Encouraging participants to share and discuss what they have learnt with their partners, children and friends. There is plenty of evidence to suggest that, for the most part, participants do talk with their friends and family about what they have learnt and discussed in the Stepping Stones sessions.
- Involving others as much as possible in the process: for example, inviting them to the open community meetings where special requests are discussed so they can participate in the discussions.
- Try to work with men (and women who did not attend) in a more focused way. For example, men who have been ‘transformed’ could be encouraged to continue meeting and try to transform others.

### F.3 Follow up support for communities

As noted above, Stepping Stones is a springboard for change. It can not stop there. Ideally, Stepping Stones should promote community initiatives that are community-owned and driven. However, such initiatives can not be expected to operate completely autonomously with no external support. Community groups require all kinds of support, including capacity-building, funding, expertise and so on. However, as the example of CARPP shows, sometimes very little can go very far.

#### **Box 14:**

#### **CARPP (the Community AIDS Resource Persons of Pabbo); Example of a SS-inspired community initiative that has grown and prospered in N Uganda**

SS was first introduced in the displaced camps of war-torn Gulu town in the mid-nineties. A group of people who were trained as Stepping Stones facilitators in Pabbo camp were so inspired by the process that they decided to set up their own group to continue doing Stepping Stones work in the camps. They were given a small grant by ACORD to buy materials and the Camp leader gave them a room in his office. Over time, the group has grown and currently is the main provider of services for People Living with HIV and AIDS in the camps, as well taking the lead in awareness-raising and prevention, primarily using SS.

Supporting such initiatives may not be very costly in terms of staff time and NGO resources, but unless they have been included in the project design from the outset, they are not likely to go far. What is needed?

- ***Continued presence in the community:*** One of the main criticisms of the SCF Stepping Stones project in Harrar, Ethiopia, which was highlighted by the recent evaluation was the fact that, once Stepping Stones was over, contact with the community only continued for a period of approximately 3 months. This was considered to be too short a period to consolidate community initiatives and 2 years was recommended as the ideal time period for NGOs to remain in the area after Stepping Stones has ended.

**Box 15:****Lesson learnt from Ethiopia: Need to include follow-up in project design**

The design of the SCF Stepping Stones project in Harar (Ethiopia) included a 1-2 day refresher training workshop after the end of the process and the development of an action plan supported primarily by community volunteers. Action plans included a range of initiatives. For example, each community received the equivalent of about \$150 to undertake their planned activities, such as the creation of Anti AIDS clubs and holding of traditional Ethiopian coffee ceremonies. However, an evaluation of the Project carried out in 2005 found that this limited follow-up is not sufficient to ensure impact sustainability.

Examples of types of follow-up support for communities:

- ***Support for advocacy demands and advocacy training:*** *Stepping Stones* often gives rise to advocacy demands, for example, more accessible VCT services, access to anti-retroviral treatments, more user-friendly STI services, access to credit for income-generation activities, access to sports and leisure facilities for young people; to name but a few. However, experience has shown that local communities usually do not have the know-how or capacity for pursuing these advocacy demands. Thus, one contribution that can be made by NGOs is to provide training so as to build up this capacity.
- ***Fundraising support:*** NGOs should also provide training for local community structures to support their efforts to raise money to enable them to continue the work
- ***Support for additional Stepping Stones work:*** one of the most common outcomes of Stepping Stones is a demand for more Stepping Stones! NGOs can provide training and material support to enable local groups to develop their own training and facilitation skills so as to continue this work for others in their own or neighbouring communities.
- ***Promoting and supporting ongoing involvement with local leadership and partners:*** After Stepping Stones is over, the local leadership must be encouraged and supported to provide ongoing support for communities and to respond in concrete ways to the demands of communities for better services, and so on. Where possible, the local Advisory Committee should continue to have meetings for at least a year after the end of Stepping Stones, specifically in order to continue supporting and monitoring local initiatives.

## F.4 Mainstreaming Stepping Stones

The Stepping Stones process provides a unique opportunity for bringing together a wide range of stakeholders to collectively engage in a process of analysis of the problems directly and indirectly linked to HIV and AIDS in their communities and together come up with ideas for addressing them. It is vital that this opportunity is not wasted and that initiatives arising are acted upon and, where possible, 'institutionalised'. Examples of different ways in which this can be done are provided in the examples included in the box below.

### Box 16

#### Mainstreaming Stepping Stones outcomes: Examples from the Gambia, Tanzania, Fiji, Angola and the Gambia

In *Mwanza (Tanzania)*, the City HIV/AIDS Coordinator, who was a member of the Local Advisory Committee and closely involved with the ACORD Stepping Stones Project, set up a system whereby local agencies were formally invited to input information to involve city level planning processes. This was in response to the finding of the Stepping Stones Advisory Committee, which had identified a lack of consistency in the flow of information from local to city level. One of the decisions made was to introduce sexual and reproductive health education in schools.

In Sasa Village, *Fiji*, a Youth Council was established. The Council meets fortnightly and presents youth requests at regular community meetings. In addition, one of the Stepping Stones facilitators has established a formal relationship with the local health clinic, which now provides her with regular monthly supplies of condoms for distribution to village residents who request them.

In *Angola*, one of the trainers was on the Board of the National Guides Association and he has succeeded in getting parts of the Stepping Stones programme included in the country-wide curriculum for boys and girl guides.

In *the Gambia*, a strategy was developed aimed at integrating Stepping Stones into the rural development system and structures at national level by including NGO representatives within multi-disciplinary teams, which include extension workers from different government departments who jointly develop ward development plans based on participatory needs assessments. As part of the strategy, Stepping Stones will be made available to any village where reproductive health problems have been identified.

## F.5 Scaling up Stepping Stones

Clearly, one of the most effective ways of enhancing the sustainability of Stepping Stones is by scaling it up so it can reach a greater number of people. The Gambia experience (see Box below) provides an example of how this can be done (see Box below) shows how this has been done.

Owing to the success of Stepping Stones, particularly in terms of reducing gender violence, a serious problem in the Gambia, it was decided to scale up Stepping Stones country-wide. This was planned to take place in a series of phases. In the first phase (2003-5), Stepping Stones was implemented in 120 villages, in the second phase (2006) in a further 225 villages and in the third phase, it was planned to introduce it in a further 300 villages. This was achieved through effective mainstreaming and coordination with others from the local through to the international level.

Clearly, scaling-up on this scale is beyond the scope of a single organization. However, as in the case the Gambia, it is possible through effective advocacy, networking and coordination of efforts, to promote the recognition of Stepping Stones so that the benefits are widely spread.

## F.6 Documentation and dissemination of Stepping Stones experiences

Stepping Stones experiences in different countries, including details of how Stepping Stones was implemented, how the Manual was adapted, the lessons learnt, key findings and conclusions of any evaluations conducted, outcomes of mainstreaming and/or scaling up efforts – all these need to be

documented and shared with others. This Guide is one effort at helping to share some of the lessons learnt. However, there are a great many more lessons that have not been shared.

There are plans to use the Stepping Stones website more effectively in future as a depository of information on Stepping Stones and to try to make this more readily accessible to Stepping Stones users and others. But, it is up to individual organizations to strive to share their experiences as widely as possible for the benefit of the wider community. In so doing, we will not only be helping each other to learn from our own successes and shortcomings, but we will also be doing our part in helping to convince the wider community, including policy makers and funders, of the difference that Stepping Stones can make to the lives of those who have ‘tasted’ it!



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# The ‘Stepping Stones’ Training Package: Publishing And Distribution

The original ‘Stepping Stones’ manual and workshop video were co-published by Action Aid and Strategies for Hope in 1995. Several other language versions and adaptations have since been produced and can be ordered from:

## **1. Teaching-aids at Low Cost (TALC): [info@talcuk.org](mailto:info@talcuk.org); [www.talcuk.org](http://www.talcuk.org):**

- English and French manual and video
- Swahili and Luganda video
- Portuguese manual

Limited quantities of free copies in these languages are available to community-based organisations in developing countries that are unable to purchase them. Income from sales to other organisations is used to help cover the cost of providing these free copies.

## **2. Plan International:**

<http://www.plan-international.org/wherewework/americas/publicaciones/> (scroll down nearly to the bottom of the page. The manual ‘Paso a Paso’ is found in pdf form there in 3 parts.)

Contact also [melanie.swan@plan-international.org](mailto:melanie.swan@plan-international.org) for the ‘Paso a Paso’ DVD:

- Spanish manual and video

## **3. ActionAid Bangladesh: [hossainmk@gmail.com](mailto:hossainmk@gmail.com):**

- **Bangla manual**

## **4. Population Concern International, Indonesia Office: [ltolley@pci.or.id](mailto:ltolley@pci.or.id):**

- Indonesian manual and video

Other translations and adaptations may also be available. To enquire, please contact [info@steppingstonesfeedback.org](mailto:info@steppingstonesfeedback.org).

## Other useful Stepping Stones Publications, articles and DVD<sup>38</sup>

Condom Commandos : 2007. 24 minute documentary showing Stepping Stones process in action in Angola, ACORD. Made by Media-Coop. Can be ordered from ACORD: [mariea@acord.org.uk](mailto:mariea@acord.org.uk)

Welbourn, Alice (2007): “HIV and AIDS, the Global Tsunami: the role of Stepping Stones as one participatory approach to diminish its onslaught” in Brock Karen and Pettitt Jethro eds “Springs of Participation: Creating and evolving methods for participatory development”, pp 123-135, Practical Action Publishing, Rugby, 2007

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**FORTHCOMING:** ‘Stepping Stones Plus: new exercises and sessions designed to be used together with the original “Stepping Stones” training manual ‘ by Alice Welbourn, Florence Kilonzo, Tj Mboya and Shoba Mohamed Liban” co-published by Strategies for Hope Trust and UNICEF, 2008. This expanded version of Stepping Stones, which includes some new exercises, is expected to appear in print in 2008. It will be posted on the Stepping Stones and Strategies for Hope websites.

The publication can be obtained in hard copy from ACORD Secretariat at a cost of £20. A PDF copy can be accessed on the following websites; [www.acordinternational.org](http://www.acordinternational.org) and [www.stratshope.org](http://www.stratshope.org).

38 All of these resources can be found in the internet, most of them in the Stepping Stones website: [www.stepsstonesfeedback.org](http://www.stepsstonesfeedback.org) and/or Strategies for Hope website: [www.stratshope.org](http://www.stratshope.org)



# ANNEX 1

## The Gender-Equitable Men Scale (GEM Scale)

Respondents are to answer; Agree (1), Partially Agree (2) or Do Not Agree (3)

	Agree (1)	Partially Agree (2)	Do not Agree (3)
It is the man who decides what type of sex to have			
A woman's most important role is to take care of her home and cook for her family			
Men need sex more than women do			
You don't talk about sex, you just do it			
Women who carry condoms on them are seen as 'easy'			
Changing diapers, giving the kids a bath, and feeding the kids are the mothers' responsibility			
It is a woman's responsibility to avoid getting pregnant			
A man should have the final word about decisions in his home			
Men are always ready to have sex			
There are times when a woman deserves to be beaten			
A man needs other women, even if things with his wife are fine			
If someone insults me, I will defend my reputation with force if I have to			
A woman should tolerate violence in order to keep her family together			
I would be outraged if my wife asked me to use a condom			
It is okay for a man to hit his wife if she won't have sex with him			
I would never have a gay friend			
It disgusts me when I see a man behaving like a woman			

## ANNEX 2: The Secret Ballot

### Some examples of questions used in the secret ballot<sup>39</sup>

- ⊙ Have you talked to your partner about sexually transmitted infections in the last year?
- ⊙ Are you responsible for any children under 16?
- ⊙ If so, have you discussed the bad side of sexual relationships with these children in the last year?
- ⊙ Can a man or woman be infected with a sexually transmitted infection but not have any symptoms?
- ⊙ Can a man have a discharge from his penis without having sex?
- ⊙ If someone has a sexually transmitted infection which is treated and cured, is IT OK to resume sex with their partner?
- ⊙ Is a woman most fertile on the day after her menses?
- ⊙ Can sexually transmitted infection make a woman barren?

39 Gambian Experiences with Stepping Stones: 1996-97, Matthew Shaw and Michelle Jawo, PLA Notes 37, February 2000, p. 75

# ANNEX 3

## Story Collection Guide for Stepping Stones<sup>40</sup>

### Background

#### Explain purpose of Evaluation.

We hope to use the stories and information collected from your interviews for a number of purposes including:

- ⊙ To help us understand what participants think is good and got as good
- ⊙ To make improvements to our work
- ⊙ To tell (the donor) what has been achieved

### Confidentiality

We may like to use your stories for reporting to our donors, or sharing with other participants and trainers. Do you (the story teller):

- |  |     |    |
|--|-----|----|
| ⊙ Want to have your name on the story            | Yes | No |
| ⊙ Consent to us using your story for publication | Yes | No |

### Contact Details

Name of story teller

Name of person recording story

Location

Project Name:

Date of recording story

### Questions

Tell me how you first became involved with the project?

Please list the most important changes in the table below that you feel have resulted in you participating or being part of Stepping Stones

Before	After

40 Developed for the purposes of the Evaluation of the pilot Stepping Stones Program in Fiji, 2007 by the Pacific Regional HIV and AIDS Project

From your point of view, select the most Significant change of all changes you have listed above. Describe this change in the form of a story [i.e. a beginning (what it was like before); a middle (what happened); and an end (what it is like now)].

Why did you choose this particular story? Why is it significant to you?

What title would you give this story?

- 1 For example, if you ask ‘Do you agree that condoms are bad?’, respondents are likely to say yes. A multiple choice approach would be preferable where respondents are given a choice of 3 or 4 different answers and they can choose the one that best reflects their views. For example, you could say: Tick one of the following: condoms provide the best protection against infection; condoms can be harmful; condoms are one of several options to be considered. This is a less biased approach.
- 2 In Fiji, it was found that facilitators from other communities were far less likely to embark on Stepping Stones on account of cost and logistical implications (PRHP: 40)
- 3 Interview with Massa Crayton, Stepping Stones trainer at Actionaid Liberia. See also: Stepping Stones: Training of Facilitators (ToF) Report produced by ActionAid Liberia in November, 2005
- 4 Extracts from these discussions both with the men and the women appear in ‘Condom Commandos’ a new film commissioned by ACORD showing Stepping Stones in action in Angola





#### ACORD (Kampala)

Plot 1272  
Kampala, Uganda  
Tel: +256 414 266 596/267 667/8  
Fax: +256 414 267 669  
E-mail: [hasap@acord.or.ug](mailto:hasap@acord.or.ug)  
[www.acordinternational.org](http://www.acordinternational.org)

#### ACORD (Nairobi)

ACK Garden House  
P. O. Box 61216 - 00200,  
Nairobi Kenya  
Tel: +254 (20) 2721172 / 85 / 86  
Fax: +254 (20) 2721166  
E-mail: [info@acordinternational.org](mailto:info@acordinternational.org)  
[www.acordinternational.org](http://www.acordinternational.org)

#### ACORD (London)

Development House  
54-64 Leonard Street  
London EC2A 4JX,  
United Kingdom  
Tel: +44 (0) 20-7065-0851  
Fax: +44 (0) 20-7065-0851  
Email: [info@acord.org.uk](mailto:info@acord.org.uk)  
[www.acordinternational.org](http://www.acordinternational.org)

"This guide is most welcome and provides an updated and expanded guide to preparation, training, adaptation and many of the other practical questions facing those developing an effective workshop programme. It should help to ensure that Stepping Stones reaches its full potential in all the places where it is used. Many thanks to Angela Hajipateras, ACORD, their partners and all those who have contributed their insights and expertise to its production."

- Dr Alice Welbourn, initiator of the Stepping Stones methodology, January 2008

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