



Curtin University

SiREN Sector Needs Assessment Survey

WA Centre for Health Promotion Research
December 2014

WA Sexual Health and Blood Borne Virus Applied Research and Evaluation Network (SiREN)

The WA Sexual Health and Blood-borne Virus Applied Research and Evaluation Network (SiREN) project is coordinated by the Western Australian Health Promotion Research Centre (WACHPR) and supported by the Western Australian Department of Health (WA Health) Sexual Health and Blood-borne Virus Program (SHBBVP).

Objectives

The objectives of SiREN are:

1. To identify sexual health and blood-borne virus (BBV) public health research priorities in Western Australia (WA) for the priority populations specified in the national sexually transmitted infections (STIs), hepatitis and HIV strategies and the Western Australian model of care implementation plans.
2. To develop partnerships between WA-based researchers, the WA Health SHBBVP and the national sexual health and BBV research centres.
3. To develop and enhance partnerships between government and non-government service providers, researchers and policy makers working towards the prevention and control of STIs and BBVs; and
4. To contribute to an evidence base to inform WA Health's policy and decision making for the prevention and control of STIs and BBVs within WA.
5. To contribute to the national sexual health and BBV research agenda, in particular development of the national STI, hepatitis and HIV strategies 2014-2017.

Summary of findings

In summary, the results of the survey indicated high interest in the sector for research and evaluation. Most (91%) considered research to be very important or important in their current role. The large majority (98%) also considered evaluation to be very important or important.

While around two in three (68%) were very confident or confident in undertaking research, 29% were not. Similarly, while most (79%) were confident in undertaking evaluation activities, one in five (20%) were not. Most (61%) respondents reported it very likely or likely that they would be able to undertake research activities. However, one in three (35%) indicated that they would not. Of note, findings indicated that those who are very likely or likely to undertake research activities are also very confident or confident in undertaking it. Those unlikely to undertake research activities also tend to lack confidence in undertaking it. When looking at evaluation, almost all (85%) indicated that they were very likely or likely to undertake evaluation activities over the coming 12 months. Few (12%) were not

likely to do so. Those very likely or likely to undertake evaluation activities tend to be more confident in undertaking it. Four of the ten respondents indicated that they were unlikely to undertake evaluation also lacked confidence in doing it.

Perceived enablers to research and evaluation activities included internal encouragement (75%), motivated staff (72%) and external resources (65%). A lack of time (82%) was the top perceived barrier to research and evaluation being undertaken, followed by a lack of funding opportunities (61%) and limited research and evaluation knowledge and skills (41%).

Additional training or toolkit resources topics of most interest to respondents over the next 12 months were developing an evaluation plan (50%) and planning and evaluating programs (46%).

Ratings of the SiREN website indicated high (63%) usage over the previous 12 months. Respondents reported that the website performed well in regards to navigation, usefulness, content and relevance; however some room for improvement exists.

The findings are being reviewed by the SiREN project and will be used to prioritise future activities and resource development that caters to the needs of the WA SHBBV sector.

Contents

1.0 Introduction	5
2.0 Methodology	5
3.0 Results (2014)	6
4.0 Comparing survey rounds	14
5.0 Strengths and limitations of the survey.....	15
5.0 Recommendations	16
6.0 Appendix.....	18

List of Tables

Table 1. Awareness and usage of SiREN services and resources	12
Table 2. Evaluating the SiREN website performance	14
Table 3. Comparison of results from the 2012 and 2014 survey rounds.....	15

List of Figures

Figure 1: Count of organisation type.....	6
Figure 2: Importance of research and evaluation	7
Figure 3: Enablers of research and evaluation in current role	8
Figure 4: Barriers to research and evaluation in current role.....	8
Figure 5: Confidence in undertaking research and evaluation	9
Figure 6: Likelihood of undertaking research and evaluation within the next 12 months	10
Figure 7: Key SHBBV priority research areas over the next 12 months.....	11
Figure 8: Additional training or toolkit resources of interest	13

1.0 Introduction

The purpose of the SiREN Sector Needs Assessment Survey was to determine the training, resources and skills needs of Western Australian (WA) health organisations involved in sexual health promotion or the control and prevention of blood-borne viruses. The results of this survey will assist the SiREN project to prioritise future activities and resource development that caters to the needs of the WA sexual health and blood borne virus (SHBBV) sector.

This the second survey round of the SiREN Sector Needs Assessment, with the previous survey conducted in August and September 2012. Multiple resources and activities were informed from the results of the 2012 survey, including workshops and toolkit resources, and the provision of information and support in relation to the research process.

This report presents the following sections: methodology; results (2014); comparing survey rounds; survey strengths and limitations; and recommendations.

2.0 Methodology

The data for this needs assessment was collected via an online survey. The 2014 survey was adapted from the previous survey round in consultation with the SiREN Resources Reference Group (see siren.org.au/what-is-siren/siren-resources-reference-group). The 2014 survey consisted of thirteen questions that gathered information in the following areas: research and evaluation, including areas of future priority; barriers and enablers for research and evaluation; SiREN services and resources; and the SiREN website. A mixture of closed and open ended questions was included in the survey. A copy of the survey is available in Appendix A.

The survey was anonymous; however information was collected on respondent role within their organisation and organisation type.

Survey data were collected between September and October 2014. A link to the survey was initially distributed via email to 155 contacts from the SiREN Network WA distribution list. This distribution list included individuals from a variety of organisations who work within the WA SHBBV sector. A survey link was then sent to an additional 20 contacts to distribute within their networks. This distribution strategy allowed the research to achieve a greater reach. It also enabled data to be collected from respondents with whom SiREN may or may not have a relationship with. A reminder email to complete the survey was sent in week three and week four following distribution.

3.0 Results (2014)

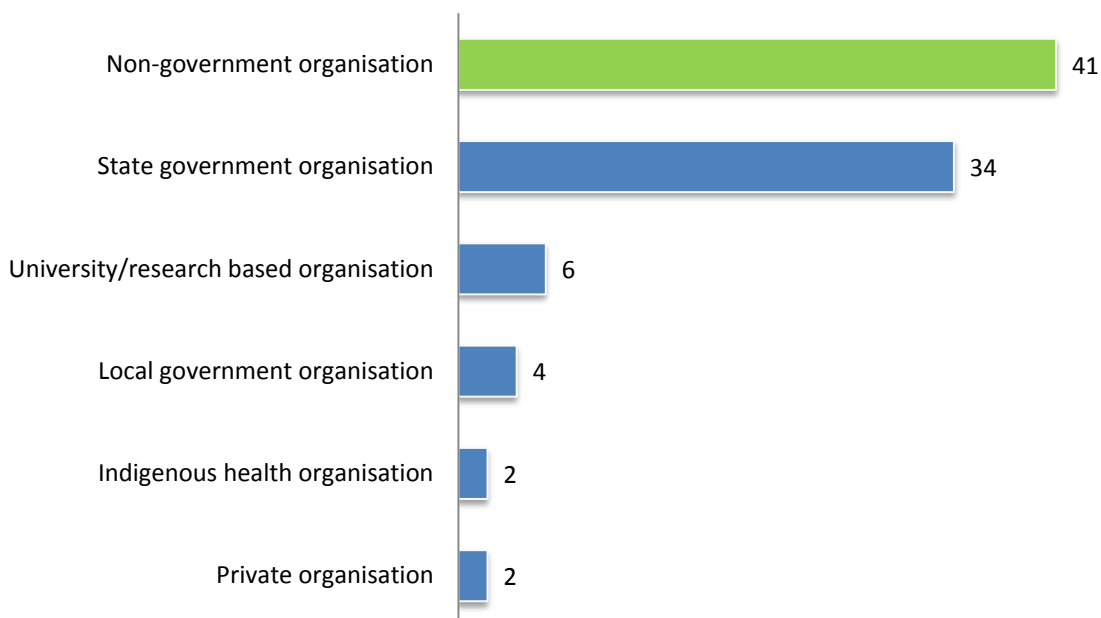
Response rate

Exact distribution numbers for the online survey through forwarded networks were uncertain; however 89 survey responses were received. Questions within the survey were not compulsory. For this reason, some questions within this report will not have 89 responses.

Organisation type

Respondents came from a variety of different organisation types. The majority of respondents were from non-government or state government organisations (41 and 34 respondents respectively). Figure 1 shows the count of respondents per organisation type.

Figure 1: Count of organisation type



Base: n=89

Respondent role

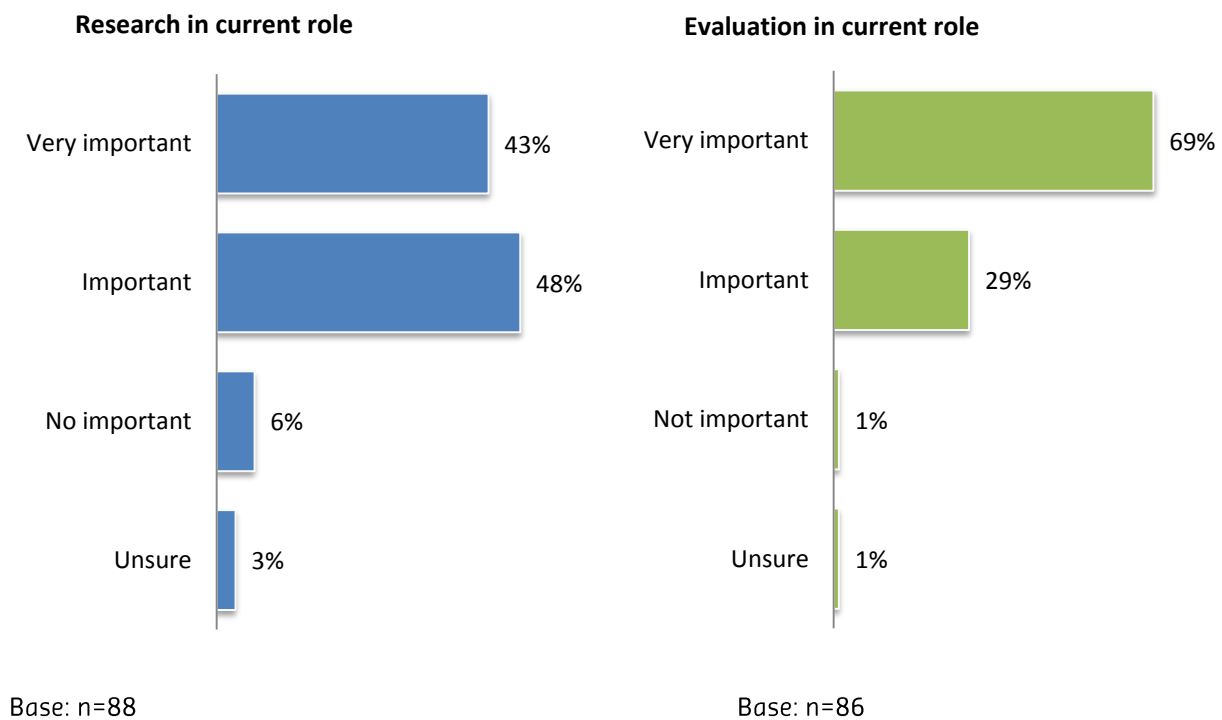
Respondents were asked to provide details on their role. Survey responses were collected from a variety of different respondents, including: health practitioners (n=30); project officers / co-ordinators (n=24); management (n=9); and researchers and academics (n=5). Some respondents provided insufficient detail to allow their response to be placed in a category.

Importance of research and evaluation

Respondents were asked to rate the importance of research and evaluation in their current role.

As shown in Figure 2, most respondents considered research to be 'very important' or 'important' in their current role (43%, n=38 and 48%, n=42 respectively). Few (6%, n=5) respondents considered research to be 'not important'. Evaluation was also considered to be 'very important' or 'important' by the large majority (69%, n=59 and 29%, n=25 respectively). Only one (1%, n=1) respondent considered evaluation to be 'not important' in their current role.

Figure 2: Importance of research and evaluation



Barriers and enablers for research and evaluation

Respondents were asked to identify barriers and enablers to undertaking research and evaluation activities in their current role.

Figure 3 shows that 'internal encouragement' (75%, n=62), 'motivated staff' (72%, n=60) and 'external resources' (65%, n=54) enable participants to undertake research and evaluation activities. Positively, few reported a lack of support for research and evaluation within their organisation (5%, n=4) or role (4%, n=3).

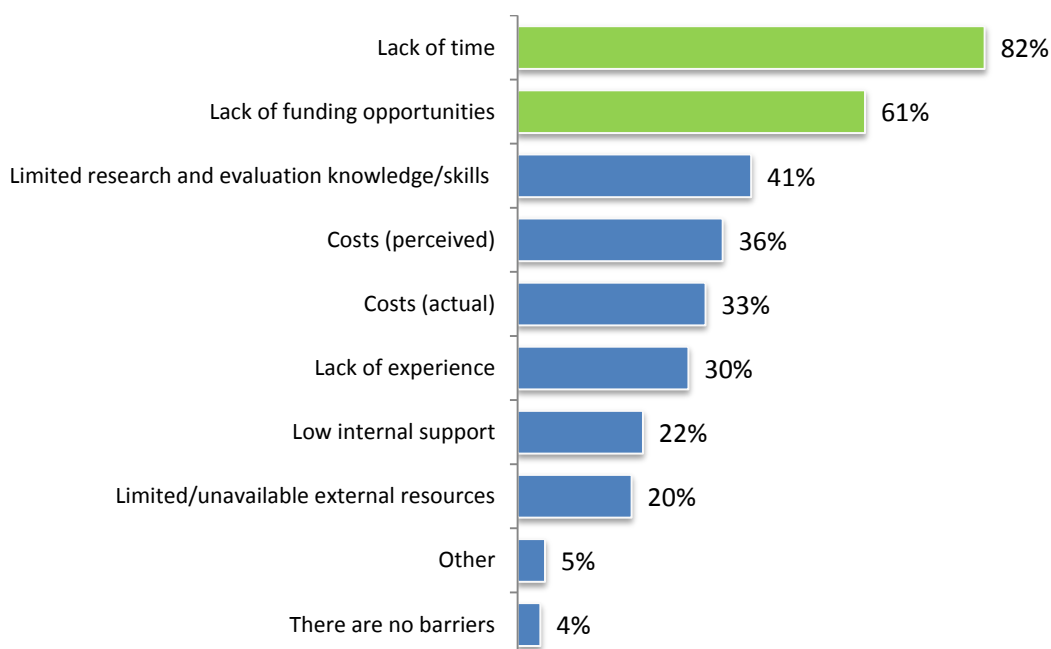
Figure 3: Enablers of research and evaluation in current role



Base: n=83

As shown in figure 4, a 'lack of time' (82%, n=68) is the top barrier to research and evaluation being undertaken by respondents. 'Lack of funding opportunities' (61%, n=51) and 'limited research and evaluation knowledge and skills' (41%, n=34) are also preventing research and evaluation activities for respondents. Other barriers included issues around staff capacity (n=3) and restrictions around obtaining data (n=1).

Figure 4: Barriers to research and evaluation in current role



Base: n=83

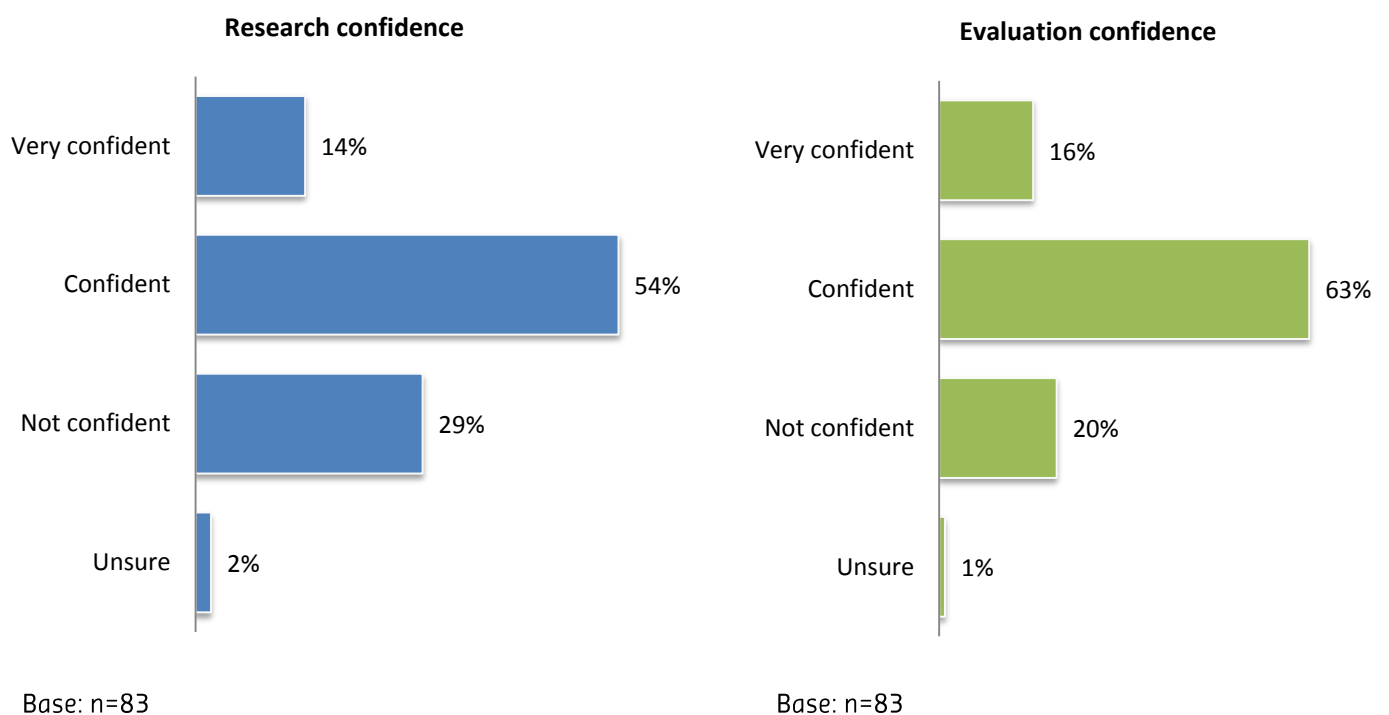
Research and evaluation confidence

Respondents were asked how confident they were in undertaking research and evaluation activities. These results are shown in figure 5.

Around half (54%, n=45) of all respondents rated 'confident' in undertaking research activities, with a further 14% (n=12) reporting that they were 'very confident'. An opportunity exists to improve confidence levels, with 29% (n=24) indicating that they were 'not confident', and a further 2% (n=2) unsure.

These results were similar for evaluation with 63% (n=52) of respondents indicating that they felt 'confident' undertaking evaluation activities, 16% (n=13) feeling 'very confident', 20% (n=17) feeling 'not confident' and 1% (n=1) 'unsure'.

Figure 5: Confidence in undertaking research and evaluation



Likelihood of undertaking research and evaluation activities

Respondents were asked how likely they were to take part in research and evaluation activities over the next 12 months.

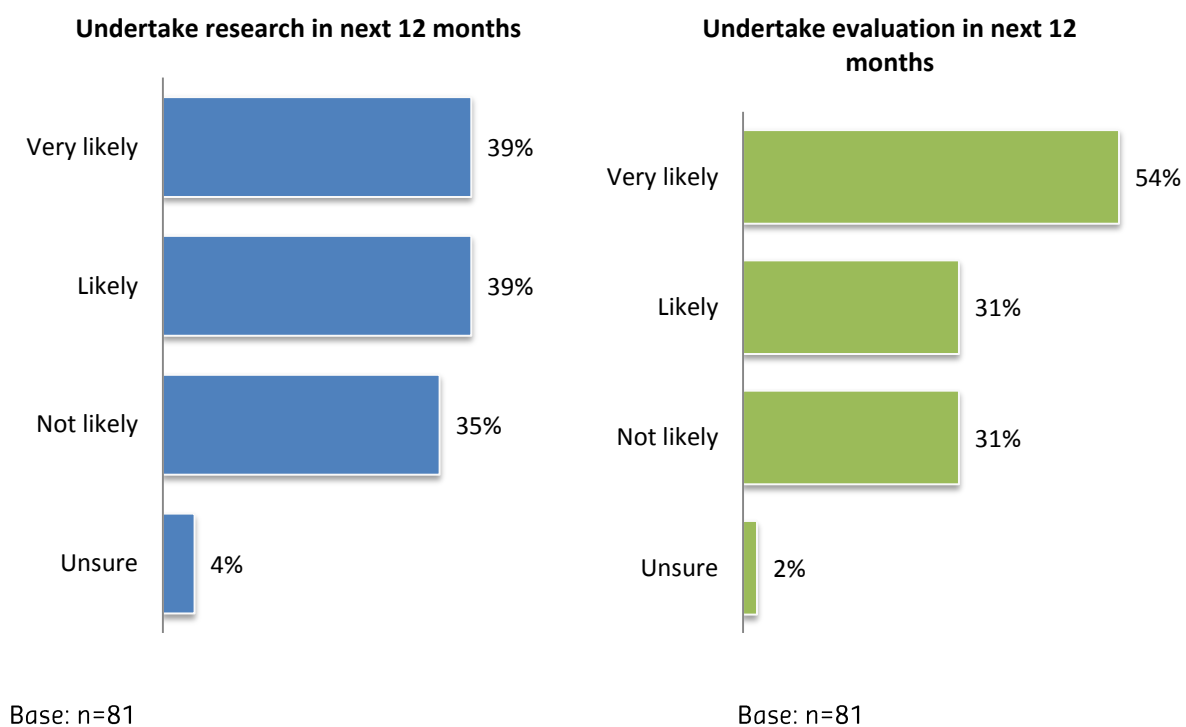
Figure 6 shows most respondents indicated that they are 'very likely' or 'likely' to undertake research activities (31%, n=25 and 31% n=25) over the next 12 months. However, one in three (35%, n=28) are 'unlikely' to undertake evaluation activities, with a further 4% (n=3) unsure.

Of note, most (82%, n=41) respondents who are very likely/likely to undertake research activities within the next 12 months are also very confident/confident in undertaking it. Those unlikely to undertake research activities tend to lack confidence in undertaking it (45%, n=13).

When looking at evaluation, around half (54%, n=44) of the respondents are 'very likely' to undertake evaluation activities over the coming 12 months. Positively, a further 31% (n=25) are 'likely' to undertake evaluation activities, with few (12%, n=10) 'not likely' to do so.

Similarly, those very likely/likely to undertake evaluation activities tend to have greater confidence in undertaking evaluation activities (80%, n=55 very confident/confident). Furthermore, four of the ten respondents who are unlikely to undertake evaluation activities also lack confidence in undertaking it.

Figure 6: Likelihood of undertaking research and evaluation within the next 12 months

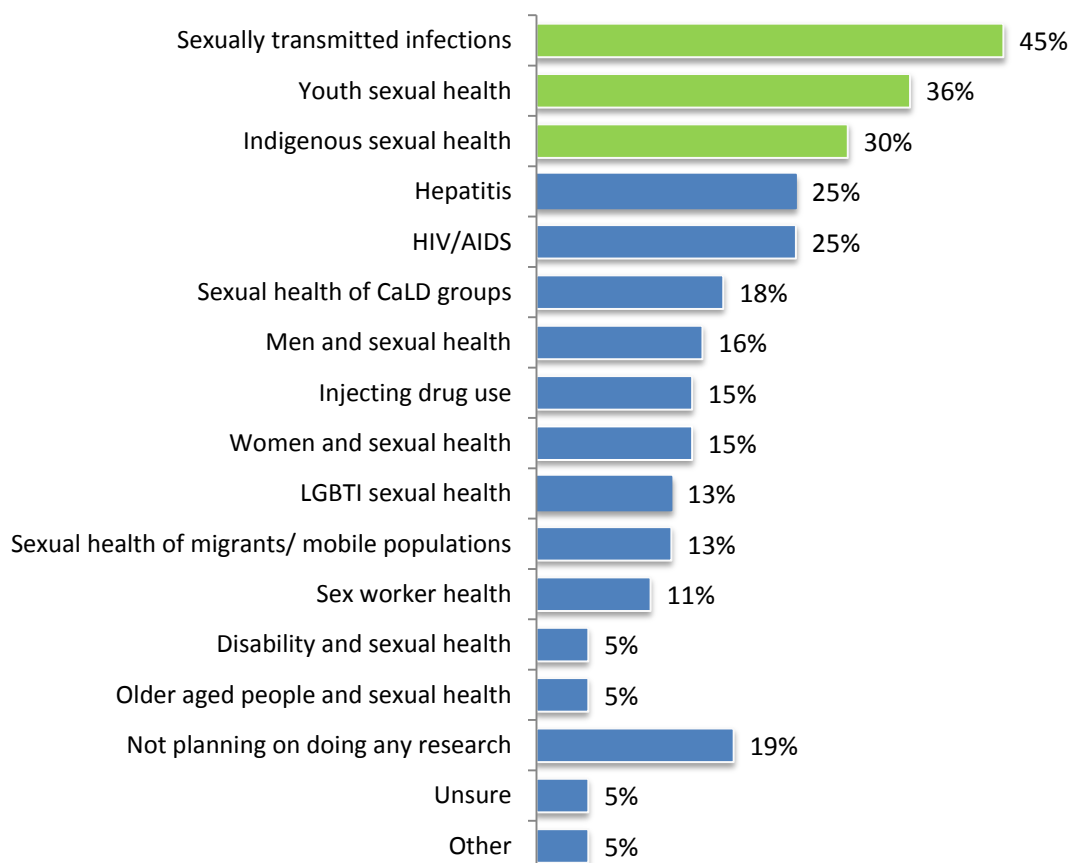


Key SHBBV priority research areas

Respondents were asked to identify the key SHBBV priority research areas in their current role over the next 12 months. 'Sexually transmitted infections' (45%, n=36), 'youth sexual health' (36%, n=29) and 'indigenous sexual health' (30%, n=24) are key priority research areas.

These results are shown in figure 7.

Figure 7: Key SHBBV priority research areas over the next 12 months



Base: n=80

Awareness and usage of SiREN services and resources

Respondents were asked to identify which SiREN services and resources they were aware of. Top mentions included 'SiREN symposium' (54%, n=36), 'research and evaluation support' (46%, n=31), 'seminars' (46%, n=31) and 'assistance with evidence dissemination' (40%, n=27). Fewer participants were aware of 'professional development services' (28%, n=19) and the 'SHBBV Ethics Approval Guide' (28%, n=19).

Respondents then indicated the services they had used at least once over the past 12 months. Most (89%, n=32) respondents who were aware of the 'SiREN symposium' had also used the service, i.e. attended the symposium. 'Seminars' (65%, n=20), 'professional development services' (63%, n=12) and the 'SHBBV Program Planning Toolkit' (47%, n=14) were also popular services and resources

among the respondents. Given the relatively low awareness but high usage of 'professional development services', increased service promotion may be required.

Respondents also indicated the SiREN services and resources that they were likely to use in the next 12 months. 'Research and evaluation support' (n=15) and the 'SiREN symposium' (n=14) were the most popular choices among respondents. No respondents who were aware of the 'SHBBV Partnership Guide' used it. 'Assistance with funding submissions' (12%, n=3) and 'project planning support' (13%, n=3) also received low usage scores.

These results are shown in Table 1.

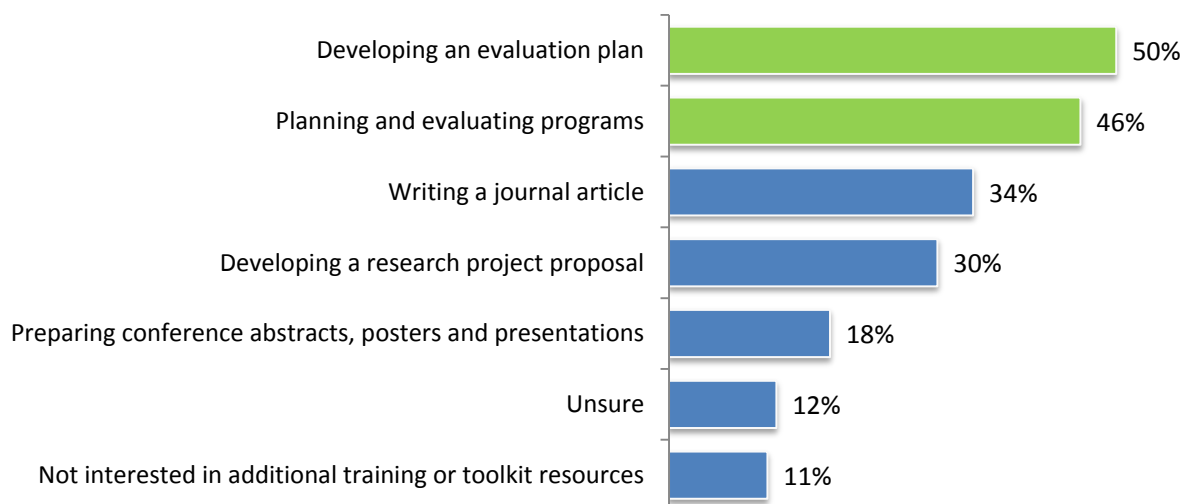
Table 1. Awareness and usage of SiREN services and resources

	Aware (%)	Aware of and have used (%)	Likely to use in the next 12 months (no. mentions)
SiREN symposium	54%	89%	14
Research and evaluation support	46%	32%	15
Seminars	46%	65%	9
SHBBV Program Planning Toolkit	45%	47%	8
Assistance with evidence dissemination	40%	19%	6
Assistance with funding submissions	37%	12%	6
Project planning support	34%	13%	7
Access to student resources	34%	22%	6
SHBBV Partnership Guide	31%	0%	2
Professional development services	28%	63%	9
SHBBV Ethics Approval Guide	28%	16%	6

Additional training or toolkit resources

Respondents were asked to identify additional training or toolkit resources of most interest over the next 12 months. 'Developing an evaluation plan' (50%, n=38) and 'planning and evaluating programs' (46%, n=35) were of most interest to respondents. Positively, most (77%) respondents were interested in SiREN developing additional training or toolkit resources. These results are shown in figure 8.

Figure 8: Additional training or toolkit resources of interest



Base: n=76

Of note, 31% of those interested in 'developing an evaluation plan' are 'not confident' (n=10) or feel 'unsure' (n=1) when undertaking evaluation activities. Similarly, 29% of those interested in 'planning and evaluating programs' lack confidence in undertaking evaluation activities ('not confident' n=9, 'unsure' n=1).

Improving access to SiREN services and resources

Respondents were asked to provide ways SiREN could make it easier for their organisation to access SiREN services and resources. Suggestions included

- Increase awareness of SiREN, its services and resources (n=6).
- Increase level of engagement (n=2) and collaboration (n=1) with the sector.
- Increase online presence and website navigation (n=3).
- Improve access (n=2).
- Reduce or remove costs (n=2). One respondent referred to the SiREN Symposium specifically.
- Increase communication (n=1).
- Provide access to journals for funding applications.

Evaluating the SiREN website

Respondents were asked whether they had used the SiREN website (siren.org.au) in the previous 24 months. Around three in five (63%, n=49) respondents had used the website. A further 27% (n=21) of respondents had not used the website, with an additional 10% (n=8) unsure.

Those who had used the SiREN website were asked to rate its performance on the following attributes: navigation; usefulness; content; and relevance. Table 2 highlights the strong performance of the website, with no respondents providing a 'poor' rating for any one attribute. However, there is some room for improvement across all attributes to push the 'fair' ratings to 'excellent' for all attributes.

Table 2. Evaluating the SiREN website performance

	Excellent	Fair	Poor	Unsure
Navigation	47%	49%	0%	4%
Usefulness	53%	47%	0%	0%
Content	61%	35%	0%	4%
Relevance	53%	43%	0%	4%

Base: n=49

4.0 Comparing survey rounds

This section will provide a comparison of key survey metrics between the 2012 and 2014 survey rounds.

A total of 23 survey responses were achieved in 2012. Thus, caution must be undertaken when making comparisons given the low base sizes in 2012.

Table 3 provides a report card of key survey metrics. Results from the 2012 survey round are relatively similar to the 2014 survey round.

Table 3. Comparison of results from the 2012 and 2014 survey rounds

	2012 survey round ¹	2014 survey round
Number of overall responses	23	89
Research importance (very important/ important) ²	96%	91%
Evaluation importance (very important/ important) ²	96%	98%
Confidence in undertaking research (very confident/ confident)	73%	69%
Confidence in undertaking evaluation (very confident/ confident)	70%	78%
Likely to undertake research activities ³	70%	62%
Likely to undertake evaluation activities ³	91%	85%
Barriers to research ⁴	Lack of time/ funding Staffing capacity & skills Resources being unavailable/limited Costs	Lack of time/ funding Limited internal skills/knowledge in research and evaluation
Enablers for research ⁴	Motivated/ keen staff Ongoing encouragement for research/evaluation Resources Training programs Increased funding	Internal encouragement Motivated staff who are keen to learn/improve skills External resources

5.0 Strengths and limitations of the survey

Strengths of the survey

The main strengths of the survey were:

- Participants had the option to remain anonymous when responding to the survey, allowing their answers to remain confidential if they wished
- The survey was not too extensive or complicated, it was quick and simple to complete making it an acceptable burden on participants to complete

¹ Low base size. Interpret results with caution

² In the 2012 survey round respondents were asked to comment on behalf of their organisation. In the 2014 survey round respondents were asked to comment on behalf of their current role within their organisation.

³ A 12-month time period was placed on the question in the 2014 survey round.

⁴ Pre-coded options were provided to questions in the 2014 survey round.

- The online survey was efficient and enabled a large number of organisations around Western Australia to provide feedback in a short time frame
- As a result of the survey being administered online this also meant it had relatively low costs associated
- The survey was sent to all known stakeholders within the WA SHBBV sector. These stakeholders were asked to forward the survey on to their networks further increasing the reach of the survey
- The results of the survey provided an insight into knowledge and skills gaps in the WA SHBBV sector, as well as future research and evaluation priorities
- Lessons learned from the previous survey round could be incorporated into the 2014 survey development, thus improving data collected.
- While differences exist in the questions asked, some comparison can be made to the results captured in previous survey rounds. However, it is noted that comparisons to previous rounds should be made with caution given the small sample size in 2012.

Limitations of the survey

The main limitations of the survey were:

- Due to the large number of organisations the survey was sent to and the anonymous nature of the survey, it is not possible to determine who actually received the survey and who completed it
- The representativeness of the survey findings for the WA SHBBV sector is unclear
- The survey provided insufficient detail in regards to respondent demographics. Future surveys should include a pre-coded list of occupations for respondents to select from
- The survey results were potentially biased as more responses may have been received from one area of the WA SHBBV sector than the other.

5.0 Recommendations

It is important to remember that survey results are not representative of the entire sector, but a small cross-section of the sector. With this in mind, recommendations have been provided for consideration, outlined below.

- Focus on further improving research and evaluation skills and knowledge within the sector as this is a barrier
- Promote quick and simple research and evaluation methods to address concerns around a lack of time for research and evaluation
- Develop strategies to improve confidence in undertaking planning and evaluation
- Increase awareness of SiREN, its services and resources, with a focus on those used most often.
- Further investigate reasons for lower usage of certain services and resources to guide future training, activities and resources.

- Further investigate training or toolkit options around developing evaluation plans and planning and evaluating programs.
- Undertake a review of the SiREN website information architecture. This should include a content mapping exercise to identify current gaps and opportunities.
- As a key communication device for the SiREN project, strategies should be developed to improve awareness of the SiREN website within the sector.

6.0 Appendix

Online Survey

Introduction

Your survey feedback will ensure that the Department of Health's investment in SiREN is directed to activities of most importance and value to Sexual Health and Blood borne Virus (SHBBV) stakeholders in WA.

The survey should take 10 to 15 minutes. You will answer up to 13 questions on research and evaluation. Your opinions will help SiREN better understand how to support research and evaluation activity in WA.

Your survey responses are anonymous and individual responses will not be identified in any materials. The data will only be accessible by the SiREN Management Team at Curtin University.

This survey is distributed biennially. A summary of the results will be posted on siren.org.au after October 31, 2014. SiREN greatly appreciates your input.

If you have any questions about the survey or the SiREN project, please contact:

Roanna Lobo
SiREN Project Manager
Curtin University
siren@curtin.edu.au

Research and Evaluation

What is SiREN's purpose?

SiREN aims to:

- Promote and stimulate opportunities for collaboration between SHBBV service providers and researchers.
- Foster links with the national SHBBV research centres and contribute to appropriate national research agendas in order to raise the profile of SHBBV concerns affecting WA.
- Strengthen the skills, competencies and networks of WA SHBBV providers to ensure best practice in research, evaluation and health promotion.

What is research?

Research is any creative investigative work undertaken on a systematic basis. The goal is to increase knowledge to improve or devise new programs, policies, medications, testing processes and treatments. Social research is concerned with the factors influencing human behaviour, motivation and social relationships.

What is evaluation?

Evaluation is a type of research. It can be undertaken before, during and after a program. Evaluation activities include needs assessment, monitoring programs and assessing the effects of programs.

Demographics

1. Firstly, what is your role within your organisation? This is just to ensure we include the opinions of a variety of different people.
2. Which of the following best describes your organisation?
 - a. Non-government organisation
 - b. State government organisation
 - c. Local government organisation
 - d. University or research based organisation
 - e. Private organisation
 - f. Indigenous health organisation

Research and evaluation

3. How would you rate the importance of...?

	<i>Very important</i>	<i>Important</i>	<i>Not important</i>	<i>Unsure</i>
The importance of research to your organisation				
The importance of evaluation to your organisation				

4. What enables research and evaluation to take place in your role? (YOU MAY CHOOSE MORE THAN ONE ANSWER)
 - a. Motivated staff who are keen to learn and improve their skills
 - b. Internal encouragement for research and evaluation
 - c. External resources e.g. online tools, training programs
 - d. Increased funding due to recognised importance
 - e. Research and evaluation is not supported in my organisation
 - f. Research and evaluation is not supported in my role
 - g. Unsure
 - h. Other/s (please specify)
5. What barriers to research and evaluation exist in your role? (YOU MAY CHOOSE MORE THAN ONE ANSWER)
 - a. Lack of time
 - b. Lack of funding opportunities
 - c. Poor internal knowledge and skills in research and evaluation
 - d. Lack of experience internally
 - e. Low support internally
 - f. Limited or unavailable external resources
 - g. Costs (perceived)
 - h. Costs (actual)
 - i. There are no barriers to research and evaluation in my role
 - j. Unsure
 - k. Other/s (please specify)
6. How confident do you feel to undertake:

	<i>Very confident</i>	<i>Confident</i>	<i>Not confident</i>	<i>Unsure</i>
Research activities				
Evaluation activities				

7. In the next 12 MONTHS, how likely is it that you will undertake:

	<i>Very likely</i>	<i>Likely</i>	<i>Not likely</i>	<i>Unsure</i>
Research activities as part of your current role				
Evaluation activities as part of your current role				

Research priorities

Now, we are going to ask you a few specific questions about research.

8. What are the key SHBBV research priority areas in your current role over the next 12 MONTHS? (YOU MAY CHOOSE MORE THAN ONE ANSWER)

- a. Hepatitis
- b. Sexually transmitted infections
- c. HIV/AIDS
- d. Injecting drug use
- e. Youth sexual health
- f. Disability and sexual health
- g. Men and sexual health
- h. Women and sexual health
- i. LGBTI sexual health
- j. Sex worker health
- k. Indigenous sexual health
- l. Sexual health of culturally and linguistically diverse groups
- m. Older aged people and sexual health
- n. Sexual health of migrants and mobile populations
- o. I am not planning on doing any research in the next 12 months
- p. Unsure
- q. Other/s (please specify)

9. Which of the following SiREN services and resources are you...?

Please provide an answer for each row. If you are not aware of, or have not used or likely to use a service or resource in the next 12 months, please leave that row blank.

	<i>AWARE of</i>	USED at least once in the LAST 12 months	LIKELY TO USE in the NEXT 12 months
SiREN symposium			
Research and evaluation support			
Seminars			
SHBBV Program Planning Toolkit			
Assistance with evidence dissemination			
Assistance with funding submissions			
Project planning support			
Access to student resources			
SHBBV Partnership Guide			
Professional development services			
SHBBV Ethics Approval Guide			

10. In the next 12 months, what ADDITIONAL training or toolkit resources would you be most interested in?

- Planning and evaluating programs
- Developing an evaluation plan
- Developing a research project proposal
- Preparing conference abstracts, posters and presentations
- Writing a journal article
- Developing an evaluation plan
- I'm not interested in additional training or toolkit resources
- Unsure
- Other/s (please specify)

11. How could SiREN make it easier for your organisation to access its services and resources?

Evaluating the SiREN website

There are just a few more questions to evaluate the SiREN website (siren.org.au)

12. Have you used the SiREN website (siren.org.au) in the last 24 months?

- Yes
- No
- Unsure

13. Lastly, how would you rate the performance of the SiREN website on the following?

	<i>Excellent</i>	<i>Fair</i>	<i>Poor</i>	<i>Unsure</i>
Navigation				
Usefulness				
Content				
Relevance				

[End of survey]