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Dance4life: a process evaluation of a global entertainment-education prevention programme to establish a social youth movement in pushing back HIV and AIDS

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Publication date

2009

Document Version

Final published version

[Link to publication](#)

Citation for published version (APA):

Hermanns, S., van Weert, J., Linn, A., & Schouten, B. (2009). *Dance4life: a process evaluation of a global entertainment-education prevention programme to establish a social youth movement in pushing back HIV and AIDS*. Amsterdam School of Communication Research, University of Amsterdam.

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*Dance4life. A process
evaluation of a global
entertainment-education
prevention programme to
establish a social youth
movement in pushing back
HIV and AIDS*

**Amsterdam,
September 2009**

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UNIVERSITEIT VAN AMSTERDAM

ISBN 978-94-90512-01-9

<http://ascor.uva.nl>

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This study was funded by Oxfam Novib

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Summary

Background

Young people aged 15 to 24 account for almost half of new HIV infections. Because of the high rates of HIV-infected adolescents, numerous education and school-based prevention programmes have been set up worldwide. Dance4life is a dynamic international initiative that actively involves young people and wants to give them a powerful voice in pushing back the spread of HIV and the stigma and taboos that surround it. Young people (13-19 years old) are attracted and empowered through the use of experience marketing, dance, music, youth icons and their own language, educated about HIV and AIDS and sexual and reproductive health and rights and encouraged to become an active member of dance4life.

Dance4life programme

The dance4life schools programme is a four-step entertainment-education programme that aims to inspire, educate, activate and celebrate. At the start of this study (April 2009), dance4life was active in 19 countries. The programme firstly exists of an interactive workshop at which a dance4life tour team of peer educators discuss with youngsters about sex and HIV in an open way (*heart connection tour*). Next, the youngsters are educated with a life skills programme about their sexual and reproductive health and rights (*skills4life*). They also learn valuable skills about negotiation, communication and decision making, which they can apply in their daily lives. In the third step, they are stimulated to take action by organising their own activities that involve their friends, families, communities (*act4life*). Finally, every two years on the Saturday before World AIDS Day, the young people attend the *dance4life event* (in every country) to celebrate their achievements. During the event there is a live satellite link between the countries, so that they young people are united. The aim of the program is not only to learn young people important knowledge and skills on HIV and AIDS prevention, but also to inspire them to become actively involved in pushing back HIV through their own actions. These actively involved young people are called *agents of change* (aoc's). Aoc's are supposed to be personally active in halting the spread of HIV and to make a positive impact in their communities. The long-term goal is to establish a worldwide social youth movement of one million agents of change by 2014 to push back HIV and AIDS.

Aim of the study

The aim of the study is to determine whether the dance4life programme is implemented according to plan by conducting a process evaluation. Such a process evaluation allows researchers to understand which aspects of the intervention are successfully implemented. An accurate assessment of whether the intervention was delivered as intended supports further improvement of the implementation and enables the interpretation of results and conclusions regarding outcome measures.

Pre-Im framework

As there was no existing framework or model that evaluates all the dimensions we considered relevant, we developed the Pre-Im framework for process evaluation. This framework is set up from different theoretical perspectives (e.g., social movement theory, Social Cognitive Theory, Information Processing Model and Theory of Planned Behaviour) and based on two process(-effect) evaluation frameworks (i.e., RE-AIM model and ICHC model). In the Pre-Im framework for process evaluation, we made a distinction between **Prerequisites** and **Implementation** topics. We distinguished three main topics of *prerequisites*: 1) General programme strength, including an evaluation of the dance4life concept, knowledge and attitude; 2) Organisational prerequisites, including communication and professionalism of the staff; and 3) Environmental and social support. At the level of *implementation* we filtered three main topics to determine the extent to which the d4l programme is successfully implemented: 1) Reach of the programme, including the frequency of programme implementation, characteristics of the participants, and the components they attended; 2) Implementation in practice, including the implementation of the four components of the programme and the registration of the aoc's; and 3) Continuation, including contact between the aoc's and the implementing partners and the continuation of the d4l programmes in the countries.

Methods

We developed questionnaires for two target groups in all 19 countries that were participating in dance4life in April 2009: a) the *implementing partners* of dance4life, i.e. staff members from the 'national concept owners' (nco's), and b) *participants* of the dance4life programme, mostly aoc's. The questionnaire covered the relevant topics as distinguished in the Pre-Im framework. In total, 53 implementing partners (51,5%) and 508 participants (22,1%) completed the questionnaire.

Results

The results show that the concept and programme of dance4life is considered a strong health prevention programme by both the implementing partners (nco's) and participants (aoc's). Furthermore, both target groups report a positive attitude towards the concept of dance4life and the various components of the programme. Together, these results are important prerequisites to realize successful implementation of the programme. However, the social movement concept and programme need more attention. Particularly, the continuous involvement of aoc's has not (yet) been reached, partly because a good registration system is often lacking or incomplete. Moreover, the fulfilment of a leadership role, for instance by ambassadors, which is essential in strengthen the social youth movement, shows room for improvement. At the organisational level, the results also point to aspects that can be improved, such as monitoring of implementing partners by dance4life international, professionalism of the staff and strategic planning to increase collaboration between implementing partners. On the content level, the quality of the schools4life programme, particularly the act4life programme, could be further improved.

Conclusion

In conclusion, the main points of interest - in the managerial and research domains - are continued involvement of agents of change, quality management at the organisational level and quality of the schools4life programme.

Just don't let your feet stop...you gotta dance. As long as the music plays
Haruki Murakami

1. Introduction

According to the UNAIDS report (2008), young people aged 15 to 24 account for an estimated 45% of new HIV infections. Because of the high rates of HIV-infected adolescents, numerous education and school-based prevention programmes have been set up worldwide. Many studies show that a sound theoretical foundation, such as Social Cognitive Theory (Bandura, 1986) or the Theory of Planned Behavior (Ajzen, 1991), contributes to the effectiveness of HIV and AIDS interventions (Gallant & Maticka-Tyndale, 2004; Kirby, 2000). However, structured evaluations of the effectiveness of HIV and AIDS prevention programmes have seldomly been conducted (Gijs, Gianotten, Vanwesenbeeck & Weijenborg, 2008), and investigation of process variables is often lacking. Such a process study is needed though, because it allows researchers to understand which aspects of the intervention were successfully implemented (Burgio *et al.*, 2001; Finnema, 2000; Schrijnemaekers, van Rossum, Heusden & Widdershoven, 2002). The aim of a process evaluation is to determine whether the programme was implemented according to plan, but also to provide programme accountability to sponsors, the public, clients and funders, and to be able to improve the quality of the programme. Without an accurate assessment of whether the intervention was delivered as intended, conclusions regarding outcome measures are questionable (Burgio *et al.*, 2001; Phillips & van Ort, 1995). The act of evaluating is, moreover, an intervention in itself (Bliss & Emshoff, 2002), because it can stimulate the implementers to think more consciously about their work, which can in itself have an immediate effect on the implementation.

Therefore, the aim of this study is to conduct a process evaluation of a global youth HIV prevention programme, developed and implemented by dance4life. Dance4life is a globally active organisation within the field of HIV and AIDS, specifically aimed at establishing a social youth movement of one million youngsters, called agents of change (aoc's)¹ by 2014 to push back HIV and AIDS (dance4life, 2008). This social youth movement should remind the world leaders specifically about the Millennium Development

¹ A dance4life agent of change (aoc) is 13 to 19 years old, in school, and has participated in at least two of the three essential components of the dance4life programme (dance4life, 2008). Note: This definition will change in 2009: then, aoc's have to participate in all three essential components.

Goal number 6 (MDG6), target 1: 'Have halted by 2015 and begun to reverse the spread of HIV and AIDS' (UNAIDS, 2008). To realise this aim, dance4life collaborates with a global network of implementing partners based on a franchise model. The intervention itself consists of a school-based programme, called the 'schools4life programme', supported by a multimedia campaign. The schools4life programme exists of four different components: the heart connection tour, skills4life, act4life and a big dance4life event every two years, in which dance4life's message is conveyed using music/dance entertainment (see paragraph 1.2 for a more detailed description of the different components of the schools4life programme). The dance4life concept is unique in four ways: dance4life engage young people through the use of experiential social marketing (Bouman, 1999); the collaboration with implementing partners all over the world using a franchise model (see paragraph 1.2); the ultimate goal of establishing a social youth movement, which goes beyond the usual remit for school-based prevention programmes (see paragraph 1.3.1); the strategy of using music and dance in an HIV and AIDS prevention programme as an exceptional form of entertainment-education (see paragraph 1.3.2).

In this process evaluation we aim to answer two research questions:

- a. To what extent are the different components of the dance4life concept implemented as intended by the national partners?
- b. What are the opportunities and challenges for dance4life in relation to the implementation of its programme?

Dance4life has different goals. The two main goals of dance4life that apply for young people are: 1) to educate and empower young people about HIV and AIDS and sexual and reproductive health and rights and 2) to encourage young people to become part of the social movement as an aoc. The third goal is to support the national partners during the worldwide implementation of the dance4life programme in order to achieve successful implementation. The process evaluation focuses on the extent to which the dance4life programme is implemented as intended, i.e. on the process to reach the latter goal.

1.2. Dance4life

1.2.1. Dance4life programme

The first component of the dance4life school-based programme, called the heart connection tour (hct), is an interactive, entertainment-educational experience intended to *inspire and ignite* youngsters' interest in dance4life's message. Implementation of the hct requires an alternation of fun with education. According to the dance4life head office's instructions, visual stimuli like videos, images or a play should be used alongside auditory stimuli such as music instruments. Teaching a special 'drill' (i.e. a dance4life song with accompanying dance), is also part of the hct. The hct team (about eight people) should include peers, because the participating youngsters will identify with them. Further at least one peer should be included who will share his/her story of how he/she was infected or affected with HIV. Last but not least, the hct should include the experiences of individuals already involved as aoc's. On the content level, the hct aims to provide basic knowledge about HIV and AIDS, to break taboos about HIV, and to provide an open and safe environment where young people feel free to speak.

The second component, called skills4life (s4l), is an in-depth educational and empowerment programme that involves acquisition of life skills, such as communication, negotiation and leadership. The aim of this part of the programme is to *educate and empower*. In the skills4life programme there should be a focus on sexuality with special attention to young women and other high-risk groups. In the heart connection tour and the skills4life programme, role modelling is a major component (see paragraph 1.4).

The third component, called act4life (a4l), aims to *encourage action* among participants. Youngsters are motivated to contribute in pushing HIV and AIDS by becoming involved in activities such as awareness raising, advocacy, volunteering and fundraising. Youngsters should be provided with a special youth action pack, tips and tricks to raise awareness, and a fundraising and advocacy toolkit.

The fourth and last component is the international event held every two years, where the aoc's in each country come together and *celebrate victory* (as well as the achievements of the aoc's). All the national events are interconnected via a live satellite link (such as was the case in 2008).

1.2.2. Organisational structure

The actual implementation of the dance4life programme is carried out by 19 worldwide or national grassroots implementing partners, each active in a particular country. They all have a franchise agreement with the head office (dance4life international) and the head office is responsible for the managerial oversight. These implementing partners are termed 'national concept owners' (nco's) by dance4life. The nco's by country are: Stop AIDS now! In the Netherlands, Kulturzentrum Lagerhaus Bremen e.v. in Germany, ALAS² in Ibiza, IFPA³ in Ireland, Africa Alive! in Kenya, UNFPA⁴ in Mexico, AFEW⁵ in Moldova, Focus Media in Russia, JAZAS⁶ in Serbia, SPW⁷ in Sierra Leone, Tanzania, Uganda, Zambia, Zimbabwe, the United Kingdom and the USA, dance4life South Africa⁸ in South Africa, UNFPA in Turkey, and WPF⁹ in Vietnam. They implement the schools4life programme supported by multimedia campaigns.

1.3. Dance4life and theoretical foundation

1.3.1 Social movement

The importance of a social movement in reducing vulnerability to HIV/AIDS is underscored by the UNAIDS report (2008), which explicitly states that leadership on the part of many stakeholders is needed to bring about legal reform, social mobilisation, and the elimination of stigma and discrimination in the battle against HIV and AIDS. The UNAIDS report (2008) states that until HIV prevention programmes incorporate elements focused on creating social change they will prove to be ineffective in the long run. For instance, Uganda, which has long been considered an African success story in the battle against HIV and AIDS (Allen & Heald, 2004), changed its policy in 2005 from *ABC* (*Abstinence, Being faithful & Condom use*) to an abstinence-only policy, due to political pressures from the then US administration of President George W. Bush (Cohen & Tate, 2005). As a result, the prevalence of HIV infections is expected to increase in the near future. Thus, in many countries social movements are necessary to

² ALAS – Against AIDS Fight Association

³ IFPA – Irish Family Planning Association

⁴ UNFPA – United Nations Population Fund

⁵ AFEW – AIDS Foundation East-West

⁶ JAZAS – Association Against AIDS

⁷ SPW – Student Partnerships Worldwide

⁸ a new implementing partner will come in 2009

⁹ WPF – World Population Foundation

pressure governmental bodies and other stakeholders to change their HIV and AIDS policies.

To create a social youth movement it is important that the full range of ingredients for establishing a social movement is incorporated in the programme. Melucci (1996) defines a social movement as 'a type of collective behaviour that challenges the ends, values and power structures of a given society'. For a social movement to emerge, Melucci (1996) mentions that it is essential to have one specific collective goal, a conflictual situation, recruitment and succession of leaders, a degree of continuity, collective norms and values, and involvement. McAdam and Snow (1997) define a social movement as 'a collectivity acting with some degree of organisation and continuity outside of institutional channels for the purpose of promoting or resisting change in the group, society or world order of which it is part of'. Furthermore, they state that the most essential element of a social movement is to pursuit of resistance of social change through engagement in non-institutional action. The concept of the dance4life programme consists of several elements that, according to the definitions of Melucci (1996) and McAdam and Snow (1997), are necessary to create and sustain such a movement. Most importantly, by contributing to MDG6 the participating youngsters have a specific collective goal. A conflictual situation is to some extent incorporated in the dance4life concept. Most governments are striving for the same goal in HIV and AIDS reduction as dance4life, so in this regard there is no conflictual situation: the dance4life programme contributes to achieving this goal. However, the HIV and AIDS pandemic is still severe, in many countries incorrect misconceptions about HIV and AIDS are still present, treatment programmes are inadequate or inaccessible, and because of these circumstances too many people still die prematurely because of AIDS (mainly in developing countries). Having a further look at implementation level some governments do not want or do not support HIV and AIDS prevention programmes who are breaking taboos and are open about sexual topics. So not all governments and health institutions operate in line with the goals of dance4life. We can therefore speak of a conflictual situation in many countries, and dance4life is challenging the ends, values and power structures of these societies. This conflict is mainly present in non-Western countries where medicines are not available and affordable for everybody and the use of condoms is not promoted or even counteracted by government or religious groups.

Dance4life cooperates with famous DJs, artists and world leaders, the so-called ambassadors, as part of its marketing communication strategy to rally support and attract youngsters and funders. According to Melucci (1996), recruitment and succession of leaders is necessary to establishing a social movement and these dance4life ambassadors could be seen as leaders. In addition, youngsters are recruited as members (aoc's) who are expected to take action continuously, potentially nurturing future leaders among these aoc's. Empowerment of a group as such can result in collective efficacy, which is important for achieving social change (Bandura, 1997). Collective efficacy is the degree to which individuals in a system believe that they can organise and execute courses of action required to achieve collective goals (Bandura, 1997). The leaders should define the general aim and specific goals, provide the means of action, maintain the structure, mobilise the support base, and maintain and reinforce the identity (Melucci, 1996). Thus, the power of leadership is important and the leader is portrayed as someone endowed with an ability to manipulate a formless aggregate of atomized individuals (Melucci, 1996). The dance4life programme provides an organisational template, and once this basis is in place the implementing partners are able to provide the continuity of the organisation, to which the aoc's feel connected. The continuity aspect is to some extent present in the dance4life concept, primarily in the guise of the biennial dance4life event. The dance4life concept is also aimed at encouraging youngsters to initiate actions once the schools4life programme has finished, although this is not yet specified in the dance4life programme. At the moment, the continuation of activities once the schools4life programme has finished is not coordinated by dance4life international. Dance4life leaves this to the aoc's themselves and to the initiative of the implementing partners in the respective countries. These activities could be understood as the continuity outside of institutional channels for the promotion of and/or resistance to change, as described by McAdam and Snow (1997). With regard to the collective norms, values and involvement we can state that the dance4life programme aims to facilitate youngsters' collective norms and values by inspiring the youngsters and teaching them about HIV and AIDS-related problems in the world. A typical group activity, which is a characteristic of a social movement according to McAdam and Snow (1997), is the dance4life event, whereby aoc's all over the world are connected and demonstrate their positive involvement with the subject of HIV and AIDS to the general public and specifically to world leaders. The dance4life event also gives a positive incentive, which contributes to maintaining a social movement (Melucci, 1996).

1.3.2. Entertainment-education

In the development of the schools4life programme, an entertainment-education strategy is used. Entertainment-education is a means of informing the public about a social issue or concern by incorporating an educational message into a popular entertainment format in order to raise awareness, increase knowledge, create favourable attitudes and motivate people to take socially responsible action in their own lives (Bandura in Singal *et al.*, 2004). Entertainment as a potential vehicle for health promotion is regarded as a challenging concept and has always been an integral part of human life, gratifying the need for amusement as well as the need for information (Bouman, 2008). Most entertainment-education programmes take the format of TV soap operas and drama. In this regard the dance4life HIV and AIDS prevention programme's use of music and dance is a unique form of entertainment-education. Music is an attention-grabbing communication tool for adolescents and usually has a strong influence on them. 'Music allows young people to portray and 'image' the outside world, satisfying their emotional needs' (North, Hargreaves & O'Neill, 2000). As Bandura (1986) states, entertainment-education can contribute to social change in two ways: firstly, by influencing the audience's awareness, attitudes and behaviour towards a socially desirable end; and secondly, by influencing the audience's external environment to help create the necessary conditions for social change at the system level. Entertainment-education interventions are based on various theoretical communication and psychological models. The most frequently used model is the Social Cognitive Theory (SCT) model developed by Bandura (Bandura, 1986). According to Bandura's SCT, self-efficacy is defined as people's expectations about their ability to perform a specific behaviour and is crucial in behavioural change because it is the most central and pervasive belief to exercise control over the way one functions (Bandura, 1977). Bandura describes two basic modes of learning. People learn through the direct experience of the rewarding and punishing effects of actions, as well as through the power of social modelling (Singhal, Cody, Rogers & Sabido, 2004). Social modelling is observing others, forming an idea of how new behaviours are performed, and on later occasions this coded information serves as a guide for action (Bandura, 1986). Elements such as role modelling and guided enactment, derived from Social Cognitive Theory-based training (Bandura, 1986), are integrated into the dance4life programme, especially during the life skills training in the skills4life programme. As noted in earlier research, many effective programmes implement interactive activities such as role-play (Gallant & Maticka-

Tyndale, 2004; Kirby, 2000; Singhal & Rogers, 2003). Mastery experiences contribute to self-efficacy (Bandura, 1986). Success builds a robust belief in one's personal efficacy. In the programme aoc's will at least have one mastery experience during act4life.

1.3.3. Other social psychological theories on behavioural change

The dance4life programme also finds a theoretical fit in other social psychological theories, such as McGuire's Information Processing Model (IPM). This model suggests that responses to persuasive communication occur in the following stages: exposure, attention, comprehension, acceptance and retention of the message (Devine & Hirt, 1989; McGuire, 1981). Behavioural change is the result of moving through these stages of information processing (McGuire, 2001). The successive phases of McGuire's model can be pinpointed in the various components of the dance4life school programme. For instance, the heart connection tour corresponds to the exposure and attention phase, while the skills4life component focuses on comprehension of the message. Elements of entertainment, the visual input and the positive mood context provided by music and dance enhance attention to the message (McGuire, 2001).

Another social psychological theory that fits with the dance4life programme is the Theory of Planned Behaviour (TPB) (Ajzen, 1991). The TPB can be explained by using behaviour as the starting-point. Someone behaves in a certain way when that person has a strong intention to display that behaviour. Attitude towards the behaviour, self-efficacy concerning the behaviour and subjective norm are considered to be important determinants underlying the behavioural intention. Attitude is the general evaluation of the behaviour and is based on people's underlying beliefs regarding the pros and cons of the behaviour. Subjective norm refers to the perceived opinion of the social environment *vis-à-vis* the desirability of a person's performance of the behaviour. Self-efficacy is defined as the expectations that people have about their capability to perform a specific behaviour (Lechner, Kremers, Meertens & De Vries, 2007). Self-efficacy is often used analogous to perceived behavioural control as both are concerned with perceived ability to perform a behaviour (Ajzen, 2002). In this study, we use the term self-efficacy to indicate the person's estimated ability to successfully perform the intended behaviour. This means that a positive attitude, subjective norms and self-efficacy are important prerequisites for reaching behavioural changes. Dance4life aims to establish a positive attitude towards becoming an aoc and being part of the social

movement. The third part of the dance4life programme, act4life, particularly focuses on the latter aim: to encourage youngsters to take action. The second component of the dance4life programme, skills4life, aims to teach life skills, such as negotiation, leadership and debating skills, hopefully resulting in improved self-efficacy. This is necessary, for instance, to be able to insist on condom use before having sex but also to take action as an aoc. Yet, dance4life also aims to establish a successful implementation of the programme all over the world. To reach optimal implementation behaviour, a positive attitude towards the programme as well as self-efficacy of staff members of nco's, i.e. belief in their capabilities to implement the programme in the local situation and confidence in their capability to overcome the difficulties inherent in implementation processes, are necessary. As described in paragraph 1.3.2, self-efficacy is also a pivotal factor in SCT in that it mediates the application of knowledge and skills in the pursuit of behavioural attainments (Bandura, 1996; Maibach & Cotton, 1995).

Dance4life international has some concerns about the way dance4life is perceived by the (potential) stakeholders and other HIV and AIDS organisations, because they might have the impression that dance4life is mainly about fun, without a good content. The entertainment approach has the intention to bring the educational content in an entertainment package to get the participants motivated and involved. According to the above mentioned theories, dance4life has strong educational ingredients in their programme that are packaged well in an entertainment wrap and the combination of content elements in different components have, from a theoretical point of view, the strengths for a strong HIV prevention programme, at least if these components are all properly implemented.

1.4. Theory and framework for process evaluation

This process evaluation is set up from different theoretical perspectives and a combination of two process(-effect) evaluation frameworks, because there was no existing framework or model that evaluates all the dimensions we considered relevant. As we can derive from the previous paragraph, it is essential for the current process evaluation to have a closer look at the implementation of elements of social movement, entertainment-education, the Information Processing Model (IPM) (McGuire, 1981) and the Theory of Planned Behaviour (TPB) (Ajzen, 1991). Elements from these theories are incorporated in the framework we developed for the dance4life process

evaluation. From process evaluation perspective we further based our framework on the RE-AIM model of Glasgow, Vogt and Boles (1999) and the ICHC model of Theunissen, Te Pas and Friele (2003). These two process(-effect) evaluation frameworks and their dimensions will be explained in more detail below.

1.4.1. RE-AIM framework

The RE-AIM model from Glasgow *et al.* (1999) is a combination of process and outcome evaluation. It states that the ultimate impact of an intervention is due to its combined effects on 5 evaluative dimensions and the abbreviation 'RE-AIM' stands for these 5 dimensions: Reach, Efficacy, Adoption, Implementation and Maintenance.

The **reach** consists of the amount, proportion and representation of the target group that has been reached and also the participation of people in the programme. In our framework we incorporated the frequency of implementation of dance4life components (amount of programmes), characteristics of the participants and participation rates of aoc's. The **efficacy** in the RE-AIM model refers to an (in between) outcome evaluation and therefore we didn't conclude this in our framework. **Adoption** refers to the proportion and representativeness of settings (such as work sites, health departments or communities) that adopt a given policy or programme. We transferred this dimension to the environmental support dance4life implementing partners receive. **Implementation** refers to the extent to which a programme is delivered as intended. For the dance4life process evaluation, a closer look at the implementation of the four different dance4life components (hct, s4l, a4l and d4l event) and the dance4life campaign is needed. **Maintenance** at *individual* level is the continuation (or relapse) of the behaviour of the participants and maintenance on *organisational* level is the extent to which a programme is sustained over time by the organisation (Glasgow *et al.*, 1999). In this regard we formulated two dimensions: continuation of contact between aoc's and implementing partners and continuation of the dance4life programme by country.

1.4.2. ICHC model

The ICHC model – Implementation of Change in Health Care - is made for evaluation of the implementation of a new intervention among caregivers who work in a health care institution (Theunissen *et al.*, 2003; Van Weert,

Kerkstra, Dulmen, Bensing, Peter and Ribbe, 2004). This model represents several dimensions at caregivers' level and at organisational level that need to receive attention to establish long-term changes. At caregivers' level, it evaluates which interventions are carried out to improve 'knowledge' and 'skills', to stimulate the 'motivation and intention to change' and to change 'habits and procedures'. It also evaluates which interventions are executed at the organisational level. First, which adaptations have been made in 'the organisational structure in which the intervention is implemented' (for instance, how existing structures have been adapted or which new structures have been developed). Second, which interventions have been developed to create 'an organisational structure to establish implemented changes' (for instance, which structural changes have been conducted to guarantee the continuation of the implement programme and what policy has been made). We incorporated the dimensions knowledge, organisational prerequisites, staff professionalism (skills) and continuation in the dance4life process evaluation framework. Some other dimensions from the ICHC-model were not applicable to dance4life (e.g., 'changing habits and procedures') because they refer to a change in an existing programme and dance4life is a new programme.

1.4.3. Pre-Im framework for process evaluation

Gathering all these topics and dimensions together we concluded that some represent *prerequisites* for successful implementation and some represent the actual *implementation* process. Therefore, we made a distinction between **Prerequisites** and **Implementation** topics in the Pre-Im framework for process evaluation we developed. We distinguished three main topics of prerequisites: 1) General programme strength, including an evaluation of the dance4life concept, knowledge and attitude; 2) Organisational prerequisites, including communication and professionalism of the staff, and 3) Environmental and social support.

At the level of implementation we filtered three main topics to determine the extent to which the d4l programme is successfully implemented: 1) Reach of the programme, including the frequency of programme implementation, characteristics of the participants, and the components they attended; 2) Implementation in practice, including the implementation of the four components of the programme and the registration of the aoc's; and 3) Continuation, including contact between the aoc's and the implementing partners and the continuation of the d4l programmes in the countries. Table 1 provides an overview of the Pre-Im framework. The framework is explained in greater detail below.

Table 1.1. Pre-Im Framework for process evaluation

I. Prerequisites			
	<i>Dimensions</i>	<i>Topics</i>	<i>Main theoretical basis</i>
I.a	General programme strength	- Concept of programme - Knowledge - Attitude	- Social movement theory, SCT, IPM - ICHC - TPB
I.b	Organisational prerequisites	- Communication organisation - Staff professionalism	- ICHC, organisation - ICHC, skills
I.c	Environmental and social support	- Organisational support - Aocs' social support	- RE-AIM, adoption, SCT - SCT, RE-AIM, adoption
II. Implementation			
	<i>Dimensions</i>	<i>Topics</i>	<i>Theoretical basis</i>
II.a	Reach	- Frequency - Characteristics of participants - Participation rates	- RE-AIM, reach - RE-AIM, reach - RE-AIM, reach
II.b	Implementation in practice	- Programme implementation - Registration of aoc's	- RE-AIM, implementation, SCT, TPB - RE-AIM, Implementation
II.c	Continuation	- Contact between aoc's and implementing partners - Continuation of the d4l programme by country	- RE-AIM, maintenance, ICHC, social movement theory - RE-AIM, maintenance, ICHC, social movement theory

SCT = Social Cognitive Theory of Bandura (1986, 1977, 2004)
 IPM = Information Processing Model of McGuire (1981, 2001)
 ICHC = Process evaluation model of Teunissen *et al.* (2003)
 TPB = Theory of Planned Behaviour of Ajzen (1991)
 RE-AIM = Process and effect framework of Glasgow *et al.* (1999)

I. Prerequisites

I.a. General programme strength

The dance4life concept

One of the prerequisites for successful implementation is the perception of a clearly defined concept and programme by the organisations and participants. A process evaluation should therefore give insight in the perceived strength of the dance4life concept, for instance, the perceived programme strengths of the different components. The main goal of dance4life is to facilitate the establishment of a social youth movement. Dance4life puts a lot of effort in empowering youngsters and collective empowerment is an essential ingredient to realize a movement, according to several social movement theories (McAdam & Snow, 1997). The dance4life process evaluation should therefore take into account whether the implementers and the aoc's grasp the concept of empowering youngsters -especially girls because gender inequality in the domain of HIV and AIDS is still a worldwide concern (UNAIDS report, 2008)- and whether the concept and programme are suitable for different cultures. As empowerment of a group can result in collective efficacy, which is important for achieving social change (Bandura, 1997), collective efficacy should be taken into account either.

Knowledge

Without knowledge, people are unlikely to engage in the process of behaviour change (Maibach & Cotton, 1995). In the case of implementation, the desired behaviour concerns implementation behaviour. According to the model for Implementation of Change in Health Care (IHC) (Theunissen *et al.*, 2003; Van Weert *et al.* 2004), the first intervention in an implementation process should be the provision of theoretical information. Knowledge about the dance4life concept and programme is therefore an essential first step for effective implementation. If implementers are not familiar with the dance4life goals and programme, then the implementation of the message and components will be inadequate.

Attitude

As mentioned in chapter 1.3.3., attitude is a strong precursor of behaviour according to Theory of Planned Behaviour (Ajzen 1991). To realize good implementing results we can state that positive attitude towards the programme from the implementing staff predicts strong implementation

behaviour. In addition, Bowie *et al.* (2002) confirm that staff commitment to the programme is an essential prerequisite for attaining intervention goals. A positive attitude from the aoc's towards the programme is considered as an important precursor for behaviour change as well and will thus contribute to the willingness of youngsters to become an aoc.

I.b. Organisational prerequisites

Communication organisation

Several models, e.g. the model for Implementation of Change in Health Care (IHC), underline the importance of a sound organisational structure in which the intervention is implemented. This structure is needed to properly anchor the implemented changes (Theunissen *et al.*, 2003; Van Weert *et al.*, 2004). For this study the evaluation of the organisational structure and the collaborating network is extremely important because the dance4life structure is comprised of a large and complex international network. Dance4life works with implementing partners all over the world who are independent and follow their own working practices. The quality of communication between the head office (dance4life international) and the implementing partners contributes to the implementation results. The communication should be clear and the instructions should be fairly easy to execute. As Schaalma and Kok (2002) state, perceived communication skills in the organisation will make it more likely that implementers will decide to choose to implement the programme.

Staff professionalism

One aspect of the programme's successful implementation is the training of educators, because their professionalism and commitment to the programme is a prerequisite for achieving the intervention goals. Several evaluation models take this into consideration, such as the IHC (Theunissen *et al.*, 2003; Van Weert *et al.*, 2004)¹⁰. In line with dance4life's preferences, most implementing partners work with peer educators and earlier research demonstrates that many effective programmes actively involve peer educators (Gallant & Maticka-Tyndale, 2004; Kirby 2000; Singhal & Rogers, 2003). In this process evaluation we took into consideration the perceived quality of the staff by the implementing partners and the aoc's.

¹⁰ This aspect is also strengthened in, for instance, the Prevention Programme at Covenant House Washington (Bowie, Bronte-Tinkew, 2008) and the *Workbook for Designing a Process Evaluation* (Bliss & Emshoff, 2002).

I.c. Environmental and social support

In the Uganda case we saw that promotion of condom use was no longer possible due to government legislation. This case highlights the importance of environmental social support that facilitates or hinders the implementation of HIV and AIDS prevention programmes. In this regard, Gijs *et al.* (2008) state that prevention programmes are more effective in combination with other environmental determinants such as facilities and legacy. Bliss and Emshoff (2002) reaffirm this by mentioning the importance of the community context on implementation results. People's behaviour is shaped by a variety of environmental factors (Bandura, 1986; Maibach & Cotton, 1995). Implementation behaviour of implementing partners might, for instance, been shaped by legacy, support from people and/or organisations (e.g. the support of national government, sponsors and religious leaders) and logistical support, such as access to the internet. With respect to the participants, social support from 'important others' in their everyday environment (e.g. the support of father, mother, friends and schools) is important, according to the SCT (Bandura, 1986), in this case marked by becoming an aoc. Overall we can conclude that environmental and social support is an important prerequisite to have a successful implementation of the programme.

II. Implementation

II.a. Reach

According to the RE-AIM framework (Glasgow *et al.*, 1999), it is important to have knowledge about indicators such as how frequently the programme is executed. To take the two extremes, if the programme is implemented only once then a social youth movement will never be established. Knowing the frequency per country provides insight into the spread and potential realisation of a social movement.

The RE-AIM framework (Glasgow *et al.*, 1999) also describes the extent to which the target group, i.e. the school going youngsters aged between 13 and 19 years old, is reached as a basic goal. This requires insight into the number of participants and their demographic characteristics, such as gender, ethnic background, urban or rural living conditions, marital status and religion. As described before, the programme is strong when the participant joins in all four components of the schools4life programme (hct, s4l, a4l, event). According to the RE-AIM model (Glasgow *et al.*, 1999),

insight in the level of participation in the four components among the respondents is necessary. Following the dance4life definition, a youngster becomes an aoc when he or she has participated in 2 or 3 components of the schools4life programme¹¹.

II.b. Implementation in practice

Programme implementation

Insight in the extent to which the different components from the schools4life programme are implemented as intended and how this was done is an essential part of the implementation according to the RE-AIM framework (Glasgow *et al.*, 1999). The perceived ease of implementation for the various components of the dance4life programme among the implementing partners has not to be ignored as it is known that the more easily the implementation is understood, the more likely the programme will be put into practice/conducted (Schaalma & Kok, 2002). Proceeding from Bandura's SCT (Bandura, 1986), it is also important to evaluate the implementation of self-efficacy and role modelling elements, particularly in the hct and s4l component. Self-efficacy is also an essential predictor of behaviour in the TPB (Ajzen, 1991). With regard to role modelling, the SCT (Bandura, 1986) suggests that we are likely to compare ourselves with similar others, but high-credibility sources, who are likely to have greater expertise on a topic, or highly attractive communicators, who may have more positive features than we do, are known to be effective too (Devine & Hirt, 1989). This means that the extent to which 'similar other' role models as well as ambassadors (who should have a role modelling function according to the high-credibility or highly attractive role) appeal to the youngsters should be taken into account.

As a complement to the schools4life programme there is a multimedia campaign, and the implementing partners are responsible for its implementation on a national level with support from dance4life international. Evaluation of media use should therefore be part of the framework.

Registration of aoc's

Dance4life wants to establish a social youth movement of 1 million aoc's by the year 2014. Registration of aoc's by implementing partners is important to keep contact with them and have insight in the degree of activity of aoc's

¹¹ This will change as of 2009. Aoc's should participated in the three essential components (hct, s4l and a4l).

after the schools4life programme has finished. Also registration is important to be able to support aoc's. Who is responsible for registration and the details recorded in this provides important information about the potential future contact with the aoc's.

II.c. Continuation

According to the ICHC model, it is essential to make policy and structural changes to guarantee the continuation of the implemented intervention (Theunissen *et al.*, 2003; Van Weert *et al.*, 2004). The RE-AIM model also emphasises that the maintenance of an implemented health programme is crucial for the future existence of the programme (Glasgow *et al.*, 1999). This is also the case with the dance4life programme. If many of the implementing partners suggest that continuation of the programme in their country is uncertain then it jeopardises the chances of achieving the goal of a movement comprising 1 million aoc's. The certainty (or lack of it) with regard to continuity provides essential information relevant to implementation strategies.

Besides, the actual contact between the aoc's and the implementing partners after the schools4life programme has finished provides insight into the aoc's' involvement with and commitment to dance4life. To establish a social movement the youngsters should have a contact point or person that they can turn to and an organisation that they feel is supportive. The movement can also become stronger when the aoc's have contact with each other and unite their strengths, so we gauged the contact between the various aoc's.

2. Methods

2.1. Procedure

This study is part of a larger research project on evaluating the dance4life programme. For the process evaluation, different methods were used, such as semi-structured interviews with dance4life staff and case studies. In this report, the focus is on the quantitative part of the research in which questionnaires were sent out. We sent questionnaires to two target groups in all 19 countries that were participating in dance4life in April 2009: a) the *implementing partners* of dance4life, i.e. staff members from the nco's, and b) *participants* (mostly aoc's) of the dance4life programme. These two target groups received a questionnaire that was adapted to the specific group. All questionnaires were in English and based on the Pre-Im framework of process evaluation as presented in chapter 1. We used a questionnaire for this part of the research because this is an effective way to reach a representative group worldwide and respondents can respond in an open, free and anonymous way (Judd, Smith & Kidder, 1991).

All staff members (n=103) from the *implementing partners* in 19 countries involved in the dance4life project received a link to the online questionnaire by e-mail. They were asked to complete the questionnaire on the Internet. After the initial e-mail they were sent two reminders. The first one was sent after two weeks and the second one after four weeks. Regarding the second target group, we aimed to gather at least 30 completed questionnaires from *participants* / *aoc's* from each country. We therefore tried to approach minimal 100 aoc's per country (with an anticipated response rate of 30% (Sheenan, 2001; Cook, Heath & Thompson, 2000)). The implementing partners were involved in contacting the aoc's or supplied their e-mail addresses to the research team. If Internet access was no problem, participants received a link to the online questionnaire by e-mail. Otherwise, the implementing partners had the option of using a paper version. For seven African countries (Sierra Leone, Kenya, Tanzania, Zimbabwe, Zambia, South Africa and Uganda) an online questionnaire wasn't an option, because the aoc's had no access to internet or e-mail. In five of these countries (Sierra Leone, Kenya, Tanzania, Zimbabwe and Uganda) the implementing partners visited aoc's who participated in the dance4life programme and gave them a paper version of the questionnaire. They approached 75, 195, 20, 150 and 20 aoc's, respectively (See Table 2.1).

Regarding European participants, the research team approached 1171 Dutch and German aoc's by e-mail, inviting them to complete the questionnaire (1000 were sent to participants in the Netherlands and 171 in Germany). The implementing partner from Great Britain sent the link to the questionnaire to 320 aoc's. The implementing partners of Turkey sent a request to the Turkish aoc's via a social digital network ('Facebook' from Turkey). Therefore, the amount of approached Turkish aoc's couldn't be specified.

To reach participants from the other countries, next to the African and the European countries, we also asked the implementing partners to collaborate. The implementing partner from Mexico approached 320 aoc's by sending them the link to the questionnaire. In Vietnam 12 aoc's were approached, who completed the online questionnaire at the office of the implementing partner. The staff helped to translate the online questionnaire for the aoc's as the English language was a problem for the participants in Vietnam. Being aware of the potential influence of a translator in between, we gave the staff specific instructions to keep translator influences to a minimum. In Russia the implementing partners (with a network of 15 districts and offices) strived to contact two or three aoc's from each of the 15 Russian districts. They finally approached 34 aoc's who had an adequate command of English.

The implementing partners of South Africa, Zambia, Ireland, Serbia, Ibiza, the USA and Moldova did not collaborate in approaching the aoc's, because of a lack of capacity and/or language difficulties. We still provided them with the link to the questionnaire or the hard copy, so they had the opportunity to approach aoc's.

2.2. Response

For the analyses (see paragraph 2.5), we divided the respondents into three groups: Africa (Sierra Leone, Zimbabwe, Kenya, Uganda, Zambia, Zimbabwe, South Africa), Europe (UK, The Netherlands, Germany, Serbia, Turkey, Ibiza/Spain, Ireland) and Other countries (Russia, Moldova, Mexico, Vietnam, USA). In total, 460 participants were approached in Africa (hard copy questionnaire), 1491 in Europe (online questionnaire) and 346 in the Other countries (online questionnaire). In addition, 38 staff members from implementing partners were approached in Africa, 33 in Europe and 32 in the Other countries. Table 2.1. gives an overview of the approach and response of participants (aoc's) and implementing partners (nco's).

Table 2.1. Response of participants (aoc's) and implementing partners (nco's)

	Participants (aoc's)			Implementing partners (nco's)		
	N approached	N responded	% response	N approached	N responded	% response
<i>Africa</i>	460	400	87.0%	38	23	60.5%
Kenya	195	195	100	9 ^a	9	
Sierra Leone	75	74	98.7	5	2	
South-Africa	n.a. ^b	0	-	11	5	
Tanzania	20	20	100	1	1	
Uganda	20	20	100	2	2	
Zambia	n.a. ^b	0	-	3	1	
Zimbabwe	150	91	60.2	7	3	
<i>Europe</i>	1491	85	5.7%	33	13	39.4%
Germany	171	9	5.3	5	1	
Ireland	n.a. ^b	0	-	5	2	
Netherlands	1000	38	3.8	11	5	
UK	320	7	2.2	4	3	
Serbia	n.a. ^b	10	-	3	1	
Spain/Ibiza	n.a. ^b	0	-	2	-	
Turkey	n.a. ^c	21	-	3	1	
<i>Other countries</i>	346	23	6.6%	32	17	53.1%
Mexico	300	7	2.3	8	2	
Moldova	n.a. ^b	0	-	4	1	
Russia	34	4	11.8	9 ^a	9	
USA	n.a. ^b	0	-	4	-	
Vietnam	12	12	100	7	5	
Total	2297	508	22.1%	103	53	51.5%

^a Six staff members were approached by the research team and the other three probably by the implementing partners themselves

^b n.a. = no active approach, as far as we know, of participants/aoc's by implementing partners

^c Reached without active approach of participants/aoc's by implementing partners, e.g. via Turkish 'Facebook'

Table 2.1 shows that there was a big difference between the response of African participants (87.0%) and European participants (5.7%) and participants of the Other countries (6.6%). This can probably be explained by the way they were approached: the youngsters in Europe and the Other countries received a request to complete the questionnaire by e-mail, while the African youngsters were provided with printed questionnaires by the implementing partners. They mainly completed the questionnaire in the classroom.

The response from the implementing partners was 51.5%. African partners had the highest response (60.5%) and European partners the lowest (39.4%).

2.3. Subjects

The mean age of the responding participants (aoc's) was 17.6 years old. The African respondents were older (17.9) than the European participants (16.7) and the participants from the Other countries (17.0). Of the African participants, 61.3% was male, while the majority of the European participants (78.8%) and the participants of the Other countries (69.6%) was female. There is also a significant difference between African participants and the other two groups in religion. The majority of the African participants (98.7%) reported to have a religion (of whom 37.6% was Catholic and 26.3% Protestant), while 38.3% of the European participants and 56.6% of the participants from the Other countries had no religion. Table 2.2 gives an overview of the socio-demographic characteristics of the participants (aoc's) who completed the questionnaire.

Table 2.2. Characteristics of responding participants (aoc's) (N = 508)

	Africa		Europe		Other countries	
	N¹	%	N¹	%	N¹	%
Gender						
Male	242	61.3 ^{a,b}	18	21.2 ^a	7	30.4 ^b
Female	153	38.7 ^{a,b}	67	78.8 ^a	16	69.6 ^b
Age						
<i>M (SD)</i>	17.9 (2.6) ^a		16.7 (3.9) ^a		17.0 (1.2)	
Range	(13-27)		(12-37)		(15-19)	
Religion						
No religion	5	1.3 ^{a,b}	31	38.3 ^a	13	56.5 ^b
Catholic	147	37.6 ^{a,b}	13	16.0 ^a	4	17.4 ^b
Protestant	103	26.3 ^{a,b}	8	9.9 ^a	1	4.3 ^b
Muslim	53	13.6 ^b	18	22.2	0	0 ^b
Jewish	5	1.3	0	0	0	0
Hindu	2	0.5	5	6.2	0	0
Other	76	19.5 ^a	6	7.4 ^{a,c}	5	21.7 ^c

¹ n varies slightly due to missing data

^a Significant difference between Africa and Europe

^b Significant difference between Africa and Other countries

^c Significant difference between Europe and Other countries

The mean age of the responding staff members of implementing partners was 29.8 years. In this target group, there were again more male respondents in the African subgroup (65.2%) than in the European subgroup (30.8%) and the subgroup from the Other countries (11.8%). Furthermore, African staff members had more often a religion (87.0%) than European staff members (38.5%) and staff members from the other countries (41.2%). The African staff members also work, on average, more hours a week for dance4life. The majority of the staff members has at least a bachelor degree (see Table 2.3).

Table 2.3. Characteristics of responding staff members from implementing partners (N = 53)

	Africa		Europe		Other countries	
	N	%	N	%	N	%
Gender						
Male	15	65.2 ^{a,b}	4	30.8 ^a	2	11.8 ^b
Female	8	34.8 ^{a,b}	9	69.2 ^a	15	88.2 ^b
Age						
<i>M (SD)</i>	30.2 (5.9) ^a		29.8 (6.2) ^a		30.3 (10.8)	
Range	(21-41)		(23-40)		(18-54)	
Highest educational level						
Primary school	0	0	0	0	0	5.9
High school (vocational college)	8	34.8	2	15.4	3	17.6
Bachelor degree	10	43.5	8	61.5	7	41.2
Master degree	5	21.7	3	23.1	6	35.3
Religion						
No religion	3	13.0 ^{a,b}	8	61.5 ^a	10	58.8 ^b
Catholic	8	34.8 ^b	3	23.1	2	11.8 ^b
Protestant	8	34.8 ^{a,b}	0	0 ^a	1	5.9 ^b
Muslim	2	8.7	1	7.7	0	0
Jewish	0	0	0	0	1	5.9
Hindu	1	4.3	0	0	0	0
Other	1	4.3	1	7.7	3	17.6
Employed in this organisation (months)						
<i>M (SD)</i>	27.1 (25.3)		28.7 (23.9)		30.1 (46.4)	
Days per month working for dance4life						
<i>M (SD)</i>	21.1 (8.1) ^{a,b}		14.0 (9.3) ^a		10.5 (6.1) ^b	

^a Significant difference between Africa and Europe

^b Significant difference between Africa and Other countries

^c Significant difference between Europe and Other countries

2.4. Measurements

The questionnaire for the implementing partners consisted of 233 items and the aocs' questionnaire of 136 items. Extra items for the staff of implementing partners were mainly about communication between their organisation and dance4life International, the clarity of the information they received from dance4life international, problems they faced with regard to implementation, collaboration with national and international implementing partners and registration of the aoc's. We formulated open questions, dichotomous (yes/no) questions, multiple choice questions, statements (5 point Likert scale) and semantic differentials. Below we describe for each dimension of the dance4life process evaluation framework the items we used. When existing measurements were not available, the items were self-developed, based on the underlying theory as described in chapter 1.

2.4.1. Prerequisites

2.4.1.1. General programme strength

Concept of dance4life programme

To evaluate the strength of the concept of dance4life, we developed items to measure collective self-efficacy, perceived strength of the different elements of the dance4life programme, gender efficacy and cultural fit of the program among the target group of the implementing partners.

Collective self-efficacy was measured with five items on a 5-point Likert scale, for example 'd4l contribute to empower young people', 'd4l devotes a lot of attention to establish an international youth movement' and 'd4l contributes to changing the way people think about HIV and AIDS' (1=*completely disagree*, 5=*completely agree*, Cronbach's $\alpha = .82$).

Perceived strength of the combination of different elements in the dance4life program to empower youngsters was measured by two items, each rated on a 5-point scale (1 = *completely disagree*, 5 = *completely agree*, Pearson's $R = .69$, $p < .001$). The items were 'the d4l programme offers many elements that empower young people' and 'the combination of the different parts of the d4l schools programme is a great concept to get young people actively involved'. One item was analysed separately, i.e. 'd4l is a HIV/AIDS school programme that contributes to connecting people from other countries' (1=*completely disagree*, 5=*completely agree*).

Gender self-efficacy was measured with two items, i.e. 'it is easier for girls than for boys to participate in the d4l programme' and 'it is easier for boys than for girls to participate in the d4l programme' (1=*completely disagree*,

5=*completely agree*). As it was not possible to construct a reliable subscale for these items, they were analysed separately.

The perceived cultural fit of the programme was measured with two separate items that could not be combined in a reliable subscale too, i.e. 'The d4l programme does suit my culture very well' and 'The promotional materials that d4l-int provides us with are mainly applicable for western oriented countries' (1=*completely disagree*, 5=*completely agree*).

In the target group of the participants / aoc's, we only measured gender efficacy and cultural fit by using the following two items, respectively: 'It is as easy for girls as it is for boys to participate in the d4l programme' and 'The d4l programme does suit my culture very well'(1=*completely disagree*, 5=*completely agree*).

Knowledge

Knowledge can be measured in two ways: recognition (lower cognitive level) or remembering (higher cognitive level). Recognition (prompted recall) arises after a stimulus is given and can therefore be measured by using multiple choice questions. Remembering (free recall) refers to spontaneous reproduction of information and can be measured by open questions (Houts, Doak, Doak & Loscalzo, 2006; Singh, Rothschild & Churchill, 1998).

Knowledge about the 'main goal of dance4life', the 'different components of the schools4life programme' and 'being an aoc' was considered as core requirement in contributing to a successful implementation of the dance4life programme. Both target groups received two open knowledge questions (measurement of free recall), i.e. 'what is the main goal of dance4life?' and 'can you name the different components of dance4life?'. The implementing partners received an additional free recall question, namely 'briefly describe the goal of each component'.

Furthermore, one multiple choice item (measurement of prompted recall) was formulated to measure whether the respondents (implementing partners as well as participants) knew the definition of an aoc, i.e. 'when is a young person an agent of change?'. Answering options were 1) when she/he uses condoms; 2) when she/he participates in two or three components of the schools4life programme; 3) when she/he knows the dance4life drill (dance and song); 4) when she/he understand HIV and AIDS problems and 5) I don't know. The second option is the right answer according to the dance4life definition. One extra dichotomous (yes/no) question was added for the aoc's, namely: 'are you an aoc's?'.

Attitude

Attitude towards the different dance4life programme was measured quite extensively by using two different attitude subscales for each dance4life component (hct, s4l, a4l, d4l event, d4l campaign). The first attitude subscale 'attitude1' exists of seven items measuring the extent to which each specific d4l component, in the opinion of the respondent, is interesting, informative, inspiring, important, educational, boosting self esteem and useful on a 5-point scale. This subscale was based on Thurnstone's technique of paired comparisons (Thurnstone, 1927), using the word pairs: interesting – uninteresting, important – unimportant, useful – useless, informative – not informative, inspiring – uninspiring, educational – not educational and boosts self-esteem – doesn't boost self-esteem. For the second subscale 'attitude2', respondents indicated whether they considered the specific dance4life component weak–strong, negative–positive, annoying–nice and passive–active. This 5-point semantic differential was based on Osgood, Suci and Tannenbaum (1957). The first four out of the five word pairs were derived from Osgood *et al.* (in Eagly & Chaiken, 1993) and based on three factors he distinguished: evaluation, potency and activity. The fifth word pair was a specific added dance4life word pair, i.e. superficial – in depth.

The word pairs were the same in the questionnaire for the implementing partners and the participants. Factor analyses using Varimax rotation including all attitude items (i.e., the Thurnstone-based items as well as the Osgood-based items) revealed consequently two factors with the seven above described items of the 'attitude1' subscale in the first factor and the five items of the 'attitude2' subscale in the second factor. Explained variance of the two factors ranged from 76.1% to 87.1% in the participants' questionnaire. The internal consistency of both subscales appeared to be very good with Cronbach's α ranging from .97 to .98 for the 'attitude1' subscale and from .85 to .93 for the 'attitude2' subscale. Table 2.4 gives an overview of the internal consistency of the attitude scales for each d4l component.

Table 2.4. Internal consistency subscales 'attitude1' and 'attitude2'

Dance4life component	Cronbach's α 'Attitude1'	Cronbach's α 'Attitude2'
heart connection tour (hct)	.97	.92
skills4life (s4l)	.97	.92
act4life (a4l)	.97	.92
dance4life music event (d4l event)	.97	.85
dance4life campaign (d4l campaign)	.98	.93
dance4life as a whole	.98	.93

Goal attitudes was measured with three items on a 5-point scale, based on Melucci (1996). For example 'd4l gives young people the opportunity to show the world that we are involved in fighting HIV/AIDS' and 'd4l contributes to the way young people think about HIV/AIDS' (1=*completely disagree*, 5=*completely agree*, Cronbach's α = .70).

2.4.1.2 Organisational prerequisites

Communication organisation

Communication between the organisation (dance4life's head office) and the implementing partners involves monitoring (e.g. personal contact by phone, e-mail, personal visits, meetings) and written instructions or manuals. Five aspects of the communication with the implementing partners are relevant for the dance4life network: clarity of their instructions (manuals), monitoring by dance4life, satisfaction with the license agreement, the capacity of each organisation to implement the programme, and the perceived quality of the communication. These items were only incorporated in the implementing partners' questionnaire.

Clearness of handbooks and instructions was measured with six items (Cronbach's α = .82). The items in this subscale are 'the hct/skills4life/act4life framework that d4l international gave us is specific enough', 'the information in the handbooks from d4l international is clear', 'the instructions given by d4l international about the implementation of their programme are perfectly clear to me' and 'd4l international always provides our NCO with the information we need' (1=*completely disagree*, 5=*completely agree*).

The subscale Monitoring measured the respondents' satisfaction with monitoring by d4l international on the quality and content of

implementation, satisfaction with frequency of monitoring on implementation and satisfaction with frequency of contact by dance4life international on a 5-point scale (three items; 1=*completely disagree*, 5=*completely agree*, Cronbach's $\alpha = .71$).

Satisfaction with license agreement was measured with two items, namely 'the license agreement offers us a lot of freedom to combine it with our own programme and ideas' and 'the license agreement clearly describes the requirements and our responsibilities' (1=*completely disagree*, 5=*completely agree*, Pearson's $R = .75$, $p < .001$).

We analysed the following six individual items separately as it was not possible to create a reliable subscale: 'the communication between me and d4l international is good', 'I always deliver the information that d4l international needs from me in time', 'when I have a problem I hesitate to contact the staff from d4l international' (recoded in positive statement during the analysis), 'I have read the handbooks delivered by d4l carefully', 'The d4l franchise model contributes to the implementation of the d4l programme in my country' and 'a lack of capacity in my organisation makes it difficult to implement the d4l programme as intended' (recoded in positive statement during the analysis) (1=*completely disagree*, 5=*completely agree*).

We also took a closer look at the network of contacts among the implementing partners, because collaboration establishes a stronger regional network that will generate opportunities to strengthen the implementation. The implementing partners first received an open question 'can you list the countries with which your nco has the closest contact (maximum of four)?', followed by a multiple choice questions: 'how frequent is the contact?' (1=*daily*, 2=*weekly*, 3=*twice a month*, 4=*monthly*, 5=*less than once a month*, 6=*never*).

Professionalism of staff

The participants and the implementing partners got respectively three and one individual item(s) about the professionalism of the staff, measured on a 5-point Likert scale (1=*completely disagree*, 5=*completely agree*). These items were based on the process evaluation of Bowie and Bronte-Tinkew (2006) and the workbook for process evaluation of Bliss and Emshoff (2002). The three statements in the participants' questionnaire couldn't been combined in a reliable subscale and were therefore analysed separately. The items were 'the instructions that (peer) educators gave to me were very clear', 'the people who instructed me during the s4l programme were very clear about what they expected from me' and 'the (peer) educators were interesting to listen to'. The implementing partners

received the statement 'the lack of professionals among the (peer) educators/teachers makes the implementation of the dance4life programme difficult'.

2.4.1.3. Environmental and social support

We measured the environmental and social support that the implementing partners perceived, as well as the perceived environmental support among participants (aoc's). The implementing partners were asked 'to what extent does the d4l programme and campaign receive support from the following people/organisations in your country?', followed by 11 potential supporting persons/organisations, i.e. 'national government', 'regional governments', 'local governments', 'international ambassadors', 'national ambassadors', 'religious leaders', 'sponsors', 'media', 'other organisations that deal with HIV/AIDS', 'national and local legislation' and 'external professionals'. The respondents could mark their degree of support on a 5 point Likert scale (1=*completely non supportive*; 2=*non supportive*; 3=*neutral*; 4=*supportive*; 5=*completely supportive*).

Seven items were developed to measure the social support the aoc's receive. The question was 'do the following people/organisations support dance4life?', followed by 'your father', 'your mother', 'your friends', 'your boy/girlfriend', 'your neighbours', 'your school' and 'the village where you live' (1=*completely non supportive*; 2=*non supportive*; 3=*neutral*; 4=*supportive*; 5=*completely supportive*). These items were analysed separately.

2.4.2. Implementation

2.4.2.1. Reach

General information about the frequency with which the various components of the dance4life programme were implemented in 2008 was derived from the monitoring system from dance4life international. We collected information about the number of schools that participated in the hct, the number of schools that participated in s4l, the number of youngsters that participated in the hct, the number of youngsters that participated in the hct and (only) in s4l, the number of youngsters that participated in the hct and (only) in a4l, the number of youngsters that participated in the hct and s4l and a4l, the total number of aoc's, the total number of aoc's compared to the target and the number of participants of the d4l event. This information is provided by the implementing partners to

dance4life on a yearly base. The total number of aoc's compared to the target gives an indication about the reach of the target. This was counted by subtracting the target number that was set at the beginning of 2008 from the number of actual aoc's as counted at the end of 2008. So a positive number means that there were more aoc's as compared to the target and a negative number means that there were less aoc's as compared to the target.

In the questionnaire for the implementing partners we asked the following dichotomous (yes/no) questions about the implementation of the heart connection tour, skills4life and act4life programmes: 'did your NCO develop the hct/s4l/a4l/d4l campaign for your country?' (four questions), 'did you stage the dance4life event in 2008?' (one question) and 'are you going to implement the hct/s4l/a4l/d4l campaign in your country this year (i.e. 2009)?' (four questions). Next, the following multiple choice question was asked: 'If you did not develop or are not going to implement hct/s4l/a4l/d4l campaign then could you explain why not?' (four questions). Respondents could mark as many from the following answering options as they wanted: 'we do not have a good programme yet', 'we do not have enough funding', 'we do not have enough staff', 'we don't know how to do it' and 'we implemented it in the past, but had to stop' or could add additional reasons themselves.

We measured the opinion of the implementing partners on the reach of the programme by the following statement: 'with d4l we reach more youngsters in our country than with previous HIV and AIDS programmes that our organisation has implemented' (1=*completely disagree*, 5=*completely agree*).

To get insight in the background of participants, we collected the following demographic characteristics from the responding participants: age, gender, education level, country of living, city/village of living, ethnic background, religion and marital status (see also paragraph 2.3). In addition, we asked them in which components they participated by using the following questions: 'did you participate in the hct/s4l/a4l?' (three questions), 'did you go to the dance4life music event?' (one question) and 'do you know the dance4life campaign?' (one question). Answering options were 'yes', 'I don't know' and 'no'.

2.4.2.2. Implementation in practice

Programme implementation

Perceived ease of implementation by the implementing partners was assessed with five items on a 5-point Likert scale. Examples of items are 'the skills4life programme is difficult to implement', 'the dance4life programme as a whole is difficult for us to implement in schools' and 'it is very easy to get young people to participate in the dance4life programme' (1=*completely disagree*, 5=*completely agree*, Cronbach's $\alpha = .70$).

Negative formulated items were recoded before constructing the subscale. The five items were also analysed as individual items to get more insight in the ease of implementation of different components (hct, s4l, a4l).

As the extent to which participants like the programme can be considered as an indicator of successful implementation, implementing partners as well as participants received the statement 'students who participated liked d4l' (1=*completely disagree*, 5=*completely agree*).

Self-efficacy was measured among participants with four items on a 5-point scale, namely 'in the s4l programme the (peer) educators/teachers paid a lot of attention to teaching communication skills', 'in the s4l programme the (peer) educators/teachers paid a lot of attention to teaching negotiation skills related to HIV and AIDS', 'in the a4l programme I was given support to realise my ideas and take action' and 'in the d4l training they paid a lot of attention to obstacles we face in daily life' (1=*completely disagree*, 5=*completely agree*, Cronbach's $\alpha = .71$). In addition, the participants received the following individual statement: 'I was inspired to take action in the d4l programme' (1=*completely disagree*, 5=*completely agree*).

Role-modelling of 'similar other' role models was measured among participants with two individual items: 'I saw young people from my age participating in hct' and 'we met a young person who talked about becoming infected with or being infected by HIV in the hct' (1=*completely disagree*, 5=*completely agree*). The items could not be combined in a reliable subscale and were therefore analysed separately.

The three story-telling items were also analysed separately as a reliable subscale could not be constructed. The statements participants received are 'the person who told a story during the hct about HIV and AIDS could be a friend of mine', 'the story which is told during the hct could also happen to me' and 'I found the stories in the hct interesting' (1=*completely disagree*, 5=*completely agree*).

To investigate the 'famous' role models, implementing partners received the statement 'we have great (global) d4l ambassadors who appeal to the young people in our country' (1=*completely disagree*, 5=*completely agree*).

In addition, participants were asked the open question 'can you name two famous people who are connected with dance4life?', followed by the dichotomous (yes/no) question 'does this person fit with dance4life?'

More specific investigation of the implementation of the different components of the schools4life programme affords insight into the extent to which the various essential elements of each component are implemented. Therefore, content information about the implementation of the different components of the dance4life programme (hct, s4l, a4l, d4l event d4l campaign) was collected among the implementing partners. These items are all based on the instructions in the handbooks from dance4life international.

Regarding the implementation of the hct, the implementing partners were asked how often the following elements were incorporated in the hct, by asking 'during the hct, they.....': 'use images', 'use videos', 'perform a play', 'use music instruments', 'include short testimonials by young people from other dance4life countries' and 'include young people living with HIV' (1=*never*; 2=*rarely*; 3=*sometimes*; 4=*often*; 5=*always*).

The following five statements were added: 'in the hct they make it possible for young people to speak in an open and safe environment about HIV and AIDS', 'in the hct they correct misperceptions about HIV and AIDS', 'in the hct they break taboos about HIV', 'in the hct they alternate fun with information' and 'in the hct they include the experiences of agents of change (aoc's) of previous years' (1=*completely disagree*, 5=*completely agree*).

Participants received one statement, i.e. 'it was easy to learn the dance and song in the hct' (1=*completely disagree*, 5=*completely agree*).

Regarding the implementation of the s4l programme, the implementing partners were asked how often youngsters were trained in specific skills, by incorporating the following five questions: 'in our skills4life programme youngsters get training' '... in negotiation skills', '... in leadership skills', '... in debating', '... in entrepreneurship' and '... in public speaking' (1=*never*; 2=*rarely*; 3=*sometimes*; 4=*often*; 5=*always*). The following four statements were added: 'in our skills4life programme we focus on young women', 'in our skills4life programme we focus on specific high risk groups (other than young women)', 'in our skills4life programme we focus on sexuality' (1=*completely disagree*, 5=*completely agree*).

Regarding the implementation of the a4l programme, the implementing partners were first asked how often youngsters were provided with supporting materials by asking the following three questions: 'in our act4life programme, we provide youngsters with...' '... a special youth action

package', '... a fundraising toolkit' and '...an advocacy toolkit' (1=*never*; 2=*rarely*; 3=*sometimes*; 4=*often*; 5=*always*). Next, the implementing partners received six statements: 'in our act4life programme youngsters get the opportunity to register their plans (on internet or in a notebook)', 'in our act4life programme we encourage youngsters to take action', 'in our act4life programme we support youngsters with a clear list of what we can offer them (an action plan, a T-shirt, condoms, posters, stickers, etc.)', 'in our act4life programme we are available for youngsters when they need us', 'in our act4life programme we offer the youngsters various volunteering opportunities' and 'in our act4life programme we offer the youngsters a plan (or tips and tricks) to raise awareness in the community' (1=*completely disagree*, 5=*completely agree*).

Last, we considered what kind of media the implementing partners used and took a closer look at the amount of media (print and broadcast) they employed in the dance4life campaign. The implementing partners were asked to mark the kind of media they use for the d4l campaign in their country. They could make a choice of eight media (i.e. 'flyers', 'posters', 'radio', 'TV', 'the movies', 'internet', 'newspapers', 'magazines') and they also got the opportunity to add additional media.

Registration

To get more insight in the registration of aoc's, we developed six questions for the implementing partners. The first question was 'do you maintain a register of the aoc's in your country?' ('no, but we will start in 2009', 'yes, but not all of them', 'yes, we register all agents of change'). Next, the implementing partners were asked 'who is responsible for the registration of agents of change?' ('the OT team in the schools', 'our nco', 'the (peer) educators/teachers' or 'other, namely....'), followed by 'what details do you register of the aoc's?' ('name', 'address', 'telephone', 'e-mail', 'the different components in which the aoc's participated', 'what they did in d4l', 'other, namely...'). The question 'how do you register agents of change' got the answering options 'per aoc', 'per class', 'per school' and 'other, namely...'. Last, the respondents were asked 'do you give the agents of change a certificate of some kind' ('yes', 'no') and 'how do you know whether the registration is correct' ('we rely on the people involved in this', 'we check this with the agents of change', 'other, namely...').

2.4.2.3. Continuation

A series of questions was developed about the degree of contact between the aoc's and dance4life respectively other aoc's, how the implementers maintain contact, how frequently they do this, and whether this constitutes sufficient contact.

Contact between aoc's and implementing partners

Contact between aoc's and implementing partners was measured by developing five questions for the implementing partners and four for the participants (aoc's).

The first question for the implementing partners ('do you think it is important to stay in contact with the youth after the program is finished?') was measured on a 5-point scale (*1=not important at all; 2=not very important; 3=neither unimportant nor important; 4=quite important; 5=very important*). The second one ('do you need support from d4l int to stay in contact with the youth?') was a dichotomous question ('yes', 'no'). The third and fourth question were respectively 'does your nco stay in contact with some agents of change who participated after the dance4life programme has finished?' and 'does your nco stay in contact with all agents of change who participated after the dance4life programme has finished?'. The respondents were asked to fill in how many times a year they have contact and to fill in '*0 times a year*' if they do not stay in contact with some respectively all aoc's. The fifth question was 'how do you stay in contact with agents of change' ('*we do not stay in contact*', '*by inviting them to the dance4life music event*', '*by sending newsletters*', '*by our internet site*', '*by post*', '*by developing a special group of aoc's who stay active*', '*by visiting them at school*', '*by phone (text messages)*', '*by a digital social network (like facebook)*' and '*other, namely...*').

The first question for the participants was an open question on contact between aoc's 'do you have contact with aoc's from other countries?'. Participants could mention four other countries. The second one was 'how do you stay in contact with d4l after the program finished?' ('*by e-mail*', '*by internet*', '*by post*', '*by personal contact*', '*by phone*' or '*other, namely...*'). Next, the participants (aoc's) received the question 'when was the last time you had contact with d4l?' ('*last week*', '*a few weeks ago*', '*1-2 months ago*', '*a couple of months ago*', '*a year ago*' and '*other, namely...*'), followed by 'is the amount of contact with d4l OK for you?' ('*yes, fine*', '*there could be more*', '*no, I would love to get in contact, but I don't know*

how', 'no, I would love to hear from them once in a while' and 'no, I tried to make contact but they never returned my request(s)'.

Continuation programme in countries

The continuation of the dance4life programme was measured in the target group of implementing partners by developing five statements that could be answered on a 5-point scale (1=*completely disagree*, 5=*completely agree*). It was not possible to construct a reliable scale from these items, so the items were analysed separately. The statements are: 'I am quite sure that I can continue the d4l programme for the next 3 years', 'after Red Zebra left, the continuation of the heart connection tour's train the trainer programme went well', 'thanks to the d4l International organisation we have good access to potential sponsors and partners', 'internal disagreements in our nco threatens the continuation of the d4l programme' and 'our nco does not want to stage the d4l event next year'.

2.5. Analysis

As mentioned in paragraph 2.3, we divided the respondents into three groups: Africa (Sierra Leone, Zimbabwe, Kenya, Uganda, Zambia, Zimbabwe, South Africa), Europe (UK, The Netherlands, Germany, Serbia, Turkey, Ibiza/Spain, Ireland) and Other countries (Russia, Moldova, Mexico, Vietnam, USA). These three groups are based on dance4life International's organisational structure, where three Regional Project managers are responsible for respectively the African Countries, the European countries and the miscellaneous countries.

The free recall questions that were developed to measure knowledge were analyzed qualitatively. Participants as well as implementing partners were asked to write down the main goal of dance4life. We first analysed the answers according to the official main goal as defined by dance4life international: 'Dance4life is a global organisation within the field of HIV/AIDS specifically aiming to establish a social youth movement of one million youngsters, called agents of change (aoc's), by 2014, pushing back HIV/AIDS (dance4life, 2008). Seven categories were derived from the dance4life definition: 1) pushing back HIV/AIDS; 2) social youth movement; 3) recruitment of aoc's; 4) worldwide/global; 5) network of organisations; 6) one million (aoc's) and 7) 2014. In addition to the categories derived from the dance4life definition, four categories were derived from the data: 1) educate; 2) activate; 3) celebrate and; 4) empowerment. The category 'educate' consists of all words referring to

teaching young people, 'activate' contains words that have to do with activating young people, raising awareness and advising or helping others, 'celebrate' consists of words referring to celebrating, such as music of dance and 'empowerment' includes all words that have to do with taking responsibility and empowering young people. By distinguishing these additional analyses, we retrieved insight in which keywords with regard to the dance4life concept are associated with the main goal of dance4life, next to or instead of the keywords that were derived from the official dance4life definition. All categories are formulated in such a way that they are exhaustive and mutually exclusive.

The implementing partners were also asked to briefly describe the goal of each dance4life component. We categorized the answers by distinguishing categories according to the goals as described by dance4life international. The categories that were distinguished for the heart connection tour are 'inspire' and 'ignite', for skills4life 'educate' and 'empower', for act4life 'activate', for the dance4life music event 'celebrate' and for the damce4life campaign '(international) attention' and 'giving young people a voice'. All the answers were analysed and, if possible, categorized in one of those categories.

The other data were analysed quantitatively. Differences between quantitative scores from participants (aoc's) from Africa, Europe and the Other countries were calculated using Oneway Anova analysis or chi-square tests, where appropriate. We also used Oneway Anova analysis or chi-square tests, where appropriate, to examine differences between the implementing partners from Africa, Europe and the Other countries. Differences between boys and girls were counted by a Students t-test. We used a significance level of $p < .05$. It must be noted that the amount of subjects in subgroups was sometimes (very) low, especially in the subgroups of the implementing partners. This diminishes the power and the chance to find significant differences, indicating that there might be meaningful differences that didn't reach significance. For reasons of readability, the standard deviations (sd) of mean scores are not always included in the Tables. The sd scores can be derived from the corresponding researcher on request (see colophon). All statistical analyses of quantitative data were carried out using SPSS 16.0.

3. Results

In this chapter, the results of the questionnaires that were filled in by the participants or agents of change (aoc's) and the implementing partners (nco's) are presented. The results are described according to the framework for process evaluation that was explained in chapter 1.

3.1. Prerequisites

3.1.1. General programme strength

3.1.1.1. *Concept dance4life programme*

Table 1 shows that the implementing partners are rather positive about the extent to which the dance4life programme contributes to the empowerment of young people and, subsequently, to collective efficacy. Yet, the 'Other countries' are on average somewhat less positive than 'Africa' and 'Europe'. All implementing partners are convinced that the combination of the different elements is essential to reach this empowerment (subscale '*strengths of the combination of different elements of d4l to empower youngsters*').

The results regarding gender efficacy are somewhat more difficult to interpret. The implementing partners in Europe seem to agree that it is easier for girls than for boys to participate in the dance4life programme (see Table 3.1). This was illustrated by remarks like '*the hct can be improved by something that could appeal to boys, because in our school most of the boys were standing at the back*' (girl, 17 years, Great Britain). 'Africa' and the 'Other countries' are rather neutral in this. Although they report that it is not easier for boys to participate than for girls, the African implementing partners and partners from Other countries are not convinced that it is clearly easier for girls either. The participants themselves generally agree (although not *completely* agree) that it is as easy for girls as for boys to participate in the programme. With regard to the cultural fit of the dance4life programme, the implementing partners as well as the participants on average agree, but not *completely* agree, that the dance4life programme suits their culture 'very well'. The lack of a complete fit with the culture also concerns European countries as is illustrated by the following quote: '*The hct is not entirely applicable to the culture of the UK as there is far more of an RnB and Hip Hop culture than in Europe*'. It is striking that the implementing partners also agree (although not

completely) with the statement that the promotional materials provided by dance4life international are mainly applicable for western oriented countries (see Table 3.1).

Table 3.1. Prerequisites: Concept dance4life (nco's and aoc's)

COLLECTIVE EFFICACY AND STRENGTHS DIFFERENT ELEMENTS	Implementing partners (nco's)		
	Africa (n=14)	Europe (n=9)	Other (n=12)
<i>Subscales (M; range 1-5)^d</i>			
<i>Subscale 'collective efficacy'</i> (hct/s4l/a4l contribute to empower young people, d4l devotes a lot of attention to establish an international youth movement, d4l contributes to changing the way people think about HIV and AIDS) (5 items)	4.47	4.57 ^c	3.97 ^c
<i>Subscale 'strengths of the combination of different elements of d4l to empower youngsters'</i> (the d4l programme offers many elements that empower young people, the combination of the different parts of the d4l schools programme is a great concept to get young people actively involved) (2 items)	4.26	4.54	4.47
	Participants (aoc's)		
	Africa (n=368)	Europe (n=81)	Other (n=22)
<i>Individual variable (M; range 1-5)^d</i> D4l is a HIV and AIDS school programme that contributes to connecting people from other countries	4.09 ^a	3.53 ^a	3.59

GENDER EFFICACY

	Implementing partners (nco's)		
	Africa (n=21)	Europe (n=12)	Other (n=17)

Individual variables (M; range 1-5)^d

It is easier for girls than for boys to participate in the d4l programme	2.62 ^a	3.67 ^a	3.06
It is easier for boys than for girls to participate in the d4l programme	2.43	2.08	2.29

	Participants (aoc's)		
	Africa (n=391)	Europe (n=81)	Other (n=23)

Individual variable (M; range 1-5)^d

It is as easy for girls as it is for boys to participate in the d4l programme	4.09	4.22	4.09
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CULTURE

	Implementing partners (nco's)		
	Africa (n=21)	Europe (n=12)	Other (n=17)

Individual variable (M; range 1-5)^d

The d4l programme does suit my culture very well	3.90	4.33	3.76
The promotional materials that d4l-int provides us with are mainly applicable for western oriented countries	3.71	4.17	3.53

	Participants (aoc's)		
	Africa (n=390)	Europe (n=82)	Other (n=22)

Individual variable (M; range 1-5)^d

The d4l programme does suit my culture very well	4.11 ^a	3.78 ^a	3.81
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^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d The highest score is the most favourable score; 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

3.1.1.2. Knowledge dance4life

Participants as well as implementing partners were asked to write down the main goal of dance4life. We first analysed the answers according to the official main goal as defined by dance4life international: 'Dance4life is a global organisation within the field of HIV/AIDS specifically aiming to establish a social youth movement of one million youngsters, called agents of change (aoc's), by 2014, pushing back HIV/AIDS (dance4life, 2008). From this definition, only 'pushing back HIV and AIDS' was mentioned by almost two thirds of the participants (65.0%) and the implementing partners (64.2%). Almost half of the implementing partners named 'the recruitment of aoc's' (47.2%) and around one third '2014' (37.7%), 'one million (aoc's)' (34.0%) and 'social youth movement' (30.2%). The latter was also mentioned by 13.0% of the participants. All other elements of the definition were written down by less than 10% of the participants (see Table 3.2).

Next, we analysed how often additional keywords with regard to the dance4life concept are mentioned. This gave us more insight in which other words are associated with the main goal of dance4life, next to the official dance4life definition. The majority of the additional keywords could be categorized in four main categories:

1) educate; 2) activate; 3) celebrate and; 4) empowerment. For instance, the category 'educate' consists of all words referring to teaching young people, 'activate' consists of words that have to do with activating young people, raising awareness and advising or helping others, 'celebrate' consists of words referring to celebrating, such as music of dance and 'empowerment' consists of all words that have to do with taking responsibility and empowering young people. The results of this analysis show that 'activate' was mentioned by about one of every five participants (22.4%) and about one third of the implementing partners (35.8%). 'Educate' was considered as a main goal of dance4life by a quarter of the participants (24.0%). The latter was hardly mentioned by the implementing partners (1.9%). As we were in fact asking for the main goal, and the additional keywords do not refer to the main goal according to the dance4life definition, this is not considered a negative result.

The mean number of elements of the main goal of dance4life and/or additional keywords that was mentioned by participants is 1.57.

Implementing partners named on average 2.85 out of the eleven elements and/or additional keywords from one of the four categories that were distinguished.

More than one out of every ten participants (13.6%) and implementing partners (13.2%) gave a wrong answer on the main goal. For instance, one implementing partner and five participants mentioned 'abstinence' from sex as part of the main goal. Other examples of wrong answers by implementing partners are '2015', 'to be in every heart', 'to draw young people away from the streets' and 'the question of relationships is the real goal'.

Table 3.2. Prerequisites: Knowledge of participants (aoc's) and implementing partners (nco's) about the main goal of dance4life

KNOWLEDGE				
	Mentioned by aoc's N	Mentioned by aoc's %	Mentioned by nco's N	Mentioned by nco's %
<i>Elements of main goal d4l mentioned</i>				
Pushing back HIV and AIDS	330	65.0%	34	64.2%
Social youth movement	66	13.0%	16	30.2%
Recruitment aoc's	33	6.5%	25	47.2%
Worldwide/global	27	5.3%	9	17.0%
Network of organisations	9	1.8%	1	1.9%
1 million (aoc's)	7	1.4%	18	34.0%
2014	6	1.2%	20	37.7%
<i>Additional keywords mentioned as main goal</i>				
Educate (e.g., teach young people, learn lifeskills)	122	24.0%	1	1.9%
Activate (e.g., raising awareness, advice, helping others)	114	22.4%	19	35.8%
Celebrate (e.g., music, dance)	49	9.6%	2	3.8%
Empowerment (e.g., taking responsibility, empower)	32	6.3%	6	11.3%

Mean number of elements main goal d4l mentioned (0-7) (M, (sd))	0.94	(0.80)	2.32	(1.50)
Mean number of elements main goal d4l or additional keywords mentioned (0-11) (M, (sd))	1.57	(1.15)	2.85	(1.67)
No answer main goal (n, %)	59	11.6%	0	0%
Wrong answer main goal (n, %)	69	13.6%	7	13.2%

We then asked the respondents to name the different components of dance4life (free recall). Almost two third of the implementing partners mentioned the heart connection tour (60.4%), skills4life (66.0%), act4life (62.3%) and the dance4life event (62.3%). The dance4life campaign was only named by less than half of the implementing partners (45.3%). More than half of the participants also mentioned the heart connection tour (53.7%), skills4life (57.9%) and act4life (57.3%). However, a quarter of the respondents (24.0%) didn't name a component at all and another quarter (26.0%) gave one or more wrong answers. Nine implementing respondents (17.0%) didn't mention any component at all and eight (15.1%) gave one or more wrong answers (see Table 3.3).

The implementing partners were also asked to briefly describe the goal of each component. We categorized the answers by distinguishing categories according to the goals as described by dance4life international. Table 3.3 gives an overview of the categories and the scores of the respondents. The table shows that almost half of the implementing partners mentioned none of the intended goals or keywords with regard to the heart connection tour (47.2%), skills4life (43.4%) and act4life (43.4%). The majority mentioned none of the intended words regarding the dance4life event (81.1%) and the dance4life campaign (77.3%).

Last, we asked both the participants and the implementing partners when a young person is an agent of change (aoc) by using a multiple choice question with four choices (prompted recall). Although the majority of the participants (85.2%) said to be an aoc, only 28.3% choose the right answer according to the official dance4life definition (i.e., 'when I participate in two or three components of the schools4life program'). Almost half of the

participants choose the answer 'when I understand HIV and AIDS problems'. The majority of the implementing partners (86.8%) gave the right answer according to the definition.

Table 3.3. Prerequisites: Knowledge of participants (aoc's) and implementing partners (nco's) about the different components of dance4life

KNOWLEDGE	Mentioned by aoc's N	Mentioned by aoc's %	Mentioned by nco's N	Mentioned by nco's %
<i>Different parts of d4I mentioned (active reproduction)</i>				
Heart connection tour	273	53.7%	32	60.4%
Skills4life	294	57.9%	35	66.0%
Act4life	291	57.3%	33	62.3%
Dance4life event	187	36.8%	33	62.3%
Dance4life campaign	51	10.0%	24	45.3%
Schools4life	73	14.4%	11	20.8%
Support4life	-	-	8	15.1%
<i>No answer different parts</i>	123	24.0%	9	17.0%
<i>One or more wrong answers</i>	183	26.0%	8	15.1%
<i>Goals different parts d4I mentioned (active reproduction)</i>				
Heart connection tour (hct)				
Inspire			6	11.3%
Ignite			14	26.4%
Inspire & ignite			8	15.1%
None of these mentioned			25	47.2%
Skills4life (s4l)				
Educate			14	26.4%
Empower			4	7.5%
Educate & empower			12	22.6%
None of these mentioned			23	43.4%
Act4life (a4l)				
Activate/action			30	56.6%
Not mentioned activate/action			23	43.4%
Dance4life event				
Celebrate			10	18.9%
Not mentioned celebrate			43	81.1%

Dance4life campaign (International) attention	9	17.0%		
Giving young people a voice	2	3.8%		
(International) attention & giving young people a voice	1	1.9%		
None of these mentioned	41	77.3%		

Other knowledge questions

Are you an Agent of Change? (n, % yes)	433	85.2%	-	-
Definition Agent of Change (prompted recall/mc question) (n, % right answer)	144	28.3%	46	86.8%

3.1.1.3. Attitude towards dance4life

The attitude towards the different components of the dance4life programme was measured quite extensively by using two subscales (see method) for each dance4life component (hct, s4l, a4l, d4l event, d4l campaign). Table 3.4 shows that both the participants and the implementing partners score very high on attitude towards each component of the dance4life programme. All mean scores (M; range 1-5) are between four and five (the highest score), except for the attitude towards the heart connection tour and the dance4life campaign ($M=3.78$ on both 'attitude 2' scores) by the African implementing partners. The African participants give the highest scores (as compared to 'Europe' and 'Other countries') on attitude towards all dance4life components (although not always significantly higher), including the heart connection tour and the campaign. Attitude towards dance4life in general is very high among all groups of respondents too. Moreover, the aoc's report a highly positive attitude towards the goals of the dance4life programme.

Table 3.4. Prerequisites: Attitude towards the different components of the dance4life programme (aoc's and nco's)

ATTITUDE						
	Participants (aoc's)			Implementing partners (nco's)		
	Africa	Europe	Other	Africa	Europe	Other
<i>Subscales</i> (M; range 1-5) ^d	(M; 1-5) ^d	(M; 1-5) ^d	(M; 1-5) ^d	(M; 1-5) ^d	(M; 1-5) ^d	(M; 1-5) ^d
Heart connection tour (hct)	(n=302)	(n=53)	(n=19)	(n=18)	(n=9)	(n=17)
Attitude1	4.59	4.28	4.37	4.56	4.52	4.40
Attitude2	4.63 ^a	4.30 ^a	4.31	3.78	4.16	3.93
Skills4life (s4l)	(n=319)	(n=32)	(n=16)	(n=16)	(n=10)	(n=15)
Attitude1	4.53	4.35	4.46	4.63	4.21	4.53
Attitude2	4.63 ^a	4.04 ^a	4.39	4.49	4.56	4.40
Act4life (a4l)	(n=254)	(n=40)	(n=11)	(n=15)	(n=11)	(n=16)
Attitude1	4.58	4.29	4.64	4.24	4.31	4.36
Attitude2	4.61	4.35	4.38	4.00	4.64	4.26
Dance4life event	(n=310)	(n=60)	(n=20)	(n=16)	(n=11)	(n=15)
Attitude1	4.64	4.38	4.30	4.37	4.62	4.64
Attitude2	4.71	4.57	4.43	4.10	4.56	4.56
Dance4life campaign	(n=242)	(n=46)	(n=12)	(n=14)	(n=11)	(n=15)
Attitude1	4.42	4.44	4.39	4.28	4.13	3.87
Attitude2	4.45	4.29	4.18	3.78	4.16	3.93
Dance4life in general	(n=340)	(n=70)	(n=20)	(n=16)	(n=11)	(n=15)
Attitude1	4.48	4.63	4.56	4.52	4.83	4.82
Attitude2	4.56	4.62	4.43	4.43	4.76	4.69
GOAL ATTITUDE						
<i>Subscale 'goal attitude'</i> (M; range 1-5 ^e ; 3 items ^f)	4.50 ^a	4.15 ^a	4.23			

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d The highest score is the most favourable score

^e The highest score is the most favourable score; 1=completely disagree;

2=disagree; 3=neutral; 4=agree; 5=completely agree

^f Three items, e.g. 'd4l gives young people the opportunity to show the world that we are involved in fighting HIV and AIDS'; 'd4l contributes to the way young people think about HIV and AIDS'

We also examined differences between male and female participants with regard to attitude towards the various dance4life components. Table 3.5. shows that the scores of boys and girls are in general very similar. Girls only give a significantly higher score on 'attitude1' towards the act4life programme, but both scores are rather high and the difference is small. Overall, there are no indications of big differences between boys and girls in attitude towards the dance4life programme.

Table 3.5. Prerequisites: Differences between Male and Female Participants in Attitude towards the different components of the dance4life programme (aoc's)

ATTITUDE	Boys		Girls	
	(M; range 1-5) ^b	(sd)	(M; range 1-5) ^b	(sd)
<i>Subscales</i> (M; range 1-5) ^b				
Heart connection tour (hct)	(n=208)		(n=165)	
Attitude1	4.52	(1.02)	4.54	(.81)
Attitude2	4.56	(.94)	4.56	(.68)
Skills4life (s4l)	(n=208)		(n=155)	
Attitude1	4.50	(1.09)	4.53	(.90)
Attitude2	4.48	(1.05)	4.67	(1.06)
Act4life (a4l)	(n=150)		(n=152)	
Attitude1	4.42 ^a	(1.17)	4.66 ^a	(.72)
Attitude2	4.52	(.94)	4.61	(.73)
Dance4life event	(n=204)		(n=180)	
Attitude1	4.61	(.98)	4.54	(.82)
Attitude2	4.70	(1.13)	4.63	(.74)
Dance4life campaign	(n=153)		(n=145)	
Attitude1	4.36	(1.25)	4.48	(.97)
Attitude2	4.38	(1.12)	4.45	(.88)
Dance4life in general	(n=227)		(n=196)	
Attitude1	4.48	(1.17)	4.53	(.98)
Attitude2	4.53	(1.03)	4.62	(.78)

^a Significant diff between boys and girls

^b The highest score is the most favourable score

3.1.2. Organisational prerequisites

3.1.2.1. Communication organisation

The results show that the implementing partners are rather satisfied, but not *completely* satisfied, with the clearness of handbooks and instructions. However, they are less satisfied by the monitoring they receive from dance4life international (d4l-int) on the quality and content of the implementation. They also would like to have more contact with d4l-int. Especially the African partners think that monitoring by d4l-int on the implementation should be better and more frequent (Table 3.6). The table further shows that the majority of the implementing partners is satisfied with the License Agreement, although the African partners are significantly less satisfied than the European and Other partners. It is striking that, in general, the implementing partners do not agree with the statement 'The communication between me and dance4life is good'; although the respondents do not really disagree either. Particularly the African and Other partners give, on average, a neutral score on this (3.29 resp. 3.35 on a scale from 1 to 5), indicating room for improvement.

We also asked the implementing partners how often they have contact with other implementing partners, because working together forms a stronger regional network that will facilitate opportunities to strengthen the implementation. The majority of the African (78.3%) and European partners (76.9%) has contact with at least one other country (on average with two countries) and more than half of the Other partners (58.8%) has contact with on average one other country. Contact with The Netherlands is often mentioned by all three groups, but this can probably be explained by the fact that dance4life international is settled in The Netherlands. The African countries seem to have most contact with each other, followed by the European countries. The African partners report most contact with South-Africa, Zambia, Tanzania and Uganda, the European partners, next to the Netherlands, with Great-Britain. However, about two third of the African partners and the Other partners has less than once a month contact with partners from other countries, and almost half of the European countries also report a low frequency of less than once a month.

Tabel 3.6. Prerequisites: Communication organisation (nco's)

COMMUNICATION BETWEEN DANCE4LIFE INTERNATIONAL AND IMPLEMENTING PARTNERS	Implementing partners (nco's)		
	Africa (n=21)	Europe (n=13)	Other (n=17)
<i>Subscales (M; range 1-5)^d</i>			
Clareness of handbooks and instructions (the hct/s4l/a4l framework is specific enough, the information in the handbooks form d4l-int is clear, the instructions given by d4l-int are clear, d4l-int always provides our NCO with the information we need) (6 items)	3.67	4.01	3.69
Monitoring by dance4life international (satisfaction with monitoring by d4l-int on the quality and content of implementation, satisfaction with frequency of monitoring on implementation and satisfaction with frequency of contact) (3 items)	2.11 ^{a,b}	2.94 ^a	3.00 ^b
Satisfaction with license agreement (the license agreement offers us a lot of freedom to combine it with our own programme and ideas, the license agreement clearly describes the requirements and responsibilities) (2 items)	3.81 ^a	4.88 ^{a,c}	3.71 ^c
<i>Individual variables (M; range 1-5)^d</i>			
Communication with d4l-int is good	3.29	3.92	3.35
NCO delivers information to d4l-int in time	4.14	3.33	3.82
No hesitate to contact the staff from d4l-int	3.53	4.17	3.65
I have read the handbooks delivered by d4l carefully	4,29	4,08	3,76
D4l franchise model contributes to the implementation of d4l programme	3.57 ^a	4.58 ^a	3.76
<i>Individual variable (M; range 1-5)^e</i>			
A lack of capacity in my organisation makes it difficult to implement the d4l programme as intended ^e	1.27	1.76	1.28

CONTACT OF IMPLEMENTING PARTNERS WITH OTHER (IMPLEMENTING) COUNTRIES

	Implementing partners (Nco's)		
	Africa (n=23)	Europe (n=13)	Other (n=17)
Contact with (n, %):			
<i>Africa</i>			
Sierra Leone	4 (17.4%)	0 (0%)	0 (0%)
Zambia	9 (39.1%) ^{a,b}	2 (15.4%) ^a	0 (0%) ^b
Uganda	7 (30.4%)	2 (15.4%)	1 (5.9%)
Tanzania	8 (34.8%) ^{a,b}	1 (7.7%) ^a	0 (0%) ^b
Zimbabwe	4 (17.4%)	0 (0%)	0 (0%)
Kenya	1 (4.3%)	0 (0%)	0 (0%)
South Africa	9 (39.1%) ^{a,b}	0 (0%) ^a	1 (5.9%) ^b
<i>Europe</i>			
Turkey	0 (0%)	0 (0%)	1 (5.9%)
Serbia	0 (0%)	1 (7.7%)	0 (0%)
Germany	0 (0%)	3 (23.1%)	0 (0%)
Great Britain	2 (8.7%) ^a	6 (46.2%) ^{a,c}	2 (11.8%) ^c
Ibiza / Spain	0 (0%)	1 (7.7%)	0 (0%)
The Netherlands	8 (34.8%)	5 (38.5%)	6 (35.3%)
Ireland	0 (0%) ^a	3 (23.1%) ^{a,c}	0 (0%) ^c
<i>Other countries</i>			
Vietnam	0 (0%)	1 (7.7%)	0 (0%)
Moldova	0 (0%) ^b	0 (0%) ^c	3 (17.6%) ^{b,c}
Russia	0 (0%)	1 (7.7%)	1 (5.9%)
Mexico	0 (0%)	1 (7.7%)	1 (5.9%)
USA	0 (0%)	1 (7.7%)	0 (0%)
No contact with other countries	5 (21.7%)	3 (23.1%)	7 (41.2%)
Mean number of contacting countries			
Number of other countries with which NCO has close contact (M; max = 4)	2.26 ^b	2.15	0.94 ^b
Frequency of contact with most frequent country (n, %)			
Daily	3 (15.0%)	1 (7.7%)	2 (11.8%)
Weekly	2 (10.0%)	4 (30.8%)	2 (11.8%)
Twice a month	2 (10.0%)	1 (7.7%)	1 (5.9%)
Monthly	0 (0%)	2 (15.4%)	1 (5.9%)
Less than once a month	8 (40.0%)	2 (15.4%)	4 (23.5%)
Never	5 (25.0%)	3 (23.1%)	7 (41.2%)

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d The highest score is the most favourable score; 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

^e The lowest score is the most favourable score; 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

3.1.2.2. Professionalism staff

It is striking that the implementing partners of all three groups do not disagree with the statement 'The lack of professionals among the (peer) educators/teachers makes the implementation of the dance4life programme difficult' (Table 3.7). Although the respondents do not (completely) agree either, this indicates that there are doubts about the professionalism of at least some (peer) educators. We don't have a deeper insight in the reasons of these doubts, but some comments made by the implementing partners confirm that there is room for improvement. E.g. *'There is a lack of trained teachers'* (Other countries); *'A challenge is the high turnover of trained hct-members of the implementing partner'* (Africa); *'The motivation of the team members is not well managed'* (Africa) and *'The learners often think that the d4l programme is about learning to dance only'* (Africa).

The participants (aoc's) seem to be satisfied with the instructions that were given by the (peer) educators and thought the peer educators were interesting to listen to. However, the clearness of the instructions during the skills4life programme, especially what was expected from the participants, might need further improvement (Table 3.7).

Table 3.7. Prerequisites: Skills of staff (nco's and aoc's)

SKILLS STAFF	Implementing partners (nco's)		
	Africa (n=21)	Europe (n=13)	Other (n=17)
<i>Individual variable (M; range 1-5)^d</i>			
The lack of professionals among the (peer) educators/teachers makes the implementation of the dance4life programme difficult ^d	3.60	3.45	3.06

	Participants (aoc's)		
	Africa (n=392)	Europe (n=83)	Other (n=23)
<i>Individual variables (M; range 1-5) ^e</i>			
The instructions that (peer) educators gave to me were very clear	4.34	4.30	4.09
The people who instructed me during the s4I programme were very clear about what they expected from me	3.86	3.89	3.59
The (peer) educators were interesting to listen to	4.26	4.10	4.00

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d The lowest score is the most favourable score; 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

^e The highest score is the most favourable score; 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

3.1.2.3. Environmental and social support

Regarding support from people and organisations, the implementing partners perceive, in general, the religious leaders, international ambassadors and the national and local legislation as the least supportive partners (overall $M < 3.00$). In 'Africa', external professionals and the local government are not perceived very supportive too. 'Europe' also reports low support from the local government, and the 'Other countries' from external professionals and sponsors. On average, other organisations that deal with HIV and AIDS, national ambassadors and the media are experienced as the most supportive people or organisations (Table 3.8). Participants (aoc's) experience, on average, quite some social support. Neighbours, fathers, mothers and the village/city are generally perceived as least supportive (overall M between 3.50 and 4.00). However, only one out of every ten participants report that their neighbours (13.2%), father (12.1%), mother (9.5%) and the village/city (9.2%) are not supportive at all (score 1 or 2) (not in Table). The school, friends and boy/girlfriend are considered most supportive (overall $M > 4.00$).

The results further show that, on the institutional level, the lack of accessibility to internet hamper the work in some African countries, which limits the possibilities to receive international support. Additional remarks reveal that a lack of computers in some schools also hinder the

implementation of the skills4life programme. E.g., 'Yet most schools don't have computers and the programme is computer based' (Africa) and 'There is a lack of computers in some of the schools' (Africa).

Table 3.8. Prerequisites: Environmental and Social Support (nco's and aoc's)

ENVIRONMENTAL AND SOCIAL SUPPORT			
	Implementing partners (nco's)		
	Africa (n=21)	Europe (n=12)	Other (n=17)
<i>Individual variable (M; range 1-5)^d</i>			
Our organisation finds it difficult to recruit local partners and ambassadors for d4I	2.48	2.58	2.76
The media in our country are not paying any attention to d4I	2.62	2.00	2.12
Lack of accessibility to internet makes our work difficult (on an international level)	3.29 ^b	2.58	2.00 ^b
<i>Support from people/organisations (M; range 1-5)^e</i>			
National government	3.19	3.64	3.38
Regional governments	2.94	3.09	3.38
Local governments	3.25	3.27	3.44
International ambassadors	2.50	3.09	2.94
National ambassadors	3.50	3.82	3.69
Religious leaders	3.13	2.82	2.38
Sponsors	3.69	3.36	3.44
Media	3.56	3.64	3.63
Other organisations that deal with HIV and AIDS	3.50	4.09	3.94
National and local legislation	2.81	3.00	3.13
External professionals	2.81 ^a	3.73 ^a	3.13
<i>Support from people/organisations (M total scale; range 1-5)^e</i>	3.17	3.41	3.32

Support from people/organisations (n (%) supportive or completely supportive)	(n=16)	(n=11)	(n=16)
National government	10 (62.5%)	7 (63.6%)	7 (43.8%)
Regional governments	4 (25.0%)	3 (27.3%)	8 (50.0%)
Local governments	8 (50.0%)	3 (27.3%)	9 (56.3%)
International ambassadors	3 (18.8%)	3 (27.3%)	4 (25.0%)
National ambassadors	9 (56.3%)	8 (72.7%)	12 (75.0%)
Religious leaders	6 (37.5%)	2 (18.2%)	2 (12.5%)
Sponsors	12 (75.0%)	6 (54.5%)	7 (43.8%)
Media	9 (56.3%)	7 (63.6%)	11 (68.8%)
Other organisations that deal with HIV and AIDS	9 (56.3%)	8 (72.7%)	12 (75.0%)
National and local legislation	6 (37.5%)	4 (36.4%)	5 (31.3%)
External professionals	4 (25.0%)	7 (63.6%)	6 (37.5%)
Collaboration with implementing partners/stakeholders/sponsors (n (%) 'yes')	(n=18)	(n=11)	(n=17)
Collaboration for the heart connection tour	9 (50.0%)	4 (36.4%) ^c	14 (82.4%) ^c
Collaboration for the skills4life programme	12 (66.7%)	7 (63.6%)	8 (50.0%)
Collaboration for the act4life programme	9 (56.3%)	6 (60.0%)	10 (62.5%)
Collaboration for the dance4life event	15 (88.2%)	9 (90.0%)	10 (66.7%)
If yes, with how many implementing partners do you collaborate (M)			
Heart connection tour	2.56 ^b (n=9)	3.00 ^c (n=4)	8.92 ^{b,c} (n=13)
Skills4life	1.75 ^b (n=12)	3.00 (n=4)	8.14 ^b (n=7)
Act4life	1.78 ^b (n=9)	1.40 ^c (n=5)	7.33 ^{b,c} (n=9)
Dance4life event	2.79 ^a (n=14)	14.00 ^a (n=8)	7.43 (n=7)

	Participants (aoc's)		
	Africa	Europe	Other
Support from people/organisations (M; range 1-5) ^e			
Father ^f	3.83 (n=344)	3.53 (n=68)	3.32 (n=19)
Mother ^f	4.04 ^a (n=370)	3.70 ^a (n=74)	3.56 (n=18)
Friends	4.19 (n=388)	3.97 (n=75)	4.20 (n=20)
Boy/girlfriend ^f	4.18 ^a (n=297)	3.60 ^a (n=45)	3.83 (n=12)
Neighbours	3.65 ^{a,b} (n=376)	3.00 ^a (n=75)	2.85 ^b (n=20)
School	4.44 ^b (n=392)	4.33 (n=75)	3.90 ^b (n=20)
Village/city of living	3.86 ^a (n=370)	3.48 ^a (n=75)	3.60 (n=20)
Support from people/organisations (M total scale; range 1-5) ^e			
	4.11 ^{a,b} (n=238)	3.55 ^a (n=41)	3.49 ^b (n=10)
Support from people/organisations (n (%) supportive or completely supportive)			
Father ^f	239 (69.5%) ^b	38 (55.9%)	8 (42.1%) ^b
Mother ^f	294 (79.5%) ^b	45 (60.8%) ^c	8 (44.4%) ^{b,c}
Friends	329 (84.8%) ^a	53 (70.7%) ^a	15 (75.0%)
Boy/girlfriend ^f	251 (84.5%) _{a,b}	24 (53.3%) ^a	7 (58.3%) ^b
Neighbours	215 (57.2%) _{a,b}	19 (25.3%) ^a	3 (15.0%) ^b
School	357 (91.1%) ^b	66 (88.0%) ^c	13 (65.0%) ^{b,c}
Village/city of living	250 (67.6%) ^a	31 (41.3%) ^{a,c}	13 (65.0%) ^c

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d The lowest score is the most favourable score; 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

^e The highest score is the most favourable score; 1=completely non supportive; 2=non supportive; 3=neutral; 4=supportive; 5=completely supportive

^f Counted if respondent has one

3.2. Implementation

3.2.1. Reach

We retrieved information from the monitoring system of dance4life international about the frequency the different programme components were implemented in 2008, the amount of participants in these components and the amount of aoc's (youngsters who participated in two or three components). Table 3.9 gives an overview of these figures. The table shows that the reach is largest in Africa. The total number of aoc's is 121 980 in Africa, which is almost 36 000 more than the target that was given at the beginning of 2008. On the other hand, 'Europe' and the 'Other countries' didn't succeed in getting the target that was set (see Table 3.9). The fifth and sixth column give the figures of youngsters who participated in two out of three essential d4l components, indicating that they could become an aoc, according to the d4l definition that was used until 2009. The seventh (grey) column shows how many youngsters participated in all three essential components (hct, s4l, a4l).

Table 3.9. Implementation: Frequency of implementation of dance4life components and number of participants in 2008 (according to monitoring system of dance4life international)

	Schools hct	Schools life skills	Partici-pants hct	Partici-pants hct + only s4l	Partici-pants hct + only a4l	Partici-pants hct + s4l + a4l	Total aoc's	aoc's compared to target ^a +/-	Partici-pants d4l event
	(n)	(n)	(n)	(n)	(n)	(n)	(n)	(n)	(n)
<i>Africa</i>	377	360	192587	48 734	14 550	58 201	121980	+ 35 830	20 294
Kenya	60	50	6 120	3 000	1 880	0	4 880	+ 880	2 692
Sierra Leone	64	64	18922	17675	0	1 247	18922	-9 078	5 348
South-Africa	50	55	38500	2160	0	0	2160	- 4 990	3 737
Tanzania	62	62	86 235	0	?	54 279	54279	+ 39279	5 775
Uganda	47	35	20 924	8252	12 670	?	20922	+ 13922	1 570
Zambia	64	64	18 444	15454	0	2 200	17 654	+ 2 654	607
Zimbabwe	30	30	3 442	2 193	0	475	3 163	- 6 837	565
<i>Europe</i>	115	81	38443	1741	18 237	1 018	21296	- 7204	12 624
Germany	13	13	996	165	0	831	996	- 2 004	700
Ireland	4	10	361	361	0	0	361	- 639	0
Netherlands	46	22	30 350	0	14 625	0	14 625	- 2 875	10 000
UK	21	24	3 500	968	3 123	149	4 240	+ 1 240	650
Serbia	17	12	1 926	247	89	38	374	- 1 626	574
Spain	12	0	1 010	0	400	0	400	+ 400	400
Turkey	2	0	300	0	0	0	300	- 1 700	300
<i>Other countries^b</i>	267	40	28698	2080	2 906	2 201	7187	- 7313	7433
Mexico	25	20	2 519	684	380	114	1 178	- 1 322	400
Moldova	53	0	4 214	0	1 500	0	1 500	0	1 500
Russia	173	6	18 865	496	1 026	87	1 609	- 4391	3 046
USA	9	9	500	500	?	?	500	- 1 000	87
Vietnam	7	5	2 600	400	0	2 000	2 400	- 600	2 400

^a compared to target given at beginning of 2008; + means more aoc's compared to target; - means less aoc's compared to target

^b total amounts without Vietnam

Table 3.10 gives additional information from our survey among the implementing partners. The results show that the majority of the implementing partners developed and implemented all the components of the dance4life programme (hct, s4l, a4l, d4l event, d4l campaign). The least implemented component is the dance4life campaign. Two third of the implementing partners in 'Africa' and 'Other countries' say that they are not going to implement the d4l campaign this year (i.e., in 2009). The most given reason is that they don't have enough funding. Some implementing partners mention they don't have enough staff (Table 3.10). Table 3.10 also shows that the implementing partners on average agree, although 'African' and 'Other' partners do not *completely* agree, that more youngsters are reached with the dance4life programme than with previous HIV and AIDS programmes that were implemented by the responding partner.

Table 3.10. Implementation: Development of the different components of dance4life, implementation plans 2009 and perceived reach of participants (nco's)

IMPLEMENTATION DIFFERENT COMPONENTS DANCE4LIFE	Implementing partners (nco's)		
	Africa	Europe	Other
Development of different d4l components			
Did your NCO develop for your country (n (%) 'yes'):			
Hct	18 (94.7%) (n=19)	10 (90.9%) (n=11)	17 (100%) (n=17)
s4l	16 (88.9%) (n=18)	9 (81.8%) (n=11)	16 (100%) (n=16)
a4l	12 (70.6%) (n=17)	9 (81.8%) (n=11)	16 (100%) (n=16)
d4l campaign	10 (62.5%) (n=16)	7 (63.6%) (n=11)	13 (81.3%) (n=16)
Stage d4l event in 2008	17 (100%) (n=17)	10 (90.9%) (n=11)	15 (93.8%) (n=16)

	Implementing partners (nco's)		
	Africa	Europe	Other
Implementation of different d4l components			
Is your NCO this year (2009) going to implement			
(n (%) 'yes'):			
hct	17 (89.9%) (n=19)	8 (72.7%) (n=11)	17 (100%) (n=17)
s4l	18 (100%) (n=18)	11 (100%) (n=11)	15 (93.8%) (n=16)
a4l	16 (94.1%) (n=17)	10 (90.9%) (n=11)	16 (100%) (n=16)
d4l campaign	11 (68.8%) (n=16)	10 (90.9%) (n=11)	10 (62.5%) (n=16)

	Implementing partners (nco's)		
	Africa	Europe	Other
Reasons for not implementing d4l components			
(n=23) (n=13) (n=17)			
Reasons for not implementing hct			
(n (%) 'yes'):			
We do not have a good programme yet	1 (4.3%)	0 (0%)	0 (0%)
We do not have enough funding	3 (13.0%)	0 (0%)	2 (11.8%)
We do not have enough staff	0 (0%)	1 (7.7%)	0 (0%)
We don't know how to do it	0 (0%)	0 (0%)	1 (5.9%)
We implemented it in the past, but had to stop	0 (0%)	1 (5.9%)	2 (3.8%)
Reasons for not implementing s4l			
(n (%) 'yes'):			
We do not have a good programme yet	0 (0%)	0 (0%)	0 (0%)
We do not have enough funding	0 (0%)	0 (0%)	0 (0%)
We do not have enough staff	0 (0%)	0 (0%)	0 (0%)
We don't know how to do it	0 (0%)	0 (0%)	0 (0%)
We implemented it in the past, but had to stop	0 (0%)	0 (0%)	0 (0%)
Reasons for not implementing a4l			
(n (%) 'yes'):			
We do not have a good programme yet	0 (0%)	0 (0%)	0 (0%)
We do not have enough funding	0 (0%)	0 (0%)	0 (0%)
We do not have enough staff	0 (0%)	1 (7.7%)	0 (0%)
We don't know how to do it	0 (0%)	0 (0%)	0 (0%)
We implemented it in the past, but had to stop	0 (0%)	0 (0%)	0 (0%)

Reasons for not executing a campaign
(n (%) 'yes'):

We do not have a good programme yet	1 (4.3%)	0 (0%)	1 (5.9%)
We do not have enough funding	3 (13.0%)	2 (15.4%)	5 (29.4%)
We do not have enough staff	1 (4.3%)	1 (7.7%)	2 (11.8%)
We don't know how to do it	0 (0%)	0 (0%)	1 (1.9%)
We implemented it in the past, but had to stop	0 (0%)	0 (0%)	0 (0%)

REACH OF PARTICIPANTS

	Implementing partners (nco's)		
	Africa (n=21)	Europe (n=12)	Other (n=17)
Individual variable (M; range 1-5)			
With d4l we reach more youngsters in our country than with previous HIV and AIDS programmes that our organisation has implemented	4.10	4.48	3.94

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d A higher score indicates a more frequent use: 1=never; 2=rarely; 3=sometimes; 4=often; 5=always

We intended to use background characteristics of the respondents of the participants questionnaire to get more insight in the age, gender, ethnic background and religion of the participants, but due to the low response rate in especially Europe and the Other countries, we can not consider the respondents as a representative group of participants. The participants who filled in the questionnaire seem to be a rather selected group, who participated in almost all d4l components (see Table 3.11). 82.8% of the respondents participated in the hct, 82,8% participated in s4l, 65,7% participated in a4l, 85,5% participated in the d4l music event and 70,0% knows the d4l campaign. The figures that were retrieved from the dance4life monitoring system give more insight in the general participation patterns (see Table 3.9). These figures reveal that, overall, most participants participated in the hct. In Africa, quite a large amount of youngsters also participated in s4l *or* in both s4l and a4l. In Europe, especially in The Netherlands, many participants participated in the hct as well as a4l (Table 3.9). We have no reliable data on background characteristics of participants of the dance4life programme.

Table 3.11. Participation of respondents in different parts d4l (aoc's)

PARTICIPANTS DIFFERENT PARTS D4L			
	Participants (aoc's)		
	Africa (n=377)	Europe (n=83)	Other (n=23)
Participate in heart connection tour? (n,%)			
Yes	322 (85.4%)	57 (68.7%)	21 (91.3%)
I don't know	6 (1.6%)	9 (10.8%)	2 (8.7%)
No	49 (13.0%)	17 (20.5%)	0 (0%)
	Africa (n=379)	Europe (n=81)	Other (n=22)
Participate in skills4life? (n,%)			
Yes	346 (91.3%)	37 (45.7%)	16 (71.7%)
I don't know	3 (0.8%)	20 (24.7%)	4 (18.2%)
No	30 (7.9%)	24 (29.6%)	2 (9.1%)
	Africa (n=366)	Europe (n=81)	Other (n=22)
Participate in act4life? (n,%)			
Yes	250 (68.3%)	46 (56.8%)	12 (54.5%)
I don't know	5 (1.4%)	16 (19.8%)	4 (18.2%)
No	111 (30.3%)	19 (23.5%)	6 (27.3%)
	Africa (n=374)	Europe (n=80)	Other (n=21)
Went to the dance4life music event? (n,%)			
Yes	318 (85.0%)	67 (83.3%)	21(100%)
I don't know	5 (1.3%)	0 (0%)	0 (0%)
No	50 (13.4%)	13 (16.3%)	0 (0%)
	Africa (n=370)	Europe (n=77)	Other (n=19)
Know the dance4life campaign? (n,%)			
Yes	264 (71.4%)	51 (66.2%)	11 (57.9%)
I don't know	8 (2.2%)	15 (19.5%)	7 (36.8%)
No	98 (26.5%)	11 (14.3%)	1 (5.3%)

3.2.2. Implementation in practice

3.2.2.1. Programme implementation

Most of the implementing partners give scores between three (neutral) and four (agree) in reaction on statements about the perceived ease of the implementation of the dance4life programme (see Table 3.12). This indicates that there are some barriers in the implementation process. The implementation of the components s4l and a4l seems to be most difficult in the 'Other countries'. In 'Europe', the ease 'to get young people to participate' got the lowest score. One of the obstacles mentioned by respondents is 'It is not possible to oblige schools to participate in skills4life. Therefore, not all youngsters pass through the whole programme' (Europe).

With regard to self-efficacy, the participants from 'Europe' and 'Other countries' report significantly lower self-efficacy scores as compared to the African respondents. Although all participants generally state that they were inspired by the dance4life programme, there seems to be some room for improvement on teaching skills that can increase the self-efficacy of European participants and participants of the other countries (Table 3.12).

Table 3.12. Implementation in practice: General implementation (nco's en aoc's)

IMPLEMENTATION IN GENERAL			
	Implementing partners (nco's)		
	Africa (n=20)	Europe (n=9)	Other (n=16)
<i>Subscale (M; range 1-5)^d</i>			
<i>Subscale 'ease of implementation' (5 items; see individual variables below) (M; range 1-5)^d</i>	3.99	3.64	3.56

Individual variables (M; range 1-5)^d

Ease to get young people to participate	4.10 (n=21)	3.25 (n=12)	3.76 (n=17)
Ease to implement hct	3.85 (n=20)	3.64 (n=11)	3.94 (n=16)
Ease to implement s4I	4.10 ^b (n=20)	3.56 (n=9)	3.24 ^b (n=17)
Ease to implement a4I	3.70 (n=20)	3.67 (n=9)	3.18 (n=17)
Ease to implement the d4I programme as a whole in schools	4.29 (n=21)	4.00 (n=11)	3.82 (n=17)

LIKEABILITY PARTICIPANTS

	Implementing partners (nco's)		
	Africa (n=21)	Europe (n=12)	Other (n=17)

Individual variables (M; range 1-5)^d

Students who participated liked d4I	4.38	4.33	4.06
	Participants (aoc's)		
	Africa (n=389)	Europe (n=83)	Other (n=23)

Students who participated liked d4I

4.09^{a,b}

3.18^a

3.04^b

SELF-EFFICACY

	Participants (Aoc's)		
	Africa	Europe	Other

Subscale (M; range 1-5)^d

Self-efficacy (i.e., in the s4I programme the (peer) educators/teachers paid a lot of attention to teaching communication skills, [...] to teaching negotiation skills related to HIV and AIDS, in the a4I programme I was given support to realise my ideas and take action, in the d4I training they paid a lot of attention to obstacles we face in daily life) (4 items)

4.19^{a,b}
(n=299)

3.81^a
(n=62)

3.59^b
(n=17)

Individual variable (M; range 1-5)^d

I was inspired to take action in the d4I programme

4.42^a
(n=383)

4.40^{a,c}
(n=85)

3.86^c
(n=22)

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d The highest score is the most favourable score; 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

We distinguished two kinds of role models: 'similar others' (i.e., 'comparable' youngsters from the same age as the participants, who tell stories and can be observed with the aim of social modelling) and 'ambassadors' (famous people or public persons). With regard to the 'similar others', the participants (aoc's) do not really agree with the statements 'the person who told a story during the hct could be a friend of mine' and 'the story which is told during the hct could also happen to me', although the majority found the stories rather interesting (Table 3.13). Besides, more than 40% of respondents from Europe and the Other countries and almost a quarter of the African respondents reported that they did not 'met a young person who talked about becoming infected with or being infected by HIV' during the hct. This might be explained by the fact that sometimes video-recordings are used instead of 'real life' role models. It is rather remarkable that 'only' three quarter of the European respondents agree with the statement 'I saw people from my age participating in the hct'. This means that one out of every four European respondents does not agree with this statement.

Table 3.13. Implementation in practice: 'Similar other' role modelling and story-telling (nco's en aoc's)

ROLE MODELLING 'SIMILAR OTHERS' AND STORY-TELLING	Participants (aoc's)		
	Africa	Europe	Other
<i>Individual variable (n (%)) yes</i>			
I saw young people from my age participating in hct	339 (89.4%) ^a	57 (74.0%) ^{a,c}	19 (95.0%) ^c
We met a young person who talked about becoming infected with or being infected by HIV in the hct	293 (77.7%) ^a	45 (58.4%) ^{a,c}	12 (60.0%) ^c
<i>Individual variables (M; range 1-5)^d</i>			
The person who told a story during the hct about HIV and AIDS could be a friend of mine	3.82 (n=370)	3.67 (n=83)	4.10 (n=21)
The story which is told during the hct could also happen to me	3.82 ^a (n=361)	3.41 ^a (n=81)	3.50 (n=22)
I found the stories in the hct interesting	4.33 ^b (n=371)	4.19 ^b (n=83)	3.83 (n=23)

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d The highest score is the most favourable score; 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

The implementing partners were also asked to give their opinion about the 'famous' role models, or ambassadors. Table 3.14 shows that especially the African partners do not really agree with the statement that d4l 'has great ambassadors who appeal to the young people in our country'. The European and Other partners are somewhat more positive, but they also do not clearly agree with this statement.

To get insight in the visibility of the ambassadors, we asked the responding participants to name two famous people who are connected with dance4life. 425 of the 508 participants (83.7%) gave one name, and 356 participants (70.1%) gave two names (not in Table). Table 3.14 gives an overview of the names that were mentioned. In Africa, Desmond Tutu (mentioned by one out of every three African respondents) and Nelson Mandela (mentioned by one of five African respondents) were named most often, followed by DJ Base/Mohamed Jollah and Kofi Annan (both mentioned by one out of ten African respondents). In Europe, DJ Tiesto was the only name that was often mentioned (by almost two of every three European respondents) and in the Other countries XaunBac (mentioned by four of every ten respondents from the Other countries). Table 3.14 shows that there are a lot of other names who were irregularly written down by the respondents. Although this indicates that part of the ambassadors is not visible enough, almost all respondents think that the person they mentioned fit with dance4life, particularly the African participants. In Europe, more than one out of every ten respondents think the famous person does not fit with dance4life (see Table 3.14).

Table 3.14. Implementation in practice: Role modelling of famous people / ambassadors (nco's en aoc's)

ROLE MODELLING; 'FAMOUS' ROLE MODELS / AMBASSADORS	Implementing partners (nco's)		
	Africa (n=21)	Europe (n=12)	Other (n=17)
<i>Individual variable (M; range 1-5) ^d</i>			
We have great (global) d4l ambassadors who appeal to the young people in our country	2.71 ^{a,b}	3.75 ^a	3.76 ^b

	Participants (aoc's)		
	Africa (n=400)	Europe (n=85)	Other (n=23)
Can you name two famous people who are connected with dance4life? (n mentioned)			
Desmond Tutu (157)	149	7	1
Nelson Mandela (81)	80	1	0
DJ Base / Mohamed Jalloh (53)	53	0	0
DJ Tiesto (51)	1	51	4
Kofi Annan (42)	40	2	0
BonaniMadina (31)	31	0	0
Wyre (26)	26	0	0
Leonard Mapfumo (18)	18	0	0
M.O.G. (18)	18	0	0
George / Georgina (16)	16	0	0
James Fofanah (16)	16	0	0
Daniel Kettor (15)	15	0	0
Nicola Sibanda (Owen) (15)	15	0	0
KanuAbubakarr (13)	13	0	0
AhajijKabba (12)	12	0	0
XaunBac (10)	0	0	10
Abby Sykes (9)	9	0	0
Fareed (Farida) Kubanda (8)	8	0	0
Eelco van der Linden (8)	8	0	0
Unique Sisters (8)	8	0	0
Anna Stanic (8)	0	8	0
Tu Long (7)	0	0	7
Harmony Dube (6)	6	0	0
Fid Q (6)	6	0	0
Don Diablo (6)	0	6	0
GielBeelen (6)	0	6	0
Daddy K. (IbrahimKargbo) (5)	5	0	0
Alec(k) (5)	5	0	0
Lange Frans (4)	0	4	0
Dennis Karpes (4)	4	0	0
SakhileMleya (4)	4	0	0
Lazarus Mkorno (4)	4	0	0
Tawana Ndebele (4)	4	0	0
Baas B. (3)	0	3	0
Nikki Plessen (3)	0	3	0
Mr. Maine (3)	3	0	0
Pauline (3)	3	0	0
Kim Jojo (3)	0	0	3
Paul van Dijk (2)	0	1	1
Maxi Jazz (2)	0	2	0
SaschaVisser (2)	0	2	0
Benjamin Bates (2)	1	1	0
The Party Squad (2)	0	2	0
Wilfried (1)	0	1	0
MaricioBarceleta (1)	0	0	1
Total of names mentioned (max 2 per respondent)	581	100	27

<i>Does this person fit with dance4life?</i>	(n=623)	(n=131)	(n=35)
Yes (n (%))	615 (98.7%)	114 (87.0%)	33 (94.3%)

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d The highest score is the most favourable score; 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

The tables 3.15 to 3.18 give more extensive background information about the implementation of the different components of the dance4life programme: heart connection tour (hct), skills4life (s4l), act4life (a4l), dance4life event (d4l event) and dance4life campaign (d4l campaign).

Table 3.15 shows the results of the implementation of the heart connection tour (hct). In Europe, images and videos are often used, while Africa and the Other countries more often perform a play. Music instruments are mostly used in Africa. It is rather remarkable that the European partners and partners from Other countries do not really agree with the statement 'the hct includes young people with HIV'. In Europe and the Other countries, the experiences of agents of change of previous years seem to be incorporated more often in the hct. All implementing partners are very positive about the hct when it comes to the possibility to speak in an open and safe environment, to alternate fun with education and to break taboos about HIV.

Table 3.15. Implementation in practice: Implementation of the heart connection tour (hct) (nco's)

Implementation of heart connection tour (hct)	Implementing partners (nco's)		
	Africa	Europe	Other
<i>In the hct, they.....</i>			
<i>(M; range 1-5)^d</i>			
use images	3.06 ^a (n=17)	4.89 ^a (n=9)	4.00 (n=14)
use videos	3.11 ^{a,b} (n=18)	4.89 ^a (n=9)	4.86 (n=14)
perform a play	4.56 ^a (n=18)	2.38 ^{a,c} (n=8)	4.00 ^c (n=13)
use music instruments	4.17 ^b (n=18)	3.22 (n=9)	3.07 ^b (n=14)
include short testimonials by young people from other dance4life countries	3.19 (n=16)	4.00 (n=9)	3.00 (n=13)
include young people living with HIV	4.28 (n=18)	3.78 (n=9)	3.47 (n=15)
<i>In the hct, they.....</i>			
<i>(M; range 1-5)^e</i>			
make it possible for young people to speak in an open and safe environment about HIV and AIDS	4.17 (n=18)	4.78 (n=9)	4.00 (n=14)
correct misperceptions about HIV and AIDS	4.44 (n=18)	4.78 (n=9)	3.93 (n=14)
break taboos about HIV	4.17 ^a (n=18)	4.89 ^{a,c} (n=9)	4.00 ^c (n=14)
alternate fun with information	4.67 (n=18)	4.89 ^c (n=9)	4.29 ^c (n=14)
include the experiences of agents of change (aoc's) of previous years	3.61 (n=18)	4.38 ^c (n=8)	3.21 ^c (n=14)
		Participants (aoc's)	
	Africa (n=379)	Europe (n=84)	Other (n=23)
<i>Individual variable (M; range 1-5)^e</i>			
It was easy to learn the dance and song in the hct	3.74	3.96	3.83

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d A higher score indicates a more frequent use: 1=never; 2=rarely; 3=sometimes; 4=often; 5=always

^e A higher score indicates more agreement: 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

Table 3.16 presents information about the content of the skills4life (s4l) component. The African countries seem to be most active in training negotiation skills, leadership skills and public speaking, while in Europe the training of entrepreneurship gets more attention.

We also investigated whether the empowerment of young women (because gender inequality in the domain of HIV and AIDS is a worldwide concern) and other specific high risk groups receive special attention and we found that this is not really the case. All groups report that there is also not a clear focus on sexuality during s4l.

Table 3.16. Implementation in practice: Implementation of the skills4life programme (s4l) (nco's)

Implementation of skills4life programme (s4l)	Implementing partners (nco's)		
	Africa	Europe	Other
<i>In our skills4life programme.....</i>			
<i>(M; range 1-5)^d</i>			
youngsters get training in negotiation skills	4.82 ^{a,b} (n=17)	3.38 ^a (n=8)	3.86 ^b (n=14)
youngsters get training in leadership skills	4.69 ^a (n=16)	3.50 ^a (n=8)	3.92 (n=13)
youngsters get training in debating	4.44 (n=16)	3.63 (n=8)	3.79 (n=14)
youngsters get training in entrepreneurship	3.50 (n=16)	4.25 (n=8)	3.31 (n=13)
youngsters get training in public speaking	4.44 ^b (n=16)	3.88 (n=8)	3.21 ^b (n=14)
<i>In our skills4life programme.....</i>			
<i>(M; range 1-5)^e</i>			
we focus on young women	3.56 ^a (n=16)	2.38 ^a (n=8)	3.00 (n=14)
we focus on specific high risk groups (other than young women)	3.00 (n=16)	2.89 (n=9)	3.14 (n=14)
we focus on sexuality	3.88 (n=17)	3.56 (n=9)	3.27 (n=15)

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d A higher score indicates more frequent training: 1=never; 2=rarely; 3=sometimes; 4=often; 5=always

^e A higher score indicates more agreement: 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

In the act4life (a4l) programme, Europe seems to be most active in the provision of a special youth action package, a fundraising toolkit and an advocacy toolkit. Some implementing partners from the Other countries reported that activities such as fundraising are not very common in their culture, which is illustrated by the following citations: *'Fundraising activities are perceived as something awkward and attributed to begging, thus youth is mostly involved in raising awareness'* and *'These kind of volunteering / advocacy activities by young people are not very common in our country' (Other countries)*.

Although all groups agree that they encourage youngsters to take action and that they offer youngsters various volunteering opportunities, the European a4l programmes seem to provide more support, for instance by offering youngsters an action plan or materials such as T-shirts, condoms, posters or stickers. They also give more opportunities to youngsters to register their plans (on internet or in a notebook).

Table 3.17. Implementation in practice: Implementation of the act4life programme (a4l) (nco's)

Implementation of act4life programme (a4l)	Implementing partners (nco's)		
	Africa	Europe	Other
<i>In our act4life programme.....</i>			
<i>(M; range 1-5)^d</i>			
We provide youngsters with a special youth action package	3.60 (n=15)	4.25 (n=8)	3.47 (n=15)
We provide youngsters with a fundraising toolkit	1.79 ^{a,b} (n=14)	3.80 ^a (n=10)	2.92 ^b (n=13)
We provide youngsters with an advocacy toolkit	2.87 (n=15)	4.10 (n=10)	3.00 (n=12)
<i>In our act4life programme.....</i>			
<i>(M; range 1-5)^e</i>			
Youngsters get the opportunity to register their plans (on internet or in a notebook)	3.07 ^a (n=15)	4.38 ^{a,c} (n=8)	2.93 ^c (n=15)
We encourage youngsters to take action	4.47 (n=15)	4.60 (n=10)	4.13 (n=15)
We support youngsters with a clear list of what we can offer them (an action plan, a T-shirt, condoms, posters, stickers, etc.)	4.07 (n=15)	4.78 ^c (n=9)	3.87 ^c (n=15)
We are available for youngsters when they need us	4.47 ^b (n=15)	4.90 ^c (n=10)	3.93 ^{b,c} (n=15)
We offer the youngsters various volunteering opportunities	4.14 (n=14)	4.60 (n=10)	3.80 (n=15)
We offer the youngsters a plan (or tips and tricks) to raise awareness in the community	4.20 ^b (n=15)	4.70 ^c (n=10)	3.50 ^{b,c} (n=14)

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d A higher score indicates a more frequent provision: 1=never; 2=rarely; 3=sometimes; 4=often; 5=always

^e A higher score indicates more agreement: 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

Table 3.18 gives insight in the media use for the dance4life campaign. Almost half of the responding African partners and almost a quarter of the European partners and the partners of the Other countries report that they do not use media for the dance4life campaign. In Africa, a mean number of 2.3 different media is used. Radio, newspapers and TV are mentioned most often. The European partners report a mean number of 4.2 different media, particularly the Internet, magazines, newspapers, posters, flyers and radio. In the Other countries a mean number of 3.7 different media is mentioned, with Internet, posters, radio, TV, flyers and newspapers on top.

Table 3.18. Implementation in practice: Media use for the dance4life campaign (nco's)

Media use for the dance4life campaign	Implementing partners (nco's)		
	Africa	Europe	Other
	(n=23)	(n=13)	(n=17)
<i>What kind of media do you use for the campaign in your country? (n (%) yes)</i>			
Flyers	7 (30.4%)	7 (53.8%)	7 (41.2%)
Posters	8 (34.8%)	8 (61.5%)	11 (64.7%)
Radio	11 (47.8%)	6 (46.2%)	8 (47.1%)
TV	9 (39.1%)	4 (30.8%)	8 (47.1%)
The movies	2 (8.7%)	1 (7.7%)	3 (17.6%)
Internet	2 (8.7%) ^{a,b}	9 (69.2%) ^a	12 (70.6%) ^b
Newspapers	11 (47.8%)	8 (61.5%)	7 (41.2%)
Magazines	3 (13.0%) ^{a,b}	9 (69.2%) ^{a,c}	6 (35.3%) ^{b,c}
Other, namely:			
Billboards	-	-	1 (5.9%)
conferences, youth faires or community events	1 (4.3%)	1 (7.7%)	-
free publicity, co-branding	-	1 (7.7%)	-
sponsor, guerilla action	-	-	-
transport ad	-	-	1 (5.9%)
	Africa	Europe	Other
	(n=23)	(n=13)	(n=17)
<i>Mean number of different media used by implementing partner for the dance4life campaign (range 0-9) (M, (sd))</i>	2.3 (2.7)	4.2 (3.1)	3.7 (2.6)

Number of different media used by implementing partner for the dance4life campaign (n (%))

No media use	11 (47.8%)	3 (23.1%)	4 (23.5%)
One medium	1 (4.3%)	1 (7.7%)	1 (5.9%)
Two different media	0 (0%)	0 (0%)	0 (0%)
Three different media	3 (13.0%)	1 (7.7%)	2 (11.8%)
Four different media	4 (17.4%)	3 (23.1%)	2 (11.8%)
Five different media	0 (0%)	2 (15.4%)	3 (17.6%)
Six different media	2 (8.7%)	1 (7.7%)	2 (11.8%)
Seven different media	1 (4.3%)	1 (7.7%)	3 (17.6%)
Eight different media	1 (4.3%)	1 (7.7%)	0 (0%)
Nine different media	0 (0%)	1 (7.7%)	0 (0%)

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

3.2.2.2. Registration

It is striking that less than a quarter of the African and European implementing partners register all aoc's. Although the majority has a registration system, they do not register all aoc's (Table 3.19). There are also big differences in who is responsible for the registration of aoc's. While the Other countries mainly report that their nco is responsible for this, more than half of the African respondents state that the (peer)educators or teachers are responsible for registration. In many cases in all groups, contact details such as address, email address or telephone, essential to keep contact, are not registered. The Other countries seem to do more checks whether the registration is correct than the African and the European countries. They also report more often that they provide their aoc's with a certificate. The latter is hardly reported by the European partners and only by one out of three African partners. We can conclude that the registration of participants and aoc's needs improvement.

Table 3.19. Implementation: Registration (nco's)

REGISTRATION	Implementing partners (nco's)		
	Africa	Europe	Other
<i>Do you maintain a register of the aoc's in your country (n (%))</i>	(n=20)	(n=12)	(n=17)
No, but we will start in 2009	2 (10.0%)	2 (16.7%)	1 (5.9%)
Yes, but not all of them	13 (65.0%)	8 (66.7%)	7 (41.2%)
Yes, we register all agents of change	5 (25.0%)	2 (16.7%)	9 (52.9%)
<i>Who is responsible for the registration of aoc's? (n (%))</i>	(n=20)	(n=12)	(n=17)
The OT team in the schools	5 (25.0%)	4 (33.3%)	2 (11.8%)
Our nco	2 (10.0%)	4 (33.3%)	13 (76.5%)
The (peer) educators/teachers	12 (60.0%)	0 (0%)	1 (5.9%)
Other (hct team, d4l office coordinator, local coordinators)	1 (5.0%)	4 (33.3%)	1 (5.9%)
<i>What details do you register of the Aoc's? (n (%) 'yes')</i>	(n=23)	(n=13)	(n=17)
Name	17 (73.9%)	9 (69.2%)	15 (88.2%)
Address	11 (47.8%)	2 (15.4%)	8 (47.1%)
Telephone	9 (39.1%)	5 (38.5%)	13 (76.5%)
E-mail	2 (8.7%)	9 (69.2%)	13 (76.5%)
The different components in which the aoc's participated	10 (43.5%)	2 (15.4%)	9 (52.9%)
What they did in d4l	4 (17.4%)	5 (38.5%)	7 (41.2%)
Other (age, sexe, school, no activities, don't know)	2 (8.7%)	2 (15.4%)	3 (17.6%)
<i>How do you register aoc's? (n (%) 'yes')</i>	(n=23)	(n=13)	(n=17)
Per aoc	7 (30.4%)	8 (61.5%)	10 (58.8%)
Per class	2 (8.7%)	2 (15.4%)	2 (11.8%)
Per school	15 (65.2%)	5 (38.5%)	8 (47.1%)
Other (e.g., 'don't know', 'via consent forms')	2 (8.7%)	2 (15.4%)	1 (5.9%)
<i>Do you give the aoc's a certificate of some kind? (n (%))</i>	(n=20)	(n=12)	(n=17)
Yes (n (%) 'yes')	6 (30.0%) ^a	2 (16.7%) ^c	11 (64.7%) ^{a,c}

<i>How do you know whether the registration is correct? (n (%))</i>	(n=23)	(n=13)	(n=17)
We rely on the people involved in this	10 (43.5%)	4 (30.8%)	8 (47.1%)
We check this with the organisations involved	2 (8.7%)	2 (15.4%)	8 (47.1%)
We check this with the aoc's	10 (43.5%)	3 (23.1%)	5 (29.4%)
Other (don't know, only involved in event, rely on registers VPEs)	3 (13.0%)	4 (30.8%)	1 (5.9%)

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

3.2.3. Continuation

The actual contact between the aoc's and the implementing partners after the schools4life programme has finished provides insight into the aoc's' involvement with and commitment to dance4life. The implementing partners of all groups completely agree that 'it is important to stay in contact with the youth after the program is finished'. A large majority of the partners states that they need support from dance4life international (d4l-int) to stay in contact with the youth. The African and European countries report that they have less than twice a year contact with all aoc's at this moment. In Europe, they relatively often develop a special group of aoc's who stay active. The nco's have a mean number of six times a year contact with this group of youngsters. Newsletters and Internet are often used in Europe to keep contact, but less often in the Other countries and hardly in Africa. African partners who stay in touch with the aoc's mostly visit them at school. This is confirmed by the African participants (aoc's), who report that they mainly stay in contact with dance4life by personal contact, while the European respondents mention Internet and e-mail as the main way to keep in touch. Almost 60% of the African participants and one third of the European and Other participants say that the last time they had contact with dance4life was more than a couple of months ago. It is remarkable that only one third of the African respondents and half of the respondents from Other countries is satisfied with the amount of contact with dance4life. A large majority of respondents would like to have more contact. One third of the African respondents even agree on the statement 'I would love to get in contact, but I don't know how'.

Regarding the continuation of the program itself, the implementing partners have a great confidence in the continuation during the next three years, although the access to potential sponsors and partners might be improved (Table 3.20).

Table 3.20. Continuation (nco's and aoc's)

CONTACT BETWEEN PARTICIPANTS AND IMPLEMENTING PARTNER AFTER THE PROGRAMME FINISHED	Implementing partners (nco's)		
	Africa (n=16)	Europe (n=11)	Other (n=16)
Do you think it is important to stay in contact with the youth after the program is finished? (<i>M</i> importance, range 1-5) ^d	4.69	4.82	4.69
Do you need support from d4l int to stay in contact with the youth? (n (%) 'yes')	12 (75,0%)	7 (63,6%)	12 (75,0%)
<i>Does nco stay in contact after the d4l programme has finished?</i>	(n=9)	(n=9)	(n=12)
With <i>all</i> aoc's who participated? (<i>M</i> times per year)	1.56	1.63	4.64
With <i>some</i> aoc's who participated (<i>M</i> times per year)	1.78	6.00	4.64
<i>How do you stay in contact with the youth after the program is finished? (n (%) 'yes')</i>	(n=23)	(n=13)	(n=17)
We do not stay in contact	6 (26.1%) ^{a,b}	0 (0%) ^a	1 (5.9%) ^b
By inviting them to the d4l event	5 (21.7%) ^{a,b}	6 (46.2%) ^a	11 (64.7%) ^b
By sending newsletters	1 (4.3%) ^{a,b}	8 (61.5%) ^{a,c}	4 (23.5%) ^{b,c}
By our internet site	1 (4.3%) ^{a,b}	8 (61.5%) ^{a,c}	6 (35.3%) ^{b,c}
By post	0 (0%)	1 (7.7%)	0 (0%)
By developing a special group of Aoc's who stay active	1 (4.3%) ^{a,b}	10 (76.9%) ^{a,c}	7 (41.2%) ^{b,c}
By visiting them at school	9 (39.1%)	4 (30.8%)	3 (17.6%)
By phone (text messages)	2 (8.7%)	4 (30.8%)	5 (29.4%)
Other	2 (8.7%)	4 (30.8%)	3 (17.6%)

	Participants (aoc's)		
	Africa	Europe	Other
<i>Do you have contact with other aoc's?</i>	(n=400)	(n=85)	(n=23)
No contact with other aoc's	206 (51.5%)	37 (43.5%)	10 (43.5%)
Contact with aoc's from 1 country	138 (34.5%)	27 (31.8%)	6 (26.1%)
Contact with aoc's from 2 countries	12 (3.0%)	4 (4.7%)	0 (0%)
Contact with aoc's from 3 countries	9 (2.3%)	4 (4.7%)	1 (4.3%)
Contact with aoc's from 4 countries	35 (8.8%)	13 (15.3%)	6 (26.1%)
<i>How do you stay in contact with d4I after the program finished? (n (%)) 'yes'</i>	(n=400)	(n=85)	(n=23)
Email	17 (4.3%)	41 (48.2%)	11 (47.8%)
Internet	31 (7.8%)	41 (48.2%)	9 (39.1%)
By post	8 (2.0)	6 (7.1)	1 (4.3)
Personal contact	145 (36.3%)	14 (16.5%)	5 (21.7%)
Phone	83 (10.8%)	8 (9.4%)	6 (26.1%)
<i>Is the amount of contact with d4I OK for you? (n (%))</i>	(n=387)	(n=74)	(n=20)
Yes, fine	126 (32.6%)	49 (66.2%)	10 (50.0%)
There could be more	103 (26.6%)	13 (17.6%)	7 (35.0%)
No, I would love to get in contact, but I don't know how	130 (33.6%)	4 (5.4%)	1 (5.0%)
No, I would love to hear from them once in a while	23 (5.9%)	7 (9.5%)	2 (10.0%)
No, I tried to make contact but they never returned my request(s)	5 (1.3%)	1 (1.4%)	0 (0%)
<i>When was the last time you had contact with d4I? (n (%))</i>	(n=376)	(n=69)	(n=20)
Last week	59 (15.7%)	11 (15.9%)	7 (35.0%)
A few weeks ago	43 (11.4%)	15 (21.7%)	4 (20.0%)
1-2 months ago	54 (14.4%)	18 (26.1%)	2 (10.0%)
A couple of months ago	176 (46.8%)	21 (30.4%)	5 (25.0%)
A year ago	33 (8.8%)	1 (1.4%)	1 (5.0%)
Other	11 (2.9%)	3 (4.3%)	1 (5.0%)

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	Implementing partners (nco's)		
	Africa (n=21)	Europe (n=12)	Other (n=17)
<i>Individual items (scale 1-5) ^e</i>			
I am quite sure that I can continue the d4l programme for the next 3 years	4.00	4.33	3.82
After Red Zebra left, the continuation of the heart connection tour's train the trainer programme went well	4.19	4.58	3.94
Thanks to the d4l International organisation we have good access to potential sponsors and partners	3.67	3.33	3.29
<i>Individual items (scale 1-5) ^f</i>			
Internal disagreements in our NCO threatens the continuation of the d4l programme	2.48	2.17	2.24
Our NCO does not want to stage the d4l event next year	2.05	1.83	1.35

^a Significant diff between Africa and Europe

^b Significant diff between Africa and Other countries

^c Significant diff between Europe and Other countries

^d A higher score indicates more perceived importance: 1=not important at all; 2=not very important; 3=neither unimportant nor important; 4=quite important; 5=very important

^e A higher score indicates more agreement: 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

^f A lower score indicates more agreement: 1=completely disagree; 2=disagree; 3=neutral; 4=agree; 5=completely agree

4. Conclusions

The aim of this study was to investigate to what extent the different components of the dance4life programme are implemented by the various collaborating partners and to identify the opportunities and challenges that dance4life faces in the implementation of their HIV prevention programme and the establishment of a social youth movement.

4.1. Representativeness of respondents

Before discussing the main conclusions it is important to mention that the overall response was low among some of the target groups: 5.6% of participants (aoc's) approached by e-mail (n=107) responded as compared to 89.2% of aoc's given a written questionnaire (n=395) and 51.5% of the implementing partners (nco's). The results, especially from aoc's from non-African countries (who were approached by e-mail), cannot be described as being highly representative of the target group, so they should be interpreted with caution.

The aoc's in African countries received a written questionnaire from the implementing partners, resulting in a much higher response rate (89.2%) than in Europe and the Other countries, where aoc's were approached by e-mail (5.9% response). The respondents approached by e-mail were free to decide whether they filled in the questionnaire, while the aoc's received a written questionnaire in person, which might in part explain the huge difference in response rates between the African countries and the European and Other countries. However, the low response to the digital version also prompts the question of whether the aoc's are sufficiently engaged with the dance4life programme. Given that dance4life's main goal is to establish a social youth movement in which aoc's actively participate, a much higher response was to be expected. The respondents were probably the most committed aoc's, so these respondents cannot be considered as representative for the aoc's from Europe and the Other countries. Further research should be conducted among a more representative group of aoc's in Europe and the Other countries, including youngsters who did not become an aoc or who are registered as an aoc, but not active (any more). These youngsters might provide different opinions and views on the strengths and weaknesses of the programme and its implementation.

The response from implementing partners was moderate (51.5%), but above the average response rates in social science research. In their meta-

analyses, Sheenan (2001) and Cook *et al.* (2000) report a variation in digital response rates among the general population of between 24.0 and 34.6%. Implementing partners are a specific target group that is committed to dance4life so a higher response was to be expected, but the response rate was still high enough to consider the data reliable.

4.2. Overall conclusions of the dance4life process evaluation

The results indicate that, from a conceptual viewpoint, the dance4life programme is fairly successful as a preventive health programme. The answers of implementing partners and the aoc's revealed a very positive attitude towards the dance4life concept and the programme's various components. These combined results are important prerequisites for achieving an adequate implementation of the programme. Neither gender inequality and cultural variations nor environmental and social factors seem to hamper the implementation too seriously, although gender inequality requires further in-depth research to pinpoint potential areas for improvement. However, the social movement concept and programme need more attention, particularly with regard to the continued involvement of aoc's. Moreover, the fulfilment of a robust leadership role, for instance by ambassadors, is essential to strengthen the social youth movement (see paragraph 4.2.1). Room for further improvements at the organisational level are also indicated, such as closer monitoring by dance4life international, further professionalisation of staff, and strategic planning to improve collaboration between the implementing partners (see paragraph 4.2.2). With regard to content, the quality of the schools4life programme could be improved. Particular attention should be devoted to the act4life components, because these are crucial to establishing a movement and ensuring its continuity (see paragraph 4.2.3).

4.2.1. Social Movement

The results reveal that respondents generally perceive the dance4life as a programme that contributes to the empowerment of young people and collective efficacy, though among the participants there is a lack of knowledge and awareness of the main goal of dance4life (i.e. establishing a social youth movement). The results demonstrate that staying in contact after the schools4life programme requires greater consideration. Many aoc's indicated that they were keen to stay in contact more often and to continue participation after the programme finished, or were waiting for

dance4life to return. This is not, however, the idea of a social movement, because activities should continue without the actual presence of dance4life. These results beg the question of whether the message of continuity in being an activist and a member of the movement is given sufficient attention during (all components of) the programme. The conditions required to establish an actual movement should therefore be provided, to enhance the sense among aoc's that they belong to a network after the schools4life programme and continue in their activities. At present there are doubts if this is the case.

It is, moreover, unclear what meaning the aoc's attribute to their title and whether or not they interpret being an aoc as being a member of a social youth movement. Many aoc's gave an incorrect answer when they were asked 'When are you an aoc?' Almost half of the respondents answered, 'When I understand HIV and AIDS problems.' It is still unclear whether they understand that they are regarded as members of a social youth movement, even if they gave the correct answer: 'When I participate in 2 or 3 components of the schools4life dance4life programme.' It is also remarkable that some implementing partners do not use the term 'aoc', which indicates that youngsters from these regions are unable to identify themselves as an aoc or as part of a global network of other aoc's. This implies that they are easily confused about the definition of an aoc and what it entails in the long term.

If there is no continuation of activities or an engrained sense of membership then we cannot speak of a member of a social movement according to accepted definitions (McAdam & Snow, 1997; Melucci, 1996). In this regard, it is interesting to note the difference between interest groups and social movements as described by McAdam and Snow (1997): 'Interest groups pursue their collective objectives almost exclusively through institutionalised means, such as lobbying and soliciting campaign contributions, whereas social movements are more or less forced to resort to the use of non-institutional means or tactics, such as conducting boycotts, blockades, encampment, and sit-ins, in pursuit of their collective ends.' It seems that aoc's are for the moment part of an interest group rather than a social movement.

Dance4life wants aoc's to continue with their activities after the programme proper has finished, but the results of this process evaluation indicate that at the moment this is not sufficiently common or widespread; collective activities in the wake of the programme seem to be lacking. For dance4life this means that aoc activities such as volunteering, advocacy, awareness-raising and fundraising should continue after the schools4life programme has finished (in the guise of extra-institutional means), probably in a more

collective or networked form. Such activities could be stimulated (and implemented) to strengthen the social youth movement that dance4life is endeavouring to establish.

A further impediment to establishing a social youth movement is that a considerable proportion of aoc's are not registered (as yet), which makes it impossible to remain in contact with them. There is, moreover, no systematic tracking of related activities that are prompted or facilitated by aoc's in the wake of the schools4life programme. Because there is no ongoing contact with the dance4life organisation, the potential for aoc's to continue activities is unknown. This is a missed opportunity for dance4life and it is therefore strongly recommended that they involve the aoc's and their activities in the overall movement, thus giving them ongoing support and motivating them to continue.

Leadership and leaders are essential to establishing a movement (McAdam & Snow, 1997; Melucci, 1996). Dance4life has associated ambassadors and/or public figures with its programme and these could fulfil the leadership role. Results show that the aoc's are able to name several famous people who represent dance4life, and according to respondents these figures are a good match with dance4life. DJ Tiesto was primarily mentioned by European aoc's, while figures such as Nelson Mandela, Kofi Annan and Desmond Tutu were often mentioned by the aoc's from African countries (as well as some local famous figures). Although the aoc's mentioned these world leaders as representatives of dance4life they are not fulfilling the tasks that one might expect of the leaders of the dance4life social youth movement, because they represent a much broader goal and are associated with bigger, overarching global ideals. This means they are not specifically recognised as the leaders of the dance4life social youth movement, something which would motivate aoc's to become part of it. This raises the question of whether the current ambassadors and famous people mentioned by the aoc's are perceived as leaders by the youngsters and whether they are the ideal figures to serve as active leaders.

Dance4life does not involve or profile these famous figures as the leaders of a social movement, because the people concerned are, as far as we know, primarily deployed by dance4life as marketing and promotional figureheads. The leadership role and who should fulfil this on the international and national level is an area that requires clearer specification from dance4life in the context of its effort to establish a thriving social youth movement.

Given that the respondents (nco's and aoc's) showed a very positive attitude towards dance4life and that in many countries there is a conflictual

situation with governmental institutions there are some strong conditions to inspire and motivate the aoc's to establish a social movement.

Three key social movement aspects require further research and/or attention from dance4life

- What are the essential ingredients for your social youth movement?
- How does dance4life strengthen this in the implementation? (e.g. improving communication of the main goal, registration of aoc's and maintaining contact with them)
- How will dance4life fill the leadership role that is essential to strengthening the social youth movement?

4.2.2. Quality management at the organisational level

The results show that the manuals and instructions are clear and effective, though they could be improved. The lack of monitoring of nco's by dance4life international, especially the perceived lack of contact with dance4life international, is of more serious concern. Further research is needed to gain greater insight into the underlying reasons for dissatisfaction among the nco's and how communications and monitoring in general might be improved.

Facilitating contact between implementing partners contributes to the strengthening of the dance4life network, as does mutual assistance with the everyday obstacles the partners face. However, contact between the implementing partners is in general not very high. The closest contact is among the African implementing partners; the lowest among the Other countries. This finding is not too surprising, given that the geographical spread is sometimes great and a specific region might be uninvolved (as with African and European countries). Greater contact between implementing partners to allow the exchange of experiences among aoc's and to bring aoc's into contact with one another would contribute to establishing an international social youth movement. It is therefore important to encourage this, most especially by organising more collective activities.

The results reveal that the on-the-ground teams which work with the implementing partners harbour some doubts about the professionalism of the staff, i.e. (peer) educators. On the other hand, aoc's were fairly

positive, reporting that they were satisfied with the instructions given and that (peer) educators/teachers were interesting to listen to. Less clear was what the (peer) educators/teachers expected of aoc's and this will probably have consequences for the future activities of the aoc's. Gijs *et al.* (2008) state that in the Netherlands the quality of sexual health programmes is most dependent on the individual teachers; too many teachers leave out essential disease-prevention activities, such as demonstrations and skills training, because they are unaware how to go about it. It is beyond question that the professionalism of staff contributes hugely to the quality of implementation of the various components of the programme, but more in-depth research should be carried out to gain greater insight into this issue. We recommend taking into consideration that different people (with different skills and persuasion effects) should be the instructors/teachers for distinct components of the programme. For example, a doctor or teacher might be a good instructor in health-related facts and knowledge, but to achieve an attitude change a peer educator is a more appropriate instructor and role model. See Step 2 of the Intervention Mapping protocol and paragraph 4.3 (Gijs *et al.*, 2008). Further research could provide valuable information for developing dance4life guidelines for educator skills and prerequisites, which do not yet exist.

Three key organisational aspects require further research and/or attention from dance4life:

- Monitoring of the implementing partners by dance4life international
- Strategic planning to improve collaboration between implementing partners (mainly for strengthening the network to realise a social movement)
- Professionalism of staff

4.2.3. Quality of the schools4life programme

The combined ingredients of dance4life's schools4life programme should provide a robust HIV and AIDS prevention programme (at least if the components are implemented adequately). There are some strong elements, such as making use of peer educators, establishing a good balance between fun and content (entertainment-education) that inspires and motivates participants, and learning essential behavioural skills that

youngsters can employ in becoming strong individuals and/or aoc's. The programme provides robust formats that cover the essential elements for each component, such as empowering girls (s4l) and breaking taboos (s4l), but also for creating a safe environment to speak freely (hct). All these elements and the entertainment-education approach contribute to an HIV and AIDS prevention programme from a positive health perspective, which is absent in most other sexual prevention programmes, which still over-emphasise negative consequences (Schaalma, Reinders and Kok in Gijs *et al.*, 2008, express a similar point of view). However, a potential risk of focusing too much on the programme's entertainment aspect is that funding bodies and other stakeholders might not be sufficiently aware of the highly effective schools4life programme that dance4life operates in the field of HIV and AIDS prevention. The fun component might seem to prevail over the serious educational aspects and content, even though this is not the case. Raising the profile of the strong content of the schools4life programme could prevent such misconceptions arising. According to several social psychological models, including the Information Processing Model (McGuire, 1981), the sequence of the four components (hct → s4l → a4l → d4l event) is a key element for achieving behavioural change that is present within the schools4life programme.

The nco staff indicated that the programme in general is clear and fairly easy to implement, so it should not present barriers to implementation. Unfortunately these components have not all been implemented yet. Without the implementation of all components the programme lacks the synergy of their combination and is weakened. The intention of many implementing partners to implement the full programme in 2009 bodes well.

The content component that demands most attention is act4life. This is the least clearly defined component for the implementing partners and is therefore difficult to implement (they struggle to determine what exactly to implement and how). Act4life is a crucial factor in propagating an active aoc, because mastery experience (in act4life) is an essential element that can contribute to future behavioural change (Bandura, 1986). The encouragement and stimulation from (peer) educators during act4life to continue with future activities outside the dance4life programme (continuation) is another aspect that could be made more explicit. As mentioned, it is a challenge for aoc's to remain motivated and continue with their activities without links to a network.

A potential threat to the global implementation of the programme is that youngsters from developed (Western) countries might perceive dance4life

as a programme primarily for helping the poor in developing countries, rather than it being as much a programme for them, intended to empower them to assume personal responsibility for safety precautions and offering them the personal benefits of being a member of the movement. The severe life-threatening HIV and AIDS pandemic in African countries might be grabbing most of their attention and the emphasis on fundraising for 'others' might be feeding the notion that this programme exists only to help others. This is the opposite of what dance4life is striving for. The content of the dance4life programme in Europe should be evaluated in greater detail to gain more insight into the motives and perceptions of youngsters from developed countries, thereby ascertaining whether adjustments are needed in order for aoc's to perceive dance4life as a programme which also embraces their personal interests.

Two major aspects of the dance4life programme's content require further research and/or attention:

- Implementation of all the components in every country.
- Act4life needs to provide clearer specifications with regard to goal-setting and content. Greater clarity and facilitation should be provided for the implementing partners. If properly structured this could become a crucial stepping stone, encouraging youngsters to continue as active aoc's after the schools4life programme has been completed.

4.3. Recommended approach for further improvements

In conclusion, the main points of interest in the managerial and research domains are:

- 1) Continued involvement of aoc's (e.g. how does the organisation ensure that the students are willing or able to remain involved after the programme has ended in school, what elements underlie the continued involvement of the aoc's, what do the aoc's expect and what are they prepared to undertake?);
- 2) Quality management at the organisational level (e.g. how does the organisation guarantee the quality of the implementation, is the implementation in line with the dance4life concept, how could the organisation improve their monitoring system and skills, i.e. their support for the implementing partners during the implementation process?);
- 3) Quality of the schools4life programme (e.g. how could the implementation of all the components in all countries be ensured, how could act4life be improved?).

Besides using background information about social movement theories and psychological models to strengthen the dance4life programme and improve implementation, we recommend that dance4life also makes use of Intervention Mapping. This provides a professional and practical framework for setting up and improving prevention programmes (Gijs *et al.*, 2008). The Intervention Mapping protocol is comprised of five steps that partly overlap during development. The steps are 1) set specific programme goals; 2) select theoretical methods, prevention strategies, activities and materials; 3) design, produce and pretest the programme; 4) devise an evidence-based theoretical strategy for distribution and implementation of the programme, and 5) make a plan for process and cumulative evaluation. This does not mean that dance4life has to start from scratch, but following these steps will provide a more rigorous approach and compel the staff involved to consider the requisite topics and questions, which will ultimately contribute to the strengthening the programme. Last but not least, in future research we recommend investigating the cost-effectiveness of the dance4life programme.

Acknowledgements

We would like to thank the staff from dance4life international, particularly Klaartje Spijkers, for the nice collaboration and the support we received. We got access to the dance4life monitoring system and received all additional information we needed. We are also very grateful to dance4life international for the support in approaching aoc's and nco's. Furthermore, we would like to thank all participating staff members of nco's and participants (aoc's) for completing the extensive questionnaire. We also thank the nco's, particularly those of Kenya, Sierra Leone, Tanzania, Uganda, Zimbabwe, Great Britain, Mexico, Russia and Vietnam, for their efforts in the data gathering. Last but not least, we thank Oxfam Novib for funding this study.

Literature

- Ajzen, I. (1991). The theory of planned behavior. *Organisational Behavior and Human Decision Processes*, 50 (2), 179-211.
- Ajzen, I. (2002). Perceived behavioral control, self-efficacy, locus of control, and the theory of planned behavior. *Journal of Applied Social Psychology*, 32, 665-683.
- Allen, T., & Heald, S. (2004). Policy in Africa: What has worked in Uganda and what has failed in Botswana? *Journal of International Development*, 16 (8), 1141-1154.
- Applegate, M. (1998). AIDS education for adolescents: A review of the literature. *Journal of HIV/AIDS Prevention & Education*, 2 (1), 5-29.
- Bandura, A. (1977). Self-efficacy: towards a unifying theory of behavioral change. *Psychological review*, 84 (2), 191-215.
- Bandura, A. (1986). *Social foundations of thought and action: a social cognitive theory*. Englewood Cliffs, NJ: Prentice-Hall.
- Bandura, A. (1997). *Self-efficacy: the exercise of control*. New York: Freeman.
- Bandura, A. (2004). Social cognitive theory for personal and social change by enabling media. In A. Singhal, M.J. Cody, E.M. Rogers, M. Sabido (Eds), *Entertainment-Education and Social Change*. New Jersey: LEA, Mahwah.
- Bliss, J. & Emshoff, J.G. (2002). *Workbook for designing a process evaluation*. Georgia: Georgia State University, Department of Human Division of Public Health.
- Bouman, M.P.A. (1999). *The turtle and the peacock: The entertainment-education strategy on television*. Doctoral dissertation. Wageningen Agricultural University, Wageningen, The Netherlands.
- Bouman, M. (2008). *Experience sharing and cross-learning among Dance4Life partners: an evaluation paper*. Unpublished manuscript, Centrum Media & Gezondheid, Gouda, The Netherlands.
- Bowie, L., Bronte-Tinkew J. (2008). *Process evaluation: a guide for out-of-school time practitioners*. Publication no. 2008-01. Washington DC: Child trends.
- Burgio, L.D., Corcoran, M., Lichstein, K.L., Nichols, L., Czaja, S., Gallagher-Thompson, D., Bourgeois, M.S., Stevens, A., Ory, M. & Schulz, R. (2001). Judging outcomes in psychosocial interventions for dementia caregivers: the problem of treatment implementation. *The Gerontologist*, 41 (4), 418-489.

- Cohen, J. & Tate, T. (2005). *The less they know, the better: Abstinence-only HIV/AIDS programs in Uganda*. New York: Human Rights Watch (Human Rights Watch, Vol 17, no 4).
- Dance4life (2008). *Annual Report*. Amsterdam: dance4life international.
- Cook, C., Heath, F. & Thompson, R.L. (2000). A Meta-analysis of response rates in web- or internet-based surveys. *Educational and Psychological Measurement*, 60 (6), 821 - 836.
- De Vries, H., Mudde, A., & Dijkstra, A. (2000). The attitude-social influence-efficacy model applied to the prediction of motivational transition in the process of smoking cessation. In P. Norman, C. Abraham & M. Conner (Eds), *Understanding and changing health behaviour: From health beliefs to self-regulation* (pp. 165-187). Amsterdam: Harwood Academic Publishers.
- Devine, P.G., & Hirt, E.R. (1989). Message strategies for information campaigns: A social-psychological analysis. In C.T. Salmon (Ed.), *Information campaigns: Balancing social values and social change* (pp. 229-258). Newbury Park, CA: Sage.
- Finnema, E.J. (2000). *Emotion-oriented care in dementia: a psychosocial approach*. Amsterdam: Free University.
- Eagly A.H., & Chaiken, S. (1993). *The psychology of attitudes*. Fort Worth, Tx: Harcourt Brace Jovanovich College Publishers.
- Gallant, M., & Maticka-Tyndale E. (2004). School-based HIV prevention programmes for African youth. *Social Science & Medicine*, 58 (7), 1337-1351.
- Glasgow, R.E., Vogt, T.M., & Boles, S.M. (1999). Evaluating the public health impact of health promotion interventions: the RE-AIM framework. *American Journal of Public Health*, 89 (9), 1322-1325.
- Gijs, L., Gianotten, W., Vanwesenbeeck, I., & Weijnenborg, P. (2004). *Seksuologie*. Houten: Bohn Stafleu van Loghum.
- Himmelfarb, S. (1993). The measurement of attitudes. In: Eagly, A.H. & Chaiken, S. (eds.), *The psychology of attitudes* (Chapter 2). Fort Worth: Harcourt Brace Jonavich College Publishers.
- Houts, P. S., Doak, C. C., Doak, L. G. & Loscalzo, M. J. (2006). The role of pictures in improving health communication: A review of research on attention, comprehension, recall and adherence. *Patient Education Counseling*, 61, 173-190.
- Judd, C.M., Smith, E.R., & Kidder, L.H. (1991). *Research Methods in Social Relations*. Fort Worth: Harcourt Brace Jovanovich College Publishers.
- Kirby, D. (2000). School-based interventions to prevent unprotected sex and HIV among adolescents. In J.L. Peterson & R.J. DiClemente

- (Eds.), *Handbook of HIV prevention* (pp. 83-101). New York: Kluwer Academic/Plenum Publishers.
- Lechner, L., Kremers, S., Meertens, R., & De Vries, H. (2007). Determinanten van gedrag. In J. Brug, P. van Assema, & L. Lechner (Eds.), *Gezondheidsvoorlichting en Gedragsverandering* (pp. 75-106). Assen: Van Gorcum.
- McAdam, D. & Snow D.A. (1997). *Social movements: readings on their emergence, mobilization, and dynamics*. Los Angeles: Roxbury Publishing Company.
- McGuire, W.J. (1981). Theoretical foundations of campaigns. In R.E. Rice & W.J. Paisley (Eds.), *Public communication campaigns* (pp. 41-70). Beverly Hills, CA: Sage.
- McGuire, W. J. (2001). Input and output variables currently promising for constructing persuasive communications. In R.E. Rice & C.K. Atkins (Eds.), *Public communication campaigns* (3rd ed., pp. 22-48). Newbury Park, CA: Sage.
- Maibach, E.W., & Cotton, D. (1995). Moving people to behavior change: a staged social cognitive approach to message design. In E.W. Maibach & R.L. Parrott (Eds.), *Designing health messages: Approaches from communication theory and public health practice* (pp. 41-65). Thousand Oaks, CA: Sage.
- Melucci, A. (1996). *Challenging codes: Collective action in the information age*. Cambridge: Cambridge University Press.
- North, A.C., Hargreaves, D.J., & O'Neill, S.A. (2000). The importance of music to adolescents. *British Journal of Educational Psychology*, 70 (2), 255 – 272.
- Osgood, C. E., Suci, G. J., & Tannenbaum, P. H. (1975). *The Measurement of Meaning*. Urbana: University of Illinois Press.
- Philips, L.R., van Ort, S. (1995). Issues in conducting intervention research in long-term care settings. *Nursing Outlook* 43 (6), 249-253.
- Prochaska, J.O. (1994). Strong and weak principles for progressing from precontemplation to action on the base of twelve problem behaviors. *Health Psychology*, 13, 1-5.
- Singh, S.N., Rothschild, M.L., & Churchill, G.A. (1988). Recognition versus recall as measures of television commercial forgetting. *Journal of Marketing Research*, 25 (1), 72-80.
- Schaalma, H.P. & Kok, G. (2001). A school AIDS prevention program in the Netherlands. In: K. Bartholomew, G.S. Parcel, G. Kok, & N. Gottlieb (eds). *Intervention Mapping. Designing theory and evidence-based health promotion programs* (pp. 353-386). Mountain View, CA: Mayfield.

- Schrijnemaekers, V.J.J., van Rossum, E., van Heusden, M.J.T., Widdershoven, G.A.M. (2002). Compliance in a randomized controlled trial: the implementation of emotion-oriented care in psycho-geriatric facilities. *Journal of Advanced Nursing* 39 (2), 182-189.
- Sheehan, K.B. (2001). E-mail survey response rates: a review. *Journal of Computer-Mediated Communication*, 6, 2. Retrieved from <http://jcmc.indiana.edu/vol6/issue2/sheehan.html>
- Singhal, A. & Rogers, E.M. (1999). *Entertainment-education: A Communication Strategy for Social Change*. Mahwah, NJ: Lawrence Erlbaum Associates.
- Singhal, A. & Rogers, E.M. (2003). *Combating Aids: communication strategies in action*. New Delhi: Sage Publications India.
- Singhal, A., Cody, M.J., Rogers, E.M. & Sabido M. (2004). *Entertainment-education and social change*. New Jersey: Lawrence Erlbaum Associations.
- Theunissen, N.C.M., Te Pas, S.M.E., & Friele, R.D. (2003). *Evaluatie Implementatiemonitor ZonMW. Onderzoek naar de relatie tussen implementatieplannen en hun uitkomsten [Evaluation of the model for Implementation of Change in Health Care. A study into the relationship between implementation plans and their results]*. Utrecht: NIVEL.
- Thurnstone, L.L. (1927). A law of comparative judgment. *Psychological Review*, 34, 237-286.
- UNAIDS (2008). *2008 report on the global Aids epidemic*. Geneva: UNAIDS.
- Van Weert, J.C.M., Kerkstra, A., Van Dulmen, A.M., Peter, J.G., Bensing, J.M., & Ribbe, M.W. (2004). The implementation of snoezelen in psychogeriatric care: an evaluation through the eyes of caregivers. *International Journal of Nursing Studies*, 41, 397-409.
- Velicer, W.F., Fave, J.L., Prochaska, J.O., Abrams, D.B., Emmonds, K.M., & Pierce, J.P. (1995). Distribution of smokers by stage in three representative samples. *Preventive Medicine*, 24, 401-411.