Demonstration Projects and Networks

Demonstrating evidence-based interventions

South Africa has major social problems that require implementation of evidence-based interventions. To assist policy-makers and other decision-makers in testing the effectiveness of proposed interventions in communities, the HSRC embarked on an approach that entails demonstrating via pilot projects that a concept is working in a research setting. If successful, the demonstration projects are implemented, monitored and evaluated, with the eventual aim of assisting government in scaling up the project to even larger areas.



Project Accept shifts access

Project Accept, a large scale, four-country community randomised trial, funded by the US National Institutes of Mental Health, is completing almost three years of intervention by delivering mobile voluntary counselling and testing services, coupled with community mobilisation and post-test psychosocial support to communities in a rural community just outside Pietermaritzburg.

Close to 10 000 people in four intervention communities have been tested so far.

Significantly, almost 77% of those we have tested are between the ages of 16 and 32 years of age, with 47% being male and 53% female.

These findings are shown in Table 5 below and demonstrate an important shift in access by men and young people to counselling and HIV testing.

Figure 4: Characteristics of testers in Project Accept

CLIENT TESTING OUTCOMES

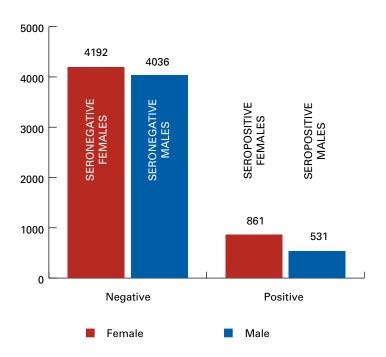


Table 5: Characteristics of testers in Project Accept

CLIENTS TESTED		9620
Male	4567	47,47%
Female	5053	52,53%
SEROSTATUS		
Positive	1392	14,47%
Negative	8228	85,53%
AGE DISTRIBUTION		
Age: 16-17	2425	25,21%
Age: 18-32	4950	51,46%
Age: 33-55	1767	18,37%
Age: 56 and over	474	4,93%
TESTER MEDIAN AGE		21

We are approaching the assessment phase of the study. The study outcomes are to test whether there are fewer new infections in our intervention communities and if these communities are characterised by greater disclosure, openness, more frequent discussions about HIV and AIDS, and a reduction in risk behaviours, stigmatising beliefs and discriminatory attitudes towards those living with HIV/AIDS.

Even ahead of this important outcome data, our process level data suggests that we are

encouraging and reaching a critical mass of young people and men to HIV testing – groups who are typically hard to reach through traditional health services. This represents a significant achievement given the prevention and treatment goals of the AIDS programme in South Africa. The project is also reported under the 'Health' theme on page 47.

Child, Youth, Family and Social Development programme

Mentoring for HIV-positive mothers

Project *Masihambisane* (meaning, 'let's walk together') is a randomised clinic trial to test the effectiveness of health information materials and a clinic-based peer-support and mentoring intervention to improve the health and wellbeing of HIV-positive mothers and their babies during pregnancy and the early post-partum period. This study is funded by the National Institute of Health (NIH).

One of the key intervention messages emphasised by our study is learning how to negotiate disclosure of one's newly learnt HIV status. Data from the current sample suggests that about 40% of the women (239 of 565) feel that they are able to tell someone their HIV status. The analysis shows that more women disclose to their partners than to any other group of people, followed by other family members, and mothers. Fathers and spiritual leaders are two of the least likely groups of people to whom pregnant women will disclose their HIV status.

Despite the reported fear involved in disclosing one's HIV status, the study showed that independent of whom pregnant women disclose to, the response they receive is almost always overwhelmingly positive.

In the nine months since data collection began in this project, close to 600 HIV-positive pregnant women have enrolled in the study. During this time, an active community advisory board (CAB) consisting of 20 community members has been constituted. Regular meetings are held with this body and other implementation partners. A website has been set up to keep all CAB members as well as other key stakeholders abreast of the latest project news and activities. The website also functions as an internal project management system tool.

Project *Masihambisane* is roughly one third of the way through enrolment and three years away from completion. This project is also reported under the 'Health' theme on page 47.

Child, Youth, Family and Social Development programme

Acceleration of service delivery in the Tshwane Metropolitan Municipality

The aim of this project is to conduct research that could lead to interventions through pilot demonstrations that will help accelerate service delivery in the Tshwane Metropolitan Municipality.

The idea is to build a more effective delivery system in the municipality through interventions that combine better planning, training and implementation.

Even at an early stage, work on the project has fed into the municipality's regional spatial development framework (RSDF) process. As such, it is having a considerable impact on what would constitute an appropriate regional development model for Tshwane.

Individuals from key stakeholder grouping such as government departments, civil society and research institutions serve as a crucial link between research, development and the adoption of models and innovation arising from the research.

The project has important spin-offs, with the municipality constantly seeking the advice and input of the HSRC as its research partner. These include inputs into the executive mayor's 2008 state of the city address, and detailed commentary on the Tshwane Municipality's indigent strategy.

Insights gained from this project on how to improve their delivery systems, will prove instructive in addressing the country's service delivery challenges.

This project is also reported under the "Poverty" theme on page 61.

Centre for Service Delivery

Accelerating sustainable water service delivery in the Eastern Cape

In this demonstration project, the HSRC is acting as project manager and works in partnership with the Council for Science and Industrial Research (CSIR) to implement rural water schemes in the Eastern Cape. The project explores the relation between the 'hard' and 'soft' sciences of project implementation in the uncertain conditions of deep rural areas.

Although service delivery is the outcome of a complex, 'messy' delivery system, this project is designed to produce concrete results to accelerate safe drinking water to poor communities.

At this early stage of the project, various institutions and networks have been mobilised to prioritise implementation, including the departments of Water and Forestry, Science and Technology, Provincial and Local Government, the South African Local Government Association, Umgeni Water, the Ekurhuleni Metropolitan Municipality, the Development Bank of Southern Africa, the Independent Development Trust, the Water Research Commission, and the Amathole and OR Tambo District Municipalities.

This project is also included under the 'Poverty' theme on page 62.

Centre for Service Delivery

Preliminary socioeconomic assessment of communal water

A German-South African demonstration project, in partnership with the Communal Water House, aims to improve the lives of citizens in poor communities via advanced water treatment technologies, water recycling and sanitation.

The project was initiated in Jansenville in the Eastern Cape and is widely regarded as one of the most innovative interventions in providing poor people with access to safe water and washing facilities.



A preliminary report has been widely circulated and an assessment of the goals of improving personal hygiene, health and wellbeing of the community, is ensuing. The National Research Foundation has awarded a grant to facilitate workshops and scientific exchange on this project.

Centre for Service Delivery

Councillor Nqukhwe points to the turbid waters of the Mzimvubu River and indicates the height and the long distances between houses and water in Mnxekazi, Eastern Cape.

A woman in the Mnxekazi village, Eastern Cape, scoops dirty water from the Umzimvubu River



Networks increase the relevance of our work

The introduction of implementation networks as part of research planning is an important development at the HSRC.

By networking closely with strategic partners, we aim to increase the relevance, utilisation and potential impact of human and social science research. Nearly all projects mentioned in this annual report have resulted in strong networks with partners and mutually benefiting relationships with government departments, government agencies, donors and funders, international development agencies, universities, and NGOs.

In this section we highlight some of the projects where implementation networks were part of the success formula.

The Department of Labour scarce and critical skills research projects

At various levels of this research project, also reported on page 67, staff of the Department of Labour and other stakeholders participated in the formulation and design of the research, its methodologies and instruments; and they provided feedback on the implementation of research fieldwork, and commented on draft research findings.

The key processes were implemented at a number of levels:

- A steering committee consisting of the senior staff of the Department of Labour (DoL) and representatives of the HSRC, the Development Policy Research Unit (DPRU) at the University of Cape Town, and the Sociology of Work Programme (SWOP) at the University of the Witwatersrand provided high-level oversight and determined the general research direction.
- Researchers from DoL, the HSRC, DPRU
 and SWOP regularly met to discuss
 progress on project activities, consider
 feedback and assess changes to research
 design. Project leaders submitted six
 detailed quarterly reports over the project
 period. Researchers also met with other

stakeholders, such as Sector Education and Training Authorities (SETAs) and the Commission for Employment Equity CEE to plan the design of the studies.

The design, implementation and delivery of project outcomes were highly dependent on the quality of collaboration among government officials, the HSRC and university researchers. This was a highly successful process, largely mediated by a core of senior research scientists heading up discrete sections of the overall research programme.

Education, Science and Skills Development programme

Evaluation of literacy teaching in the Limpopo province

A highlight of our research on literacy in the Limpopo province in 2007/08, was our involvement in wider policy implementation networks. The development of the research on literacy included the Department of Education in the Limpopo Province, the funding agency, and the research organisation in partnership with a local university.

Additional representatives such as academics, the national language board, the national publishers

association, labour, and provincial representatives from national school governing body associations added further value to the project.

We found that sense of ownership, accountability, smooth execution of logistics, and successful implementation, sustainability and continuity are but some of the benefits of going about research the networking way (also reported on page 36).

Education, Science and Skills Development programme

Western Cape provincial microeconomic development strategy

The micro-economic development strategy (MEDS) aims to advance the Western Cape provincial government's goals of shared growth and higher job creation. HSRC researcher Dr Jo Lorentzen has been involved in the MEDS since 2005 when he was first appointed as one of four members of the MEDS oversight committee that advises senior officials in the Department of Economic Development and Tourism. The committee also supervises sectoral research outsourced by the department to external consultants.

Every year the committee compiles a synthesis report which discusses the challenges of Western Cape industrial policy in its national and global context, and reflects on the results of the commissioned research in public dissemination events.

For the 2008 version of the MEDS, the departmental leadership and the committee agreed to review what had been achieved to date. Members of the committee engaged with both senior and junior staff to compare the original recommendations advanced in the various synthesis reports with what departmental officials had actually been implementing over the years. This exercise revealed some gaps in implementation, which the parties then discussed in order to identify solutions. In turn, this brainstorming informed and will continue informing departmental strategies for the future.

The Western Cape provincial government funds the MEDS. Members of the implementation network include the organising committee, departmental officials, and representatives of industry that manage the respective sector associations.

Education, Science and Skills Development programme

International advisory panel for quality education

The Centre for Education Quality Improvement has appointed an international advisory panel comprising regional and international policy analysis, researchers, academic, and practitioners from diverse regions and organisations. They provide advice in organising and improving the research activities of our Centre for Education Quality Improvement (CEQI).

Centre for Education Quality Improvement

The Affiliated Network for Social Accountability in Africa

Our Democracy and Governance (D & G) programme has been responsible for ensuring the implementation and coordination of the HSRC's custodianship of the Affiliated Network for Social Accountability in Africa (ANSA-Africa).

The project - a joint initiative of the HSRC and the World Bank - aims to become a leading African advocate of citizen involvement in demand-side governance initiatives.

Members of the Affiliated Network for Social Accountability in Africa (ANSA-Africa), a joint initiative between the HSRC and the World Bank, listen to a presentation at a conference on Social accountability in fragile and post-conflict states, held in Addis Ababa, Ethiopia on 19-20 May 2008.



ANSA-Africa links African civil society and community groups across the continent to support and implement initiatives that focus on citizen involvement. In turn, partners forge their own regional and local associations to implement social accountability initiatives and expand cadres of knowledge.

Through its network, ANSA-Africa works in three main ways:

- Support social accountability initiatives and programmes by providing technical and leveraged financial assistance for the design, implementation and evaluation of quality social accountability initiatives. Through collaboration, the network transmits effective tools and incubates innovative new approaches.
- Promote capacity development through training and skill building to encourage the use and adaptation of means for citizens to demand accountability from governance, delivered through a regional approach.
 ANSA, through its partners, will design and deliver training programmes across Africa.
- Undertake research and dissemination to apply creativity and rigor to assessing, refining and developing social accountability tools and innovative electronic means to promote wide access to knowledge.

Since inception, the HSRC has overseen the establishment and management of the network's core agenda, objectives and networking activities. More information is available at www.ansa-africa.net.

Democracy and Governance programme

Expert review panel for HIV surveys

Since inception, the national HIV prevalence, incidence and communication surveys (2002, 2005 and 2008) engaged a review panel consisting of renowned South African experts on HIV research and experts from key stakeholder groups.

The panel advises the core research team during the development phase of the project proposal to the stage where they are requested to provide feedback on the penultimate draft of the main reports.

Due to its success, this practice has now been adopted for all large-scale studies that our Social Aspects of HIV/AIDS and Health (SAHA) research programme undertakes. The practice is particularly valuable in assisting SAHA to develop practical recommendations for potential users of the information contained in the reports.

Social Aspects of HIV/AIDS and Health programme

Networking in the southern African region

SAHA has also been actively participating in regional initiatives in southern Africa by working closely together with the SADC HIV/AIDS unit and the UNAIDS regional support team for East and southern Africa through the SAHARA (Social Aspects of HIV/AIDS Research Alliance) network.

SAHARA is an alliance of partners established to conduct, support and use social sciences research to prevent the further spread of HIV and to mitigate the impact of its devastation in South Africa, the SADC region and sub-Saharan Africa.

SAHARA serves as a vehicle for facilitating the sharing of research expertise and knowledge, and for conducting multi-site, multi-county research projects that are exploratory, cross-sectional, comparative or intervention-based.

Its explicit aim is to generate new social science evidence for the prevention, care and mitigation of the impact of the HIV/AIDS epidemic on individuals, families and communities. For more information, view www.sahara.org.za.

Social Aspects of HIV/AIDS and Health programme