

Additional Evaluation Resources and Websites

Publications

Qualitative Research & Evaluation Methods by Michael Quinn Patton (3rd Edition, 2002)

Designing and Conducting Mixed Methods Research by John W. Creswell and Vicki L Plano Clark (2007)

Real World Evaluation; Working Under Budget, Time, Data, and Political Constraints by Michael Bamberger, Jim Rugh, and Linda Mabry (2006)

Evaluation Strategies for Communicating, Reporting, Enhancing and Learning in Organizations by Rosalie T. Torres, Hallie Preskill and Mary E. Piontek. (2nd Edition. 2005)

Websites

<http://www.careacttarget.org/>

The Target Center which stands for **T**echnical **A**ssistance **R**esources, **G**uidance, **E**ducation & **T**raining offers technical assistance to the Ryan White Community. There is a full array of technical assistance and training resources funded by the HRSA HIV/AIDS Bureau.

<http://www.careacttarget.org/librarysearch.php>

If you go to the Technical Assistance Library on the Target Center and choose “Evaluation” as a resource topic, you will find many helpful resources including the below guides.

Some helpful guides include:

[A Practical guide to Evaluation and Evaluation Terms for Ryan White CARE Act Grantees](#)

[Outcomes Evaluation TA Guide: Primary Medical Care Outcomes Titles I and II of the Ryan White CARE Act](#)

[The Outcomes Evaluation TA Guide: Case Management Outcomes Titles I and II of the Ryan White CARE Act](#)

<http://www.nationalqualitycenter.org/index.cfm/316>

The **National Quality Center** in conjunction with HRSA HIV/AIDS Bureau, provides no-cost, state-of-the-art technical assistance for all Ryan White HIV/AIDS Treatment Modernization Act of 2006 funded grantees to improve the quality of HIV care nationwide.

There is a tab for QI Resources (Quality Improvement resources) where you can find helpful tools to assist in your quality improvement efforts

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr4811a1.htm#top>

CDC Report: Framework for Program Evaluation in Public Health

The Centers for Disease Control and Prevention (CDC) developed and published this framework for program evaluation “to ensure that amidst the complex transition in public health, we will remain accountable and committed to achieving measurable health outcomes.”

<http://dir.unitedway.org/outcomes/library/pgmomres1.cfm>

The United Way Outcome Measurement Resource Network provides resources for evaluation. One example of an excellent resource if you are new to the concept of Program Evaluation is [Measuring Program Outcomes: A Practical Approach](#) .

<http://www.ojp.usdoj.gov/BJA/evaluation/links/WK-Kellogg-Foundation.pdf>

The Kellogg Foundation Evaluation Handbook provides principles for principles to help guide evaluation work and a blueprint for planning, designing and implementing effective program evaluations.

http://communityhealth.ku.edu/ctb/about_the_ctb.shtml

KU Work Group Community Toolbox is a free, capacity-building website available to communities. It includes an [evaluation section](#) which contains information on developing a plan for evaluation, methods for evaluation, and using evaluation to understand and improve the initiative.

Validated Evaluation Instruments

These instruments have gone through rigorous testing/research to ensure that they have high validity and reliability. A validated tool has been shown to measure what it purports to measure, for example, showing that people with high scores on a questionnaire about risk-taking actually do take more risks than people with low scores. Reliability is another important factor when giving surveys and inter-rater and intra-rater reliability must be high. For example, if one evaluator gives a depression survey to 10 patients, is there a high level of agreement if a 2nd evaluator gives the same depression survey to the same 10 patients? If not, there may be bias in the way the evaluator is administering the survey or the survey may not be a very good tool for measuring depression. The following list provides tools that may be helpful in your HIV program evaluation.

The Berger HIV Stigma Scale is an instrument to measure the stigma perceived by people with HIV which was developed based on the literature on stigma and psychosocial aspects of having HIV. In this document, we have provided the actual tool, documentation on scoring the tool, and a journal article that describes its development. Please be sure use the appropriate citation if you use the tool – the citation is included with the scoring instructions.

The Risk Assessment Battery (RAB) is a self-administered, multiple choice questionnaire, It was developed to offer a quick and confidential assessment of both needle sharing practices and sexual activity associated with HIV transmission. The following link from the University of Pennsylvania will give you details on the RAB and the actual instrument: http://www.med.upenn.edu/hiv/rab_download.html

The Center for AIDS Prevention Studies out of the University of California, San Francisco has compiled a comprehensive list of survey instruments that are in the public domain. For example **The HIV Treatment Adherence Self Efficacy Scale (HIV-ASES)** can be downloaded from this site.

<http://www.caps.ucsf.edu/tools/surveys/#105>

Rand Health is another excellent resource for survey instruments. All of the surveys from RAND Health are public documents, available without charge (for non-commercial purposes).

Please provide an appropriate [citation](#) when using these products. In some cases, the materials themselves include specific instructions for citation.

Some materials listed are not available from RAND Health. Those links will take you to other websites, where you will find instructions for use.

The Medical Outcomes Study, Social Support Survey can be found here as well as other quality of life instruments.

http://www.rand.org/health/surveys_tools.html

Berger HIV Stigma Scale ©

This study asks about some of the social and emotional aspects of having HIV. For most of the questions, just circle the letters or numbers that go with your answer. There are no right or wrong answers. Feel free to write in comments as you go through the questions.

This first set of questions asks about some of your experiences, feelings, and opinions as to how people with HIV feel and how they are treated. Please do your best to answer each question.

For each item, circle your answer: Strongly disagree (SD), disagree (D), agree (A), or strongly agree (SA).

	Strongly			Strongly
	Disagree	Disagree	Agree	Agree
	(SD)	(D)	(A)	(SA)

- | | | | | | | |
|----|--|----|---|---|----|------|
| 1. | In many areas of my life, no one knows that I have HIV | SD | D | A | SA | 2 |
| 2. | I feel guilty because I have HIV | SD | D | A | SA | 3 |
| 3. | People's attitudes about HIV make me feel worse about myself | SD | D | A | SA | 3 |
| 4. | Telling someone I have HIV is risky..... | SD | D | A | SA | 2, 4 |

5.	People with HIV lose their jobs when their employers find out.....	SD	D	A	SA	4
6.	I work hard to keep my HIV a secret.....	SD	D	A	SA	2, 3
7.	I feel I am not as good a person as others because I have HIV	SD	D	A	SA	3
8.	I never feel ashamed of having HIV.....	SD	D	A	SA	3
9.	People with HIV are treated like outcasts	SD	D	A	SA	4
10.	Most people believe that a person who has HIV is dirty.....	SD	D	A	SA	4
11.	It is easier to avoid new friendships than worry about telling someone that I have HIV	SD	D	A	SA	2, 3, 4
12.	Having HIV makes me feel unclean.....	SD	D	A	SA	3

13.	Since learning I have HIV, I feel set apart and isolated from the rest of the world	SD	D	A	SA	1, 3, 4
14.	Most people think that a person with HIV is disgusting	SD	D	A	SA	4
15.	Having HIV makes me feel that I'm a bad person.....	SD	D	A	SA	3
16.	Most people with HIV are rejected when others find out	SD	D	A	SA	1, 4
17.	I am very careful who I tell that I have HIV	SD	D	A	SA	2
18.	Some people who know I have HIV have grown more distant.....	SD	D	A	SA	1
19.	Since learning I have HIV, I worry about people discriminating against me	SD	D	A	SA	2, 4
20.	Most people are uncomfortable around someone with HIV	SD	D	A	SA	4
21.	I never feel the need to hide the fact that I have HIV	SD	D	A	SA	2
22.	I worry that people may judge me when they learn I have HIV.....	SD	D	A	SA	2, 4

23. Having HIV in my body is disgusting to me..... SD D A SA 3

Many of the items in this next section assume that you have told other people that you have HIV, or that others know. This may not be true for you. If the item refers to something that has not actually happened to you, please imagine yourself in that situation. Then give your answer ("strongly disagree," "disagree," "agree," "strongly agree") based on how you think you would feel or how you think others would react to you.

		Strongly Disagree	Disagree	Agree	Strongly Agree	
		(SD)	(D)	(A)	(SA)	
24.	I have been hurt by how people reacted to learning I have HIV.....	SD	D	A	SA	1
25.	I worry that people who know I have HIV will tell others.....	SD	D	A	SA	2
26.	I regret having told some people that I have HIV	SD	D	A	SA	1

27.	As a rule, telling others that I have HIV has been a mistake	SD	D	A	SA	1, 3, 4
28.	Some people avoid touching me once they know I have HIV	SD	D	A	SA	1, 4
29.	People I care about stopped calling after learning I have HIV	SD	D	A	SA	1
30.	People have told me that getting HIV is what I deserve for how I lived my life	SD	D	A	SA	1, 4
31.	Some people close to me are afraid others will reject them if it becomes known that I have HIV	SD	D	A	SA	1
32.	People don't want me around their children once they know I have HIV	SD	D	A	SA	1, 4
33.	People have physically backed away from me when they learn I have HIV	SD	D	A	SA	1, 4
34.	Some people act as though it's my fault I have HIV	SD	D	A	SA	1, 4
35.	I have stopped socializing with some people because of their reactions to my having HIV	SD	D	A	SA	1

36.	I have lost friends by telling them I have HIV	SD	D	A	SA	1
37.	I have told people close to me to keep the fact that I have HIV a secret.....	SD	D	A	SA	2
38.	People who know I have HIV tend to ignore my good points	SD	D	A	SA	1, 3, 4
39.	People seem afraid of me once they learn I have HIV	SD	D	A	SA	1, 3, 4
40.	When people learn you have HIV, they look for flaws in your character.....	SD	D	A	SA	1, 4

SCORING for the Berger HIV Stigma Scale and Subscales

- 1) Items are scored as follows:
 - strongly disagree = 1
 - disagree = 2
 - agree = 3
 - strongly agree = 4.

If a subject selects a response in between two options (e.g.: between SD and D), a numerical value midway between the two options would be used (e.g.: 1.5).

- 2) Two items are reverse-scored: items 8 and 21.
- 3) After reversing these two items, each scale or subscale's score is calculated by simply adding up the raw values of the items belonging to that scale or subscale. Subscale designations appear in small print in the far right margin of the instrument; it may be desirable to cover or delete those numbers before reproducing the instrument for administration to subjects. Sixteen items belong to more than one subscale, reflecting the intercorrelations of the factors on which the subscales are based.
- 4) The range of possible scores depends on the number of items in the scale. For the total HIV Stigma Scale, scores can range from 40 to 160 [1 x 40 items to 4 x 40 items]. For the personalized stigma subscale, scores can range from 18 to 72. For the disclosure subscale, scores can range from 10 to 40. For the negative self-image subscale, scores can range from 13 to 52. For the public attitudes subscale, scores can range from 20 to 80.

Please include the below citation if you use this tool:

Citation: Berger, B, Ferrans, CE, & Lashley, FR. (2001). Measuring stigma in people with HIV: Psychometric assessment of the HIV stigma scale. Research in Nursing and Health, 24, 518-529.