A summary report of the background and key findings of the pilot Respect Project
(Based on the Interim Evaluation Report)
Supporting a partnership approach to the promotion of healthy decision-making about relationships and sexual activity amongst young people

Summary Report Presented By:
Respect Project Steering Group

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- Community Services, Wexford
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- Public Health Nursing Department, Waterford
- Occupational Health Department, Wexford
- Department of General Practice, Waterford Regional Hospital

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Con Pierce, Chairman,
Respect Project Steering Group, November 2006

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## Glossary

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<tr>
<td>CPA</td>
<td>Crisis Pregnancy Agency</td>
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<td>FCSE</td>
<td>Family, Communication &amp; Self Esteem (Programme)</td>
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<td>HSE</td>
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<td>RSE</td>
<td>Relationships and Sexuality Education</td>
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<td>SPHE</td>
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<td>STI</td>
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1. Introduction

This summary document provides an outline of the history, development and aims and objectives of the pilot Respect Project. The report also highlights key findings identified when developing and implementing this project in four different school settings in Co. Wexford.

The objective of this interim report is to provide interim results from the project with a view (a) to informing the continuing development of the project and (b) to assisting the project Steering Group in opening discussions about future funding implications of the project, with national and regional health and education managers and with the Crisis Pregnancy Agency (CPA).

This present document is a summary of a larger document entitled "Interim Report of the Respect Project". The latter report is more detailed in its documentation of the history of the process, experiences and findings from each stage of the project's development and implementation in Co. Wexford. We anticipate that the learnings detailed in the larger report will be particularly useful to individuals or organisations hoping to develop and implement a similar programme. The "Interim Report" is available from the Project evaluators, on request.

The findings presented in this document are a summary of the main themes from the larger report and are based on the views of those who implemented and took part in the project, namely teachers, health professionals, students and peer educators. Their views were expressed to a full time project evaluator throughout the Project's development¹.

To encourage objectivity, Professor Colin Bradley, Department of General Practice, UCC, has reviewed all transcripts of research interviews and the subsequent themes identified.

A final evaluation report for the Respect Project will be available in 2007. It is intended that the final report will combine the findings summarised in this report with aggregate outcome data for students who took part in the pilot programme.²

¹ Research & fieldwork informing this report was carried out over the period July 2003 to December 2005.
² To obtain outcome data for the final evaluation report, students who participated in the programme at 2nd & 3rd year (2004-2005) will be surveyed on their knowledge, attitudes and stated behaviours in relation to relationships and sexual activity in their 4th year of post primary school (2007). The outcome data for this group will also be compared with a) older students in the pilot schools and b) students in control (or comparative) school settings. Baseline data for both comparison groups was collected by survey in 2005 & 2006.
2. Why Was the Respect Project Established?

In 1997 the south east was identified as having a high level of teenage pregnancy (the highest of the former health board areas, outside the eastern region) and a higher proportion of teenage mothers who remain single than the national average (Report of the Director of Public Health, 1997). In addition social workers identified a high proportion of referrals to the child care service from children of very young parents. It was decided to look more closely at the issue and a discussion document on teenage pregnancy in the south east was collated by the Public Health Department and the Regional Co-ordinator for Child Care Services of the former South Eastern Health Board.

Following the production of the discussion document the Public Health Department and the Regional Co-ordinator for Child Care Services hosted a seminar on the issue of teenage pregnancy. The seminar highlighted the lack of primary research conducted from the perspective of teenage parents. In 1998, the Public Health Department commissioned the Department of General Practice, University College, Cork (UCC) to carry out research to explore the experience of teenage pregnancy from the teenager's perspective and to identify how service providers might respond more effectively to support pregnant teenagers and teenage parents. The researcher spoke to 48 teenage mothers/pregnant teens through one-to-one interviews and conducted a further six focus groups with 44 teenage mothers/pregnant teens in the south east. Teenage fathers, mothers of teenage parents/pregnant teens and local service providers were also spoken to as part of the study.

Themes from the interviews with teenagers showed that sex education was not viewed as being detailed or comprehensive and that young teenagers did not view sexual intercourse as pleasurable nor did they link it with babies. The study found that often the greatest fear for teenagers on confirmation of pregnancy was informing their parents, as to do so was an admission of sexual activity. In addition, safe sexual practices were primarily linked with the prevention of pregnancy and did not necessarily extend to the prevention of sexually transmitted infections (S.T.I.s).

The subsequent report "The Experience of Teenage Pregnancy in the South East of Ireland" (2001) recommended sexual health programmes be delivered in a holistic, interactive and comprehensive manner, by appropriately trained people. They also recommended that such programmes should incorporate peer-led education.

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1 The Health Service Executive South (South East) replaced the former South Eastern Health Board (SEHB) structure in January 2005. For the purposes of clarity, the term HSE-SE will be used throughout the report but will mean the SEHB when referring to a timeframe before January 2005.
3. What is the Respect Project?

3.1. New Model For the Delivery of Relationships and Sexuality Education

The Respect Project was established to develop a new model for the delivery of an evidence-based relationships and sexuality education programme at post primary school level in the Irish setting. In the Respect programme model, teachers, health professionals and older students (peer educators) deliver ten structured classroom sessions to 2nd and 3rd year students.

As shown in diagram 3.1 below, 60% of the content is co-delivered by a health professional and a teacher and 40% is co-delivered by peer educators supported by a teacher.

Sessions are designed to facilitate the development of students’ self esteem, self-empowerment and communication skills to provide them with accurate information relevant to their age.

The Respect Programme has been piloted with a cohort of approximately 330 teenagers, aged 13-15 years, in Co. Wexford over the school calendar years 2004/2005 and 2005/2006. The four pilot schools included two mixed vocational schools and two single sex schools (one girls, one boys). As a result of positive feedback from the first cohort, the programme is now underway with a second cohort of students who began their Respect Programme sessions in 2005/2006.

Diagram 3.1 Outline of the Respect Project

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4 See section 6, page 7 for outline of how the Respect Programme is designed to support the RSE component of the national SPHE curriculum.
3.2. Project Structure, Resources and Support

The Respect programme is supported through the provision of project structures, resources and support to facilitators, students, parents and schools.

The Respect Project is overseen by a multi-sectoral Steering Group which includes relevant professionals working in health and education and representation from parents.

In September 2003 the Respect Project Steering Group appointed a dedicated programme manager to implement the programme's development and provide an organisational and managerial link between the relevant health and education sectors.

The pilot Respect Project was funded by the Crisis Pregnancy Agency, (CPA). The Project began in July 2003 with funding provided for a three-year period (July 2003-December 2006).

The model, and classroom materials used, have been adapted for the Irish setting (by the programme manager, in collaboration with schools) from the APAUSE model. APAUSE is a UK based team, who have extensively evaluated the model and have found it to be effective in a number of school settings.

In addition to the Respect classroom materials the project also provides training to adults and peers in how to facilitate the classroom sessions.

The Project has also developed a parallel support programme for parents. Parents of students receiving the programme have been offered the Family Communication and Self Esteem Programme with the addition of two sessions on relationships and sex. Thus parents have the opportunity to focus on encouraging and facilitating better family communication in the area of relationships and sex.
4. What Does The Respect Project Aim to Achieve?

From the outset the Respect Project Steering Group outlined clear aims and objectives for the project.

The Respect Project aims...

"To promote, amongst young people, healthy decision-making about relationships and sexual activity, through the piloting of a programme which models a collaborative approach to school-based relationship and sexuality education, delivered in the context of the existing Relationships and Sexuality Education (RSE) syllabus which is a part of the Social, Personal and Health Education (SPHE) curriculum".

"To develop the programme in such a way as to maximise its sustainability within the Irish public service system".

Specific objectives of The Respect Project are...

- To support parents and schools in educating and providing skill development for young people around healthy decisions on relationships and sexual activity;
- To work collaboratively with pupils and their parents, with their teachers and schools, with health professionals, HSE management and with the APAUSE team, and with other relevant groups and organisations;
- To adapt and develop a school-based programme, based on the APAUSE model, which is delivered by teachers, health professionals and peer educators and which builds on the strengths of the current RSE/SPHE programme;
- To ensure that such a programme will:
  - increase tolerance, respect and mutual understanding,
  - improve knowledge,
  - provide effective skill development and
  - improve appropriate service use by young people around relationships and sexual activity;
- To develop the programme so as to maximise its mainstreaming potential;
- To make recommendations to the Crisis Pregnancy Agency and the Department of Education & Science, to schools and the Health Service Executive about how best to sustain and mainstream such a programme, if it proves to be both effective and feasible.
5. What Principles Underpin the Respect Project?

5.1 Need for Guiding Principles

In addition to the aims and objectives the Steering Group also established Guiding Principles for the Project, which set out the ethos and values that guide the project’s interaction with students, parents, education and health professionals. The guiding principles also reaffirm the Project’s respect for parents as the primary educators of their child.

5.2 The principles are:

Acting out of respect and care for the holistic health and well-being of young people, and with due regard to the individual, family and community context in which they operate, to

- Facilitate the development of self-esteem and self-empowerment
- Facilitate the development of life skills including decision-making
- Model relationships, within the programme, which are respectful and where communication is open
- Promote the benefits of delaying first sexual intercourse amongst school-aged teenagers
- Promote responsible behaviour with regard to relationships and sexual activity at any age
- Support parents in the care and education of their children
6. Content, Format & Classroom Methods

6.1 Respect Programme and national SPHE curriculum

The Respect Programme sessions are not intended to replace the Department of Education & Science RSE syllabus in any school. The Respect Project offers a specific relationship and sex education programme that facilitates additional support and resources to schools, primarily through supporting a link between health and education professionals. The classes are delivered in the context of the existing RSE syllabus, which is a part of the SPHE curriculum. They are intended to enhance the personal development work done within the school RSE and SPHE curricula.

As a supplement to the RSE available in a school, five of the ten Respect sessions are normally delivered in addition to the schools' own timetabled (40 minute) Junior Cycle SPHE classes.

6.2 Format of Respect sessions and topic areas covered

The programme consists of a total of 10 (60-80 minute) classroom sessions, conducted over two school years (2nd & 3rd year). In 2nd year, adult-led sessions run over 3 consecutive weeks and peer-led sessions run over 4 consecutive weeks. In 3rd year, students receive further adult-led sessions run over 3 consecutive weeks. A full summary of the programme content and delivery methodology is presented as an appendix to this report.

Diagram 6.1 represents an overview of the topic areas covered by the Respect classroom sessions over 2nd and 3rd year. The emphasis throughout all sessions is on creating a safe place to discuss and explore the issues, on highlighting sources of support, on presenting the students with accurate information and on the repetition of key programme messages over the two years.
6.3 Classroom methods; Adult-led sessions

In 2nd year and 3rd year, each adult-led session is co-facilitated by the class’s own SPHE teacher and a health professional (such as a midwife, GP registrar or public health nurse). As with SPHE training, teachers and health professionals are encouraged by the Respect Project to move away from the traditional instructional role of teachers and to work to facilitate the student’s learning, using techniques such as drama, small group work and class discussion.

6.4 Classroom methods; Peer-led sessions

In 2nd year, the peer-led sessions are facilitated by a group of four trained peer educators from the student’s own school. The SPHE teacher should always be in the room during sessions. However, it is the peers and not the teacher that lead the sessions. Generally teachers only intervene, if necessary, to ensure a safe and productive learning environment.

The peer educators are made up of 4th and/or 5th year students. Where possible, mixed gender groups deliver in co-educational schools and single sex groups of four peer educators deliver in single sex male and female schools.
7. What Have Schools, Teachers, Health Professionals & Students Said About The Respect Project?

7.1 Students

The approach of bringing a health professional and peers into their classroom differentiates the sessions from students' other SPHE work.

When spoken to, the 2nd years outlined key differences between the role of the adult-led and peer-led sessions. Local health professionals are viewed by the teenagers as the most appropriate sources of providing them with accurate information.

Students are very impressed with the opportunity to have a health professional available to answer their own or other class member's questions.

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Student

"Like (the health professionals) weren't embarrassed, they would answer any questions, and one fella asked a question, and she didn't know the answer and she said that she'd go home and she'd find out the answer, and she did, she found out the answer and just came back and told it."

(3rd year boy, all boys' school)

Interviewer

So, what did you think of it?

Student 1

"Ya, it was good like, (the adults) answered any questions you wanted and they talked to you like the way you wanted to be heard. They weren't speaking double dutch or anything.

Ya like they were explaining it as well like

Ya, they explained everything

And they made it like having a laugh like, enjoy yourself like."

(3Y boys, mixed school)

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Different student types (e.g. outgoing and shy) from all four schools were asked their opinions of the 10 Respect sessions. To make students more comfortable, two friends were spoken to at a time (known as friendship pairings). The pairs were interviewed in 3rd year after the last of their adult-led sessions. Students from 11 out of the 16 classes included in the project were interviewed (a total of 22 students). The use of student 1 & 2 alongside student quotes denotes each speaker's response within a paired interview.
When compared with the adult sessions, peers are not viewed by the students as having a major role in providing them with information. However, peers are seen as the experts on being a teenager. Peers are viewed as young enough to understand younger teenagers' lives and old enough to be credible role models when promoting healthy decision-making strategies.

**Student**

"We felt like we could relate to them more, because they're only like a few years older."

(3Y girls, all girls’ school)

Students say the scenarios dramatised in the peer sessions are realistic. There was very high recall amongst the students for the session on the '3 Rs' when spoken to six months following the sessions.

**Student**

"The scenes that we acted out were good because it was a boy coming on to a girl and a girl resisting, we'd another scene and it was a girl coming onto a boy and the boy resisting, it was good each way."

(3Y boy, all boys’ school)

Both teachers and students say classes looked forward to the adult-led and peer-led sessions each week. Student comments reflect the fun, relaxed, but productive classroom atmosphere facilitators aimed to create.

Students feel it is important to get relationships and sex education in school. As young teenagers (13-15 years), some feel it is easier to talk openly in the Respect sessions than to speak to a parent. Some feel a parent's reaction may be to worry if asked questions about relationships and sex.

**Student 1**

"I wouldn't talk to my mother about sex, like the parents try and talk to you, and children don't listen, they don't want to. We'll find out about it in school, it's so much better, because you're laughing and listening, and it's easier, you can actually talk properly. If you tell your mother about something, she's like, 'are you doing that?'

**Student 2**

Like if you get your periods and stuff, it kind of makes things awkward, like your mother says, 'congratulations, you're a woman!'

**Student 1**

*This is so much better."

(3Y girls, all girls’ school)

*The '3 Rs' are a method whereby students learn how to effectively resist pressure in typical teenage situations they may experience at some stage in their teens. The '3 Rs' stand for Refuse the pressure, Reverse the pressure back onto the pressurer and, if necessary, Remove yourself from the situation in a manner that is positive, yet assertive.*
Students who have older siblings or parents whom they feel they could talk to about relationships and sex, also agree that the sessions are useful in school, due to the amount of information covered.

**Student**  
"You’d learn about some stuff (from older brothers), but not everything like, with this you can ask anything, we learnt so much."  
(3Y boy, all boys’ school)

Students also like the idea of their whole class, or students in their area, getting the same sex education.

**Student 1**  
"It’s good that they’re doing it in all the schools here"  
**Student 2**  
"Ya, it’d be crap if it was just us, it’s better, then at least we’ve all had the same."

(3Y boys, all boys’ school)

Although less informative than the adult-led sessions, students also think it is beneficial to include older students in teaching relationships and sexuality education. The mix of both adults and peers is considered an ideal mix within the programme.

**Student**  
"It was good to have older students instead of just the teacher, because they know what to do, they went through it all as well..."  
(3Y girl, mixed school)

Students also feel it is beneficial that the sessions are delivered over a double period as opposed to their normal 40 minute SPHE class time.

**Student**  
"We’d two classes, so we had more time to talk about stuff, that made it better as well."

(3Y boy, all boys’ school)
7.2 Adults

Both health professionals and teachers enjoy training with individuals from a different professional background and the challenge of co-delivering the Respect classroom sessions.

On both a personal and professional level, health professionals also enjoy the experience of working with second level students who, some feel, may not always get the same level of attention from health services as that received by primary level students.

All health professionals involved say the experience is new, challenging and enjoyable and many feel it will contribute positively toward their own professional development. Several health professionals note they often only work with teenagers when they are experiencing a crisis and are very pleased to be offered an opportunity to work with teenagers towards promoting healthy attitudes and behaviours.

Health Professional

"I think ultimately if you could push the age of the first sexual contact, it would solve a lot of the problems...because invariably all these girls if they become sexually active young...they turn up at our colposcopy clinics, if they're lucky enough to have had a smear done."

Health professional's involvement in the programme also supports the development of a “teenage friendy” approach to their clinical work.

Teachers note several added benefits from their own involvement; in particular teachers feel their shared experience with students of the “open atmosphere” created during the sessions improves their relationship with their students. Whilst their involvement was initially time consuming (given preparation and training time in year one) many teachers’ involvement had the added impact of reenergising their interest and enthusiasm for the larger SPHE syllabus.

7. A total of 10 SPHE teachers and 6 health professionals who delivered in all four schools were spoken to in one-to-one interviews both following their training and after their delivery in the classroom.
7.3 Peer Educators

Peers also feel they particularly benefited from the Respect training days which focused on their own sex and relationships education (as apart from the APAUSE training, which focused on developing facilitation skills). Peers say the training helped increased their confidence, in particular by increasing their knowledge of STIs and contraception methods. Peers feel their own previous knowledge of RSE would not have been sufficient to facilitate sessions with the 2nd years.

Peer: “We learned a lot over those two days. We learned a lot of stuff that we never knew about, and we wouldn’t want to be teachin’ stuff that we didn’t know anything about, ‘cos you don’t want to just be reading from the scripts, you want, you want to show that you know what you’re talking about.”

Peer, all boys’ school

Peers also say they would have appreciated a similar approach to the effects of peer pressure on decision-making when they were younger.

7.4 Effectiveness of the peer educators dependent on several factors

Prior to the Respect Project all four pilot schools regularly drew on their 6th year students to work with 1st year students as part of a local post-primary, anti-bullying programme. All schools find the peer element of the Respect Project builds on this work.

Teachers (particularly those involved in the training of peer educators) enjoy watching the peers learn, practice and develop leadership, drama, teamwork and presentation and communication skills. Teachers are also positive that the peer’s work is rewarded with certificates and an awards night.

Teacher: “I think it’s important for them to get certificates and it’s one attraction about Peers as well they will get a certificate out of it and it’s not an exam subject so getting a cert means something for them for their CVs.”

Despite students and their teachers being positive about the approach of using peers in the classroom and their enjoyment of the activities in the peer-led sessions, some peer groups appeared to have engaged classes more than others.

Several criteria were identified by teachers, teenagers and peers as necessary for the peer educator sessions to be viewed as effective.

The ability of peer-led educators to engage the 2nd year classes appears dependent on the capabilities and confidence levels of the peers who are facilitating the sessions. Teachers say it is also dependent on a 2nd year student group’s confidence in engaging with the drama element of the classroom activities.

* A total of 33 peer educators from all four schools gave their views on the Respect sessions through focus group discussions.
If both the peers and the whole student groups are less mature, less confident or have lower literacy skills, the classes are generally less interactive and less enjoyable for peers, students and teachers alike. Sessions delivered in such situations appear disjointed and of less visible learning benefit to the 2nd year students.

Overall, students prefer peers who appear more natural when presenting the sessions.

Student 1
“Two of them you could talk to, and two of them were like, I don’t know, there were too many responsible ones, you couldn’t really talk to them. The others they didn’t really care, not that they couldn’t be bothered, but they were more relaxed and stuff and you could just talk to them, and they were just like talking to us about stuff.”
(3Y Girls, all girls’ school)

Student 2

Teacher
“There was one or two that just shone that I didn’t think would. They just totally took it on and were quite confident. The ones that would make the best peers are those that are confident in their own body, in their body language. They can stand up there with a body language that says ‘I am shy’, or they can stand up there, ‘Right lads I am confident in myself’.”

Some teachers (who were also present during the sessions) note, however, that the added benefit of the peer sessions may be in the peers presence alone adding to the credibility of the programme’s messages.

Teacher
“One thing about them though, they were really very good I felt in that what they were saying, there was no fear at any stage that they were just giving a message that was written down, even though they were reading it, they came across as if they believed all this, all the time and that was very good.”

Teachers, peers and students also feel that the peer-led sessions will improve in succeeding years. Teachers spoken to following the second cohort of peer educators (05/06) noted that overall the peer sessions improved the second time they were run in their school.

The second time around teachers are more familiar with the format and content of the peer-led sessions and the support needed for weaker peer groups such as helping them with their classroom management skills.
Teachers are very interested to see how the students who received the sessions in their 2nd year would deliver as peer educators in future years. Such students would have experienced the sessions from the class' perspective and be familiar with the content and activities in each session prior to their training and delivery. Many of the students also felt they would have a future advantage as a peer, having experienced the sessions first hand (as students) in 2nd year.

Interviewer: "Would you be interested in being in a peer group?"
Student 1: "Ya"
Student 2: "Ya, I wouldn’t mind doing it"
Student 1: "Someone is after telling us like how to say no, so we try and pass it onto someone else"
Interviewer: What would you change?
Student 1: "Talk up. And not to take any notice of people down there shouting at you And get the quieter lads to ask questions as well."
(3rd year boys', VEC)

7.5 Addresses relationships and sexuality education earlier

For most teachers a key difference between the Respect sessions and the current RSE post primary syllabus is it prescriptively introduces the issue of sexual relationships earlier (at an age, 13-15 years, when the majority of students are not yet sexually active). The programme offers the opportunity to promote healthy attitudes towards relationships and sex amongst the young people before the majority have previously experienced sexual relationships. Typically teachers say they have previously chosen to cover the content and information on contraception and sexual relationships at senior cycle.

Teacher: "I would have done RSE in 5th year, knowing that it was too late so I'm delighted that we’re getting a chance to do it at an earlier stage."
Interviewer: Is there material there at the moment for 2nd and 3rd years? Yeah, there is, we’ll say we have resources...I would have taught it in 2nd and 3rd year but I was always probably afraid to go and do anything extra with it, not knowing how parents were going to react and so forth whereas with this it's very organised, parents have been contacted, they know about it, they’ve been informed, it’s a very structured approach."

Students receiving the sessions welcome the opportunity to learn about relationships and sexuality at 2nd and 3rd year. All students spoken to feel the information given to them was age appropriate.

Interviewer: Do you think 2nd year is too young to get these classes?
Student 1: "No, definitely not, like the level of people that think that everyone’s already having sex, like and boys pressuring them It would be helping them out and that And in first year, that's when you start having boyfriends and stuff, and like 2nd year is perfect, cos like we’re in 3rd year now and the amount of stuff you hear all about people and the problems they have."
(3Y girls, all girls' school)
Interviewer: As you learned in the programme, the majority of people aren’t having sex before 16, so people say then why tell (students) at this stage, what do you think about that?

Student: “They’d need to tell us, like if we do decide to have sex, we need to know how to do it and how to be safe with it, but if someone just decides to have sex, not knowing anything about it, anything could happen.”

(3Y boy, all boys’ school)

7.6 Promotes teacher confidence

The training and support offered by the national and regional SPHE/RSE support service is the foundation on which the Respect training and programme is developed. Teachers praise the training they have received from the SPHE support service. In particular teachers say it informs them of the range of resources available to structure SPHE and RSE sessions. Teachers also acknowledge that the approach to teaching RSE or SPHE is very different to the approach to traditional school subjects.

Teacher: “They showed us the resources and how you can use them, which is brilliant... they showed us some of those games you can do, refresher games, just to get the children interested and making us realise that we’re not actually to be teachers at all, well we do have a role as teachers, but you’ve got to let down that front, SPHE won’t work unless you let down the authoritarian person.”

Teachers do not appear to have any problems in facilitating the “relationships” aspect of RSE and many are comfortable to cover simple “biological facts”. Teachers say the relationships and biological parts of the RSE programme can be considered “safe” territory. However, although comfortable with teaching sessions outlining the attributes of a healthy relationship, some teachers admit they have avoided the “sex” part of the RSE syllabus due to their own confidence levels and worries about retaining credibility and respect from students in such classroom sessions.

Teacher: “I didn’t know how to deal with it properly, I really didn’t until I did this course (Respect training), I suppose I would have sidelined the sexuality part of it and ok done something, but not really in-depth the way it should be done

Interviewer: What’s different about the Respect Project?

Teacher: It’s a specific programme that deals with sexuality and that doesn’t allow you to sort of skip by it...it has a certain length of time to be done and it’ll be done in that time and that’s it.”

Teachers feel the Respect classroom structured resources and activities help them facilitate discussions on choices and decision-making in a context that appeals to teenagers.
Many teachers have found in the past that, as an older person, it can be difficult to make a connection for teenagers between the topics covered in the classroom and the reality of teenager’s own relationships and lives outside of the classroom.

Teacher

“All of it involves giving them a bit of confidence in themselves, knowing what they want for themselves, what to get out of life, and the confidence to go ahead and do that, that’s really what SPHE is I think. But how do you teach that, you know, how do you break that down. We’ll say we did that general side in RSE, like we had the (class) resources and so forth, but nobody kind of tried to tie down the programme as such, you were still left going off looking for resources too, you know, and trying to put, trying to put the programme together, it just wasn’t tied down, whereas this one is.”

Teachers who had previously sidelined dealing with the sexual aspect of teenage relationships enjoyed seeing their classes engage with the issues discussed and looked forward to working with their classes in a similar way in the future.

Teacher

“(SPHE) just fell into place for me this year, part of the reason for this for me was the Respect Programme...it encouraged me to facilitate, particularly with the work I did with the peers.”

7.7 Health Professional’s role showed students “it’s ok” to talk openly in front of adults

The students and their SPHE teachers agree that the health professionals presence in the classroom over several weeks means that students build their confidence in talking within class groups and in the presence of adults about sex, relationships, values and attitudes.

Student

“The way she (the health professional) reacted like, it made me think I should talk to my parents more.”

(3Y girl, all girls’ school)

Students also respond well to the health professionals’ (scripted) stories told as an introduction to each session or topic.

Health Professional

“It’s a clever programme the way it’s done. It gets them figuring it out themselves and when they all get together and speak candidly and truthfully they know then that not everybody is doing it, because here’s a group of them now, and they speak afterwards to each other, which of course they will, but they know then that it’s not the norm, and once they even talk about these things they kind of know that it’s okay for them, you know. Which I think will be a great help”
All students have high recall for the stories and issues raised by the health professionals' 'stories'.

Student 1

"(The health professional) was giving us examples of how if you're young like
And if (something happened) and it was from drink and whatever, and
it just happened, they didn't mean it to happen, and they (the couple)
wanted to change it, but sure they couldn't
Ya, it's worrying like."

(3Y boys, mixed school)

Student 2

"That was one of the stories, a man had sex with a girl when he was
younger...all the boys were putting pressure on him, and the girl was
ready to have sex, and he wasn't rushing or anything, and they did have
sex and they didn't talk afterwards, and later on he was getting married,
and he couldn't have sex with (his wife)...That stood out to me, like that
could happen, that's one of the consequences."

(3Y girls, all girls' school)

7.8 Groundrules Work Effectively

A key part of the structure of the sessions for all facilitators (adult and peers) is the groundrules. At
the beginning of each session students and facilitators agree to follow the ground rules and
facilitators report that, for the most part, everyone follows them. The groundrules include no personal
put-downs, no personal comments and they put an emphasis on listening to one another. Both facilitators
and students feel this creates a positive atmosphere in the classes.

Students have commented positively on the groundrules. The emphasis on listening and no personal put-downs
meant that students who may have less knowledge than their classmates are protected by the security of the class
group and the agreed rules. This appeals to students who feel it is important that everyone in the class
enjoys and 'respects' the sessions.

Interviewer

Would people make someone feel bad if they didn't know something?

Student 1

"No, no they wouldn't laugh. There are groundrules and all, like in SPHE,
and if someone doesn't know something, you wouldn't embarrass them
Whatever is said in the class stays in the class."

(3Y girls, all girls' school)
7.9 Mix of Classroom Activities Worked Well
SPHE teachers praise the emphasis on group participation and interaction during the classroom sessions as "a breath of fresh air". Teachers say the range of interactive activities and facilitation methods create a safe, respectful, moral and fun classroom environment. Teachers like the various activities used, particularly as they often provide opportunities for students to process what they have learned.

Students also feel the mix of activities allows them to reflect on the information received in the classes.

Student 1: "The questionnaire things were handed out, like they used to talk you through that, that was fairly informative, you didn’t really need to ask any questions, but I felt all the questions were answered at some stage anyway.

Interviewer: So the sheets were good?

Student 2: Yeah, for the groups, after learning all about the S.T.I.s, you had to try and tell whether they (contraceptives) were effective and how to use them, it’s just another way of looking over it and remembering."

(3Y boy, all boys’ school)

7.10 Works in mixed & single sex classrooms
The Respect sessions were delivered in mixed gender vocational schools and single gender religious order post-primary schools.

Some health professionals who experienced both mixed and single sex classes feel that perhaps the discussion aspect (of the adult-led sessions) offers a greater range of debate and opinion within the mixed classrooms.

Teacher: “I do feel our lads missed out... It's a pity really that we’re not in a mixed class for it. I used to teach in a mixed school and it’s better for them all, but particularly in something like this where they see both sides of the coin. That’s a pity...”

Students from the single sex schools have said however, that they might not feel as comfortable discussing topics about relationships in front of the opposite sex.

Interviewer: Would you prefer if the classes were mixed, how would you feel if boys were there?

Students
Student 1: “(Both say no)]
Maybe if they did one session or something

Student 2: No, because no one would talk

Student 1: Like the boys might say something, and they might tell other boys

Student 2: Ya, they’re totally different

Student 1: Like girls, we’re all like, if someone said something stupid, we all support each other, that’s our class, that’s the way we are.”

(3Y girls, all girls’ school)
Students are most comfortable receiving the sessions in the same gender mix in which they are accustomed.

<table>
<thead>
<tr>
<th>Interviewer</th>
<th>Student 1</th>
<th>Student 2</th>
</tr>
</thead>
</table>
| What was it like talking about this stuff with girls around? | "Sure it didn't really bother me
Didn't bother me, didn't take any notice" | (3^Y boys, mixed school) |

But, would you mind asking questions?

(Both saying no)

Sure I had a mixed school like when I was in primary, so it didn't really bother me.

Teachers are impressed that the activities where students dramatise the roles of males and females experiencing a pressure situation work in single sex schools. Teachers and students from the single sex boys' and girls' schools feel that students playing the role of their opposite sex often increases the "fun" element of the peer-led sessions.

"(The boys) got great craic out of it when they pretended to be Mary, some of the peers were very funny because they were acting it out with their hands in the air, it depends on the peers too, if you had nervous peers it could be different, but we were very lucky with them."

7.11 Key Messages Repeated

Many teachers mentioned how they worked with the Project developers to adapt the UK programme to ensure the programme was consistent with the messages and content of the RSE/SPHE curriculum. Teachers feel the resulting programme is well structured with an emphasis on spiral learning. Teachers and health professionals praise the repetition of value-based messages (underpinning all sessions) throughout the two-year programme cycle.

During 3rd year sessions, facilitators were impressed by students' retention of the messages and information covered in 2nd year adult and peer-led sessions.

"There were many occasions in the 3rd year delivery when both my self and the health professional realised that work done in the previous year had been remembered by the students, and they really did remember it."

All students spoken to are aware that certain messages are repeated throughout the programme and the development of the programme content over the two years of delivery.

"in 2nd year you just get a really good talk about it, the normal stuff, just relationships and all that, that's what it's about in 2nd year, when you go into 3rd year, we were talking about more
Like different things they didn't tell us in 2nd year, the course carries on from where it left off and they explain to us in different stories."

(3^Y boys, all boys' school)
Student

“Don’t have a relationship when you’re young, just take your time... If you’re pressured into something, if your friends are bragging about having sex and all, just don’t be pressured.”

(3Y boy, all boys’ school)

7.12 Dedicated programme manager

For schools, health professionals and teachers the presence of a dedicated programme manager has been vital in terms of supporting the project’s development. The dedicated programme manager is viewed as the expert with regard to the approach to the programme and the session content. The manager is also perceived as being “at the end of the phone” and is viewed as providing a supportive link role between all elements of the project.

Teacher

“Well, I feel that (the programme manager), there’s support there, and anytime we need to make contact we can, and I know she’ll help as much as she can, so I don’t feel I’m on my own.”

7.13 Parental permission & support

Schools have also been very positive that parents have been offered sessions in addition to the current Family Communication & Self Esteem Programme (FCSE) that focus on ways parents can work to communicate with their child around relationships and sex.

Schools and teachers in particular have also been positive that parents were given the opportunity to attend parent information evenings in each school, prior to their children receiving the programme. This was important for all teachers spoken to as parent support was viewed as key when making any changes to the delivery of relationships and sexuality education in a school.

Teacher

“I suppose the concern I had at the start, and as it happened it came to nothing, but when we were having the meeting for parents, I didn’t know what the reaction of parents would be, I said to the principal, ‘if there’s any awkward questions, you handle them’, I knew there was nothing to be nervous of because I’d seen the programme, and I’m a parent as well and I couldn’t see any difficulty, but it was handling that you know, but there was nothing, even parents still come up to me since then you know and say ‘you know it’s great, we’re delighted our son is doing that, just very positive.’”

7.14 School management & principal’s support

All teachers have praised the support of their principal in allowing the pilot project the resources and space to develop in their school. Teachers were all aware of the importance of the principal having been consulted on the programme’s content and delivery prior to its implementation. As the Respect Project is an addition to the RSE syllabus, a principal’s support appears key to promoting whole staff support as it ensures that other staff members are more likely to accommodate the provision of the 60-80 minute sessions.

Teacher

“Well definitely one hundred per cent support from the principal, definitely, and the other staff, I haven’t heard anyone complain or whinge at all, it’s just go with it and see. So our principal has been fantastic, if he wasn’t supportive, you know it could go wrong, but he has.”
8. Were there any challenges?

8.1 Schools' Provision of Staff & Peers For Training

The key challenge in implementing the Respect Programme in schools has been the provision of that most valuable resource within schools ...time.

All partner schools have worked hard to overcome the logistical challenges inherent in releasing their staff for the Respect Project training. In releasing staff for training schools have organised substitute teachers and teachers themselves have had to reorganise their planned class work to accommodate the training and delivery.

Schools and teachers have also facilitated the release of the peer educators for their training and the subsequent delivery of the peer-led sessions.

8.2 Provision of Double Periods & Staff Within School Timetable For Delivery

All four schools also worked hard to co-ordinate the logistics required to provide a double period for each Respect session. This has included the encouragement of support amongst other teaching staff to facilitate the Respect sessions. It has also meant that schools designed timetables so that (where possible) teachers who delivered sessions at 2nd year, would be available to deliver 3rd year sessions to the same class groups within the following years timetable.

Despite the logistical challenges involved in the pilot project, all four partner schools were committed to working with the Respect Project to implement the pilot project in their school.

8.3 Provision of Time & Cover For Health Professionals

For the health service, the key challenge in developing and implementing the Respect Project was the release of health staff from normal duties to attend Respect training and to deliver the programme sessions. This meant that both health service managers and health professionals worked to accommodate this commitment along with their clinical service duties.
9. Areas For Further Exploration & Development

9.1 Length of peer-led sessions

Whilst being fully in favour of the impact that the peer-led sessions made on the 2nd year students, some teachers remain unsure as to the need for this element of the programme to remain at four 80-minute sessions. Some teachers have suggested that it may be possible to reduce the length and content of some of the peer sessions to 40-minutes in order to minimise the disruption to the 2nd year timetable and to the peer educators' own classes.

Some teachers have also suggested that the emphasis in the peers' delivery should be solely on the modelling of healthy behaviours. Many teenagers have also reflected this view.

9.2 Literacy

The Respect sessions appear to work well across all types of school groups and student types. However, facilitators working with class groups (in any school type) with lower literacy abilities have found that paper based activities within some sessions require literacy or comprehension skills outside the abilities of some students or student groups. Whilst the overall content of the adult-led and peer-led sessions appears to work with these groups, where necessary, teachers would like the classroom notes to offer activities/approaches for lesser academically able students.

9.3 Additional Content in Specific Areas

Throughout the process of developing the materials and delivering the sessions with students, teachers have noted additional issues or content they also feel relevant to the Respect sessions. In particular, teachers have noted the relationship of alcohol to teenage sexual behaviour and the need to address negative stereotypes surrounding homosexuality. Although both issues were addressed to some degree in stories or scenarios included in sessions, many facilitators feel there may be room to increase the content on the role of both issues on teenage sexuality.
10. Continuation of the Multi-Sectoral Approach & Location of Funding

Based on the perceived effectiveness of the Project to date by all project partners, the Steering Group is keen to foster continued support from within the health and education sectors. The location of core resources is necessary to allow for the continued development, management and training elements of the Project.

As a priority, the Steering Group is committed to exploring options for the provision of continued resources (e.g. substitution costs) to enable future training for teachers and health professionals.

11. Conclusions of the Steering Group

The Respect Project was implemented as one response to the high rates of teenage pregnancy in the South East, and the views of pregnant teenagers, and teenage mothers, many of whom felt that the sex education they received in school was not comprehensive in its approach.

Although the programme does not concentrate exclusively on the difficulties resulting from unplanned and unprotected sex, this is its primary focus.

The Respect Programme is not intended as a standalone relationship and sexuality programme. Due to the primary focus of the programme, it is extremely important that the Respect programme is delivered in the context of the work done on positive relationships in RSE/SPHE.

The Steering Group is equally keen to foster continued support of Health Service managers to facilitate the possible inclusion of the Respect Project within relevant health service plans. Such commitments would provide a formalised structure to allow the continued availability of health professionals as a valuable resource for schools.

The Steering Group recommends that it should only be delivered within the context of an integrated and supported RSE/SPHE programme, which stresses the development of the whole person.

The programme sessions' content and methods have been well received to date and the Steering Group looks forward to the results from the outcome element of the evaluation in 2007.
## Appendix

### Respect Programme Sessions Content & Delivery Methodology

<table>
<thead>
<tr>
<th>Sessions</th>
<th>Duration</th>
<th>Content</th>
<th>Facilitators</th>
<th>Pre-Delivery Training</th>
<th>Methodology</th>
<th>Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-3</td>
<td>60-80 mins</td>
<td>Groundrules. Revision of some puberty facts. Basic info. on sexual intercourse and reproduction Contraception. Crisis pregnancy (sources of support)</td>
<td>Class's SPHE teacher &amp; health professional</td>
<td>1 day (initially 2 days)</td>
<td>Teacher/health professional input</td>
<td>Classroom notes Student worksheets</td>
</tr>
<tr>
<td>4-7</td>
<td>60 mins</td>
<td>Benefits of delaying first intercourse in school aged young people Peer pressure Assertive responses to pressure</td>
<td>Peer Educators (4th/5th years from same school) [With SPHE teacher present in classroom, in support role if necessary]</td>
<td>2 days of basic relationships and sex education 2 days of training in the delivery of the programme</td>
<td>Peer input Small group work (whole class feedback) Role play Quiz game</td>
<td>Classroom notes Student worksheets</td>
</tr>
<tr>
<td>8-10</td>
<td>60-80 mins</td>
<td>Teen crisis pregnancy (options and consequences) S.T.I.s Exploration of appropriate levels of intimacy</td>
<td>Class's SPHE teacher &amp; health professional</td>
<td>1 day (initially 2 days)</td>
<td>Teacher/health professional input</td>
<td>Classroom notes Student worksheets</td>
</tr>
</tbody>
</table>
Dear Colleague,

You may or may not have heard about the Respect Project, however, I am sure that you have repeatedly heard and seen media attention highlighting the issue of teenage pregnancy in Ireland and the increased rate of STIs in the young adult population.

The Respect Project was established to support parents and schools in educating and providing skill development for young people around healthy decisions on relationships and sexual activity. Respect is not intended as a stand-alone programme, rather it is extremely important that Respect is delivered in the context of the work done on positive relationships within the Relationships and Sexuality Education (RSE) syllabus.

In the Respect model, teachers, health professionals (e.g. doctors and nurses) and older students (known as peer educators) deliver ten structured classroom sessions to 2nd & 3rd year post-primary level students.

The response to this programme has been very positive.

I invite you to please read and learn from the views of teenagers, teachers and health professionals expressed in the accompanying research report. Their views demonstrate the value and need for the continuation of the programme to benefit other young people.

Please do not hesitate to contact me if you wish to learn more about the Respect Project and our experience of helping schools, health professionals and parents work collaboratively to offer additional support around relationships and sexuality education.

The project is still in its pilot phase and a final report regarding its potential effect and sustainability will be available next year.

Yours Sincerely,

Moira Germaine
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