Guidelines for the Implementation of Peer Education Programmes for Learners in South African Schools

> A Guide for Programme Managers



basic education

Department: Basic Education REPUBLIC OF SOUTH AFRICA

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### Acknowledgements

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The Guidelines for the Implementation of Peer Education Programmes for Learners in South African Schools was developed by the Department of Basic Education with the financial support of the United States Agency for International Development (USAID) and the technical support of Professor Maretha Visser, University of Pretoria. The guidelines underwent consultations with national and provincial education departments and with a range of stakeholders working in the education sector and the peer education fraternity. The guidelines were also peer-reviewed by Dr Sharlene Swartz, Human Sciences Research Council and Ms Susannah Farr, Gold Peer Education.

The guidelines will be updated periodically. As such, any comments or suggestions are welcomed and should be sent to the Director-General: Basic Education for the attention of the Health Promotion Directorate; Private Bag X895; Pretoria; 0001.

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# Preface

There is no doubt that HIV and AIDS is one of the biggest developmental challenges facing the nation and in particular, our young people. Despite the most recent downturn in new infections among young people, given the scale of the epidemic in South Africa, there is little room for complacency. To turn this epidemic around, a comprehensive set of interventions is required from every sector of society as outlined in the HIV and AIDS & STI National Strategic Plan 2007-2011.

Household and school-based surveys tell us that 95% of our learners are HIV negative, making HIV prevention the primary target of school-based interventions. Over the past 10 years, this has primarily been delivered in the education system through the HIV and AIDS Life Skills Education Programme.

The life skills programme is a curriculum-based intervention designed to address inter alia, peer pressure, discrimination, decision-making, negotiation skills, HIV and AIDS, substance use and abuse, and promoting healthy lifestyles.

But the curriculum is not the only instrument available to the education system to address HIV and AIDS and a range of risk behaviours. Peer education has long been applied within and outside of schools to support and strengthen what is taught in the curriculum.

It is an effective approach or strategy to influence peer group norms – a now well established risk factor for HIV and many other risk behaviours. Peer education also offers a channel through which to role model desired behaviour, to shift attitudes, share ideas, build skills and develop critical thinking about existing behaviour and group norms.

Despite the substantive experience of applying peer education within the education system, approaches have been fragmented and unevenly applied across the country. The Department of Basic Education has developed these implementation guidelines to optimise the effectiveness of peer education in schools and to harmonise approaches across provinces and schools. The document offers broad guidelines for the planning, implementation, monitoring and evaluation of peer education programmes in South African schools; and sets out a minimum set of standards to be applied.

The intended audience for the guidelines is necessarily broad because of the range of organisations that implement peer education programmes in schools. I trust that the introduction of peer education guidelines will mark the end of disparate approaches towards peer education and the beginning of evidence-based, harmonised and standardised approaches.

The Department of Basic Education is grateful to the United States Agency for International Development (USAID) for providing financial support that enabled a consultative process for the development of the guidelines. I trust that efforts put into the development and distribution of this document will yield positive results in the near future.

Mr PB Soobrayan Director-General: Basic Education Date: December 2011



# **Table of Contents**

1.	Abbrevia	Abbreviations and glossary of terms1				
2.	Definition of term(s) 2					
3.	Purpose	Purpose of the document				
4.	Process	Process of development				
5.	Backgro	Background				
	5.1. Pee	r education as an educational intervention	7			
	5.2. Pee	r education in the context of HIV and AIDS	8			
	5.3. Effe	ectiveness of peer education as an HIV preventive strategy	9			
	5.4. Rea	sons for effectiveness of peer education	10			
	5.5. Cha	Illenges of peer education	11			
	5.6. Pol	icy framework for peer education	11			
	5.7. Pee	r education as an approach, intervention or strategy	14			
	5.8. Rol	es and responsibilities of peer educators	15			
	5.9. Val	ues that support peer education	16			
6.	Program	me planning at national and provincial levels	17			
		uctural arrangements to facilitate peer education in schools	17			
		Management of the peer education programme	17			
	6.1.2.	Funding	17			
	6.1.3.	Roles and responsibilities	17			
	6.2. Dev	veloping a peer education management system	21			
	6.2.1.		22			
	6.2.2.	Mobilise stakeholders	22			
	6.2.3.	Develop a management plan	23			
	6.2.4.	Determine the target audience of the programme	23			
	6.2.5.	Develop or adapt a peer education curriculum	23			
	6.2.6.	Develop a general plan for M&E	25			
7.	Program	me implementation at local level	27			
	7.1. Mo	bilise local stakeholders	27			
	7.2. Ide	ntify the target groups and needs in each school	27			
		ermine local programme goals and objectives	28			
		ess and develop the school's capacity to implement the programme	28			
		elop the peer mentor's skills	29			
		ablish a referral system	29			
		/elop an implementation plan	30			
		n the M&E of the programme	30			
		ruitment and training of peer educators	30			
	7.9.1.	Criteria for the recruitment and selection of peer educators	30			
	7.9.2.	Develop a standardised and transparent selection process	32			
	7.9.3.	Set clear expectations, roles and performance standards	32			
	7.9.4.	Establish a reward system	33			
	7.9.5.	Training of peer educators	33			

7.10. Implementing peer education in schools	35
7.10.1. Models of peer education in schools	35
7.10.2. Implement curriculum-based peer education	37
7.10.3. Maintain ethical standards	38
7.10.4. Monitor and evaluate sessions	38
7.10.5. Provide supervision and support	39
7.11. Management of peer education	40
7.12. Reporting, monitoring and evaluation of peer education	41
7.12.1. Monitoring	41
7.12.2. Evaluation	42
References	45
Annexures	
Annexure 1: Checklist – characteristics of an effective peer education programme	50
Annexure 2: Monitoring & Evaluation framework for prevention of HIV and AIDS	55
Annexure 3: Code of conduct for peer educators	57

# 1. Abbreviations and Glossary of Terms

AIDS	Acquired Immunodeficiency Syndrome
BEM	Boy Education Movement
CRC	Convention on the Rights of the Child
DBE	Department of Basic Education
DoH	Department of Health
GEM	Girl Education Movement
HIV	Human Immunodeficiency Virus
LO	Life Orientation
M&E	Monitoring and Evaluation
NGO	Non-Governmental Organisation
NIP	National Integrated Plan
NSP	HIV & AIDS and STI National Strategic Plan for South Africa, 2007 – 2011
OBE	Outcome Based Education
OVC	Orphans and Vulnerable Children
PMTCT	Prevention of Mother to Child Transmission
RCL	Representative Council of Learners
SAQA	South African Qualification Authority
SBST	School Based Support Team
SGB	School Governing Body
SMT	School Management Team
UNICEF	United Nations Children's Fund

# 2. Definition of term(s)

Adolescent	An adolescent is a young person between the ages of 12 and 18 years. In this document, specific reference is made to secondary school learners.
Baseline data	Data obtained before the programme is implemented.
Counselling	A relationship between a professional and an individual that explores the individual's problems in order to assist him/her to understand a particular situation and to take action to address these problems. Special training or professional skills are needed to undertake counselling.
Guidelines	Guidelines offer recommendations or basic standards of how a task should be completed or what action should be taken in a particular circumstance.
Peer	An individual who belongs to the same social group as others and has similar characteristics to the social group.
Peer educator	An individual trained to influence thinking and behaviour among members of his/her social group.
Peer mentor	An individual who trains, supports and supervises the work of peer educators.
Stakeholder	A person or organisation that holds an influential position in the community and has an interest, investment or involvement in the programme (for example government agencies, donors, community-based organisations and schools).
Support	Assisting, listening to, encouraging and referring for help, but does not include counselling.
Young people	Youth between the ages of 15 and 24 years.

# 3. Purpose of the document

Peer education is a popular strategy used to influence the behaviour of young people, **especially behaviour that is influenced by peer group norms**. Peer education has been extensively applied both within and outside of the school setting. In fact, many peer education programmes are currently implemented in schools. However, they tend to be implemented differently with varied educational messages, strategies and results.

To optimise the effectiveness of peer education in schools, it is necessary to apply evidence-based guidelines to harmonise the different approaches to peer education implemented in different provinces and schools. This document provides broad guidelines for the planning, implementation, monitoring and evaluation of peer education programmes in South African primary and secondary schools.

The guidelines are primarily intended for use by individuals and/or organisations involved in the *management* and implementation of peer education programmes in schools. These include members of the Department of Basic Education (DBE) at national, provincial and district levels, non-governmental organisations (NGOs) and donor organisations tasked with the management and oversight of such programmes. Members of school based support teams (SBSTs), educators, peer educators and peer mentors will also benefit from the guidelines.

The use of evidence-based guidelines that have been developed through consultative processes can improve the quality of existing programmes as well as strengthen the development of new programmes. Some advantages of guidelines are:

- Guidelines are developed from research-tested and experience-based programmes. They highlight what has previously worked and what has not worked to assist future implementation. Guidelines should present an objective picture of what is practical, useful and tested, that can be used in developing and implementing programmes.
- Guidelines can be used to ensure quality at all stages of implementation that is to evaluate and to improve the quality of programmes.
- Guidelines offer a common language that can be used to assess and compare the value of programmes. They provide a basis for determining the status and effectiveness of programmes.

The guidelines are intended to strengthen peer education as an *approach* or *strategy* to promote and support healthy lifestyles in schools. These guidelines emanated from the need to cohere peer education programmes for HIV and AIDS. As such, HIV and AIDS is used as the context to illustrate the application of these guidelines. However, peer education, and by extension these guidelines, can be used to implement programmes intended to reach learners on almost any subject. Examples include gender-based violence, environmental awareness, drug and substance use prevention, teenage pregnancy prevention and academic achievement.

The principles of peer education and the guidelines for implementation will remain the same. However, the content, messaging and learners selected to serve as peer educators may differ depending on the focus of the programme. For example, programmes directed at learners with physical disabilities or developed to promote communication between learners of diverse cultural backgrounds may use different messages and select different learners to implement the programmes. The goal of a peer education programme, and what should and should not be included, will direct many decisions in the development of the programme. These guidelines should be viewed as *guidance* in programme implementation. They should be used in a flexible way and adapted to the realities of a programme's context and environment; they are not intended to be rigidly implemented. The guidelines need to be supported by documents and training manuals for peer educators and peer mentors that offer practical guidance and skills to effectively implement programmes. This falls outside the scope of the current guidelines. However, to demonstrate the practical application of the guidelines, *lessons learned* from research and field experience are provided in text boxes throughout the document.

# 4. Process of development

The guidelines presented in this document were developed through a consultative process involving a range of stakeholders:

- In August 2007, a participatory workshop was convened with 48 representatives of the various education departments, both national and provincial, service providers implementing peer education programmes and labour unions.
- In 2007/8 a pilot peer education project was undertaken in 88 schools in 4 provinces over an 18 month period. The project trained 173 peer educators. The experiences and lessons learned from this pilot project have informed the development of the guidelines.
- A global literature review was conducted on guidelines for peer education, reproductive health and HIV education programmes. The following seminal documents informed the de-velopment of the guidelines:
  - Family Health International (2009). *Guidelines for Youth Peer Education in HIV and Reproductive Health*, Research Triangle Park: Family Health International.
  - Senderowitz, J. and Kirby, D. (2006) *Standards for curriculum-based reproductive health and HIV education programmes*, Arlington: Family Health International/YouthNet.
  - Tanzania, Ministry of Health and Social Welfare. (2008) *National Standards in peer education for young people*, Dar es Salaam: Ministry of Health and Social Welfare.
  - United Nations Population Fund (2005) *Youth peer education Toolkit: Standards for peer education programmes,* New York: United Nations Population Fund.
  - Deutsch, C. and Swartz, S.C. (2002) *Rutanang, Learning from one another: Towards standards of practice for peer education in South Africa,* Pretoria: Department of Health.
  - South African Qualifications Authority (2009) 'Unit standard: Facilitate a peer education intervention', *Government Gazette*, No. 32058, 3 April.
  - Ward, C.L. Van der Heijden, I.J., Mukoma, W., Phakati, S., Mhlambi, T., Pheiffer, J. and Bhana,
     A. (2008) South Africa's peer education programmes: A mapping and review, Cape Town: Human Sciences Research Council.
- In July 2009, the draft guidelines were discussed at a consultative workshop with national and provincial representatives of the DBE, service providers implementing peer education programmes, peer education experts and labour unions.
- In January 2010, the draft guidelines were peer reviewed by experts in the field.



# 5. Background

# 5.1. Peer education as an educational intervention

**Peer education** is an approach or intervention strategy that typically involves the training and support of members of a given group to effect change among members of the same group (United Nations 2003).

A **peer** is defined as an individual who belongs to the same social group as another person. This means that they share at least one characteristic such as age, gender, socio-economic status or educational level. Peer education is built on the premise that people in similar situations have similar experiences, under-stand one another and can influence one another.

The definition of peer education agreed upon in the **Unit Standard for peer education** (SAQA 2009a) is: Peer education is a dynamic process, a strategy, a communication channel, system and a tool whereby selected and well-trained people in a specific situation contribute to the wellbeing of others in the same situation. They:

- Contribute towards an increase in knowledge, skills, values and attitudes.
- Enhance health-seeking behaviour.
- Reduce risk behaviour and vulnerability.
- Promote resilience.
- Rectify or influence a situation.

Peer education is based on the social influence people have on one another. Young people are especially influenced by their peers and peer group norms. They do most of their learning, talking and listening about issues (such as sexuality), with other young people. Peer education is therefore a crucial part of their natural development. A formalised and structured peer education programme takes advantage of the interpersonal influences peers have on one another to create a particular climate or to influence behaviour of the peer group.

Peer education is not a new concept. Historically, peer education has been used for several purposes:

- 1. The educational use of peer education as an intervention is based on the idea that individuals learn more effectively through teaching. Child-to-child approaches in learning didactic material is therefore common practice, especially in Outcome Based Education (OBE) where learners work in groups and assist one another.
- 2. In Health Promotion interventions, non-professional helpers are used intensively as part of primary healthcare in roles such as healthcare trainers and community health workers. These workers have contact with community members, understand the culture and issues in the community and can be easily approached to provide information, basic care and to refer people with serious problems for appropriate care (Frankel 1992; Werner and Bower 1982).
- 3. Following the work of the Mental Health Movement in the 1960s, it is widely acknowledged that it is not only professionals who can help individuals with emotional difficulties. An early example of peer education in schools is the "companions" programme in the United States, where older learners involved themselves with younger learners who experienced emotional

and behavioural difficulties in adapting to the school environment (Goodman 1972). Peer educators are often used to assist new learners to adapt to the school, to assist learners with learning difficulties with their school work, to develop self-esteem and to support and refer learners with specific emotional and social problems for further assessment and management. Older learners or learners with more experience and some basic training in helping skills are, in effect, mentors for other learners.

4. Peer education is used as one of the main strategies to promote the health of learners and families as part of the Health Promoting Schools concept (South Africa, Department of Health 2003).

Peer educators are especially effective in: modelling healthy behaviour; setting and shifting peer group norms; supporting peers to find relevant information and help; and, demonstrating academic, decision making and social skills. General interventions focusing on various topics, using peer education, have shown positive results over decades of implementation, if the programmes are implemented in an effective way (Cowen 1982; Durlak 1979). Various studies have shown that peer education is often as effective as professional help (Durlak 1979; Hattie et al 1984). The effectiveness of peer education is often embedded in the high level of understanding between people in similar situations and the informal nature of the relationships (Frankel 1992).

Peer education targets the peer group and aims to effect change in the group as a whole by targeting group norms. Peer-led interventions are based on the assumption that behaviour is socially influenced (Bandura 1986) and that behavioural norms, which influence behaviour, are developed through interaction with the peer group (Campbell and MacPhail 2002). Two other theories supporting the relevance of peer-led interventions are the 'Theory of Reasoned Action', which states that individuals' behaviour is influenced by what they see as a "norm" or what they think people believe about a behaviour (Fishbein and Ajzen 1975) and the 'Theory of Diffusion of Innovation' (Rogers 2003), which states that people do not only change with information, but they change when others around them change.

Peer education activities are participatory and based on sharing of ideas, building skills and developing critical thinking about existing behaviour and group norms. Peer education in schools thus makes use of established networks and channels of interpersonal influences among adolescents.

# 5.2. Peer education in the context of HIV and AIDS

HIV and AIDS represent one of the biggest challenges to the health and wellbeing of young people in South Africa. *The HIV & AIDS and STI National Strategic Plan 2007 – 2011* has identified young people as a priority group for preventive interventions. HIV prevalence among children aged 2–14 years is 2.5% while prevalence among 15–24 year olds is 8.6% (Shisana et al 2009). Despite the recent downturn in HIV prevalence rates among young people aged 15–24 years (Shisana et al 2009), the HIV incidence rate among young people (15–24 years) is still the highest of all the age groups (Dorrington et al 2006). Women in this age group, in particular, experience high levels of risk for HIV infection (Shisana et al 2009). In fact, prevalence among young women is 21.1% as opposed to 5.1% among young men. Sexual activity is common in this age group, with over a third (37.5%) of secondary school learners in grades 8 to 11 in public schools reporting sexual experience (Reddy et al 2009).

Young people continue to report high-risk sexual behaviour despite sound knowledge about sexual health risks (Reddy et al 2009; Shisana et al 2009). Many interacting individual and environmental

factors influence high-risk behaviour among young people (Campbell and MacPhail 2002; Eaton et al 2003; Harrison et al 2005), including:

- Low levels of perceived risk;
- Peer pressure;
- Gender norms that place young men under pressure to have unprotected sex and that limit women's power to make independent decisions;
- Lack of positive role models;
- Poverty that can result in transactional sex; and
- Inadequate support structures.

In addition, children and adolescents are adversely affected by high levels of AIDS mortality in the adult population. The epidemic has orphaned almost 2-million children (Shisana et al 2005). Adolescents affected by HIV and AIDS are at greater risk of malnutrition, illness, abuse, school dropout and sexual exploitation (Richter 2004; UNICEF 2000) than those who are not affected by HIV and AIDS. This, in turn, increases their personal risk of becoming HIV infected (Richter 2004; UNICEF 2000). It is therefore important to implement prevention as well as care and support programmes for school-going adolescents to decrease their risk of infection and to support those who are infected by HIV and AIDS. These programmes can have a significant impact on their future wellbeing in that the knowledge that young people acquire, the values and attitudes they develop, and the skills that they learn can influence their future behaviour (Manosch and Mahy 2006).

South African schools have implemented a variety of HIV prevention interventions over the past decade. Some of these approaches include short-term awareness and information campaigns, large-scale implementation of the life skills programmes and the institutionalisation of the subject of Life Orientation as part of the school curriculum. Peer education has also gained popularity as an HIV prevention strategy in schools, either to complement other programmes or as a stand-alone programme. In mapping peer education programmes in South Africa, (Ward et al 2008) identified and studied 39 organisations implementing peer education programmes, mainly in school contexts. The range of peer education programmes identified in this study demonstrates the popularity and acceptance of peer education as an HIV preventive strategy.

# 5.3. Effectiveness of peer education as an HIV preventive strategy

Despite the implementation of several HIV and AIDS prevention programmes in South Africa, very few have been evaluated with sufficient rigour to conclude whether they have had the desired effect (Flisher et al 2007). A similar situation is reported regionally and internationally (Bastien et al 2006; Speizer et al 2003). As a result, there is currently a paucity of evidence that demonstrates the effectiveness of peer education programmes to improve the sexual health of young people.

In a review of peer education programmes for adolescents in South Africa, Bastien et al. (2006) found no evidence that the programmes contribute to long-term behaviour change. Kim and Free (2008) reviewed 13 studies and found some evidence of fewer sexually transmitted diseases and a lower level of sexual experience among female students after participation in peer education programmes, but consistently positive results were not found across all of the studies. In a study in Tshwane, South Africa, involving 17 secondary schools, it was found that peer education may have had an influence on the delay of sexual debut of school-going young people, although no influence was seen on the behaviour of learners who were already sexually active (Visser 2007).

Medley et al. (2009) undertook a systematic review and meta-analysis of peer education interventions in developing countries. Thirty programmes were studied of which 13 were in Sub-Saharan Africa and eight focused on youth as the target population. The review indicated that peer education interventions significantly increased HIV-knowledge and condom use, but had no impact on biological outcomes such as sexually transmitted infections. These results should be interpreted with care, as the target population was diverse and not necessarily school-going adolescents. The authors also caution that the study designs were weak and that implementation issues may have influenced the programme's effectiveness.

Similarly, a report from the United Nations Population Fund (2005) analysed the effectiveness of 34 peer education programmes in developing countries (18 had well-designed quantitative evaluations). The report indicated that if peer education programmes in school are well-designed and well-implemented, programmes can contribute to higher levels of HIV knowledge, positive attitudes, and skills related to reproductive health and HIV prevention.

In fact, several well-designed evaluation studies of peer education programmes showed increased levels of knowledge, self-efficacy and communication skills (Borgia et al 2005; Flisher et al 2006; Mema Kwa Vijana 2008; Ross et al 2007; UNICEF Ghana 2002). Although less common, there is evidence of changed sexual behaviour patterns among young people who participated in peer education programmes (Agha and Van Rossem 2004; Kempe 2003; Ward et al 2008). Changes were specifically noticed with regard to condom use (Caron et al 2004; Smith et al 2000), delay of sexual activity based on changed sexual norms (Mellanby et al 2000) and increased use of sexual and reproductive health services.

Some research studies have shown that peer educators can be as effective as adults in impacting on the behaviour of their peers (Kirby et al 2006). These studies reported that young people were more likely to engage in interactive discussion after peer-led sessions than after adult-led sessions. Mellanby et al. (2000) found in this regard that peer-interventions were more effective than adultinterventions in establishing norms and attitudes related to sexual behaviour, while adults were more effective in instilling factual information in a formal setting.

# 5.4. Reasons for effectiveness of peer education

The effectiveness of peer-interventions among adolescents has been attributed to the following factors (Kinsman et al 2001; Mukoma 2001; UNAIDS 1999):

- Adolescents are more likely to listen to and openly discuss sensitive issues such as sexual matters and grief and death with their peers than with adults. Adults are often perceived to be in authoritarian positions.
- Adolescents are familiar with the cultural context that their peers live in and are aware of the factors that influence their behaviour.
- Adolescents identify with one another and influence one another through the development of group norms. Such peer group forums also create space for peer educators to challenge group norms.
- Peer educators can serve as role models of healthy behaviour. Young people are more likely to adopt certain behaviours when modelled by people similar to them.
- Young people are recognised as partners in solving problems, which increases their participation in decision making and taking ownership of their health. The programme taps into the resilience, innovation and enthusiasm of young people.

- By using peers as resources, information, skills and caring can be extended in an exponential way to influence the social climate in a school.
- Peer education is a flexible strategy that can be used to complement many other strategies.
- Peer educators themselves benefit from their role in terms of communication and leadership skills and the realisation that they can make a difference in their peers' lives. This contributes to their personal growth and can have a potentially lifelong impact.
- Peer educators develop skills and leadership capacity that has the potential to create future community leaders.

#### 5.5. Challenges of peer education

Although peer education has many advantages, the strategy poses various challenges that need to be addressed for the programme to function effectively:

- While some consider peer education as an inexpensive strategy because it uses volunteers to reach large numbers of learners, the cost of implementing peer education can be high due to the time and materials needed for ongoing training, support and supervision. As peer educators age out of the programme, new peer educators have to be recruited and trained, at minimum, on an annual basis (James-Traore et al 2002).
- Peer educators need a network of supportive relationships and resources to be effective. The strategy will have little impact on learner behaviour in the absence of appropriate resources and partnerships. Campbell (2004) warned that "programme success is unlikely without parallel efforts to create supportive social environments, through building alliances between peer educators and more influential groups." Thus, peer education requires an enabling environment to support health-enhancing behaviour change among learners. Peer education therefore cannot be viewed as a 'quick-fix' programme in resource-poor environments.
- The set up of egalitarian youth-adult partnerships can pose a challenge to the programme. Adults need to adjust and give young people an opportunity to take responsibility for the programme.
- Peer educators may find it difficult to move beyond simply sharing information to imparting behavioural skills. And yet the strength of peer education lies in the ability of peer educators to change norms and build skills rather than just share technical information and raise awareness.
- Peer educators are young people with their own problems and need much support to assist their peers. Without appropriate training and support, peer educators can misuse their power, breach confidentiality or become over-burdened with other people's problems. This point is well illustrated by a peer educator interviewed in the study by Ward et al. (2008, p.65) in South African schools: "We are human too, we have our own lives outside of us being volunteers and it is a reality that we come into difficulties and problems of our own. Perhaps we need some counselling (from) time to time, or some training on how to be in our families without feeling overloaded."

# 5.6. Policy framework for peer education

The implementation of peer education programmes in South Africa, particularly in schools, is supported by a sound policy and legislative mandate. As a foundational policy framework, peer

education may be located within a human rights framework, especially the **Convention on the Rights of the Child (CRC) (1989)**, to which South Africa is a signatory. In it children are guaranteed the right to life (Article 6.1), health (Article 24), freedom of expression (Article 13.1) and education (Article 28). In particular the CRC requires that:

- "The **best interests** of the child shall be a primary consideration" (Article 3.1);
- All services offered for children "conform with the standards established by competent authorities, particularly in the areas of safety, health, in the number and suitability of their staff, as well as competent supervision" (Article 3.3);
- The State "ensure(s) to the maximum extent possible the survival and **development** of the child" (Article 6.2);
- The State "assure(s) to the child who is capable of **forming his or her own views** the right to express those views freely in all matters affecting the child" (Article 12.1);
- Children are allowed the "freedom to seek, receive and impart information and ideas of all kinds" and "from a diversity of national and international sources, especially those aimed at the promotion of his or her social, spiritual and moral wellbeing and physical and mental health" (Article 17);
- The State facilitates "access to scientific and technical knowledge and modern teaching methods" (Article 28.3); and
- The State provides education that prepares "the child for **responsible life** in a free society, in the spirit of understanding, peace, tolerance, (and) equality of sexes" (Article 29.1 (d)).

These rights are well pursued through peer education, especially peer education that has standards (or guidelines) in place and offers children modern teaching methods, permits children to form their own views and consult a diversity of sources in pursuit of a responsible life in a free society.

**The South African Constitution and Bill of Rights** captures the right of all citizens to life (Article 11), freedom of expression (Article 16), health including reproductive healthcare (Article 27) and education (Article 29). More specifically, children are guaranteed that their best interest will be pursued in all matters concerning them (Article 28.2).

Within the school setting, the following legislation/policy frameworks lend support to the implementation of peer education:

- The South African Schools Act (1996) recognises the invaluable role that learners can play in their own development and in promoting the development of the whole school by mandating the set up of a representative council of learners at every public school enrolling learners in the eighth grade or higher. Learners are further invited to serve on the school's governing body to contribute towards management and governance issues of the school.
- White Paper 6 on Inclusive Education is supportive of the development of the potential of all learners including the most vulnerable who experience barriers to learning. The framework for special needs education emphasises the empowerment of learners "by developing their individual strengths and enabling them to participate critically in the process of learning".
- Outcomes Based Education and its articulation through the Revised National Curriculum Statement seeks to promote the agency of young people by engendering a culture of amongst others, problem solving and critical thinking and, organising and managing activities in an effective and responsible manner.

- The Life Orientation learning area through which peer education programmes are often implemented aims to guide and prepare learners for life and its possibilities, by developing skills, knowledge, values and attitudes that empower learners to make informed decisions and take appropriate actions regarding their health, social, physical and personal development.
- **The School Health Policy and Implementation Guidelines**, developed in 2003 by the Department of Health, recognises the need for participatory methodologies in promoting health by adopting child-to-child and peer education approaches.

More specifically, the mandate for peer education within HIV and AIDS is derived from the following policies:

- The National Policy on HIV and AIDS for Learners and Educators in Public Schools, and Students and Educators in Further Education and Training Institutions (1999) seeks to promote effective prevention and care with regard to HIV and AIDS within the context of the public education system. It deals with the protection of educators and learners who are infected with and affected by HIV and AIDS, the provision to implement universal precautions to eliminate the risk of transmission in an effective way, as well as provision for an effective and sustainable education programme on HIV and AIDS.
- HIV and AIDS Life Skills Education Programme (2000): Following on the adoption of the National Policy on HIV and AIDS for Learners and Educators in Public Schools, in 2000 Cabinet approved the National Integrated Plan (NIP) for Children and Youth infected and affected with HIV and AIDS. The NIP serves to inform the intervention strategies implemented to mitigate the spread of HIV and AIDS. One of the main interventions identified through this process was the Life Skills: HIV and AIDS Sexuality Programme. The main objective of the life skills programme is to integrate HIV and AIDS and relevant life skills (using sexuality education as a basis) into the school curriculum as a strategy to mitigate the spread of HIV and AIDS. The programme is funded through a conditional grant from the National Treasury. Peer Education has been identified as one of four focal areas of the conditional grant to support curriculum implementation and care and support activities within schools and districts.
- The HIV & AIDS and STI National Strategic Plan for South Africa 2007 2011 (NSP) recognises a number of roles for the Department of Education in preventing and mitigating the impact of HIV and AIDS amongst young people, the majority of which are closely aligned to the goals of peer education:
  - In terms of augmenting HIV prevention efforts, the NSP assigns responsibility to the Department of Education for developing and implementing strategies to address gender-based violence that can effectively address cultural norms and attitudes that promote gender power stereotypes and condone coercive sexual practices. Furthermore, the NSP recommends that the department undertake efforts that will reduce infection in young people with a special focus on young women. These efforts can centre upon policies and legislation to keep youth in school, strengthen school-based life skills programmes and enhance teacher training and ability to deliver quality life skills programmes to the youth.
  - The NSP also assigns responsibility to the department for developing and implementing targeted HIV prevention activities that will reach high risk out-of-school youth, as well as developing guidelines for schools to become places of care and safety for children and young people. Other prevention efforts for schools to undertake, according to the NSP guidelines, include encouraging pregnant teenagers to have an HIV test and establishing close referral links to facilitate access of HIV positive pregnant youth into PMTCT programmes.

- The education system also plays a significant role in achieving the objectives within the second pillar of the NSP, *Treatment, Care and Support*. Accordingly, the education system needs to increase care and support for orphans and vulnerable children through strengthening the implementation of OVC policy and programmes. Not only will such efforts serve to augment the care and support OVC youth receive, but such efforts may also succeed in reducing their vulnerability to HIV infection.
- In terms of priority area 4 of the NSP, Human Rights and Access to Justice, the Department of Education will ensure adherence to existing legislation and policy relating to HIV and AIDS in the education system. In order to achieve this, the department is required to develop and distribute a national guideline of children's rights in schools to access HIV and AIDS information, prevention, treatment, care and support. However, in order to facilitate access to useful HIV and AIDS information and services, the education system must attempt to forge effective referral networks and relationships that can assist youth in accessing prevention, treatment, care and support services.

#### 5.7. Peer education as an approach, intervention or strategy

Deutsch and Swartz (2002, p.37), preceding the development of the SAQA definition (SAQA 2009a), give a working definition of peer education focusing on the roles of the peer educator in an educational setting: Peer education is the process whereby trained supervisors assist a group of suitable learners to:

- Educate their peers in a structured way;
- Informally role-model healthy behaviour;
- Recognise youth in need of additional help and refer them for assistance; and
- Advocate for resources and services needed by young people.

Above all, peer educators create a safe space for candid and genuine examination of attitudes, choices and situations. This is often effective because people learn best when taught by others similar to themselves. Peers are defined as people who are similar in ways that are important to them; they are members from the same group who have some mutual characteristics and interests.

Peer education is different from other forms of peer outreach:

**Peer supporters** provide their peers with a situation where they can explore their problems and support them on an emotional level by listening to them and referring them to the appropriate help.

**Peer counsellors** assist peers in exploring their problems and assist them in taking action to address these problems. This is beyond the ability of learners not specifically trained for this role.

Peer tutors or mentors provide academic support for other learners in a one-on-one relationship.

The role of peer educators in schools is described in this document **as a combination of education and support**. Support is added here specifically because young people who have psychosocial problems may be especially vulnerable to engage in risk behaviour. While peer educators require training in norm forming and skill building, they also require training to support peers and to refer them to the appropriate services when they need help.

#### What peer education is not:

- Peer education is not a replacement for professional or formal education but an extension of education that promotes dialogue, information sharing, debate and discussion amongst peers (SAQA 2009a).
- Peer education is not a replacement for teachers or responsible adult involvement, and should not be seen as such. Peer educators are intended to compliment, supplement and strengthen the life orientation curriculum in the school and to strengthen community support networks.
- Peer education is not an alternative channel to put forward adult opinions. Peer education draws on the agency of young people to take the lead and to reach their peers outside of the control of adults.
- Peer education is not about giving advice on how young people should live. It is rather about actively acquiring information, examining attitudes and practicing skills. Helping young people to think, learn, ask questions, decide and recognise their own needs provides them with lifelong skills.
- Peer education does not provide therapy or treatment for learners with serious problems. Peer educators should not be overburdened with responsibilities that are beyond their ability.
- Peer education does not only involve training and development for peer educators. Personal growth of peer educators is frequently a positive by-product of the programme, but is not the programme's end goal. Rather, peer education programmes must reach out to peers in order to improve knowledge, establish and change norms and build skills on a larger scale (Deutsch and Swartz 2002).
- Peer education is not an inferior and cheap intervention. A supportive environment with the requisite resources (human, material, financial) is critical to ensure successful implementation. Peer education is not about placing a greater responsibility on a group of peers without supporting them.

# 5.8. Roles and responsibilities of peer educators

Peer education aims to achieve the following amongst peers (SAQA 2009b):

- Encourage positive life choices;
- Render personal support;
- Change behaviour;
- Enhance health seeking behaviour;
- Reduce risk behaviour;
- Promote leadership in schools by building capacity; and
- Promote an enabling environment.

The roles of a peer educator include, but are not limited to, the following (Deutsch and Swartz 2002; Ward et al 2008):

**Educator:** Provide basic information and skills to facilitate norm forming about healthy living to peers in a youth-friendly way in informal face-to-face, one-on-one discussions or in formal education sessions.

**Role-model:** Provide positive role models for healthy behaviour and reinforce values and attitudes in the form of positive peer pressure. Peer educators can exert informal influences when they are noticeable, genuine and credible.

**Supporter:** Build trusting relationships with peers, listen to their experiences and provide support to build self-esteem and to address their problems. (Programme boundaries need to be specific in what issues peer educators can address and when they need to refer learners to a professional).

**Referral agent:** Identify peers with problems that impact their behaviour and educational performance, support them and, if necessary, refer them to appropriate community agencies such as youth-friendly health or social services.

**Advocate:** Raise awareness of issues like inequities and services available; make school management aware of the learner's needs and advocate for resources. They can make learners aware of their rights and create an atmosphere of questioning.

#### Lesson learned: Value of a role model

One of the youth recipients in a peer education programme in South African schools was quoted as follows about the value of role models in peer education programmes: "You know that there are people out there who are abstaining and you can do the same thing. It dismantles the peer pressure build up because you know that not everyone has sex, some people do abstain. There is positive peer pressure to abstain now" Ward et al. (2008, p.67).

#### 5.9. Values that support peer education

To implement an effective peer education programme, all individuals involved should adhere to common values that assure activities of high integrity. In practical terms values can be reflected in a code of conduct developed for peer educators. An example of a code of conduct is provided in Annexure 3. Values include (Tanzania, Ministry of Health and Social Welfare 2008):

- Respect for, and the promotion and protection of the human rights of individuals;
- Participation of young people as agents of change on all levels of the programme, including planning, implementation and evaluation to assure that the programme addresses their needs;
- Sensitivity to, and respect for culture, traditions and beliefs of the community and the use of language that young people feel comfortable with to communicate. Stimulate constructive discussions on cultural practices that may contribute to risk behaviour;
- Respect for diversity including ethnicity, language, gender, disabilities and socio-economic class;
- Promotion of gender sensitivity and equality and re-evaluation of gender norms;
- Assurance and protection of confidentiality;
- Promotion of self-examination and expression rather than imposition of values or opinions onto others;
- Maintenance of personal boundaries in relationships by sharing honestly what one feels comfortable with;
- Provision of updated, correct and unbiased information; and
- Refraining from misusing the position of peer educator; rather trying to promote the wellbeing
  of peers.

# 6. Programme planning at national and provincial levels

# 6.1. Structural arrangements to facilitate peer education in schools

Before peer education programmes can be implemented in schools, a management system is needed at various levels. This section provides guidelines for the development of infrastructure, at the national and provincial level, to support the implementation of peer education programmes in schools. When the appropriate infrastructure is in place, then programmes can be implemented at district and school level.

# 6.1.1. Management of the peer education programme

A management system for a peer education programme refers to the processes to guide and control how the programme's policies and procedures are implemented and how programme objectives are achieved. The overall management of the peer education programme should be the responsibility of all tiers of the Department of Basic Education – national, provincial, district and school levels as well as key partners including other government departments and non-governmental organisations. Management of the programme includes coordination amongst the various role players at all levels.

# 6.1.2. Funding

As discussed earlier, peer education is not an inexpensive strategy. It requires significant resources and time for material development and for ongoing training, support and supervision. In addition, as peer educators age out of the programme, new peer educators have to be recruited and trained at minimum on an annual basis. Many peer education programmes are initially developed and implemented within the education system through the financial support of NGOs and donor funding. However, the scale-up and long-term sustainability, ownership and mainstreaming of peer education programmes depends on provincial departments making provision for programmes within their voted funds. This will ensure the availability of both human and financial resources to implement and monitor the programme's outcomes.

# 6.1.3. Roles and responsibilities

Peer education does not function in isolation. For peer education to function effectively in schools, a network of supportive relationships is necessary at various levels. Peer education is implemented into an existing school structure and needs to fit into that structure. It needs the buy-in and support of all stakeholders to be sustainable. The main stakeholders in peer education are the different levels of the DBE, the SGB, parents, SMTs especially the principal, educators and learners in the school, health services and other providers, and NGOs serving the specific community. All these stakeholders have a role to play in the programme to create an environment conducive to change. The specific roles of the different role players are outlined below:

# • National level

The national DBE is responsible for the overall management of peer education by providing guidelines for developing or identifying existing curricula and implementation strategies, leveraging resources and developing or refining existing M&E strategies. It can also play a role in ensuring that best practice models are identified, documented and widely disseminated. Peer education requires a multi-sectoral approach with linkages to other government departments and non-governmental organisations to develop and implement programmes. The national DBE can assist in facilitating such linkages.

#### • Provincial level

The provincial Department of Education is responsible for implementation of the programme: decisions about an appropriate curriculum, mobilisation of resources, coordination of training with NGOs and implementation with the district offices. Schools and district offices report M&E data to the provincial Department of Education to compile reports on the programme's effectiveness. The provincial department coordinates the activities of the various district offices. In some cases, this may be supported by an NGO partner.

#### • District level

Various units in the district offices can become involved with the implementation of peer education, such as the units managing school safety, health, values, whole school culture and inclusion. Collaboration between all relevant units in managing the programme is important.

A needs assessment should be done at district level to determine the focus of peer education in the district. District officials can assist each school in undertaking a brief needs assessment.

The peer education coordinator in the district office works with the steering committee of each school to plan and manage the day-to-day activities of the peer education programme. The district office can assist in determining each school's needs and, in reviewing existing programmes as well as those from NGOs, the district office can determine the appropriateness of programmes and adapt the programme to fit local needs. They coordinate the selection and training of peer educators and peer mentors and support programme implementation in the schools. They monitor the programme, coordinate data collection and reporting of the results. Such a model of decentralised management of programme activities contributes to direct involvement in programme implementation and the promotion of ownership of the programme.

#### School level

#### - School management team

The principal and SMT should support peer education and allow peer educators to take the initiative and lead the programme. Educators should play a supportive and guiding role. The SMT controls the school's resources such as time, venues, human and financial resources and need to approve all activities in the school. When principals promote peer education as an integral part of the school calendar of events, programme implementation improves significantly (Visser 2005). Specific time needs to be allocated for peer education activities, which are conducive for peer educators to access other learners, preferably within the school day or after school during the extra mural programme if this exists.

#### - School governing body

The SGB's role is to identify a **steering committee** to manage the implementation of peer education in the school. The steering committee should report back to the SGB about the functioning of the programme in the school. The SGB can also assist in facilitating communitybased activities that would ensure continuity of issues addressed by peer education within the school environment.

#### - Peer education steering committee

The steering committee for peer education should consist of the LO educator (often the programme's coordinator), representatives of educators, parents and learners. Where NGOs have been contracted to assist with programme implementation, they should be co-opted onto the steering committee. There may be various existing structures in schools that could be used for this function such as the school based support teams (SBSTs) or Health Advisory Committees. The steering committee should manage all aspects of the programme, such as the needs assessment, building of a referral network with health and social services, involvement of relevant stakeholders, selection of peer educators, assistance in implementation, coordination of data collection for M&E and reporting on the progress made. The steering committee should also organise meetings with the parents to gain their support for the programme. They can coordinate programmes directed towards motivation of health seeking behaviour among parents to encourage them to model healthy behaviour for their children.

#### - Peer mentors

The educator taking responsibility of the peer education programme in the school contributes largely to the programme's effectiveness. The peer mentor (often the LO educator or teacher liaising with the RCL) coordinates the steering committee and is responsible for the programme's implementation in the school. He or she should coordinate the selection of peer educators, support and supervise their work, support communication with the SMT, refer learners to outside agencies or partner NGOs and supervise the data collection on the programme implementation. The extent of responsibility assigned to the peer mentor requires the involvement of several educators.

Successful peer mentors demonstrate a genuine interest and commitment to young people's development, communicate easily with learners and are comfortable to discuss sexuality and emotional issues. These educators need skills in counselling, supervision and referral, motivation and advocacy. The educators need special training to equip them to manage the peer education programme in schools.

Managing the peer education programme should form part of the educator's work allocation, and not be an add-on assignment. If educators feel overburdened with teaching and administrative responsibilities, they cannot mentor peer educators effectively.

If an educator cannot be identified to serve as a peer mentor or if the school lacks capacity to coordinate a peer education programme, the services of a local accredited service provider or NGO can be used. The NGO will take responsibility to implement the programme in partnership with the LO educator and the steering committee. The NGO's activities should be regarded as part of the school and they should be actively involved in the day-to-day activities of the peer educators and have meetings with peer educators on a weekly basis. The NGO should report to the school's steering committee or the SBST and the LO teacher on a regular basis. Although it is preferable for the peer mentor to be part of the school structure, there is evidence that well-trained members of NGOs can make invaluable contributions to the effective implementation of peer education.

#### - Other educators in schools

All educators in the school should be aware of the goals of the peer education programme and should support it. They should be aware of the young people's needs. When educators adopt a learner-focused approach, the wellbeing of learners can be enhanced.

#### - Peer educators

Peer educators play a central role in the programme. They should give input into the management of the programme and decision making and planning where possible. Cooperation and teamwork among the peer educators is important for retention, motivation and productivity. Intra-site and inter-site activities between groups of peer educators is encouraged. Peer educators need a shared vision and commitment to practice new roles and to serve as role models for other young people. However, the effectiveness of peer educators receive training, supervision and guidance from adult staff members.

#### - Youth involvement

Youth participation in each stage of the development of the peer education programme will help planners better assess, identify and meet the needs of the youth/learners. In the long-term, youth involvement ensures that peer education is directed towards young people's needs, engenders an environment of shared-learning, shared-ownership, and enhances the perceived value of the programme among the broader school community. All learners should be encouraged to participate fully in the peer education programme.

Where possible young people should be included in the programme's decision making through focus groups and workshops.

Youth/learner participation can be enhanced by linking the programme to the Representative Council of Learners. The RCL should take the lead in peer education programmes by:

- Organising the needs assessment;
- Deciding on what the programme should address;
- Selecting peer educators; and
- Organising peer education sessions in schools.

#### - Parents/Guardians/Caregivers

Parents/guardians/caregivers should be included in the steering committee. Parental involvement is needed in the day-to-day functioning of the programme to identify needs, decide on the focus of the programme, help with resources, guidelines and referral sources and to manage implementation of the programme. This committee can make sure that the needs of the community are addressed in the programme.

The steering committee should also involve all the parents in creating awareness of HIV risks and healthy behaviour. Parents/guardians/caregivers should be enabled to develop open communication with their children, discuss health enhancing behaviour and model healthy behaviour. Change in the social environment is necessary to strengthen messages from peer educators. Peer educators need recognition and encouragement from their parents and open communication to reinforce a healthy lifestyle. Peer educators who are supported by their parents/ guardians/caregivers are more likely to be motivated as peer educators. Parents of peer educators therefore require additional support to enable them to fulfil this role.

#### • Community level

#### - Referral agencies

Linkages and partnerships with referral agencies (social workers, social protection services, health services, etc) are essential. Without the linkages and partnership, peer educators may easily feel overburdened, given that they are not trained to provide social or health services. Local health and referral agencies should be made aware of the peer education programme. They need to understand the ethos of peer education, help referred learners and provide feedback on how the school can assist the learner. If referral services are not prepared for learners referred to them, and are not welcoming (youth-friendly), it may demoralise the peer educators and can potentially diminish their credibility and role amongst their peers. If peer education is implemented effectively, the demand for health services will increase as more learners become aware of their needs and seek help (Campbell 2004; United Nations 2003).

It is strongly recommended that peer educators, with the support of peer mentors, visit the community's resources in order to know their location, understand their role and meet their staff personally. This will enhance the likelihood and quality of referral.

#### - Additional community stakeholders

The intended outcomes of peer education programmes will not be achieved without the active participation and ownership of the programme by stakeholders across all areas of impact. While the peer education programme may reside in the school, it reaches from the school into the community as a whole. As a result, linkages with the broader community will sustain and build community support for the programme. These include: police, recreational facilities, local business, media and local government.

#### - Peer education networks

Developing a peer education network between local schools can support peer educators through sharing ideas and forming an advocacy group to communicate the needs of learners. This network can use various forms of interaction such as Internet relationships formed under the supervision of the peer mentor.

The following section provides guidelines and examples of lessons learned in order to plan, implement and monitor peer education programmes in schools. They are summarised in Annexure 1 as a checklist of the key characteristics of effective programmes.

# 6.2. Developing a peer education management system

Programmes implemented by the DBE tend to be on a large scale and sometimes involve top-down approaches. As a result, strong coordination and management systems are required across different levels in the department to ensure effective implementation and management of the programme.

This should be based on agreed standards. Attention should be given by the provincial department leadership to providing district offices with a framework for the development of a strategic plan based on a situation analysis, involvement of relevant stakeholders, implementation of guidelines for programme development, and the set up of an overall M&E strategy.

# 6.2.1. Conduct a situation analysis or needs assessment

In the development of any intervention, it is necessary to base the intervention on the needs identified by the target audience. A needs assessment amongst young people in schools could focus on broad educational needs, social and psychological needs as well as risk behaviours that may impact on their lives. Sources of information for needs assessments can include:

- National research studies conducted on a regular basis, such as research conducted by the Human Sciences Research Council or the Medical Research Council. Such research can be used to identify social and behavioural trends among the youth.
- The Education Management Information System is a monitoring system within the education sector that collects information about each school on an annual basis. It can be used to identify problems in local areas as well as broad social trends.
- School level records of incidents and learner profiles can be used to identify local issues requiring attention.

If no information is available, a needs assessment can be conducted to identify issues that should be addressed.

# 6.2.2. Mobilise stakeholders

If peer education is to be implemented successfully, it needs to be included in the formal structure of the educational system and requires the support of all relevant stakeholders. The following steps should be followed to mobilise stakeholders:

- Identify the relevant stakeholders: officials of DBE at national, provincial and district levels, other government departments such as DoH and Social Development, donor organisations such as UNICEF, partner agencies, educational leaders, health professionals, community leaders, NGOs, trade unions and potential programme participants such as youth groups.
- Encourage stakeholders to be involved in the overall planning of the peer education prog-ramme and to support the programme.
- Work within the policy framework of the issue that is being targeted by the programme. In the case of HIV and AIDS, the NSP as well as policies within the education department on HIV and AIDS provide the guiding framework. Such an approach will ensure that programme objectives contribute to national, provincial and local plans.
- Identify and coordinate with existing programmes and networks to avoid duplication of efforts, to harmonise planning and to share resources. Develop partnerships with other programmes through joint programming, coordination and linkage of activities that benefit all parties equitably. The peer education programme should establish linkages with life orientation, life skills and gender equity programmes (for example Girl Education Movement (GEM) and Boy Education Movement (BEM)), and other such relevant programmes.
- Develop a communication strategy to maintain ongoing communication, consultation and feedback between stakeholders in order to enhance programme efficiency.

#### 6.2.3. Develop a management plan

The development of a management plan at provincial level, based on the needs and resources available, can guide the overall development, management and evaluation of peer education.

- Use the needs identified through the situation analysis to set goals for the programme.
- Take into account the available resources, demographics and level of involvement of young people of school-going age.
- Identify appropriate intervention strategies to address these needs. Peer education can be one of the strategies in a larger intervention to address these issues. Specify how peer education fits into the intervention plan.
- Develop a management plan including a strategic plan, operational plan, communication strategies, policies, M&E procedures, roles, responsibilities and performance appraisals of peer educators and peer educator mentors, indicators and time-frames. Develop a budget and get approval for implementation of the programme.
- Develop communication channels of reporting and feedback on a regular basis to allow for tracking of programme implementation and decisions on addressing gaps, problems and challenges.

#### 6.2.4. Determine the target audience of the programme

Determine a realistic number of schools, geographical areas and scope that is possible to reach, based on the available human and financial resources.

Make an effort to reach schools most in need of the programme. It is often poorly-resourced schools that need such a programme the most. However, these schools would require capacity building before the programme can be implemented.

Focus on target groups in schools, such as specific age groups to ensure that programme development is focused (as opposed to disparate), as well as age and developmentally appropriate. However, to avoid discrimination and stigmatisation, care should be taken not to single out learners with specific needs.

#### 6.2.5. Develop or adapt a peer education curriculum

A curriculum is defined as an organised set of activities or exercises ordered in a developmental fashion, designed to enable the target audience to obtain specific knowledge, skills and experiences (Senderowitz and Kirby 2006). The curriculum therefore consists of the overall goals, specific goals for each session, content, activities and strategies to be implemented to reach these goals. The curriculum contains the messages that need to reach young people. This curriculum forms the framework for peer educator training and the manual for peer education activities. A generic programme should be developed that can be adapted for use in local schools. These guidelines can be used to develop a curriculum or evaluate the content of existing programmes (Refer to Annexure 1).

The following guidelines apply to developing or adapting an existing HIV and reproductive health curriculum and are based on current evidence-based standards (Senderowitz and Kirby 2006).

• Use professionals with experience in curriculum development and knowledge of the target group to develop the programme.

• Use the situation analysis to understand current behaviour patterns, risk behaviours and motivation for risk behaviour and protective factors.

#### What promotes and perpetuates unsafe behaviour among learners?

High risk sexual behaviour is complex and is motivated by various factors. In a meta-analysis of 75 studies done in South Africa on the sexual behaviour of young people aged 14 to 35 years over the past decade, Eaton et al. (2003) identified various factors promoting and perpetuating unsafe sexual behaviour in youth. These include:

- Personal factors (such as low perception of risk, myths, lack of knowledge, low self-esteem).
- Interpersonal factors (such as negotiating condom use, male-dominated relationships, peer pressure, poor adult role models, substance use).
- Cultural and structural factors (lack of recreational facilities, poor living conditions, gender roles, poverty resulting in transactional sex, lack of discussion of sexual behaviour, and inadequate support structures).

These underlying factors must be addressed as part of the peer education curriculum, in particular, peer group norms, perceptions of sexuality and gender roles, poverty, substance use and setting future goals.

- Develop goals and objectives for the programme. Focus on specific behaviours to be changed (such as early sexual debut and age mixing).
- Use a logic framework that relates goals, desired behavioural outcomes and specific strategies based on a sound theoretical framework that explains how the intervention could contribute to behaviour change.
- A curriculum should focus on, among others: beliefs, knowledge, attitudes (evaluating the pros and cons of the behaviour), motivation to change, social influences (social pressure/support, modelling, social norms) and skills development (self-awareness, decision making, assertiveness, negotiation skills). It must be noted that focusing on knowledge and awareness alone is not enough to encourage behaviour change and is not the primary purpose or strength of peer education programmes.
- Programmes with a broader focus on the wellbeing of the learners that enhance positive lifestyles usually have a positive impact on learner behaviour as well.
- Include methods to develop a safe environment of openness and trust in the curriculum by developing ground rules and ice breakers.
- Use various participatory educational techniques to encourage participation, understanding and critical thinking.
- Use activities, messages and methods that are appropriate to the culture, age and sexual experience of the target group. To enhance age-appropriateness, an incremental approach towards programme development will be required. Alternatively, separate programmes can be developed for the junior and senior secondary phase according to their needs.
- Consider specific community values and traditions.
- Present information that is scientifically and medically accurate.
- Consider the availability of resources such as educator capacity, availability of technology and financial resources. (For example, programmes in low resourced schools should not require highly technical equipment.)

 Pilot test the curriculum on a small and similar group to evaluate the effectiveness of the content of the programme and the response of learners. Revise the programme accordingly and include the evidence into the curriculum.

#### Lessons learned: HIV messages

Various messages are used in peer education programmes to prevent HIV transmission. Examples include *Abstain, Be Faithful, Condomise* (ABC) and *Delay, Reduce and Protect* (loveLife). In deciding on HIV preventive messaging, the needs of the specific group and the norms and values of the community need to be considered.

Most school peer education programmes focus on abstinence-only messaging to encourage learners to delay sexual debut. Abstinence-only programmes may sometimes be effective in discouraging learners from becoming sexually involved, but do not change the behaviour of those who are already sexually active. These young people are often at highest risk of contracting HIV. Learners who engage in risky sexual behaviour may find the abstinence-only messaging alienating and may not receive the necessary information to protect themselves from HIV. The needs of these learners need to be taken into account in peer education programmes. There should be respect and acceptance of honesty and special attention should be given to promote both secondary abstinence and condom use. (A recommendation of Ward et al 2008 after studying peer education programmes in South Africa.)

#### 6.2.6. Develop a general plan for M&E

An overall M&E plan needs to be developed to assess various processes in implementation and outcome. The overall plan can be adapted to the needs and circumstances of the different districts and schools. A general M&E plan should include the following:

- Outcome and behavioural indicators are used to assess if goals were reached. Indicators are
  measurable statements of the programme's objectives and activities which reflect what the
  programme intends to change. Indicators can be used to track and assess whether these changes
  took place. Examples of outcome indicators are HIV prevalence and number of teenage pregnancies. Possible behavioural indicators to use are age of sexual debut, number of sexual
  partners, and condom use (refer to Annexure 2). The programme must also specify process
  indicators to understand if the programme was implemented as intended. Examples of process
  indicators are: number of peer educators trained, number of peer education sessions implemented and number of learners reached by the programme.
- Data collection tools or instruments: specify how data will be collected. Choose tools with care, particularly for HIV-related programmes, as sensitive information that is not easily observable or obtainable is tracked, such as age of sexual debut and condom use. Data is often recorded by peer educators through tracking forms, questionnaires, templates and diaries (refer to Annexure 2).
- **Reporting channels:** specify how the findings will be reported to inform the different stakeholders of the progress and outcomes of the programme.
- A training plan is needed to develop the capacity of those who will be collecting the data for monitoring and evaluation purposes. It is essential that data collectors understand the purpose or rationale of collecting data as well as the definition of data elements and indicators.
- **Data collectors** should, as far as possible, be the primary users of the data that is collected. This way data quality and evidence-based management can be enhanced.

#### Lessons learned: Indicators from Phase I of the Pilot Peer Education Project

The following indicators were developed to evaluate the Phase I of the pilot peer education programme tested by the Department of Education (2008):

Process indicators used to monitor the programme reach were as follows:

- Number of learners trained as peer educators;
- Numbers of learners reached by the programme activities;
- Number of peer education sessions completed; and
- Number of learners supported individually.

Attention should be given in the formulation of indicators to also include the denominator. This means that the number of learners trained must be given as a percentage of the total number of learners in the school.

The following behavioural and outcome indicators were used to demonstrate that the programme had an effect on the behaviour of learners:

Behavioural indicators:

- Number of sexually active learners;
- Age of sexual debut;
- Number of learners sexually active in the past six months;
- Number of learners with multiple sexual partners during the past six months;
- Number of learners who used condoms every time they had sex; and
- Number of learners who use alcohol excessively.

Outcome indicators:

- Number of teenage pregnancies in the school (from school records); and
- Number of learners with STIs (data from local clinic).

Data is often collected through self-reported questionnaires which may be biased because of inaccurate reporting of sensitive behaviour. More objective data collection includes biological records from clinics.

# 7. Programme implementation at local level

While the previous section focused on developing a management system at national and provincial levels, the following section focuses on preparations for implementation of peer education programmes at the district and school levels respectively. Similar infrastructure needs to be developed at this level to get started with programme implementation.

# 7.1. Mobilise local stakeholders

Implementation at the district and school level begins with mobilising stakeholders and promoting local ownership of the programme. Under the leadership of district coordinators, each school needs to establish a vision and commitment towards the programme, develop an implementation plan and organise resources. The following steps should be followed:

- Identify and consult with local stakeholders such as community leaders, service providers and LO educators of the targeted schools to build consensus on the goals, content and methods to be used and to get recommendations and feedback. Such a consultative process engenders ownership of the programme.
- Form a steering committee in each school, consisting of the LO educator as the coordinator, community leaders, representatives of parents, educators and learners. If an NGO has been identified to assist with the implementation of the programme, co-opt them onto the steering committee. The school based support team can be an ideal steering committee for the peer education programme. The steering committee should take responsibility for programme implementation at the local school and report to the district coordinator. Gaining the support of parents and the community will increase the acceptance of the programme.
- Develop a management structure with clear roles and responsibilities.
- Identify existing programmes addressing similar problems and network with them to avoid duplication of efforts, to harmonise planning and share resources where possible.
- The steering committee should provide a brief and concrete description of the programme to all local stakeholders, including the parents, community members, religious leaders, NGOs and service providers before the programme is implemented.

# 7.2. Identify the target groups and needs in each school

The peer education programme should be adapted to address the needs of young people in the target schools and the community they come from. This can be achieved through a needs assessment. The needs assessment should focus on, among others, behaviour patterns, commonly held myths, and barriers and motivations for responsible behaviour. The needs assessment will also inform language to be used, values of the community that should be respected and groups that are most at risk. Guidelines on conducting a needs assessment are as follows:

- The district office should conduct a needs assessment to identify the specific needs of learners in the district. Information gathered through the Education Management Information System can be used to identify trends and specific social problems that need to be addressed. If no information is available, a formal needs assessment can be conducted at district level.
- The district coordinator for the peer education programme must assist the steering committee at school level to conduct a needs assessment.
- The needs assessment should involve learners, parents, educators and community leaders.

- Select the most appropriate methods to conduct the needs assessment. The method chosen should be affordable, feasible and provide useful information within the time frame and resources available. A needs assessment does not have to be an elaborate and protracted scientific exercise. It can involve short surveys, discussions or informal interviews with learners, educators and parents. The school's records of problems or incidents of the past year can be used to identify problems or issues relevant to the school.
- Specifically, for reproductive health and HIV and AIDS programmes, information about HIV knowledge levels, risk behaviour patterns, commonly held myths, barriers to, and motivation for protective behaviour will be relevant. Informal discussions with young people can provide valuable information about these behavioural patterns.
- Use the results of the needs assessment to determine the focus of the programme and what community values and norms should be included in the programme.
- Obtain baseline data (that tells you what the current situation is before implementation of the peer education programme) on the extent of the problem to be addressed by using existing research data or obtaining data from other community organisations.

# 7.3. Determine local programme goals and objectives

- The steering committee, in collaboration with the district coordinator, should decide on the target group (all learners or a specific age group) and the most important issues to be addressed, using the target group's needs, feedback from stakeholders and the goals of the national peer education programme.
- Refine the programme's goals and adjust the content of the programme according to the target group's needs.
- The messages that are conveyed through the programme should be agreed upon by the district management and the steering committee in the school, based on the needs in the specific communities. Therefore there is no 'one-size-fits-all' message.
- Develop a formal process for engaging young people from the target group, from diverse backgrounds; seek their input and encourage their participation.

# 7.4. Assess and develop the school's capacity to implement the programme

Successful implementation of peer education programmes in schools depends on the availability of appropriate infrastructure and resources. This involves the provision of a budget, a physical space to meet, time for peer educators to meet with peers, commitment of the principal to the programme and skills of educators to support and mentor peer educators.

- Identify the resources (financial and non-financial) needed to implement peer education activities. Categorise each of the resources as available, readily accessible or currently unavailable.
- Develop a plan to obtain adequate funding and material resources needed for implementation through involvement of the district office, provincial education department or NGOs working in the area.
- Assess the commitment of the school management team and educators to implement the programme and develop a strategy to develop commitment.
- Create an enabling atmosphere in the school that encourages learners to take responsibility and to talk and advocate for their rights.

#### Lessons learned: Developing the school's capacity to implement peer education

The school's capacity to host the programme should be developed prior to programme implementation (Deutsch and Swartz 2002; Ward et al 2008). Schools that are already over-burdened should not be expected to carry another load. Large-scale implementation of the programme in schools that do not have the capacity is not cost-effective and is unfair towards all stakeholders, especially the peer educators. If a programme is to be implemented in such a school, the programme should develop a strategy to build sufficient support so that the programme can run in the school without an extra burden on the limited resources of the school (South Africa, Department of Education 2008; Ward et al 2008). The programme's success relies on the school's capacity to support it.

## 7.5. Develop the peer mentor's skills

- Identify educators who are able to serve as peer mentors (often the LO educator and other interested educators). In collaboration with the SMT, develop a formal agreement with the educators to include this role as part of their work allocation.
- Identify the skills and training needs of peer mentors. Provide training that includes tasks such as how to select and support peer educators. Peer mentors will require training in, amongst others, counselling skills, referral skills, motivating and supporting peer educators through supervising skills and how to manage the programme. The peer mentor is often the communication channel between the peer educators, the school management team and the steering committee.
- Prepare the mentors to create opportunities for peer educators to work effectively. Peer mentors should be able to train, supervise and motivate peer educators, understand the needs of young people, monitor budgets, generate income, provide reports, liaise with external agencies and organise data collection for monitoring and evaluation.
- Peer education mentors should be role models for peer educators by adhering to ethical and legal standards of behaviour.

# 7.6. Establish a referral system

- Identify organisations where peer educators, through the support of peer mentors and the SBST, can refer young people for services such as NGOs, local clinics, youth centres, counselling centres, police, social workers and child welfare agencies.
- Establish relationships with these local referral agencies; discuss how learners will be referred and how feedback will be provided.
- Ensure that the referral agency shares the programme's vision, is willing to assist learners referred to them and that youth-friendly services are provided.
- Provide peer educators with a list of the approved referral agencies, including contact information and guidance on how to make the referrals. This is a critical aspect of the programme. Without the appropriate referral mechanisms an unrealistic burden may be placed on peer educators and peer mentors to respond to the needs of learners that may well be beyond their scope. In addition, poorly developed referral systems may compromise young people's participation, trust and belief in the peer education programme.

#### Lessons learned: Need for youth-friendly services

The implementation of Phase I of the pilot peer education programme led by the then Department of Education (2008) showed that the absence of youth-friendly health services can negatively affect the quality of peer education programmes. When pregnant teenagers are sent to clinics and they are not accepted or helped, but rather reprimanded, it is damaging for the girls and the peer education programme.

## 7.7. Develop an implementation plan

- Develop a work plan that includes goals, objectives, activities, partners, resources, a budget and timeline and reporting strategies in collaboration with district coordinators.
- Plan for recruitment of peer educators, training, advocacy campaigns, training materials needed and where monitoring and evaluation will fit into the programme.
- Prioritise activities. First implement those activities that are essential to launch the programme.
- Determine whether the activities are realistic, based on the resources and capacity of the school. Identify potential barriers to implementation and discuss ways to reduce their effects.
- Develop a plan that fosters institutionalisation, ownership and sustainability of the programme. To sustain the peer education programme, the role of the peer educator should not be attached to a person, but to a position that needs to be filled. Recruitment and training will therefore be done at certain intervals and there should be advancement options for experienced peer educators, such as leadership and management positions. The ongoing provision of financial resources should also be planned to ensure the sustainability of the programme.

## 7.8. Plan the M&E of the programme

- Use the general M&E plan (discussed earlier) to decide on relevant indicators and methods for data collection (See Annexure 2).
- Include training on data collection in the training of peer educators and mentors.
- Establish ways of getting feedback about the programme from various stakeholders, especially learners. Ensure that the suggestions provided by programme participants are followed up on to improve the quality of the programme.

# 7.9. Recruitment and training of peer educators

#### 7.9.1. Criteria for the recruitment and selection of peer educators

The selection of peer educators to implement the programme is one of the critical steps to ensure the success of the programme. Hence investing time to set up sound criteria for the selection of peer educators is essential. To enable this process:

 Negotiate criteria for the selection of peer educators with the learners, educators and school governing body in each school. Discuss the selection criteria with other schools or nongovernmental organisations that have previously implemented peer education programmes as well as the district coordinator.  Keep in mind factors such as: availability, age, educational level, cognitive and emotional maturity, gender balance, motivation, previous experience, personal traits and potential for leadership.

What age group? There are various strategies that can be used. One strategy is to select learners from each grade to work with their own grade group and with learners in lower grades. Another strategy is to select older learners (such as those from the age of 15 to 16 years and upward) to work with younger learners. Young people require cognitive maturity to be able to understand the emotions of their peers. They also need emotional maturity to deal with the emotions and problems of others and to be able to separate these problems from their own experiences. If peer educators do not master this or get support to deal with this, the task of being a peer educator may prove to be burdensome and negatively affect their own development.

#### Lessons learned: Recruiting younger learners as peer educators

Phase I of the pilot peer education programme led by the then Department of Education (2008) demonstrated that some of the younger learners (Grades 7 and 8) felt uncomfortable dealing with sexual issues. They were also not confident enough to assert themselves among their friends and felt overwhelmed by the expectations of the programme. In addition, younger learners (especially younger than 15 years of age) were in the process of developing their own world view. Hence they struggled to show empathy for alternative world views. Such learners may be too young for the responsibilities associated with being a peer educator.

- Characteristics of peer educators: The ideal is to select a natural leader from the target group who is similar in age and socio-economic background; an individual who learners respect and can talk to; who can influence the behaviour of his/her peers. The peer educator should have good interpersonal skills, be involved with his/her peers and must be responsible and trustworthy.
- Actively involve learners with a diverse array of skills and demographic characteristics instead of choosing only from those who volunteer.

#### Lessons learned: Qualities of peer educators

Specific qualities to look for when selecting peer educators include, but are not limited to, the following:

- Ability to communicate clearly and persuasively with peers;
- Good interpersonal skills, including listening skills;
- A socio-cultural (gender, age, social class) background similar to that of the target group;
- Accepted and respected by peers;
- Non-judgemental attitude and ability to interact with people from different backgrounds;
- Strong motivation to work with peers;
- Care, compassion and respect for all people, including people affected by hiv and aids;
- Self-confidence and potential for leadership;
- Time and energy to devote to this work;
- Potential to be a safe sex role model for their peers.
- Reliable, trustworthy and ability to keep confidentiality;
- A good public speaker; and
- Having previous experience as a leader or helper can be an advantage.

(Deutsch and Swartz 2002; Family Health International Prevention Project cited in Campbell 2005; United Nations 2003; Visser 2005).

#### Lessons learned: Who should be selected as peer educators?

Peer educators are selected to serve as role models for their peers. What criteria should be set for the selection of peer educators? There are various arguments in setting the selection criteria:

Ward et al. (2008) in a review of peer education programmes in South Africa argue that learners with experience of risk behaviour, who have changed their behaviour to be in line with positive messages, can serve as good role models for other learners. These young people may be more approachable than learners who are the 'perfect' role models. The 'perfect' role models may not be able to make contact with learners with high risk behaviour who are especially in need of the programme.

However, Phase I of the pilot peer education study implemented by the then Department of Education (2008) found that learners with risk behaviour often dropped out of the programme because they felt they did not fit the expectations of the programme. When there are inconsistencies between the message and the behaviour of the peer educator, their message is often undermined.

## 7.9.2. Develop a standardised and transparent selection process

- Document the recruitment process so that it can be implemented fairly and ethically. Inconsistent selection processes can lead to favouritism and disagreements.
- Communicate how the peer educators will be selected to prospective candidates. The criteria should be implemented in a transparent way.
- Decide on a selection team consisting of members of the steering committee, educators, and RCL or existing peer educators. Professionals from referral agencies or NGOs can be included as key stakeholders.
- Recruitment can be preceded by an advocacy campaign initiated by the RCL and SMT to make learners aware of the role of peer educators and the kind of commitment the programme requires.
- Select a balanced team that represents the important criteria across the group. Individual peer educators do not have to meet all the criteria.
- How many? Select preferably a group of at least 10 peer educators per school. This should be made up of three to four peer educators to work with a particular group of learners. In other words, the selection of peer educators must not be random across the school population. A ratio of 1:50 learners in the school is suggested. A group of peer educators can have more influence on their peers collectively and can support one another.
- Select equal numbers of males and females; one gender should not be promoted over the other.

#### 7.9.3. Set clear expectations, roles and performance standards

- Develop a clear set of expectations, roles, responsibilities and behavioural standards in the form of a code of conduct for peer educators (example in Annexure 3). Clarify tasks and time commitments expected of them. Be realistic about what they can accomplish with their level of skills and education.
- Specify that peer educators report on a regular basis (weekly) to their mentor or supervisor as a mechanism for control and supervision.
- Review these expectations with all peer educators; get their input and formalise it in a written agreement.

- Clarify the period of engagement. Peer educators are generally assigned for one year but it is preferable that they are involved in the programme for more than one year. In the second or third year a new agreement should be signed.
- Specify procedures to take corrective action in the case of non-compliance with the code of conduct. The contract with a peer educator can be terminated in case of unethical behaviour or if the peer educator's behaviour negatively influences the behaviour of their peers.

## 7.9.4. Establish a reward system

It is essential to motivate peer educators and peer mentors through different forms of rewards, recognition or compensation for their time, effort and expenses (United Nations 2003). Helping others is a motivation in itself and volunteers may feel proud, respected by others and acknowledged, but additional rewards are required. Additional rewards tend to build accountability among peer educators, enhance motivation and wins parental support, especially if peer educators come from low income families. It is also a mechanism to prevent attrition from the programme – often cited as a significant challenge of implementing peer education programmes!

- Agree on appropriate recognition and rewards for peer educators and their mentors, such as T-shirts and badges, public recognition, awards, social and recreational activities, which build identity and strengthen the social support network amongst peer educators. (Note: Transport allowance and meals should not be regarded as incentives, but rather as basic support provided to the peer educators by the programme.)
- Make sure the reward system is fair and that everyone knows the criteria for receiving awards or opportunities.
- Create advancement opportunities to reward positive behaviour such as leadership positions within the programme. Peer education positions can be graded into junior, senior and mentor positions, where the mentor takes responsibility for the junior peer educators, become cotrainers or participate in recruiting new peer educators.
- The programme can contribute to skills development, be a corridor to leadership courses, bursaries and exchange programmes that can influence peer educators' career paths. Emphasise this benefit during the recruitment of peer educators. These benefits are often not recognised by peer educators at first, but become important as they progress through school.
- Acknowledgement for peer mentors should also be considered. Awards can be given to the best peer mentor and the schools where peer education is functioning exceptionally well.
- As the programme gains momentum and becomes more structured over time, consider accreditation for peer educator training and outputs.

## 7.9.5. Training of peer educators

Peer educators should be trained to have the knowledge and skills for each of their roles: education, support, referral and advocacy. No training workshop can fully prepare peer educators for all the tasks involved, they therefore need continuous training, integrated with support and supervision.

- Use qualified, well-informed trainers who are responsive to the needs of young people and sensitive to cultural and gender issues. Consider hiring trainers on a contract basis if the DBE does not have its own trainers. NGOs can often fulfil this role well.
- Use a quality training manual that is consistent with the guidelines of peer education and devel-

oped to fit the peer education curriculum. The training programme needs to be broader than the curriculum, because peer educators need the background, knowledge, skills and motivation to implement the programme.

- Include skills to promote each role of the peer educator: educator, role model, supporter, referral
  agent and advocate. Peer educators need the following skills: communication, active listening,
  session management, problem solving, teamwork and leadership skills (SAQA 2009b). Note that
  although the primary role of the peer educator is not knowledge transmission, failure to provide
  peer educators with accurate and factual information can result in them perpetuating myths
  and stereotypes. Take time during the training session to ensure that peer educators are well
  informed on the subject under discussion.
- Encourage learner participation and interactive learning through activities such as discussions, games, skills-building exercises, role play, drama, storytelling, scenarios, surveys, real life case studies, problem-solving activities, home work assignments, dance and sport.
- Use small groups of 10 to 15 learners to facilitate interactive learning. Arrange groups according to age and shared characteristics to allow for discussion of sensitive issues. Younger peer educators (12–14 years) may have different life experiences than older peer educators and may feel uncomfortable discussing some issues.
- Challenge peer educators to think critically about current group norms, behaviour patterns and relationships. This can strengthen their role as advocates for health-seeking behaviour.
- Allow sufficient time for practicing skills in role play situations.
- Initial training should be at least five days (or 30–40 hours) long to allow peer educators time to develop their skills and build a sense of their role as a peer educator.
- Avoid overloading the trainees with too much information. Training can continue through ongoing mentoring, supervision, meetings and exchange visits to other programmes.
- Training should preferably use the vernacular of peer educators. Peer education deals with very personal information which is dealt with easier in their mother tongue.
- Provide peer educators with the practical handouts they need to use in the training session and in their work with their peers. It should be in the language learners are most comfortable with and appropriate to the local environment.
- Develop and enforce a code of conduct for peer educators, using guidelines in Annexure 3 as examples.
- Conduct refresher training within six months of the initial training to refine the peer educators' skills, teach new skills where gaps were observed and allow discussion of real life situations they experienced.
- Evaluate the training through monitoring the skills peer educators acquire. Allow the peer educators to evaluate the trainers and the training programme in an anonymous way to identify areas where the training can be improved.

#### Lessons learned: Themes to address during training

Suggested for themes to address in the initial training programme (Department of Education 2008; Deutsch and Swartz 2002; Family Health International 2009):

- Personal development exercises such as self-knowledge and self-esteem builders.
- Information about the issue/s addressed (such as HIV and AIDS information).
- Underlying gender and socio-cultural/socio-economic barriers to behaviour change.
- The psychosocial impact of HIV, stigma and human rights.
- Presentation skills.

- Participatory techniques to engage peers in problem-solving dialogue about behaviour change.
- Basic communication and counselling skills.
- How to support and refer vulnerable peers.
- Discuss values underpinning peer education and ethical behaviour.
- Logistical issues behind managing the programme such as data collection for monitoring and evaluation of the programme, how often to conduct sessions, and how to give and accept feedback for continuous programme improvement.

# 7.10. Implementing peer education in schools

Peer education aims to influence the behaviour of peers in a positive way. If peer education is to be implemented successfully, the programme should be integrated into the mainstream of education activities. This will allow the peer educators time and contact with their peers to build relationships so that they can influence behaviour. This is often an area where peer education programmes fail. Peer educators often have too little contact with their peers (Deutsch and Swartz 2002). More attention should be focused on reaching peers in schools. The success of this strategy was confirmed by a study in Tanzania that showed that high levels of exposure to peer educators was associated with higher level of knowledge, intention to use condoms, lower stigma and increased condom use at last sex among the learners (Svenson et al 2008).

Ensuring successful implementation of the peer education programme is critical as poor outcomes of peer education programme often result from poor levels of implementation (Swartz 2003).

## 7.10.1. Models of peer education in schools

There are many different models for implementing peer education interventions in schools and there is little definitive research to tell us which models work best under which conditions. Therefore, it is very important for planners to choose the model that will best fit their circumstances and setting. Aspects of different models can also be integrated according to the needs and resources at school level. Understanding these models and their particular advantages and disadvantages is the first step in this process. These models may be selected from those that exist within provincial Departments of Basic Education or from those developed by credible NGOs with a peer education track record.

## • Formal curriculum-based peer education as part of Life Orientation

This model provides peer educators with a structured manual and lesson plan activities to implement as part of the Life Orientation curriculum, in class under the supervision of the LO educator. In this model, life skills training and peer education are integrated into one programme where different actors (educator and peer educator) present different parts of the curriculum. It must be noted that when educators and peer educators are involved in presenting the curriculum, each should focus on aspects of the curriculum that they are best at. For example, educators do best at providing information, while peer educators do best at norm forming activities.

#### Advantages:

- All learners in the school can be exposed to peer education.
- Interaction between educators and peer educators is strengthened.
- Peer education is acknowledged as part of the formal structure in the school.
- Peer educators can continue to deliver peer services outside the school context and ensure strengthening of the LO outcomes from the school context through to the community.

#### Disadvantages:

- If peer educators are not available in every class, some peer educators may be withdrawn from their own classes to present lessons in other classes.
- Educators may retain control of peer educators' lessons, thereby inhibiting spontaneous discussion amongst peers.

#### • Curriculum-based peer education in addition to Life Orientation

This model provides peer educators with a structured manual and lesson plan activities to implement in addition to LO. Time is allocated on the timetable for peer education where the whole school is available (such as an activity period). The peer educators can use this period to present their lessons in small groups. This is done under the supervision of the Life Orientation educator.

#### Advantages:

- All learners in the school can be exposed to peer education.
- Learners can be organised in different groups other than just the class setting.
- The presentations can be youth-friendly.

#### Disadvantages:

- Peer educators need the buy-in of the SMT to allow space on the timetable without disadvantage to other subjects.
- Peer educators need to be well-organised and effective in order to maximise the time they have with learners.
- Quality assurance of messaging may be needed to ensure that it compliments LO outcomes.

#### • Peer education as part of youth participation in school

For this model, peer education is institutionalised as part of the learner leadership development programme. This often falls under the auspices of the Representative Council of Learners. When peer education is included in the activity schedule of the RCL, the activities of the peer educators can be coordinated with other learner-driven activities in schools. The LO educator supervises the peer education activities which are mainly presented after school as an extra-curricular activity. With RCL support, the peer educators can organise youth-friendly activities to raise awareness of high-risk behaviours and involve learners in activities. The focus in this model is on awareness, participation and the modelling role of the peer educator to influence their peers' behaviour.

#### Advantages:

- Peer educators are in a position to take the initiative and lead programme development and implementation.
- Peer educators can reach peers through youth-friendly ways.
- Peer educators can present various activities to involve their peers.

#### Disadvantages:

- This model is less structured, with less adult involvement peer educators need to be motivated and need to motivate learners to participate.
- Activities that encourage participation usually focus on awareness and fun and might not address deeply-rooted behavioural issues and critical thinking about peer group norms.
- Activities are scheduled out of school hours and compete with other activities such as sport or cultural activities. Transport problems can also serve as barriers to attendance of activities.
- Attendance is voluntary; therefore all learners will not be reached by the peer education activities. In fact, evidence shows that only the most motivated will participate.

#### Lessons learned: Models of peer education

Field experience in South Africa showed that peer educators who were accommodated as part of the LO curriculum had appropriate contact with their peers and exposure in the school to convey their message (Department of Education 2008). Educators were of the opinion that the peer education programme worked best when integrated into the LO subject area, since the content areas are aligned. Peer educators had a specific time scheduled as part of LO class activities to share their messages with their peers, without having to schedule extra time after school. In this way peer educators have support and acceptance as part of the school structure. The peer education programme is then formally part of the educators' workload and not additional to their normal workload.

Additionally, evidence from international research shows that structured, curriculum-based programmes that are intensive and focused have the most positive results (Senderowitz and Kirby 2006).

## 7.10.2. Implement curriculum-based peer education

- Choose a curriculum and lesson plan that addresses the needs of learners in the school and shows evidence of being effective. Lesson plans enable peer educators to convey information, share experiences and develop skills. Without specific lesson plans, their lessons often do not go beyond providing factual information.
- Provide peer educators with all the necessary materials for leading the sessions.
- Provide time for peer educators to plan the implementation of the sessions and to practise role play situations to ensure that they are confident to facilitate sessions.
- Negotiate the time and venue for the sessions with members of the target group and schedule sessions around their availability. The venue needs to allow for interaction, be comfortable and private.
- Involve the same group of learners in a series of sessions where different themes are addres-sed. Life skills training requires complex and sequential activities. As a result, a few sessions (three or four) may have limited effect. Sessions should be scheduled using intervals between sessions not exceeding one week. Field experiences showed that at least 10 sessions were needed to impart knowledge and skills for long-term behaviour change (Tanzania, Ministry of Health and Social Welfare 2008).
- To retain learners' attention and interest, do not schedule sessions for longer than two hours.
- Use youth-friendly participatory activities, games, debate, discussion and questioning in small groups not exceeding 20 participants to encourage participation. Participation contributes to ownership, responsibility and control of learners' sexual health.

- Encourage discussions, challenge beliefs regarding gender roles and positively influence group norms underlying risky behaviour.

#### Lessons learned: Structured versus unstructured sessions

Kirby, Obasi and Laris. (2006) have shown in research on HIV education programmes in developing countries' schools that structured sessions, built into a coherent whole, were more effective in changing behaviour than unstructured sessions. Unstructured sessions could result in misinformation, a lack of skills training and a negative impact on the peer group. In addition, programmes with limited sessions had minimal effect on behavioural outcomes, whereas long-term programmes had a larger chance of resulting in behaviour change.

## 7.10.3. Maintain ethical standards

- Maintain ethical standards and high quality facilitation in groups, according to the code of conduct developed for peer educators during the training (based on guidelines from Annexure 3).
- Establish ground rules for group interaction, including respect, confidentiality and punctuality. These rules should be adhered to throughout the programme.
- The climate in the group should be such that learners are willing to share experiences and discuss sensitive topics such as sexual experiences or exposure to HIV. Learners' experiences should be treated with respect and they should not be stigmatised.
- Refer learners with specific needs, beyond the ability of the peer educators, to agencies that can help them according to the agreed upon referral structure.
- To ensure effective implementation of the code of conduct, peer educators will require training in ethical standards as well as support from the programme staff in upholding these ethical standards. For example, for peer educators to protect confidentiality, programme staff would need to provide training and supervision on how and when to protect confidentiality outside of peer education sessions.

#### Lessons learned: Gaining acceptance from peers

Phase I of the pilot peer education programme implemented by the then Department of Education (2008) showed that the first challenge faced by peer educators was to gain acceptance from their peers. At first the learners did not take them seriously, did not respect them and did not discuss their problems with the peer educators. Learners responded with resistance. It took time for the peer educators to build trusting relationships and to gain the support of their peers who had to get used to the new role of peer educators (South Africa, Department of Education 2008; Visser 2005).

#### 7.10.4. Monitor and evaluate sessions

- At the end of each session the peer educators should document and evaluate the session with the tools that are part of the programme (attendance sheets, evaluation forms, etc) or review what was learned to assess the level of understanding of the material covered.
- Use feedback and the data obtained from session evaluations to improve the content and delivery of other sessions.

## 7.10.5. Provide supervision and support

Peer educators are not professional teachers or counsellors. They might be faced with difficult issues they are not trained to deal with. They need ongoing weekly supervision and support to ensure high quality programme implementation. The goals of supervision and support are to:

- 1. Motivate peer educators;
- 2. Help peer educators deal with specific cases, trauma and emotional issues of learners;
- 3. Help peer educators deal with their own problems and relationships;
- 4. Develop peer educators' skills and time management; and
- 5. Monitor programme implementation to keep the programme on track or change it to be more effective.

If peer educators do not have support they may become demotivated and overburdened.

## Lessons learned: Role of the peer mentor

The role of the mentor is to support, encourage, help with realistic planning and to get permission from the school management team, but not to control the peer educator programme. Some research suggests that educators frequently take control and do not allow the peer educators to take initiative (Campbell and MacPhail 2002). Other research has found that some educators are completely uninvolved in the programme (Visser 2005). Neither of these scenarios enhance the peer education programme. Mentors should be involved, offering on-going advice and support, but in a non-directive way. They should not be too rigid or controlling since this would undermine any sense of 'youth ownership' of the programme (Campbell 2004).

- Peer educators need continuous support and supervision to deal with new issues and to develop new skills. Peer mentors should be readily available to peer educators to answer questions, provide feedback and offer support.
- Support should be linked to the training programme to develop the skills of peer educators.
- Peer mentors who were trained in the start-up phase should be skilled, committed, available and informed about the content of the programme and methods used to implement the programme. Supervisors need to be sensitive regarding the group dynamics and emotional issues of peer educators. They should facilitate supervision and team building skills.
- Peer educators are more responsive to supervisors whom they view as friendly and understanding rather than controlling.
- Peer mentors must review the code of conduct (refer to Annexure 3) and performance expectations with peer educators before the peer educators start their work with their peers. Reinforce compliance with ethical behaviour throughout the programme.
- Conduct supervision sessions in one-on-one or in group meetings. The atmosphere of meetings should encourage teambuilding, conflict resolution and constructive criticism. It is suggested that meetings be held once a week, but should be determined by the context and the needs.
- Track the performance of peer educators regularly, monitor personal limitations and note skills that should be included in refresher training.
- Motivate peer educators, promote opportunities for personal growth and guide them towards personal development.

- Make sure that peer educators receive incentives that motivate and relieve stress in a timely way.
- The trainers (from the DBE or contracted for the project) and coordinators from the DBE district
  office should visit the schools at least four times per year to follow up on progress, supervise and
  provide on-going on-site training.
- Develop a peer education network at district level where peer educators from various schools can share ideas and support one another through various communication channels. Contact need not be face-to-face at all times – Internet contact can be implemented, provided that it is done under the supervision of an educator and that ethical guidelines are adhered to. A peer education network can form an advocacy group to communicate the needs of learners to educators and DBE officials as part of the programme's management.

## 7.11. Management of peer education

- Establish a working group at the district level, consisting of the district coordinator and a representative of each school to manage effective implementation. Networking amongst schools can contribute to motivation and sharing of best practices.
- At the school level, the steering committee must oversee programme implementation.
- The management committee needs to be technically competent to manage and monitor programme implementation. Build their competence through training, sharing lessons, attending discussions and site visits.
- Ensure compliance with the national standards and policy guidelines. Initiate corrective action when shortfalls are identified.
- Train young people and adults to work together and share responsibility for decision making on the programme. Cooperation includes: asking for and providing assistance, giving and receiving feedback, participating in decision making, taking responsibility and motivating each other.
- As the programme matures, educators and peer educators can take more responsibility and accountability for the project.
- The steering committee and peer educators must develop indicators of quality services (conducting small groups, organising events, referring) and institute corrective action when quality standards are not met.
- Develop programme portfolios with photographs, recordings, reports and data, which can be shared at stakeholder meetings and used for evaluation purposes.
- Develop effective management of human and financial resources.
- Develop a clear participative decision making process.
- Review data collected as part of M&E regularly to inform programme decisions and to highlight gaps, problems and challenges to correct or improve. Do not to wait until the final report has been completed before using the data to improve the programme.
- Foster sustainability of the peer education programme by establishing it as part of the school structure. According to the Tanzanian Ministry of Health and Social Welfare (2008), sustainability depends on whether the programme:
  - 1. Complies with national policies;
  - 2. Keeps stakeholders involved and updated on programme development (public relations);

- 3. Has a strategic plan available to retain peer educators and replaces those that leave school or resign and implement a succession plan;
- 4. Has a strategic plan to mobilise resources (financial and non-financial) needed beyond the programme's term; and
- 5. Takes ownership of the programme and tries to improve its functioning.

# 7.12. Reporting, monitoring and evaluation of peer education

Monitoring and evaluation of the peer education programme is essential to obtain tangible evidence of the impact of peer education in schools. To obtain accurate data about how the programme is implemented (what is working and what is not) and its achievements, it is necessary to develop evaluation plans carefully. Programmes are not implemented in a vacuum and there are many influences that may have an effect on young people's knowledge and behaviours. Other influences must be considered before making conclusions about programme success.

- Use a standardised M&E system, developed at the national or provincial level, for reporting. (See Annexure 2.)
- The collection of data should be managed at the district level. The district coordinator should provide guidance for mentors and peer educators on how to collect the data.
- Decide what data will be collected, by whom, how, how often and who will analyse the data.
- Data should be analysed at school and district levels for improving the programme.
- Data flow should be outlined. It is suggested that districts report to provincial and national departments every six months.
- External evaluators can be approached especially in the planning of M&E and in the analysis of data. External evaluators are often more objective and can minimise bias in results.
- The ideal assessment team would be composed of adults and youth experienced in working with youth. The team should be reflective of the socio-demographic characteristics of the participants to enhance open discussion.
- The assessment team should have basic skills such as language fluency, interviewing skills, notetaking and report writing skills as well as knowledge about ethics regarding confidentiality and special issues for interviewing youth.
- Results of the evaluation process can be used in grading the quality of the peer education programme at school level. Rewards for schools, peer mentors and peer educators can be based on the results of the evaluation process.

## 7.12.1. Monitoring

- Ensure the staff's capacity to plan and implement M&E, or identify external support to assist in developing capacity. Peer educators and their mentors are the main role players in reporting on activities in schools, therefore they need to be trained on how to document the relevant information.
- The monitoring plan needs to be developed in the starting-up phase. It is an ongoing process
  that should begin from the very start of the programme and is part of every aspect of the
  programme, including recruitment, training, peer education activities and supervision. All
  programme developments need to be documented throughout.

- Choose functional and relevant indicators to track and measure performance towards the programme's goals. Choose indicators that are easy and practical to track. For example, number of peer educators trained, number of meetings held, number of sessions held with peers, number of peers attending, number of referrals made and level of community participation. Examples of outcome indicators are number of teenage pregnancies in school and number of learners reported for alcohol and drug use.
- Review indicators with mentors and peer educators to obtain their input and gain an understanding of their expectations.
- Develop or adapt and use monitoring tools such as questionnaires, diaries, activity reports, discussions and tracking forms to document and measure performance and progress. Train peer educators to use these tools. (Informal discussions with learners can also provide valuable feedback about the programme.)
- Establish mechanisms to ensure the quality (accuracy, reliability, credibility and timeliness) of any data collected. Mechanisms include regular supervision, spot checks of documentation and focus group discussions among participants and stakeholders.
- Gather data on a regular basis to control implementation, to make sure it is on track or to suggest plans to get it back on track.
- Data collected should be used at school level to improve programme implementation.

## 7.12.2. Evaluation

Various forms of evaluation can provide information about the quality and effectiveness of the programme. Data is needed at each level. The school and district should be able to assess the effectiveness of programmes such that strategies can be devised to improve the programme. The data is also important for managers and donors to decide on programme effectiveness. A combination of qualitative (e.g. interviews) and quantitative (e.g. surveys) methods is recommended.

- Before conducting an evaluation all participants in the programme should be informed about the goal and process of evaluation. It may be necessary to notify and obtain permission from parents of the peer educators and learners to be interviewed. Discuss the type of questions to be asked and issues about confidentiality and anonymity.
- To assess the quality of programme components, interviews should be conducted with all relevant stakeholders: the peer educators, peer mentors, staff and management, learners, parents and community members.
- Information is necessary about stakeholder participation, parental involvement, youth involvement, youth-adult partnership, peer educators' cooperation and community involvement (Family Health International, 2006).
- The quantitative evaluation should be planned before programme implementation starts, to assure that baseline data is available to compare with the outcome data. The outcome evaluation should be done once the programme is well-established.
- Where possible, evaluation should be coordinated by the national and provincial departments
  of education using a randomised controlled trial. Results should be disseminated at meetings
  with stakeholders and programme partners. Results on best practices and challenges can
  contribute to improvements in delivery at all levels of implementation.

- Ensure that the information collected is kept confidential and no personal data is shared with others outside of the evaluation team. Treat the data with care because it is often data of a sensitive and personal nature.
- Reports must be produced for the DBE to be informed of developments and to be used in the planning and future management of the programme.



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Development of a peer education mana	Development of a peer education management system (at a national and provincial level)	Rating
Conduct a situation analysis and needs assessment	A situation analysis was conducted to understand overall behaviour and needs of the target group to inform programme development.	Yes/No
Mobilise stakeholders	Ongoing communication strategies are established between relevant stakeholders (government departments, NGOs, trade unions, youth groups etc). There is consensus on the value of the programme, goals, content and methods. The programme adheres to principles of the national policy frameworks and DBE policies.	Yes/No Yes/No Yes/No
Develop a management plan	There is an overall comprehensive management plan to implement the programme. Stakeholders were involved in development of the management plan. Linkages with related programmes were established.	Yes/No Yes/No Yes/No
Determine the target audience	Schools, areas and scope of the target group were identified based on available resources. Schools most in need and groups in schools that can benefit most are targeted.	Yes/No Yes/No
Develop the peer education curriculum	The curriculum is based on actual needs of the target group and community values. The curriculum is based on theories of behaviour change, relating to risk and protective factors. The curriculum is developed in collaboration with relevant stakeholders, including	Yes/No Yes/No Yes/No
	young people. It has a detailed action plan with clear, measurable goals, strategies and activities and implementation plan. The programme includes knowledge, skills training, development of attitudes and	Yes/No Yes/No
	personal responsibility, and motivates healthy behaviour. The programme uses participatory educational techniques. The programme is appropriate for culture, gender, age and sexual experience of the target group.	Yes/No Yes/No
	The programme addresses key values of the community. The programme provides evidence of effectiveness with target audiences.	Yes/No Yes/No
Learning objective	After the programme learners should be able to: Demonstrate a clear and accurate understanding of sex, sexuality, gender and STIs. Identify ways in which HIV can and cannot be transmitted. Identify the effectiveness of HIV prevention methods. Critically evaluate reasons for delaying sexual intercourse.	Yes/No Yes/No Yes/No Yes/No

Development of a peer education mana	Development of a peer education management system (at a national and provincial level) (continued)	Rating
Content	Understand own beliefs and attitudes. Translate new skills into actions. Respond assertively to pressures for sexual intercourse and unprotected sex. Know where to find help and support. Show compassion towards persons living with HIV. Provide care for people with HIV in the family or community. Include appropriate, medically accurate information related to a healthy lifestyle. Use skills in decision making, negotiation, assertiveness. Promote responsible attitudes and personal responsibility. Discuss peer group norms and advocate change in social norms related to sexuality and gender roles. Provide motivation and support. Be self-aware and deal with own feelings and problems.	Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No
General monitoring and evaluation plan	The programme has an M&E plan including behavioural indicators, data collection instruments, reporting channels and training for participants.	Yes/No
Programme implementation at a local level	evel	
Mobilise local stakeholders	Local stakeholders (community leaders, service providers, school management, LO educators, learners and parents) were consulted to create local ownership. There is a steering committee in each school to take responsibility of implementation and management of the programme. The programme is coordinated with similar programmes in the community.	Yes/No Yes/No Yes/No
Needs assessment in each school	A needs assessment was done, involving learners, educators and parents to assess risky behaviour, barriers and protective factors to determine the focus of the programme.	Yes/No
Determine local programme goals and objectives	The goals and content of the programme was localised according to the needs of the target group. Learners were involved in decisions about the content of the programme.	Yes/No Yes/No
Assess and develop capacity in the school to implement the programme	The infrastructure and resources needed for the programme are available or developed (committed staff, venue, time for contact with peers, budget etc). There is an enabling atmosphere in the school that encourages responsible behaviour.	Yes/No Yes/No
Develop skills of peer mentors	Educators are identified as peer mentors. Peer mentors were trained to provide supervision, support and to manage the programme. Peer mentoring is accepted as part of the educators' work allocation.	Yes/No Yes/No Yes/No

Programme implementation at a local level		каппg
Establish linkages and referral system	Programme has established relationships with local referral agencies and has agreed upon a referral strategy. Referral agencies share the vision of the programme and provide youth-friendly services.	Yes/No Yes/No
Develop an implementation plan	There is a realistic implementation plan that includes goals, objectives, activities, partners, resources, budget, timeline and reporting strategies. There is a strategy to foster local ownership and sustainability.	Yes/No Yes/No
Plan M&E	The M&E plan and data collection tools are adjusted for local use. There are communication channels with stakeholders to improve the programme.	Yes/No Yes/No
Recruitment and training of peer educators	itors	
Criteria for recruitment and selection	Criteria for recruitment and selection of peer educators are established.	Yes/No
Develop selection process	There is a standardised and transparent selection process which includes learners' participation. Participation. Peer educators consist of a balanced team, selected from different social groups. The ratio of peer educators per learners in the school is 1:50, or at least 10 per school. Peer educators have interpersonal skills and understand learners.	Yes/No Yes/No Yes/No Yes/No
Set expectations, roles and performance standards	Roles, responsibilities and performance standards are realistic and agreed upon. Peer educators signed a written agreement for a year. There is an agreed-upon plan for corrective action in case of non-compliance with performance standards.	Yes/No Yes/No Yes/No
Develop a reward system	There is an incentive system with recognition, rewards and recreational activities for motivation. There is a grading system with advancement opportunities to reward positive behaviour.	Yes/No Yes/No
Training of peer educators	A quality curriculum, a training manual and practical handouts are used. Training includes skills for each role of peer educator: knowledge, skills training, how to present information to peers, listening and referral skills, teamwork and leadership skills. Training uses a participatory learning approach in small groups, with focus on skills development and critical thinking. Training consists of at least five days, followed by continuous mentoring, supervision and refresher training. Experienced trainers, who are well-informed and responsive to the concerns of young people, are used. Training is evaluated and feedback used to improve the training.	Yes/No Yes/No Yes/No Yes/No Yes/No

Peer education implemented with peers	S	
Models to implement peer education	Peer education is implemented as part of the school structure with appropriate contact with peers.	Yes/No
Implement curriculum-based peer education	Peer educators use lesson plans of the curriculum-based programme in contact sessions with peers. Learners participate in a series of sessions with different themes with minimum exposure of four to eight hours. Lessons include youth-friendly participatory activities in small groups that involve story- telling, role play, case studies, games, questions and debate. Include strategies to create a safe environment. Lessons invite participation and a safe place for honest discussion of personal and	Yes/No Yes/No Yes/No Yes/No
Maintain ethical standards	sensitive material. Peer educators adhere to the code of conduct and ethical standards to assure high quality interaction with peers. Peer educators refer learners with specific needs to referral agencies for assistance.	Yes/No Yes/No
Monitor & evaluate sessions	Each peer education contact session is evaluated and the feedback used to improve the sessions.	Yes/No
Supervise and support peer educators	Peer mentors provide continuous support and supervision to track performance and deal with problems. Peer educators have support from the SMT to implement the programme. Peer educators are allowed to take initiative and ownership of the programme.	Yes/No Yes/No Yes/No
Management of peer education		
Management	Indicators of quality services are set and corrective action implemented when standards are not met. Communication channels in the school exist between peer educators, supervisors, management and learners. Feedback from participants is used to inform programme decisions to improve the programme. Resources are mobilised to ensure sustainability of the programme.	Yes/No Yes/No Yes/No Yes/No

Reporting, monitoring and evaluation		
Monitoring	A clear monitoring system is used that includes documentation of programme implementation.	Yes/No
	Appropriate and practical indicators are used.	Yes/No
	<ul> <li>Include ways of getting feedback from participants after every session.</li> </ul>	Yes/No
	<ul> <li>Use the feedback to improve lessons.</li> </ul>	Yes/No
	<ul> <li>Include ways of getting feedback whether learners could translate their skills into action.</li> </ul>	Yes/No
	Data collection tools are used to track programme activities and evaluate change.	Yes/No
	Data is used to improve the programme.	Yes/No
Evaluation	Use a well-developed evaluation design to ensure that data collected shows the impact of	Yes/No
	the programme. The quality of data collected is checked.	Yes/No
	Results of evaluation are disseminated to stakeholders and best practices are shared to	Yes/No

(From: Deutsch and Swartz 2002; Senderowitz and Kirby 2006)

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Objective	Indicators	Source and method of
		data collection
Effective training of peer educators	Number of mentors trained	DBE District Office
	Number of peer educators trained	Attendance registers
	Increased knowledge of peer educators after training	Knowledge questionnaire
	Improved presentation skills of peer educators	Evaluation of skills during role play
Effective implementation of peer	Proportion of schools where peer education is implemented	DBE District Office
education in schools	Proportion of schools where peer education is implemented as part of the school programme	DBE District Office
	Number of sessions of peer education	Peer educator record keeping
	Number of learners attending peer education sessions	Attendance registers
	Number of learners supported by peer educators	Peer educator record keeping
	Number of learners referred for assistance	Peer educator record keeping/NGO
	Number of support sessions between peer educators and mentors	Educator keeping record
	Level of support from the principal	Focus group discussions with peer mentors, peer educators and learners
	Level of support from the District DBE	Focus group discussions with peer mentors, peer educators and learners
	Collaboration with service providers	Focus group discussions with peer mentors, peer educators and learners
	Does the programme address the needs of learners in the school?	Focus group discussions with peer mentors, peer educators and learners

Acceptance of peer education in school?       Focus group discussions with terms of the programme implementation         Lessons learned through programme implementation       Focus group discussions with terms of te	Objective	Indicators	Source and method of data collection
asse in risk behaviour       Lessons learned through programme implementation         asse in risk behaviour       Increase in knowledge and more positive attitudes of learners         Number of learners reporting sexual activity       Age of sexual debut         Number of learners reporting sexual activity in the past three months       Increase in knowledge and more positive attitudes of learners         Number of learners with multiple sexual partners in the past three months       Number of learners with multiple sexual partners in the past three months         Number of learners who used more than three drinks of alcohol per occasion       Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months       Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months       Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months       Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months       Number of learners with STIS         Author of learners with STIS       Number of learners with STIS		Acceptance of peer education in school?	Focus group discussions with peer mentors, peer educators and learners
asse in risk behaviour       Increase in knowledge and more positive attitudes of learners         Number of learners reporting sexual activity       Number of learners reporting sexual activity in the past three months         Age of sexual debut       Number of learners with multiple sexual partners in the past three months         Number of learners with multiple sexual partners in the past three months       Interf act sexual         Number of learners who used a condom at their last sexual       Interf act sexual         Number of learners who used more than three drinks of alcohol per occasion       Interf act sexual         Number of learners who used drugs during the past three months       Interf act sexual         Number of learners who used drugs during the past three months       Interf act sexual         Number of learners who used drugs during the past three months       Interf act sexual         Number of learners who used drugs during the past three months       Interf act sexual         Number of learners with NTIS       Number of learners with NTIS         Sest in number of learners       Number of learners with NTIS		Lessons learned through programme implementation	Focus group discussions with peer mentors, peer educators and learners
Number of learners reporting sexual activity         Age of sexual debut         Age of sexual debut         Number of learners reporting sexual activity in the past three months         Number of learners with multiple sexual partners in the past three months         Number of learners with multiple sexual partners in the past three months         Number of sexually active learners who used a condom at their last sexual encounter         Number of learners who used a condom at their last sexual encounter         Number of learners who used drore than three drinks of alcohol per occasion         Unified the past three months         Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months         Number of learners with STIs         Number of learners with STIs         Number of learners with STIs         Number of learners testing HIV+	Decrease in risk behaviour	Increase in knowledge and more positive attitudes of learners	Survey among learners
Age of sexual debut         Number of learners reporting sexual activity in the past three months         Number of learners with multiple sexual partners in the past three months         Number of sexually active learners who used a condom at their last sexual encounter         Number of sexually active learners who used a condom at their last sexual         Number of sexually active learners who used a condom at their last sexual         Number of learners who used more than three drinks of alcohol per occasion         Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months         Number of learners with STIs         Number of learners with STIs         Number of learners with STIs         Number of learners testing HIV+			Survey among learners
Number of learners reporting sexual activity in the past three months         Number of learners with multiple sexual partners in the past three months         Number of sexually active learners who used a condom at their last sexual encounter         Number of sexually active learners who used a condom at their last sexual encounter         Number of learners         Number of learners who used more than three drinks of alcohol per occasion during the past three months         Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months         Number of learners with STIs         Number of learners with STIs         Number of learners with STIs		Age of sexual debut	Survey among learners
Number of learners with multiple sexual partners in the past three months         Number of sexually active learners who used a condom at their last sexual encounter         Number of sexually active learners who used a condom at their last sexual encounter         Number of learners who used more than three drinks of alcohol per occasion during the past three months         Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months         Number of teenage pregnancies in the past year         Number of learners with STIs			Survey among learners
Number of sexually active learners who used a condom at their last sexual encounter         Number of learners who used more than three drinks of alcohol per occasion during the past three months         Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months         Sumber of learners who used drugs during the past three months         Number of learners who used drugs during the past three months         Sumber of learners with STIs         Number of learners testing HIV+			Survey among learners
Number of learners who used more than three drinks of alcohol per occasion         during the past three months         Number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months         number of learners who used drugs during the past three months         Number of learners who used drugs during the past three months         number of learners who used drugs during the past three months         Number of learners with STIs         Number of learners with SIIs         Number of learners with NTIs		Number of sexually active learners who used a condom at their last sexual encounter	Survey among learners
Number of learners who used drugs during the past three months         Number of teenage pregnancies in the past year         Number of learners with STIs         Number of learners with STIs         Number of learners testing HIV+		Number of learners who used more than three drinks of alcohol per occasion during the past three months	Survey among learners
Number of teenage pregnancies in the past year       Number of learners with STIs       sase in number of learners		Number of learners who used drugs during the past three months	Survey among learners/police records
Number of learners with STIs       case in number of learners       Number of learners		Number of teenage pregnancies in the past year	School/clinic records
ase in number of learners Number of learners testing HIV+			School/clinic records
	Decrease in number of learners HIV+		Clinic records

# Annexure 3: Code of conduct for peer educators

## **Protect confidentiality**

- Peer educators hold information about peers and their concerns in confidence.
- Confidentiality is assured, except in cases where the young person is a danger to him or herself or others or is involved in illegal activity.

#### **Respect for values**

- Peer educators pledge to respect the values of peers regardless of whether they differ from their own.
- Peer educators should promote self-examination of values but not impose their own values on others.

## **Respect for diversity**

• Peer educators respect the diversity of peers, regardless of sex, sexual preference, language, ethnicity or culture.

#### Provide updated, correct and unbiased information

• Peer educators always provide correct and factual information to peers.

## Promote gender equality and equity

- Peer educators provide the same information in a similar manner to both young men and young women.
- Peer educators are sensitive to the traditions and beliefs of the community, but do not condone or contribute to unjust practices (such as forced and early marriages, and gender-based violence).

#### Avoid misrepresentation, observe disclosure boundaries

• Peer educators are honest about their own situations and behaviour but recognise that they are not obligated to share personal issues or experiences.

## Awareness of individual limits and the role of referrals

- Peer educators acknowledge that their education and training has limits. Their work can, but will not always, increase knowledge, affect attitudes and change behaviour.
- Peer educators make referrals to specialists when needed.

#### Avoid abuse of power

• Peer educators commit to using their skills and knowledge to improve the health of young people and agree to refrain from using their position at the expense of others.

Source: Family Health International (2009).

Notes

