

“Opening Locked Doors”

Evaluating peer education in schools in the Western Cape Province: A mixed methods longitudinal study

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EXECUTIVE SUMMARY

Introduction

Peer education has long been seen as a key health promotion strategy and important mechanism to challenge and shift youth behavioural norms, especially for those issues not easily discussed between adults and youth. Deutsch and Swartz, (2002, p. 37) have described how peer education achieves this through providing “a safe place for candid and genuine examination of attitudes, choices, and situations”. Over many years of programme implementation, globally and in South Africa, empirical evidence regarding its efficacy has been difficult to obtain. At best peer education programmes have been shown to aid peer educators in a number of important ways but evidence for change in those who take part as peer learners has been elusive.

This report provides an evaluation of a peer education intervention funded¹ by The Global Fund To Fight AIDS, Tuberculosis and Malaria (The Global Fund), and implemented by the Western Cape Department of Health and Western Cape Department of Basic Education in collaboration with various NGOs (known as implementing organisations) along with technical assistance and monitoring provided by the Centre for the Support of Peer Education (CSPE). Fundamentally the study asked what doors do peer education open that are not usually opened in the course of teacher-led educational interventions. This study answers this question by showing how this peer education programme in particular has opened doors regarding increased levels of knowledge and discussion amongst youth, improved measures of self-efficacy regarding sexual decision making and heightened sensitivities amongst young people regarding their need for help and support.

Research design

The evaluation used a mixed method research design to assess the impact of a structured, time-limited, curriculum-based (called ‘Listen Up’ and dealing with support, decision making, relationships, HIV risk, alcohol, pregnancy) peer-led educational programme on first year high school learners in schools in the Western Cape (peer learners) and the peer educators who facilitate the groups. It also aimed to understand the feasibility of supporting peer education programmes to reliably deliver risk reduction interventions in school settings.

The programme targeted youth in Grade 8 exposed to high-risk behaviour in schools in a number of districts in the Western Cape, as determined by the department of education, and followed them over the course of two years. Changes in their knowledge, attitudes and intentions were measured at three intervals during 2012 and 2013 (immediately before the intervention, immediately after the intervention and between 5 and 7 months later) and compared with a control group (measured at two intervals) who did not participate in the peer education programme. Thirty-five schools (27 intervention schools and 8 control schools), stratified by district, were randomly selected out of 236 schools in the Western Cape where peer education was being implemented. These schools comprised the quantitative sample.

For the qualitative study, eight schools running peer education programmes were chosen in consultation with education department officials and to ensure a balance of district and implementing partners. These served as in depth case studies of how the programme was implemented as well as the contexts in which peer education took place. Qualitative methods used included focus groups with peer educators and peer learners, individual interviews with

¹ The HSRC’s evaluation was conducted via a sub-contract with HETTAS (Health and Education Training and Technical Assistance Services).

adults stakeholders such as those from implementing organisations, teachers supervising peer education programmes, school principals, and education and health department officials. The contexts of each school were studied in a rapid but in-depth ethnography conducted over a week through observation and participation in the life of the school. Ethical clearance for the study was obtained from the HSRC Research Ethics committee and written consent was obtained from participants and from parents/guardians where participants were under 18 years old.

We report our findings in four substantive chapters: the contexts of schools in which peer education takes place; measuring qualitatively the changes a peer education programme brings about; measuring change quantitatively; and what this study contributes towards the science of peer education in terms of goals, standards and systems for peer education. We summarise findings according to this chapter delineation below.

Understanding the contexts of schools as sites for peer education

Far too often insufficient attention is paid to context in multi-site research studies. Chapter 2 reports rich data gleaned from analysing the contexts of the eight schools chosen as case studies. The data collection was done by means of a 'time-deepening strategy', or rapid ethnography, where attention was paid to specific aspects of the school and community 'culture' using a structured observation schedule. The data analysis was shaped by the ecological framework formulated by Urie Bronfenbrenner, as a means to understand processes of human development. The benefit of this model is that it considers various contexts that directly or indirectly impact the development of the individual. Based on these findings we use the concept of 'school climate', as defined by Haynes and colleagues, to posit that peer education programmes in schools with a more positive climate are more likely to display positive social behaviour and improved sexual health decision-making and outcomes.

For the sake of confidentiality we labelled each of the eight schools using consecutive letters of the alphabet from A to H. We found that the historically Coloured *rural* schools (Schools F, G and H) and the extremely well-resourced *suburban* school (School A) displayed the most positive school climate. Conversely, the historically Coloured-only schools (i.e. B and E) and the historically Black-only school (i.e. D) in *urban* locations displayed the least positive school climate characteristics. School C (an all-Black school established after the 1994 elections) displayed a mix of positive and negative characteristics, despite the impoverished context in which it is located. Not surprisingly in the final analysis Schools A, F, G and H also showed the largest gain in overall indicator scores between the baseline and the 5 to 7 month post-test questionnaire.

Measuring change qualitatively

Traditionally, predetermined indicators are used as a yardstick to measure the change wrought by programmes, and are usually done using quantitative methods. Chapter 3 focuses on the qualitative data gathered during the evaluation of the programme and uses an alternative framework, the Most Significant Change (MSC) approach, to analyse data. Using traditional predetermined indicators, our qualitative findings mirrors that of previous research studies and shows the impact of peer education on sexual behaviour change is minimal, or at least difficult to articulate. However, by using a broader set of indicators we found a number of positive impacts.

Among these are that this peer education programme fostered a compassionate and caring attitude amongst learners despite their environmental obstacles, and resulted in improved family and community relations. We also found that the effectiveness of the role modelling

function of peer educators varied, and that being peer educators improved academic skills amongst some participants, as well as improving their decision making, leadership and communication skills. The MSC approach also suggested two additional impacts that are largely undocumented by previous literature - that the programme can open doors for learners to deal with traumatic life experiences and that the programme can have a positive impact on teachers' perceptions of learners.

Measuring quantitative change

The quantitative component of the study measured nine broad indicators, namely, participant demographics; community context; levels of sexual activity; exposure to peer education; delivery of the peer education programme; sexual and HIV knowledge, attitudes and behaviour; decision making; social support and positive social behaviour. A comparison was drawn at baseline between the intervention and control samples and some differences were found between the two groups which suggest that there may be differences that were not apparent during the random selection process. At baseline and Time 1, the intervention schools were compared and the results indicated that the intervention produced statistically better outcomes with regard to future orientation, self-efficacy in sexual decision making, knowledge regarding HIV transmission, knowledge regarding HIV prevention and knowledge in terms of a healthy relationship. Intervention schools were then compared between baseline and Time 2. Results indicated that over a longer period of time the intervention yielded statistical better outcomes with regard to self-efficacy in sexual decision making and knowledge of HIV transmission. Comparing Time 1 and 2 results shows that only self-efficacy in sexual decision making remains statistically significant.

Recommendations for goals, standards and systems for peer education

To advance the science of peer education, besides measuring the efficacy of individual programmes, it is necessary to consider evaluation results in the context of wider goals, standards and systems. In Chapter 5 we draw on the South African experience of setting practice standards over 14 years through both consultation and evaluations of peer education programmes, and alongside the South African Department of Basic Education's guidelines for school-based peer education, and make recommendations in three categories: (1) conceptual aims and goals for peer education; (2) implementation standards for programmes; and (3) infrastructural systems necessary for peer education in a school-based context. A summary of these goals, systems and standards is provided below.

Conceptual goals	Implementation standards	Infrastructural systems
<ol style="list-style-type: none"> 1. Supporter: Build trusting relationships with peers 2. Educate their peers in a structured manner. 3. Role-model healthy behaviour/shift norms 4. Recognising youth in need of additional help and refer them for assistance 5. Advocate for gender equity, resources and services for themselves, their peers and their communities 	<ol style="list-style-type: none"> 1. Plan 2. Mobilise 3. Develop an adult infrastructure 4. Develop a peer educator infrastructure 5. Ensure gender sensitivity 6. Manage and reward performance 7. Monitor and evaluate inputs and impact 	<ol style="list-style-type: none"> 1. The school setting 2. Policy articulations 3. Linkages 4. Learning programme 5. School climate 6. Funding and oversight

In order to improve this peer education programme in particular, we conclude by making

twelve key recommendations as follows:

Conceptual goals

1. Limit roles of peer educator to those developmentally appropriate for 13-15 year olds (e.g. educator, supporter and role model rather than advocate and referral agent).

Implementation standards

2. A school-level peer education steering committee is necessary to ensure sustainability and to demonstrate positive social behaviour.
3. A needs assessment of school and community context (including school climate) needs to be undertaken prior to the commencement of a peer education programme.
4. Maintain a two year age difference between peer educators and peer learners to foster trust.
5. Using youth development NGOs to implement and support peer education programmes in school appears effective and should be continued.
6. More boys need to be recruited as peer educators and their involvement sustained.

Infrastructural systems

7. New ways to measure youth risk behaviour and ensure accurate self-reports need to be devised especially given the increase in risk behaviour at this age.
8. Sustainable collaboration and uninterrupted funding is essential for a programme's success and should be secured at the outset of the programme.
9. Peer education programmes should include strategies to engage parents to ensure support and understand context.
10. Current DBE policy should be amended to allow for peer education to form part of the formal curriculum and to allow peer educators to operate outside of their own grade level.
11. Given the importance of school climate, involving parents and ensuring the visibility of teachers and school principals in peer education programmes is critical to its effectiveness.
12. The learning programme needs to be enhanced with a focus on facilitation, referral and advocacy skills.
13. Use of an external agency to supply training and monitoring seems to be key to the programme's success.

CHAPTER 1: Introduction and research design

Summary

This chapter introduces the purpose and the objectives of this study: an evaluation of a peer education intervention implemented by the Western Cape Departments of Health and Basic Education in collaboration with various NGOs and with technical assistance and monitoring provided by the Centre for the Support of Peer Education. It outlines the programme indicators that have been used to measure the impact of the peer education programme that has been implemented, describes the sample, and emphasises the importance of locating peer education programmes in broader social and historical contexts. Various methodological steps are described, such as obtaining ethical clearance, sampling and selecting participants (providing a sketch of all the participating schools in the qualitative component of the study), gaining access to schools and the process of data collection and data analysis, and fieldworkers' insights and experiences of the data collection process. The chapter ends with an outline of each chapter of the report.

Introduction

Peer education is defined as a group health promotion strategy and means of intervention (Shiner 1999) able to complement other more individualised modes of health promotion and delivery. Peer education programmes target the peer group as the unit of change in order to modify social norms, and use an individual from the target group (i.e. 'peer educator' or 'peer facilitator') as the 'agent of change' (Chandan et al., 2008, p. 12). Deutsch and Swartz (2002, p. 37) argue that 'peer educators above all create a safe place for candid and genuine examination of attitudes, choices, and situations. And it is by virtue of their ability to create such safe learning places that they become educators, models, referral agents, and activists against the HIV/AIDS pandemic and other health threats to young people'.

Evaluating peer education programmes is a complex phenomenon because it presents the challenge of assessing both attitudinal and behavioural change. The evaluation of peer education programmes must consider health and development challenges such as HIV/AIDS infection, sexual decision-making, and substance abuse that are generally difficult to measure. In South Africa these challenges affect the sustainability of a successful peer education programme in many school contexts. In the Western Cape, as in many other places in South Africa, these social contexts have been shaped by our country's history of racial segregation and economic inequality that continue to influence contemporary social life. Peer education in this context is vitally important as a mechanism to challenge and change age-old, harmful behavioural and attitudinal practices that affect the quality of life for young people.

This report is an assessment of the impact of a structured, time-limited, curriculum-based, peer-led educational programme (called 'Listen Up') to first year high school learners in schools in the Western Cape province, and compares its effect with learners who have not yet received such an intervention. The target age group for the intervention was youth in Grade 8 in 2012 (aged between 13 and 15) that might be engaging in, or are exposed to, high-risk behaviour. Schools chosen to implement the intervention were those, who in the view of the Department of Basic Education, were at high risk for both educational and health outcomes. The peer education programme that forms the basis for this evaluation was implemented as a collaborative effort between the Western Cape Department of Health (WCDOH), the Western Cape Department of Education (WCDBE), the Centre for the Support of Peer Education (CSPE), a number of non-governmental organisations (known in the report as Implementing Organisations and abbreviate as IOs) with funding from The Global Fund To Fight AIDS, Tuberculosis and Malaria (The Global Fund).

This research study identifies the school-community context as significant in assessing the key institutional requirements necessary to sustain peer education in schools. Through investigating various outcomes and characteristics that make peer education feasible, and more importantly, sustainable in school settings, best practices with regards to standards and systems for peer education are the ultimate aim of this report.

The importance of schools as a site for peer education

Schools are significant sites for shifting social norms and hence are important settings in which to implement a peer education programme. Following a review of existing programmes, Mukoma, cited in Visser (2007) concludes that there is a need for innovative programmes in South African schools to promote and maintain safer sexual behaviour, as well as to provide care and support for those living with HIV/AIDS. Flisher et al. (2006, p. ix) reports that peer education programmes aimed at reducing HIV/AIDS incidence amongst school-going adolescents are important because 'a high proportion of young people are sexually active' in schools, and that 'the influence that peers exert on the sexual activity of adolescents in the school-setting is pronounced and there is a connection of the school to wider community structures' (ibid). In addition, the inaccessibility of health-care facilities to adolescents, in terms of geographical distance and cost, and a lack of friendliness of clinic staff, make the school setting a relatively more accessible avenue through which adolescents can acquire important health knowledge and referrals for further help (Flisher et al. 2006, p 2). The Department of Basic Education's guidelines on peer education in South African Schools states, "Peer education has also gained popularity as an HIV prevention strategy in schools, either to complement other programmes or as a stand-alone programme" (Visser, 2011, p. 9). Schools are well placed to provide peer education as a complementary educational approach, particularly in communities where access to information is limited. This report examines the implementation and impact of a peer education programme within school settings in the Western Cape.

Outcome indicators

The study focuses on evidence for the effectiveness of peer education. Programme outcome indicators are measures of a programme's intended effect on the population being targeted by the interventions. The indicators were determined with the curriculum content of sessions in mind, but also reflect general peer education aims, i.e. increased dialogue between peers around sensitive risk behaviours, efficacy in sexual decision making and increased awareness of services and opportunities available to them. The various chapters in this report assess and examine to what degree these outcome indicators have been attained both qualitatively (Chapter 3) and quantitatively (Chapter 4). Through a process of literature review and consultation with key stakeholders, the following indicators were taken to be adequate measures of behavioural change that has the effect of reducing adolescents' exposure to HIV infection:

1. *Demographics*: High school learners by age, sex, language, socio-economic status, leisure activities.
2. *Community context*: What are learners' levels of environmental exposure to high-risk behaviours? What support is available for them from school, home and community?
3. *Sexual activity*: Prevalence of sexual activity among youth, sexual history, teenage pregnancy rates, visits to clinics to obtain contraception, testing behaviour.
4. *Exposure to peer education*: Is this a first time exposure or a repeated exposure? Have there been other exposures to other preventative peer education programmes?
5. *Service delivery*: The efficacy with which the peer education programme has been implemented in a school according to beneficiaries, i.e. number of sessions attended, evaluation of sessions and impressions of school functioning.

6. *Sexual Knowledge Attitudes and Behaviour (KAB)*: Knowledge of HIV transmission and prevention of risk behaviours that contribute to HIV, unintended pregnancy and sexually transmitted diseases, attitudes to condoms, multiple concurrent partners, transactional sex, teenage pregnancy, and reported sexual health Intentions/Behaviours/Practices.
7. *Making smart decisions*: Percentage of learners whose friends influence decisions? e.g. “my friends think it's okay...”, “my friends use condoms”, “it is not cool to do drugs”, “I am not afraid to be myself”, “you are not a real man if...”.
8. *Perceived social support*: Percentage of learners engaging with sexual health issues, i.e. seeking help for themselves or for friends, or conducting discussions amongst groups of peers - intended to demonstrate how peer education might differ from conventional Life Orientation lessons.
9. *Positive social behaviour*: Learners showing social competence and sensitivity, discipline and self-control, independence and autonomy.

Various instruments were used to measure these indicators and will be discussed in detail later.

Main objectives of the study

The main objective of the research was to evaluate the effectiveness of running school-based peer education programmes for high school learners. In summary, the study investigates:

1. The impact of the programme on high school learners (peer learners and peer educators²): Do these lessons improve learners’ knowledge, attitudes, intentions, skills and behaviours – including the ability to support healthy behaviour that is known to contribute to the prevention of HIV infection and other risks to which youth are especially vulnerable?
2. The impact of the programme on the peer educators who facilitate the groups: Was their inclusion in the programme beneficial? How are same-age peer educators able to fulfil their roles and gain respect from their peers?
3. The feasibility of supporting peer education programmes to reliably deliver risk reduction interventions in school settings in the Western Cape. The role of the Implementing Organisations and the district coordinators³, school staff (particularly the Life Orientation teacher’s ability to allow interactive, peer-led learning and debate in class) and the WCDBE in supporting and helping to sustain peer education was assessed.

In summary, this study was designed to establish how or whether the intervention succeeds in promoting prevention of high-risk behaviour, broadening youth life skills, and influencing attitudes and intentions in the beneficiaries of the programme. It also aimed to assess the broader impacts and sustainability of the programme in the school context as identified above.

Methodology

The research methods chosen were designed to obtain a longitudinal and in-depth understanding of different stakeholders such as peer learners, peer educators, teachers, implementing organisations, officials and funders’ experiences of the programme. In order to do so a number of evaluation methods were used within a broad ecological framework of youth development (Bronfenbrenner, 1977, 1986). This section describes the research process and methods used in the design and the implementation of the research study.

² The use of the terms peer educators and peer learners is to differentiate between the learners who receive the peer education (peer learners) and those that facilitate the peer education sessions (peer educators). These two groups collectively are referred to as high school learners.

³ District Coordinator is used to refer to the person from the Implementing Organisations who participated in the study.

Design

In order to track the success of peer education delivery in schools in the Western Cape, a longitudinal research design was implemented with data collection beginning in February 2012 and ending in June 2013. With measures repeated over time it is possible to describe patterns of behaviour change and help to reveal shifting knowledge, attitudes and intentions in high school learners that may go unnoticed or unreported with once-off approaches. Data collection included a quantitative component in the form of a survey questionnaire repeated at three intervals for the intervention entire sample and twice for control school groups, along with qualitative data collection (focus groups, individual interviews and a rapid ethnography) in a smaller purposively selected sample. The survey was conducted in 35 schools (27 intervention schools and 8 control schools) while qualitative data was collected from 8 schools. In total, 7295 questionnaires were collected over the 17 month period, 30 focus groups were conducted (15 with peer educators and 15 with peer learners), 27 individual interviews were conducted (14 with teachers/principals, 9 with implementing organisations and 4 with funders and government officials responsible for the implementation of the programme). Table 1.1 summarises the number of research participants as well as schools who participated in the study.

	<i>Pre-Test/Baseline</i>	<i>Post Test 1</i>	<i>Post Test 2</i>
Number of schools	35	35	27
Intervention	27	27	25
Control	8	8	--
Peer learners	2904	2594	2211
Intervention	2225	2036	2211
Control	679	558	--
Focus Groups	<i>Total number run</i>	<i>Number of participants</i>	
Peer learners	15	126	
Peer educators	15	60	
Interviews	<i>Total number conducted</i>		
Implementing organisations	9		
Teachers/principals	14		
Funders and government officials	4		

Ethics and access

Obtaining ethical clearance

Conducting research with minors requires careful ethical considerations, particularly on topics of sexuality, sexual behaviour and HIV and AIDS. The ethics application was submitted to the Research Ethics Committee of the Human Sciences Research Council which is nationally accredited by the South African government. The ethics application included consent forms and all research instruments. Steps were taken to ensure confidentiality and anonymity for all research participants. Informed consent was obtained from all research participants and their parents/guardians (since almost all were under 18). Assent was obtained from youth participants under 18 in addition to parental consent. (See Addenda 12-19 for consent and assent forms in all languages). In this report all respondents' names and schools have been changed. For people we have used pseudonyms, while for case study schools we use letters of the alphabet (Schools A-H). For implementing organisations and other stakeholders we have used their actual names by agreement.

Choosing schools

The schools in the quantitative study were randomly selected within the five districts that were provided by the WCDBE. The schools in the qualitative sample were purposively selected according to the five districts of the Province, namely Eden District, Cape Metro, Metro North, Winelands and the Overberg. In the urban districts the schools were chosen mainly in communities previously classified⁴ 'Coloured' and 'Black/African'. School A was the only school that was selected that was located in a previously classified 'White' community. The selection of schools in several districts was done in consultation with the WCDBE and to ensure a degree of representativeness in terms of place, race, culture and religion.

Sampling

School selection

The quantitative sample consisted of peer learners and peer educators from each of the five districts in the Western Cape. Two main criteria informed site selection:

- Schools were selected proportionally according to the number of schools who are implementing peer education in the province, and in each district. There were 236 schools in this category.
- Schools were selected proportionally according to the number of implementing organisations who are working in the province to implement peer education. There were nine implementing organisations.

A simple random sampling technique (Babbie & Mouton, 2001, p. 189) was used to draw 27 schools from the 236 selected to receive peer education by the WCDBE. The 236 schools were divided into lists according to district and implementing organisation. These lists of schools were numbered, and then randomly selected using a table of random numbers for both district and implementing organisation. Overall, 28,320 Grade 8 learners were expected to participate in peer education (236 schools x approximately 120 Grade 8 learners per school). A baseline evaluation of schools randomized to an intervention or control school formed the basis for comparing outcome data, although differences in outcomes in comparing control and intervention samples were expected to be small. For this reason the margin of error was set at a lower level in order to detect a meaningful difference. Based on previous work to detect a meaningful difference in outcome scores between an intervention and control school, an error rate of 2% set at the 95% confidence level and a total population of 28,320 would require 2,216 learners from 27 schools to be sampled. Furthermore, the estimated number of Grade 8 learners per school was estimated at 85 (rather than 120) to allow for absentees and to take account of attrition over the three assessment periods. To meet the requirement for a representative sample, in some of the schools slightly more than 85 learners were included, while in others slightly less than 85 learners participated. These assumptions did not always fit schools' realities and researchers had to accommodate these differences when administering survey questionnaires. In some schools 3 out of 5 classes were included whilst in others all classes were included resulting in fluctuating numbers as compared to targeted numbers. Overall however the sample size was met.

Selecting participants

For the qualitative sample, 10 peer educators and 10 peer learners were invited to participate in

⁴ Our use of these Apartheid era racial categories are used as a form of reference in the analysis of school contexts. It does not imply an endorsement of these categories in any way.

focus groups, to enable rather than stifle conversation. Learners were eager and willing and were rewarded with refreshments for their participation. In the latter part of the research and with at least two schools, it became more difficult to identify peer educators because they had progressed to grade nine or had dropped out of the peer education programme. Life Orientation teachers were included in the sample of teacher stakeholders, and it was usually very clear who was involved with peer education and who was not. Implementing organisations also identified the peer education manager/coordinator as the person most knowledgeable to participate in the study.

Negotiating access

Access to schools started with the formal application to conduct research within Western Cape schools to the Provincial Department of Education. Permission was granted and a formal letter was received. When negotiating access into individual schools, the permission letter was shown to the Principal and the study explained in person. There was generally good cooperation from schools throughout the different phases of the research, although time delays were frequently encountered with school staff taking long periods of time to get back to researchers. There were also some communication difficulties, and schools in Khayelitsha were especially challenging to work with as the following description from the fieldworker responsible demonstrates:

No one wants anything to do with outsiders in the school. My first contact with the school was Mrs X. This woman was difficult. She wanted nothing to do with the research, no assistance afforded to me to get a venue, no assistance in terms of access to the learners. The principal was even worse. He stood in the passage on another occasion and told myself and my colleague to leave the premises and come back when Mrs X is in the school. She had taken leave on the same day that we had arranged to start the research with the learners.

However, this lack of cooperation was the exception rather than the rule. Further challenges encountered in working with schools included not all having halls or other suitable venues in which to administer the survey and no access to learners being possible from the end of September until mid-way through February of each year due to exams and poor school attendance after exams and at the start of the school year. Towards the end of the study, two schools refused to participate in the intervention group post-test 2 survey and the second round of focus groups.

Thumbnail sketch of participating schools

For the qualitative component of the study that aimed at a more in depth look at schools' social contexts, eight schools were studied. Below we provide thumbnail sketches of each of these schools. A detailed analysis of how social context affects youth health and behaviour outcomes and peer education is provided in Chapter 2.

School A

School A is located close to Cape Town's CBD. It is situated in a historically affluent part of the city and was previously a Whites-only area. However, currently the majority of the school's learners do not live in the surrounding area. Even though the community remains a predominantly White neighbourhood, a significant majority of the school's 440 learners are Coloured or Black. These learners commute from various peri-urban townships or the Cape Flats every day. The school is well-equipped with two computer labs (including printers and internet access), a small library and sports fields (which are maintained and used by a local soccer club). The community does not have a main industry, but has a busy main road with various types of restaurants, supermarkets and other retail outlets.

School B

School B is situated in the greater Athlone area on Cape Town's 'Cape Flats' – predominantly comprising Coloured communities. The majority of learners attending School B do not live in the immediate vicinity. Most are Black and commute from various peri-urban townships, with approximately 30% of learners living in the surrounding, Coloured neighbourhoods. The school has 576 learners, 57% of which are female, and 19 teaching staff. In spite of the low numbers of students from the surrounding areas, the school appears to be at least somewhat integrated into the surrounding community – it is the site of a number of activities, including dance classes and badminton. The school also has a NGO-run computer room. The neighbourhood around the school is general clean and quiet, and not characterised by violence and gangsterism as is the case in other nearby areas and in many of the communities where learners live.

School C

School C is located in Philippi, a township situated on the urban periphery 19km southeast of Cape Town's CBD. In some parts of Philippi the residents, including some of School C's learners, live in informal settlements and are severely impoverished. The school is made up mostly of Black learners who live in the surrounding community. One of the most noticeable aspects of the school is that it was originally a sports complex and still has an indoor sports facility. Although the school does not have a library, the learners have access to a computer room, with approximately 40 computers with internet access. The school is generally clean and neat, although there is quite a bit of graffiti in places. Apart from some small farms, Philippi does not have a main industry, although there are a number of informal traders, including tuck shops, as well as people selling building materials with which to build shacks. There are not many recreational activities for young people in Philippi – and a number of the learners indicated that sex is youth's only recreational activity.

School D

School D is located in northern part of Khayelitsha – one of the largest townships in South Africa. Khayelitsha consists of various sections that range from formal, middle-class housing to informal settlements. The area, as well as the school is predominantly Black (i.e. 99%), with learners living close to the school. School D has 1398 learners, 60% of whom are male. On the one hand it has two science labs, two computer labs and a well-kept library, yet some parts of the school, like the bathrooms, are unkempt. Evidence of the socio-economic challenges in Khayelitsha include the high rates of unemployment and welfare dependence, as well as the extent of informal trading on many sidewalks and the proliferation of shacks in the area.

School E

School E is situated in a predominantly-Coloured and Afrikaans-speaking suburb in the greater-Kraaifontein area of Cape Town's northern suburbs. More than 95% of the school body comprises Coloured learners, who mostly live in neighbouring communities or out-lying farming communities, both of which are historically Coloured areas. Neighbouring communities are low-income neighbourhoods where unemployment is rife and where gang-related violence is often a concern. Within the low-income peri-urban farming community, many families are largely dependent on seasonal farm labour. The school struggles to cover the costs of necessary maintenance, therefore the sports fields are neglected. However, due to the considerable interest in rugby among some of the learners, the school uses the fields at a nearby rugby club when necessary. The school also has a combined library and computer room. In order to assuage safety concerns the school has security officers on site.

School F

School F is situated in a small community between Stellenbosch and Franschoek in the Western Cape. It is comprised primarily of Coloured learners with 2% of the learners being black. Some learners live in the community, while others live on surrounding farms or in nearby rural towns. Approximately 60% of the 760 learners at School F are female, as are 31 of the 54 teachers. The school's walls are painted with bright colours and the school boasts a number of facilities including a rugby field, netball courts, a computer room, as well as an arts and culture room with a Casio keyboard. The learners' parents and others in the surrounding communities depend largely on seasonal farm work, with many of them struggling to find employment during the rest of the year. Some of the learners, such as those who live in informal settlements or on some farms, have little to no access to electricity and/or proper sanitation. On the other hand, some live in brick houses situated in the surrounding towns.

School G

School G is situated in a predominantly Coloured fishing village on the Western Cape's south coast, approximately 100km north east of Cape Town. The school was designated a Coloured-only school under apartheid and but now has some Black learners (most of whom commute from a township 10km away). The Coloured learners who attend are from the community or from a nearby town. The school has 780 learners with 34 teachers. The school's classrooms have rudimentary, but adequate furnishing. The school also has a rugby field, netball courts and a computer lab. It was clear that the community (and surrounding towns) are impoverished since a number of the learners come to school hungry each day (and participate in a school feeding programme). The predominant occupations held by the learners' parents and relatives appeared to be fishing.

School H

School H is located in Mossel Bay, a medium sized town 380km north east of Cape Town and 50km before George. The school is situated in a historically and, still, predominantly-Coloured part of Mossel Bay, although some of the learners live in the surrounding areas, including a racially-mixed neighbourhood. The school has approximately 1,000 learners, of whom 98% are Coloured. Also, 25% of the families at the school are unable to pay school fees. Nonetheless, classrooms are generally neat, with whiteboards at the front and televisions in some rooms. There were some indications of vandalism at the school and in the community although there appeared to be little concern regarding violent crime and gangs. On the whole, the surrounding communities are impoverished, with high rates of unemployment and a mix of brick houses and shacks.

Implementing organisations

Through an open tender process the WCDBE and WCDOH appointed a number of non-governmental organisation to implement peer education in various areas of the Western Cape. These implementing organisations were trained by CSPE and were key in ensuring quality programmes in the schools for which they were responsible. Table 1.2 provides a brief summary of who these implementing organisations were, and which of the case study schools they were responsible for.

TABLE 1.1. IMPLEMENTING ORGANISATIONS				
	Focus of Organisation	Location	Year established	School
PARTNERS IN SEXUAL HEALTH	Sexual and reproductive health, including HIV and AIDS	Urban/Peri-urban	2009	School D and School E
GRASSROOTS SOCCER	Development programme that uses Soccer as an entry point to educate on HIV and AIDS	Urban/Periurban	2006	--
LIFE CHOICES (Salesians Institute)	Youth development organisation, has a mobile, youth-friendly HIV counselling and testing service	Urban/Peri-urban, Cape Flats	2004	School B and School C
SPADES YOUTH DEVELOPMENT AGENCY	Community, youth development agency	Urban/Periurban	1999	School A
WAGON OF HOPE	Community development agency, based in the Drakensberg Municipality	Periurban/Rural	2000	School F
WITZENBERG COMMUNITY CARE	Community health organisation focusing on TB, HIV and AIDS and child health in the Witzenberg Municipality	Periurban/Rural	1996	--
ELGIN LEARNING CENTRE (part of Elgin Community College)	An educational organisation, focusing on adult and youth education in the larger Grabouw area	Periurban/Rural	1995	School G
YOUTH FOR CHRIST (GEORGE)	Non-denominational, Christian, youth development organisation	Periurban/Rural	1989 (peer education started in 2004)	School H
YOUTH FOR CHRIST (KNYSNA)	Non-denominational, Christian, youth development organisation	Periurban/Rural	1998 (peer education started in 2008)	--

Data collection and data analysis

Quantitative study – Surveys repeated over time comparing control and intervention schools

This was a quasi-experimental research design (Babbie and Mouton, 2001) comparing data from control schools and intervention schools. With intervention schools there were three points of survey data collection: the pre-test; post-test 1 and post-test 2, while with control schools the second post-test was omitted due to budgetary constraints. Surveys were available in learner's choice of language (English, Afrikaans or isiXhosa – See Addendum 1-3). Surveys were translated and back translated and piloted prior to initial use to iron out misunderstandings or errors. The implementation of the surveys was dependant on timeous access into the schools as well as the implementation of peer education lessons (coordinated by the implementing organisations). Implementation was delayed due to various external factors such as the contracts between the WCDBE and IOs as well as due to various internal delays by IOs themselves (conducting the training, resource availability, etc.) These delays resulted in delays in administering post-test 1.

The learners' interest in the research varied. In some schools the learners were excited and enthusiastic, in other schools they were told that it was a test and they were apprehensive. The reading and literacy levels of the learners impacted on their time taken to complete the questionnaires. As one researcher notes:

With respect to learners' response to the questionnaire itself, it was notable that first language Afrikaans learners struggled slightly to complete the questionnaire. They frequently called on the teacher to explain the meaning of a word or sentence. On the other hand, the majority of first language English learners completed the questionnaire in good time and without any major difficulties.

During the pre-test survey, the learners complained that the survey was too long but during the post-test surveys they usually completed the questionnaire much more quickly. During the administration of the post-test surveys, the learners were familiar (mostly) with the process and knew what was expected of them. It was generally noted that the administration of surveys ran smoothly in schools where IOs had good relationships with school staff.

Qualitative study - Rapid ethnographies

Ethnographies are a form of research in which social context and local cultures are explored (Hammersley and Atkinson, 1995). For this study we designed what we termed 'rapid ethnographies' to provide context for the surveys and the in-depth qualitative study. Frequently peer education programmes attempt the mammoth task of assessing behavioural change without considering the socio-economic and historical context that shapes the schools and communities within which peer education programmes are based. Millen (2000) identifies a 'rapid ethnography' as 'time deepening strategies' that pays attention to specific aspects of a culture. The rapid nature of this type of study does not preclude the need for rigorous attention to methodological basics, nor does it mean that we abandon traditional methods (Beebe, 1995).

In the South African context, rapid ethnographies have been used in previous research by McLaughlin, Swartz, Kiragu et al. (2012) and is a short engagement of participant observations and informal conversations with the broader school community. The ethnographic observations were conducted by researchers who then compiled reports based on the 'Rapid Ethnography Guide' used (see Addendum 4). The reports were analysed using qualitative analysis software (Atlas.ti) and analysis was guided by Miles and Huberman's (1984) three processes of analysis: data reduction, data display and conclusion drawing. The data reduction (that involved using codes and memos) was aimed at finding themes in the data, as well as the patterns among those themes. As per Miles and Huberman's method, the coding process began with an initial list of codes, which in this case was based on the rapid ethnography guide, and modified as analysis continued. The process of data display involved using diagrams to further develop understanding of emerging patterns (Fielding & Lee, 1998). Furthermore, the ecological framework developed by Bronfenbrenner (1977, 1986) was especially useful in the data analysis process (and will be more fully described in Chapter 2).

Qualitative study - Focus group discussions with learners and peer educators

A key part of the in-depth qualitative study, focus groups were conducted with peer learners and peer educators (see Addenda 5-8) who were interviewed near the beginning of the programme, and again at the end of the research study. This qualitative data was thematically analysed using predetermined codes based on key performance indicators, the effectiveness of peer educators as defined by the Department of Education's guidelines for peer education (Visser, 2011) and the four key functions of peer educators as defined by Deutsch and Swartz (2002). In addition, drawing on the 'Most Significant Change' framework (Davies & Dart, 2005), the data was scrutinized for key elements that might demonstrate the impact of the peer education programme. Researchers' reflections on the focus group interviews are shared below, and serve to summarise the range of responses received from peer educators and peer learners:

FGD with the peer learners were notably more dynamic than the peer educators in the

ways in which learners - some more than others -... were ready to share with the group their life experiences on sex, sexuality and their home situation.

During the questions it became clear that even the Peer Educators - who knew undoubtedly that they were peer educators - had not actually taught lessons in their classes. One out of the 3 pairs reported actually facilitating and presenting peer education classes. The reasons for this seemed to be uncertain. Some youth felt they were not sure about how to present or when they were meant to present and a few felt the teachers should have told them when to present and aided this process for them.

Learners had a range of responses to the questions. Some were willing to engage and answer questions, though did not elaborate much beyond their initial response, even if prompted. Learners also tended to avoid potentially embarrassing or revealing personal questions.... [Peer educators] became most lively when talking about the lack of support for implementing in the school, and other perceived shortcomings of the project.

Qualitative study – Individual interviews with key stakeholders

Also part of the qualitative study, were individual interviews (see Addenda 9-11) conducted with key stakeholders such as representatives from the WCDBE, WCDOH, CSPE, staff from implementing organisations, and selected school staff (usually the Deputy principal and/or Life Orientation teacher, the Head of Department for Grade 8s and the teacher responsible for peer education). As might be expected from such a diverse group, there were mixed opinions regarding peer education. Two teachers in particular illustrate this range of opinions. Mrs X [teacher, School G] knew a lot about peer education, but she was struggling with the extra work it gave her. She felt that she had no support in the school and that the youth were not responsive. She had major challenges trying to coordinate peer education in this environment. Mr M [teacher, School A] felt peer education took time to work. He reported seeing bigger changes in youth who had participated for more than a year or two. Mr M spoke of the need for more involvement from other teachers and the department of education. He felt peer education had great possibilities that were not being utilised.

Implementing Organisations were very accommodating during the interview process and spoke frankly about the strengths and challenges of the programme. IOs emphasised the need for resources and funding to make the peer education programme sustainable. They were consistent in their criticisms of the WCDBE and in their appreciation of the participation of the WCDOH. There were four WCDOH officials interviewed but only one interview with a WCDBE official (although for not a lack of attempting to obtain these).

Data-capturing

The capturing of the questionnaires took longer than anticipated. There were challenges with the data capturing process due to (a) the length of the questionnaires, (b) the fact that surveys were answered in one of three languages, and (c) inconsistency being displayed by participants in answering questions (for example saying they were not sexually active and then describing the frequency of their sexual activity). These factors meant that the training of new data capturers, and the capturing process itself, took place at a slower pace than was initially expected. However, capturing guidelines were created to deal with any difficulties in capturing inconsistent responses and the questionnaires were all recaptured by the HSRC data capturing unit to ensure that consistent guidelines were adopted for the entire sample.

Qualitative data were transcribed and thematically analysed using qualitative analysis software (Atlas.ti).

Outline of the report

This report consists of five chapters and an executive summary.

Chapter 1: Introduction and research design. This chapter has identified the aims and objectives of the study; provided a brief description of the selected school contexts within which peer education occurs and has provided a reflection on the research design and methodologies used.

Chapter 2: Understanding and comparing the contexts of eight Western Cape schools as sites for peer education. This chapter uniquely describes in detail the school context and the school climate in which peer education occurs in the Western Cape. By focusing on eight out of the 236 schools who receive peer education from the WCBDE, it is possible to provide a nuanced sense of the social and historical context that shape the delivery and impact of peer education.

Chapter 3: Measuring change qualitatively in a school based peer education programme in the Western Cape. This chapter discusses the challenge of measuring qualitative change and provides feedback from the peer learners and the peer educators on their experience and impact of the peer education programme, as well as from key stakeholders.

Chapter 4: Quantitative change in a school based peer education programme in the Western Cape. This chapter focuses on the impact of the programme on beneficiaries using data from the quantitative survey. The chapter covers demographic characteristics of the youth who are involved, and provides results and discussion on the multiple psychosocial domains in which one would expect to be influenced by participating in peer education programmes.

Chapter 5: Goals, standards and systems for peer education: A field-generated perspective for youth HIV and AIDS peer education in South Africa. This chapter seeks to advance the science of peer education by outlining suggested standards and systems for peer education drawing on a number of theoretical and empirical sources, including the findings from this study. These sources include the DBE Guidelines for the implementation of peer education programmes for learners in South African schools and the *Rutanang* framework for peer education. It also draws on other recent empirical studies such as those led by Ward, Flisher, Visser and Swartz in order to make recommendations for future practice.

CHAPTER 2: Understanding and comparing the contexts of eight Western Cape schools as sites for peer education

Summary

Insufficient attention is paid to context in multi-sited research studies. The aim of this chapter is to respond to that dearth by demonstrating the richness of the data that can be gleaned from analysing research contexts. The data collection was done by means of a 'time-deepening strategy', or rapid ethnography, where attention was paid to specific aspects of youth, school and community 'culture' – using a structured research schedule. The ethnographies, conducted at eight high schools across the Western Cape, formed part of a larger project assessing peer education programmes at the province's schools. The data analysis was shaped by the ecological framework formulated by Urie Bronfenbrenner, as a means to understand processes of human development. The benefit of this model is that it considers various contexts that directly or indirectly impact the development of the individual. Based on these findings we use the concept of 'school climate', as defined by Haynes and colleagues, to posit that peer education programmes in schools with a more positive climate are more likely to display positive social behaviour and improved sexual health decision-making outcomes.

Introduction

According to recent population estimates 8.5% of youths aged 15-24 years are HIV-positive. In 2002 that figure was 13.6% and there has been a steady decline in the ensuing years. At a glance these figures appear to paint a positive picture. However when focusing on data for all South Africans in the 15-49 year age bracket the HIV prevalence appears to have increased slightly over the same period, from 15.1% in 2002 to 15.9% in 2013 (Statistics South Africa, 2013). These figures are a valid reason for concern and on-going intervention.

Peer education is a common type of intervention that has been used across the world as means to encourage positive health-related behaviour and decisions among youth. Since health-related learning and behaviour have long been regarded as social rather than individual processes, peer education programmes target the peer group as the unit of change in order to change social norms, and use individuals from the target group as the agents of change (Chandan et al., 2008). This approach therefore seeks to make it possible, even attractive, for young people to communicate seriously about their beliefs, attitudes, questions, and decisions concerning sensitive health topics, including those that involve HIV risk (Deutsch & Swartz, 2002; Shiner, 1999).

Peer education interventions have been conducted in various contexts, with schools being a popular choice to easily access youth. The efficacy of peer education as an intervention is constantly the subject of assessment (Campbell & MacPhail, 2002), as it is in this report. Apart from being the location of the peer education programmes, schools are also primary sites for the on-going development of youths' identities and for the development of different kinds of knowledge (Soudien, 2007). Here young people also encounter "rules, regularities, and forms of authority" that mirror society at large (Wacquant, 2006, p. 7). For some learners there is a disjuncture between those norms, rules and regularities and the attitudes or dispositions of their families. In certain instances, particularly in South Africa where de facto segregation is still experienced by many (Bray, Gooskens, Moses, Kahn, & Seekings, 2010), that disjuncture is further complicated by the way it corresponds with class and racial differences (Reay, Crozier, & Clayton, 2009; Wacquant, 2006).

The question at the heart of this chapter is: How is peer education shaped by social context broadly and school climate in particular? In order to answer this question, it is also necessary to discuss, in some detail, motivations for school-based peer education (Campbell & MacPhail, 2002; Campbell, Nair, & Maimane, 2007; Cornish & Campbell, 2009), why context matters and the notion of 'school climate'. In this chapter a broad understanding of school climate, that includes school-community relations, is used (Haynes, Emmons, & Ben-Avie, 1997).

That literature section is followed by a discussion of the methodologies used, including a discussion of the time-deepening strategy used for data collection, also known as a rapid ethnography (Millen, 2000). Furthermore, we discuss the use of the ecological framework developed by Bronfenbrenner (1977) that aims to account for the various contexts that shape human development, which was particularly helpful during the analysis phase.

Literature review

In reviewing the literature we focused on how school contexts are understood to impact young people and their development. Moreover, certain studies have shown that the socio-cultural context in which peer education takes place also impacts the success of those programmes (Campbell et al., 2005a; Campbell et al., 2007; Medley, Kennedy, O'Reilly, & Sweat, 2009).

Schools as sites for social intervention

Peer education projects are not only conducted in schools, but have been conducted in various contexts including the workplace, sports clubs, prisons (Deville, Sorbello, Eccleston, & Ward, 2005; Ross, Harzke, Scott, McCann, & Kelley, 2006; Sifunda et al., 2008) and among sex workers (Cornish & Campbell, 2009). There are those who argue that schools are more of a pragmatic choice than an ideal context for sexual health interventions (Giami et al., 2006), yet schools are acknowledged as potential health-affirming environments for youths (Kelly, 2002). One reason for this is that whereas adults are more likely to obtain health-related (i.e. HIV) information at health facilities, children and youths are more likely to receive that information from educational institutions. Therefore, schools are an important point of contact with children and youth (Brookes, Shisana, & Richter, 2004; Shisana & Simbayi, 2002) and key in the goal to reduce the extent of risky sexual behaviour.

One obstacle to effective school-based interventions is that teachers can be resistant to providing sex education for various reasons. These could include: a lack of training and/or information; anxiety about encouraging sexual activity; or that they feel it breaches the professional distance between themselves and their learners (Francis, 2010). Even where teachers are willing to engage with these interventions there is a tendency to use traditional didactic forms of health education that focus on individuals, as opposed to methods that "promote assimilation or accommodation of a range of individuals' opinions within an evolving group process" (Campbell & MacPhail, 2002, p. 332). Thus, the aim is to get young people to reflect critically on the decisions they make in the development and negotiation of their identities (Campbell & MacPhail, 2002).

This kind of reflection is a product of what South American educator Paulo Freire referred to as critical consciousness and which he saw as being the result of an "active, dialogical educational programme" (Freire, 1993, p. 19). Similarly, Campbell and MacPhail (2002, p. 334) discuss the possibility of "generating scenarios of alternative ways of being" and advocate that in order for peer education programmes to be effective, it is worth including learners in deciding which issues are addressed, as well as how they are best conceptualised and delivered (Francis, 2010; Haynes et al., 1997). In addition to focusing on these interpersonal interactions, we believed it was essential to focus on the impact of varying social and historical contexts in which these interventions took place. That said, the school environment does not exist in isolation, it is

shaped by its internal relationships and practices, along with its relationship with surrounding communities, interested third parties and society-at-large (Bronfenbrenner, 1977; Haynes et al., 1997). This can be called its climate.

Schools and beyond

The notion of 'school climate' has been interrogated in various ways (Anderson, 1982; Bosworth, Ford & Hernandez, 2011; Zullig, Koopman, Patton & Ubbes, 2010). For this study Haynes et al. (1997) was particularly useful. Whereas some notions of school climate have focused primarily on the school itself, Haynes et al. recognise that the surrounding community, and its relationship with the school, forms part of the 'school climate'. In addition to some expected ingredients, such as 'student interpersonal relations', 'student-teacher relations' and 'order and discipline', Haynes et al also acknowledge the importance of 'parent involvement', as well as 'school-community relations', 'achievement motivation', 'staff dedication to student learning' and 'leadership'. These elements correspond well with Bronfenbrenner's (1977, 1986) ecological framework for youth development, which will be discussed in more detail in the following section.

A key issue in this study was young people's environmental exposure to high-risk behaviours at school, home and in their community at large. This is due to an association between youths' experiences of positive relationships that show high levels of mutual respect (i.e. potential encouragers of positive behaviour and choices) and having earlier sexual debut or exposure to related risky behaviour (Evans & Tripp, 2006). This is especially important since it has been found that a lack of positive adult role models, especially with regards to sexual relationships, can significantly undermine the success of a peer education programme (Campbell & MacPhail, 2002). Further support for this is provided by Brookes et al. (2004) who found that where parents or guardians have been involved in HIV-focused interventions there was a greater chance that correct knowledge about HIV transmission would be received.

However, one of the challenges faced with this study was utilising the best possible research method that would allow for the collection of the necessary contextual data in a time (and cost) efficient manner. We now turn to a brief discussion of the use of rapid ethnographies as a research method and describe our analytical framework.

Methodology

Data collection – rapid ethnographies

Traditional ethnographies can take months or years to complete and are usually conducted by a lone researcher. However, there are occasions when this is simply not possible, particularly when the research is being aimed at the development and/or implementation of specific applied activities or interventions (Beebe, 1995, 2001; Handwerker, 2001; Mignone et al., 2009; Millen, 2000). Instead, this study utilised a time-sensitive method that Millen (2000) calls 'rapid ethnography', which allows for collaboration between researchers and pays attention to specific aspects of a culture or context. According to Mignone et al. (2009, p. 54), the idea of a 'rapid ethnography' is not new, but has been known by various names including 'rapid assessment' (Beebe, 1995, 2001), 'quick ethnography' (Handwerker, 2001), 'rapid appraisal' (Hildebrand, 1979), and 'rapid rural appraisal' (Chambers, 1994a, 1994b, 1994c). Nevertheless, the rapid nature of this type of study does not preclude the need for rigorous attention to methodological basics (Beebe, 1995). The researchers entered the contexts they were going to study with "a specific data plan, identified informants, and specific timelines" (Kluwin, Morris, & Clifford, 2004, p. 63). Furthermore, rapid ethnographies can involve a combination of techniques, including, but not limited to, observations, interviews and, where possible or necessary, passive video observations. The aim is to make use of the essential elements of more time consuming

ethnographic methods while maximising flexibility (Beebe, 1995; Millen, 2000).

In this study, the first stage of data collection consisted of week-long ethnographic observations of the school contexts, each conducted by a different researcher but using the same observation schedule (see Addendum 4). Later, observations were made of particular lessons, aimed at highlighting classroom dynamics, including teaching methods and general interactions between teachers and learners. Each researcher then wrote a report on their observations, which was used as the primary data for analysis.

While the thumb nail sketches in Chapter 1 serve as an introduction to the eight schools in the in-depth qualitative study, Table 2.1 offers a summary of the pertinent features of each school while also attempting to protect their confidentiality. Five of the schools are located in the greater Cape Town area, two in rural coastal towns, and the other in an inland rural town. These schools will be discussed in more detail later as we consider our findings.

SCHOOL (Historical demarcation)	LOCATION	DEMOGRAPHICS	FACILITIES & ORGANISATION	SES & EMPLOYMENT	LEARNERS' HOMES
A (White)	Urban suburb near CBD	440 learners Mostly Coloured & Black	Two computer rooms Soccer fields & basketball courts Small library	Low to middle SES, some higher SES Mostly retail, domestic workers, labourers; Some business owners, nurses, MPs etc. Some unemployment Some hungry learners	Various (mostly peri-urban townships)
B (Coloured)	Peri-urban Cape flats community	576 learners 70% Black; 30% Coloured	Computer room Small field & basketball court Library Multi-purpose school hall	Low to middle SES: Lower SES & higher unemployment where learners live Hungry learners	Brick homes Shacks (timber/other)
C (Post 1994)	Peri-urban township	779 learners 98% Black; 2% Coloured	Computer room Indoor sports facility	Low SES Informal trading (incl. timber) High unemployment Hungry learners	Some concrete home Timber shacks
D (Black)	Peri-urban township	1,398 learners 99% Black; 1% Coloured	Two computer rooms Good library Science labs	Very low SES Informal trading High unemployment Hungry learners	Some brick homes Shacks
E (Coloured)	Urban, Northern suburbs	881 learners 98% Coloured; 2% Black	Computer room Deteriorating sports field Library	Very low SES Seasonal farm labour & other semi-skilled work Hungry learners	Council houses Farm homes (limited sanitation and electricity)
F (Coloured)	Rural town	760 learners 98% Coloured, 2% Black	Computer room Some sports field (rugby & netball) Arts & culture room	Low SES Seasonal farm work Unemployment	Brick homes Farm homes (limited/no sanitation/water/electricity) Shacks

G (Coloured)	Rural coastal town	780 learners 85% Coloured, 15% black	Computer room Some sports fields (netball & rugby) Library	Low SES Industry Fishing & abalone diving Some unemployment Hungry learners	Mostly 'RDP houses' with sanitation/wate r and electricity
H (Coloured)	Rural coastal town	1,000 learners 98% Coloured, 2% Black	Unkempt sports fields & netball courts Some TVs & whiteboards in classrooms	Low SES Fishing work (seasonal) & retail High unemployment	Small brick homes Shacks

Conceptual framework

As will be shown in the analysis to follow, the use of a rapid ethnography method was augmented by the use of an ecological framework developed by Bronfenbrenner (1977). Figure 2.1 illustrates Bronfenbrenner's model. At the centre of this ecological model is the 'endosystem' that comprises the "developing individual" (Swartz, 2009, p. 168). Moving outward, this is followed by the 'microsystem' that is made up of the various settings, usually physical features or contexts, in which people relate to their environment and one another by fulfilling various roles as they engage in certain activities (for example, home, schools, communities, streets).

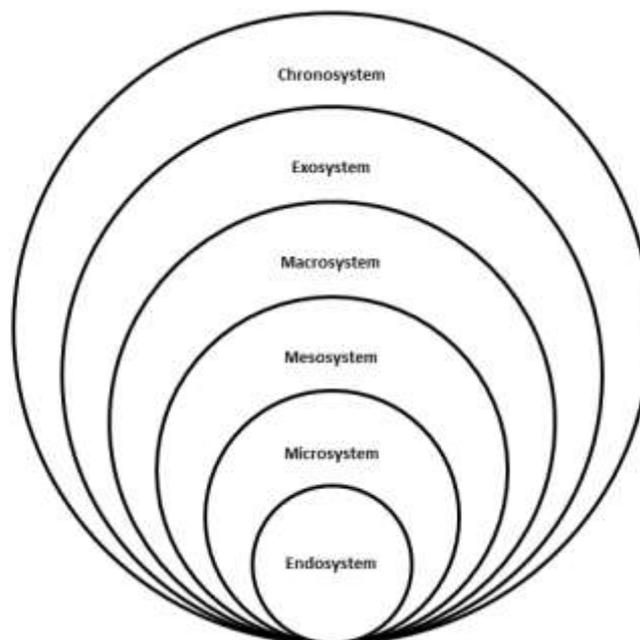


Figure 2.1 A diagrammatic representation of Bronfenbrenner's ecological model of youth development

The 'mesosystem' encompasses the interrelations between various settings or microsystems, whereas the 'macrosystem' includes various social, legal, educational, economic, and political systems that follow certain culturally-shaped institutional patterns. Next is the 'exosystem', which is an extension of the mesosystem, except that it contains social structures that do not directly contain the developing individual, but does affect the contexts in which the individual is situated, for example the working conditions of parents and the judicial system (Bronfenbrenner, 1977). Lastly, Bronfenbrenner (1986) forwards the notion of a 'chronosystem', which allows for the examining of changes in an individual over time within particular contexts. This could entail normative transitions (e.g. puberty or leaving school) or non-normative ones (e.g. winning the lottery or a change of political regime).

Method of analysis

The reports written by researchers were analysed using Atlas.ti software. Data reduction (that involved using codes and memos) was aimed at finding themes in the data, as well as the patterns among those themes. As per Miles and Huberman's (1984) method, coding began with an initial list of codes, which in this case was based on the rapid ethnography guide. The process of data display involved using diagrams to further develop understanding of those patterns (Fielding & Lee, 1998; Miles & Huberman, 1984). Furthermore, Bronfenbrenner's ecological framework was especially useful in discovering the patterns in the data, especially during the process of data display.

Findings and discussion on school climate

The aims of the current peer education curriculum ('Listen Up') being implemented in Western Cape schools include the prevention and reduction of high-risk behaviour amongst high schools learners, especially HIV infection; delaying the age of sexual debut; and reducing teen pregnancy and substance abuse. However, it is not always clear what is necessary for a peer education programme to be effective in realising change in the sexual behaviour of adolescents.

The concept of school climate put forward by Haynes et al. (1997) posited links between the school climate/environment and various aspects of students' lives and in this study was integrated with Bronfenbrenner's ecological model, as can be seen in Figure 2.2.

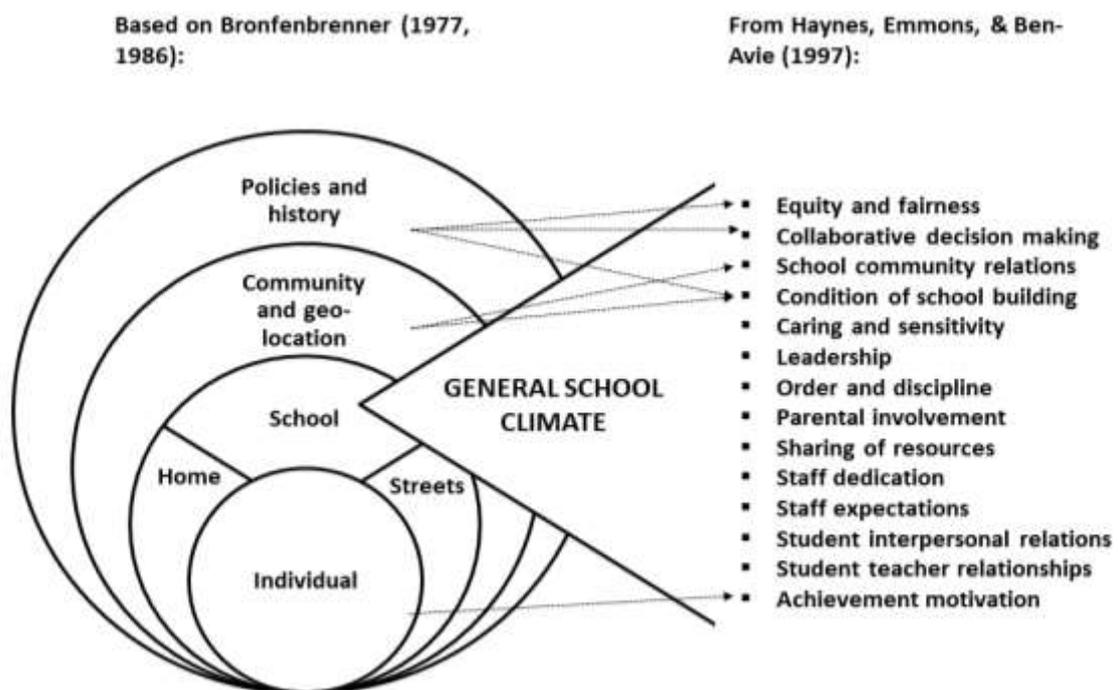


Figure 2.2 A model for school climate derived from Bronfenbrenner and Haynes.

Haynes et al. (1997) discussed 15 characteristics they associated with positive school climate. While the scope of this paper does not permit a detailed discussion of each characteristic, there are a few that, based on the data in this study, clearly emerge. They are: Achievement Motivation; Order and Discipline; Parent Involvement; School-Community Relations; Student-Teacher Relations; Staff Dedication to Student Learning; Student Interpersonal Relations; and Leadership. However, before proceeding into the discussion it is necessary to turn to a more detailed introduction to the schools in this study, and their staff.

Schools in the study

The schools in this study are situated in different suburbs, towns and townships across the Western Cape, with five of them situated in the greater Cape Town area. School A is in an affluent and predominantly white neighbourhood, although the make-up of the school no longer reflects these demographics. Schools B and E are both situated in predominantly coloured suburbs, with only School B having undergone a significant demographic shift.

Currently, approximately 70% of School B is comprised of black learners who commute from suburbs and peri-urban townships up to 20km from the school. Schools C and D are both located in predominantly black peri-urban townships, with School C being the only school in the sample that was established after South Africa's first democratic elections in 1994. Therefore it was never subject to apartheid-era legislation.

Schools F and G are situated in small inland and coastal towns respectively, while School H is in a slightly larger coastal town. All three of those schools are previously coloured-only schools situated in predominantly coloured neighbourhoods where neither the school nor the neighbourhoods' demographics have shifted significantly in the post-apartheid era. Even though apartheid-era legislation, like the Group Areas Act⁵, that separated people according to race has since been rescinded, the impact of the legislation persists. In addition to the historical differences between the school contexts, as well as learners' homes and socio-economic levels (SES), there are also significant contrasts between the schools themselves with regards to the internal functioning and/or the school climate. Some of the dissimilarities include the organisational state of the schools, as well as the resources they are able to access and utilise.

School organisation and resources

As might be expected from a school in one of Cape Town's more affluent communities, School A is the best resourced and most organised school in the sample. The buildings, although quite old, are well-maintained with almost no graffiti, other than in the bathrooms. The school also boasts well-kept sports fields, a library, computer rooms, a kitchen, basketball courts and a braai area for social functions. Additionally, the school has a 20:1 learner to teacher ratio, thanks to a number of staff members who were appointed by the school governing body. It also has an on-site psychologist to assist learners in difficulty.

Conversely, School D is a mix of organised and disorganised elements. While the library is well-managed, the lack of organisation during lessons paints a very different picture. At times learners were found to be in classrooms where they did not belong, while other classes were disrupted by teachers who were selling snacks and sweets during teaching time. On the other hand, one school that was organised, despite the impoverished context, was School C. In addition to having a very efficient, organised and helpful secretary, the teachers were quite organised when it came to arranging copies of notes for learners prior to lessons so they did not need to write everything down. This meant they could engage with the lessons more freely. Following this introduction to the schools, we now turn to some of the other key characteristics of 'school climate' as described by Haynes et al.

Achievement motivation

The first theme focuses on the "extent to which students at the school believe that they can learn and are willing to learn" (Haynes et al., 1997, p. 326). The young people encountered in this study come from varied backgrounds, have different aspirations, speak numerous languages, and face different social, academic and/or other obstacles from day to day. One such obstacle is

⁵ Act No. 41 of 1950, Act No. 77 of 1957 & Act No. 36 of 1966

the impact of commuting to school on learners' consistent attendance. Apart from the distances they travel and the unpredictability of public transport, some learners are forced to travel outside of peak-time in order to save on travel costs. This resultant tardiness has, in turn, a negative impact on both the quality and quantity of time spent at school.

Although certain schools had better performance records – at least somewhat attributable to differences in resources – there were also significant differences in the apparent prosocial attitudes between classes within each school. For example, at School F it was evident that although some learners were inattentive (evident by failing to complete homework), this did not appear to be the norm for the school as a whole. In fact, many learners seemed to be engaged with the lessons and participated quite readily. This type of inconsistency was evident at a number of other schools, including School A and School B. However, at School B it was apparent that this attentiveness was connected to the academic strength of the class in question. The stronger learners appeared to be more attentive and engaged, with weaker learners/classes less so.

Another pattern that was evident at a number of schools was that the learners' attentiveness was significantly influenced by the subject matter being taught, as well as the conduct and teaching methods of the teachers. Although teacher-learner relations will be dealt with in a later section, here it is necessary to state that certain teachers were more adept at getting and keeping learners' attention. For example, at School H there were teachers who displayed considerable patience with learners, always encouraging them. At School F, the principal and staff ensured that at the start of each term they made a concerted effort to set the tone for the coming term by encouraging and motivating learners.

However, even consistent encouragement and patience are not enough to enable learners to persist and/or to overcome the challenges they face away from the school context. Both School H and School A, the latter a former model-C school with a 98% matric pass rate, show considerable dropout rates. While at School H one reason given for the high rate of drop-outs is the use of substances like marijuana, the staff at School E indicated that learners struggle to stay motivated at school because they do not receive encouragement to focus on their schooling from their families.

Student interpersonal relations

Another element of school climate is the "level of caring, respect, and trust that exists among students in the school" (Haynes et al., 1997, p. 327). A positive finding in this study is that there did not appear to be any schools in this study where consistent violence or significant intra-school conflict was evident. On the whole the schools displayed generally positive relationships among learners, with some teasing and horseplay evident. In some schools there were occasional instances of pushing, fighting and bullying, yet without any serious injury during the time of observation.

At School G the learners coexisted happily with some playful teasing, with similar teasing and playfulness at School E. At most of these schools learners would congregate in groups according to sex and age/grade. Many learners spent their time out of the classroom in small groups talking to one another, but at some schools they organised informal games or activities, which were also usually segregated by sex. For example, at School G the girls would tend to sit in groups talking, while many of the boys played touch rugby. At School B a number of the boys would play soccer during the interval, while some of the girls played a game called 'four-square'⁶.

⁶ As the name implies, the game is played on a square court that is divided into four smaller squares, and is played with a tennis or soccer ball.

At School B, a predominantly black school in a coloured neighbourhood, there was a tendency for learners to congregate according to race. This was evident in the classrooms, during the intervals and after school. However, one learner's experience suggested that the racial and ethnic boundaries were more complex than they first appeared. One of School B's black learners spent most of his time with coloured learners because, as a Sotho speaker who was not originally from Cape Town, he felt like an outsider among his isiXhosa-speaking peers. He stated that this was the case at school, as well as in Langa, the black township where he lived.

In spite of the general sense of camaraderie among the learners at these schools, there were examples of tension, conflict and bullying in some schools. While the graffiti in the bathrooms at School C included some racially and sexually derogatory comments, none of these behaviours appeared to spill out into learners' social interactions. A key challenge faced by young people is to maintain a certain image at school as an internal and external marker of belonging. This becomes an overt challenge when for example, their socio-economic status forces them to come to school and they then have to deal with the possible shame that might be associated with making use of the feeding scheme. This was evident among some of the learners at School G and School B, as well as among a number of girls at School A. Learners also experienced a considerable amount of teasing and ridicule related to their appearance – such as not being able to afford to get their hair braided. This teasing suggested that some interpersonal dynamics at schools were not only shaped by race, gender and age, but also by perceived class differences. While bullying was primarily verbal, it took on a physical dimension at School D. Some of the learners experienced considerable pushing and shoving on the staircases as they moved between classes. They explained that they were constantly afraid of getting hurt in the stairwells.

Parent involvement

When Haynes et al. (1997) discussed the role of parents in relation to school climate, they focused on the "frequency of parent participation in school activities". Unfortunately, in this study the data on parents, in general, and their involvement in the school was scant. Nonetheless, there were a number of themes regarding parental involvement that arose in conversations with some learners, particularly regarding whether parents and the home environment were supportive of these learners' educational and related needs. This is supported by a WCDBE investigation following a knife fight outside a Cape Flats school in 2005. They found that some learners on the Cape Flats "come from communities where poverty, violence, family disintegration and the effects of the destruction of the general social fabric are part of their daily experience". Consequently, they "generally experience difficulty in establishing sound relationships" (Western Cape Education Department, 2005).

In the majority of the schools it was quite common, if not the norm, for learners to come from single parent homes. While nearly all the learners at School F and School G from single-parent home were likely to live with their mothers, a number of learners at School D lived with their fathers. Some learners also lived with other relatives, especially grandparents (noted particular among School A learners). Others, such as a number of School C learners, lived in homes with extended families that included one of their parents. Another issue that learners reported regarding their parents was the presence or prevalence of alcohol and other substance abuse. Some of the learners at School E and School F, many of whom live in homes that are dependent on seasonal farming employment, are perhaps the worst off. They have to deal with the combined challenges of domestic abuse and alcoholism or drug use at home, each of which worsens when seasonal employment comes to an end.

For the most part, it appears as though these parents have very little interaction with the schools. At times when there are serious discipline issues they might be called in to discuss the matter with the school (e.g. schools A, B, D, G and H), collect report cards (e.g. school A) or

perhaps to ask for assistance with their children (e.g. school G). The only school where there was evidence of parental involvement in events was at school H. Despite the lack of evidence for parental involvement in school events, the fact that a number of learners attended what were regarded as 'better' schools outside of their neighbourhood, suggests that these parents are invested in their children's education.

School-community relations

The next issue in focus with regards school climate is the "support and involvement of the community in the life of the school" (Haynes et al., 1997, p. 327). This kind of involvement varied noticeably from school to school. For example, while neither School G nor School D appeared to have any significant community connections, the only one evident at School C was the principal's fear of the teachers' unions. This was revealed when the researcher in question was prevented from entering certain classrooms or from being on the playground during the intervals.

Learners at school F benefited from university students arranging extra lessons, whereas safety officers assisted staff at School E with security and discipline. However, neither school displayed any further significant connections with members, organisations or institutions in the broader community. The only schools that displayed significant engagement with and/or connection to the broader community were schools A and B. The fact that these are the schools with the most significant interactions with the surrounding community is quite surprising when one considers that those are also the schools whose demographics have shifted most significantly. Therefore, those are the schools with the lowest proportions of learners who live in the immediate surroundings.

Nonetheless, School B's multi-purpose hall at the centre of the school was used on weekends by a number of different groups including a dance class, zumba classes and a badminton club. Additionally, a postgraduate student⁷ from UCT worked at the school on a part-time basis, assisting struggling learners with remedial English lessons. Lastly, the school's computer lab was set up in conjunction with the government-funded Khanya programme.

The school with what appears, on some level, to be the most significant connection to the surrounding community is School A, even though a significant majority of the school's learner are themselves not resident in the surrounding community. The school benefits by having its soccer fields rented and maintained by a local soccer club. Also, the school's library, feeding scheme kitchen and computer lab have all been added due to the support of the local Rotary club and from donations from the community.

Student-teacher relations (incl. staff dedication to student learning)

Two other important factors in school climate are student-teacher relations or the "level of caring, respect, and trust that exists between students and teachers in the school", as well as the staff's dedication to student learning, which can be seen in the "effort of teachers to get students to learn" (Haynes et al., 1997, p. 327). The data indicated that there was a greater variation in staff conduct and teaching methods within schools than between schools. Generally, a teacher-centred or didactic approach to teaching was quite common across the sample, with some teachers taking it to an extreme and not welcoming questions or comments from learners. However, some evidence of teachers engaging creatively and beyond the requirements of the curriculum was also present.

⁷ She was working on her honours degree in education, but also had a background in Adult Basic Education and Training.

Most of the schools in this study displayed what was at least an amicable relationship between teachers and learners. However, of interest was the wide range of student-teacher relations within schools than between schools. At School A we were made aware of a teacher who had a reputation for being a fantastic science and maths teacher. However, the learners disliked him and had little respect for him because of his intimidating and, at times, insulting behaviour toward them. In contrast, just about all the learners were very positive about another teacher who was not only supportive regarding academic matters, the learners also felt they were able to talk to him about anything they were dealing with. Similarly, the remedial English teacher at School B, although not part of the full-time staff, showed a strong connection and positive regard for the learners who reported that her classroom had become a 'safe place' for them.

At School G, F and H there generally appeared to be positive relationships between learners and teachers, without any major disciplinary issues arising. On the other hand, the teachers at School E appeared to have to work very hard at maintaining positive relationships with learners. Some of the learners constantly tested the teachers' patience and had to be disciplined. Unfortunately, that discipline took a considerable amount of time on occasions which took away from the time dedicated to teaching. Student-teacher relationships at School D appeared to be quite strained, with the most problematic teacher behaviour being evident. Apart from the disorganised nature of lessons and classrooms (that included teachers selling snacks during class), the most disconcerting aspect of teachers' conduct was the ways in which they handled what they perceived to be ill-discipline, but this will be dealt with in greater detail in the section on order and discipline.

Leadership

The school climate focus on leadership is on the "principal's role in guiding the direction of the school and in creating a positive climate" (Haynes et al., 1997, p. 327). Based on observations and conversations, some schools simply did not display a "positive climate" or confidence in the principal. As stated earlier, the principal at School C was very concerned about conflict arising due to the presence of a researcher in the school, because he believed that the unions would not be happy with someone being present in the classrooms. This suggested that the unions and member teachers held significant sway at the school, thereby constraining the principal's decision-making ability. At School D some learners were more vocal about their displeasure with the principal and the running of the school, especially regarding the way that order and discipline (see later for more details) was handled.

Conversely, two principals who appeared to demonstrate strong leadership in creating a positive climate were at schools F and B. This can be attributed to two main practices: both schools start the day with a short staff meeting, and discipline and organisation are taken seriously at both schools. Moreover, the conduct of both principals suggests a belief that their leadership and influence stretches beyond what happens in the classroom. For example, when School F learners are absent, and if it is deemed necessary, the principal conducts home visits. In addition, the principal at School B is credited with having worked hard to rid the school of anything related to gang culture.

Lastly, the principal at School G has developed a positive relationship with the learners, who regard him as strict but fair. Some stated that their reluctance to 'bunk' is directly related to not wanting to get into trouble with him. Whereas the quality of leadership in each of these schools differed, School E has had to cope without a principal for a year. Even though there was an interim principal during that time, the uncertainty regarding the appointment of a permanent principal relegated the school to a state of limbo during that time.

Order and discipline

When looking at issues of order and discipline as part of school climate, Haynes et al. (1997, p. 327) focus on the “appropriateness of student behaviour in the school setting”. Generally all the schools in our study had a system in place to maintain order and discipline. At School C, learners know that they will be given detention for misbehaving and at School E there are security officers in place to assist when learners play truant. At both School B and School G they kept records of who arrives late at school each day, with school G calling learners’ parents if they have been late more than twice in a term. Additionally, late-comers at School B were expected to pay a fine (R1 per hour late after 8am) or pick up litter around the school grounds. At School D late-comers were not permitted to enter the school grounds until the first interval and had to spend part of the day cleaning up the school’s grounds.

As with student-teacher relationships, the approach to discipline differed between teachers. For example, at School G there was one teacher who had a list of rules posted on the wall of her classroom and had a gentle yet unwavering approach to disruptive students. In contrast, at School D there were a few teachers who disciplined learners for what appeared to be trivial matters and in inappropriate ways. At that school, instances were observed where learners were thrown out of class for talking. On one occasion the teacher in question picked up the learner’s bag, threw it outside, while telling the learner to follow the bag and not return without his/her parents. Another troubling occurrence is the evidence that corporal punishment was still in use. For example, one teacher was reported to have a habit of hitting learners with a stick or a pipe when it is time to return to class after the intervals. The one school that appeared to be the strictest regarding order and discipline was School A. Learners’ movements were strictly controlled, with a roll call conducted at the start of each class. Like some of the other schools, parents of regular late-comers were called in to the school to discuss the matter.

Conclusion

The paper has focused on the differences between the eight Western Cape high schools who participated in this in-depth qualitative study of peer education and its requirements. Our starting point was that schools play a significant role in young people’s overall development. Second we have amplified our understanding of school by considering and researching the notion of ‘school climate’ that includes a school’s locatedness and interactions with its immediate social and historical context.

The rapid ethnographies described in this chapter have provided rich data that have shed light on the school, the surrounding community and the lives of the learners when they are not at school. Due to the extent of the data, coming to a conclusion regarding which schools demonstrated the most positive school climate was a complex task. Table 2.2 provides a ranking of schools in this study according to the elements of school climate we have described. When looking at the characteristics of school climate discussed here, it was the three rural schools, namely schools F, G and H that most consistently displayed positive traits, along with the privileged suburban school (School A). What is notable is that despite being historically coloured schools and being outside the major urban centres, Schools F, G and H, have created learning environments that include good relationships between learners, as well as between learners and teachers. At the other end of the scale, schools D and E have the least positive school climate in this sample. Based on the categories discussed here, they are characterised by the antithesis of Haynes et al’s definition of what comprises a positive school climate (with an exception being School E’s maintenance of order and discipline).

Indicator	School F	School H	School A	School G	School C	School B	School E	School D
Achievement Motivation	High	High	High	Neutral	High	Low	Low	Neutral
Student Interpersonal Relations	High	High	Low	High	Neutral	Low	Low	Low
Parent Involvement	--	--	--	--	--	--	--	--
School-Community Relations	High	Neutral	High	Neutral	Low	High	Neutral	--
Student-Teacher Relations (incl. Staff Dedication to Student Learning)	High	High	High	High	High	Neutral	Low	Low
Leadership	High	High	High	High	Neutral	High	Low	Low
Order and Discipline	High	High	High	High	Low	Neutral	High	Low
School Climate Score*	6	5	4	4	0	0	-3	-4
School Climate Rank (1 positive, 8 negative)	1	2	3	3	5	6	7	8

**Obtained by scoring High with +1 and Low with -1*

The rest of the schools (i.e. B and C) were a mix of positive and negative or neutral characteristics. Based on this analysis, we find that the rural schools (i.e. F, G and H) and the extremely well-resourced suburban school (i.e. A) have displayed the most positive school climate. Conversely, the previously coloured-only schools (i.e. B and E) and the previously black-only school (i.e. D) displayed the least positive characteristics, with school B being the strongest of the three. Lastly, although School C (established after the 1994 elections) displayed a mix of positive and negative characteristics it appears to be a relatively positive environment, despite the impoverished context in which it is located.

Limitations

In the course of the analysis, it became evident that there were certain limitations associated with this particular method of researching school context. Although these ethnographies provided considerably rich data, the rapid and focused nature of this method limited the depth and detail of data collected. Moreover, it was not always possible to obtain sufficient data about tangential areas of school life. These included staff members' expectations of learners' success at school and in life in general, as well as parents' participation in school activities (Haynes et al., 1997). Furthermore, while the method takes into account variations in the extent and quality of data collected to allow for collaborations (Millen, 2000), the fact that data were collected by four different researchers did impact on the comparability of data, with different researchers placing greater or lesser emphasis on particular aspects of their observations.

Recommendations

The data collected in order to achieve this particular aim of the study, namely school context, suggests that when attempting to understand 'climate' in a social setting, like a school, depending solely on observations of this nature is not enough. Unfortunately, it is not always possible to gain access to certain spaces and to observe certain types of interpersonal interactions (e.g. how principals conduct themselves in disciplinary conversations). Therefore, it might be necessary to combine this method of rapid ethnography with other forms of data collection, such as semi-structured interviews. Those interviews should, however, not be limited to the school site, but should include the perspectives of community members and local community organisations and stakeholders. Furthermore, even where other forms of data collection are used, a more specific and theoretically-determined ethnography guide should be utilised. Revising the guide to more closely focus on the theoretically determined aspects of school climate is needed for future studies.

Relating school climate to peer education

Finally, it has been clearly argued in this chapter that school context and climate have an impact on young people's cognitive, social, and psychological development (Bronfenbrenner, 1977, 1986; Haynes et al., 1997). Consequently, we believe that where school climates are characterised by positive and collaborative interactions and include positive roles models, they are more likely to generate new perspectives on ways of being and ensuing decisions including those of healthy and prosocial behaviour (Campbell & MacPhail, 2002; Haynes et al., 1997).

For example, where there is a high achievement motivation, we believe young people are more likely to consider the consequences of their sexual and other decisions, because they are focused on their futures. Similarly, the extent to which order and discipline are maintained is also indicative of learners' attitudes toward the consequences of their choices and actions. Where there are positive interpersonal relations between the learners themselves, these relationships could enhance peer education programmes by contributing to positive regard for and trust of the peer educators. It would also make for classroom cultures conducive to open discussion. Both the approach to leadership and the student-teacher relations can be indicative of the levels of trust that exist in the school, as well as the general relational climate. Where this is positive, it means that when the programme is established it could appropriate some of that trust to benefit the programme.

As will be seen in Chapter 4 Schools A, F, G and H showed the largest gain in overall indicator scores between the baseline and the 5 to 7 month post-test questionnaire. These are also the schools with the most positive school climate. This tentative relationship requires further investigation in the future.

CHAPTER 3 Measuring change qualitatively in a school-based peer education programme in the Western Cape

Summary

Qualitative research yields large amounts of data frequently difficult to analyse. In this chapter, we report on the findings from the qualitative component of the study by employing an alternative methodology - the Most Significant Change (MSC) approach. We found that doing so in both the data gathering and analysis phase of our research, coupled with broadened indicators significantly enriched and widened the understanding of the impact of the programme. With regards to the traditional predetermined indicators, we found, in keeping with previous research, little evidence regarding the impact of peer education on sexual behaviour change amongst peer learners. However, we did find that the programme fostered a compassionate and caring attitude amongst learners despite their environmental obstacles, and resulted in improved family and community relations. The MSC approach also helped to tease out two additional impacts that are largely undocumented by previous literature - that the programme can provide an open door for learners to deal with traumatic life experiences and that it can have a positive impact on teachers' perceptions of learners. With regards to peer educators, it improved academic skills amongst some and improved decision making, leadership and communication skills. In addition the data showed that the effectiveness of the role modelling function of peer educators varied and raised a question regarding whether peer educators success was due to their innate qualities or due to the process of being involved in the programme. The data also showed peer educators had little impact in terms of referral and advocacy due to various structural and contextual factors.

Introduction

Measurement is really efficient and effective in conveying that which is easy to count. It is the best way for holding ourselves accountable for what we have done against what we planned to do. But despite all the attempts it remains inherently unsuitable as a means of appreciating what is of greatest value to us. It is not capable of capturing *impact* (Taylor & Soal, 2003, p. 3).

Measuring the impact of a process like peer education that is geared toward achieving something as complex as behaviour change carries an inherent tension. It is the attempt to quantify qualities, to measure a process, and try to set limits on what is potentially limitless. And yet, measurement is required in order to both monitor planned activities, and evaluate these activities for effectiveness. An evaluation as a form of measurement of both the process and the impact is required for reporting on activities completed and to assist in improving future projects to achieve their goals. This tension between needing to measure, yet not finding adequate or appropriate tools, has been a longstanding struggle.

The act of measuring is something that 'comes naturally': "All individuals and organisations are in some way, planning and measuring and learning" (Taylor & Soal, 2003, p. 3). Although this behaviour may be 'natural', it is also part of an ideology or worldview that operates from the basis that the behaviour of human beings, and the systems in which they operate can somehow be reduced to a pattern, or the 'truth' of encounters discovered through quantifying and measuring them in a scientific manner. Despite the difficulties in reducing complex interactions to measurable indicators, or outcomes, this approach still dominates, perhaps because of the need for systems and standards when working with multiple organisations in multiple locations, for example using the standards explained in the *Rutanang* framework for peer education (Swartz et al., 2012).

Using qualitative data gathered during a mixed methods evaluation of the 2011-2013 'Listen Up' peer education programme which was delivered in eight schools in the Western Cape, this chapter argues that one way of overcoming the limitations of an indicator driven approach to measuring change is by including a variety of frameworks and methodologies. This has the potential of providing a more complex and detailed picture of the impact of a programme. More specifically, the data is analysed to:

- 1) Highlight the impact of the programme on some of the key indicators identified as outcomes by the project, namely 'sexual knowledge, attitudes and practices', 'making smart decisions' and 'positive social behaviour'.
- 2) Assist in gauging whether the *key effectiveness* of peer educators as identified by the Department of Education's Guidelines for the Implementation of Peer Education Programmes for Learners in South African Schools (hereinafter referred to as 'the Guidelines') as: "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" (Visser, 2011, p. 8) are achieved.
- 3) How they overlap with, and are distinct from the four *functions* of peer educators identified by the *Rutanang* set of standards namely: "Educate their peers in a structured manner; informally role-model healthy behaviour; recognise youth in need of additional help and refer them for assistance; and advocate for resources and services for themselves and their peers." (Swartz et al., 2012, p. 244).
- 4) Allow unexpected impacts to surface using aspects of the Most Significant Change (MSC) framework (Davies & Dart, 2005).

These areas of impact overlap, but are differently defined from the quantitative indicators reflected in Chapter 4 which indicate long term improvement of self-efficacy in sexual decision making and the knowledge of HIV transmission as the most significant findings. The qualitative approach therefore enriches and deepens these statistically significant findings. This chapter engages with literature around the difficulty of measuring impact from a qualitative perspective, especially with regard to peer education programmes before going on to briefly examine the methodology, analysis and findings related to the project before finally making recommendations and coming to conclusions.

Understanding and measuring peer education

The practical dilemma faced by evaluators of peer education interventions lies in the overwhelming amount of qualitative data gathered and the difficulty in communicating these stories of change in a rigorous and defensible fashion (Taylor & Soal, 2003). Thus an approach that somehow quantifies, standardises and groups the kinds of information conveyed is of vital importance. This is perhaps why many researchers turn to quantitative methods in order to evaluate the outcome of such processes. But, this approach has various drawbacks: first that rich narratives are lost, and second that the choice of the kinds of indicators chosen can obscure other results that might be important. And as Hildebrand, Lobo, Hallett, Brown, and Maycock (2012) point out, there has been little work in developing a clear theoretical model and standardised indicators for evaluation in the field of peer education that are relevant, and take into account the limited capacity of staff to both deliver and monitor the delivery of peer education programmes. This led them to develop a toolkit that would assist organisations working with peer education to both plan and evaluate youth-targeted programmes.

Similar work on systems and standards to support the implementation of peer education programmes has been undertaken in South Africa, for example the *Rutanang* framework

(Deutsch & Swartz, 2002), and the Guidelines (Visser, 2011). However, whilst monitoring and evaluation are included, there is limited discussion on the difficulties in making decisions about how to measure change. The focus remains primarily on the implementation of the programmes, and often the indicators that are chosen to measure the impact are drawn up in these initial planning stages (Deutsch & Swartz, 2002; Esplin, Seabold, & Pinnegar, 2012; Hildebrand et al., 2012; Visser, 2011). They are derived from practitioners' experiences, previous programmes, and research in the same field. Thus the groundwork for measuring change relies on frameworks and methodologies which in some way limit the scope of the change to be measured before the process can even begin, and often use research which operates within a similar sphere, but may not take into account the specificities of the context in which a programme is being run (for example applying a framework developed by Hildebrand et al. in Australia to a South African context).

With this understanding, how then, do we read the findings of research projects which attempt to measure the impact of peer education programmes? Whilst many studies champion peer education as the most preferable way to impact on youth behaviour, especially with regard to health and mental wellbeing for youth at risk (Hildebrand et al., 2012), more recent studies have been suggesting that their impact is not as profound or widespread as originally perceived (Paul, Bell, Fitzpatrick, & Smith, 2010; Sriranganathan et al., 2012). These studies are often quantitative and rely on self-reported behaviour (Medley et al., 2009). Doyle et al. (2010) took this approach a step further by correlating self-reported behaviour change with rates of teenage pregnancies and HIV infections in the community over a longer period, and their data suggests that whilst peer education programmes have an impact on the participant's knowledge (supported by our own statistical findings in Chapter 4), this does not always translate into a change in sexual behaviour. This is supported by other studies, such as Jackson, Geddes, Haw, and Frank (2012). Whilst some argue that there are small significant changes that are concentrated in the peer educators themselves (Paul et al., 2010; Visser, 2011), a more recent study even questions these impacts (Mason-Jones, Flisher, & Mathews, 2013).

Medley et al. (2009) in a systematic review of peer education evaluations indicate that methodologically, these studies have relied largely on using quantitative surveys with questions based on predetermined indicators. Even those using mixed methods, for example Esplin et al. (2012) rely on predetermined indicators to measure the qualitative results with the same drawbacks of limiting the scope of findings noted above. The result is that studies like Mason-Jones et al. (2013) which state that there is no change in peer educators' sexual behaviour ignores the other kinds of impacts that this kind of programme can have, for example the raised level of self-efficacy indicated in our statistical findings in Chapter 4. This raises the question whether using an alternative framework might surface unexpected insights and useful information.

The MSC framework is one such alternative. A qualitative, participatory, storytelling based monitoring and evaluation tool that according to the originators, when implemented properly focuses all role-players on the impact of their programme. The approach was developed by Rick Davies to deal with some of the complexities of monitoring and evaluating a development project in Bangladesh. It relies on the recipients of any project answering the basic question 'what is the most significant change...' in a defined context and time period, and invites evaluators to sift the stories generated through layers of readers to find 'typical' stories which assist in evaluating the impact of the project, and suggesting improvements (Davies & Dart, 2005). It seemed an ideal approach to take as part of the mixed methods approach envisaged in this study. One which was not too reliant on pre-determined indicators, or pre-defined roles, but would do what these approaches could not – allow unknown impacts to surface. How this was achieved is set out in the methodology section below.

Methodology

This chapter brings together stories and findings from individual semi-structured interviews with four key stakeholders in the Western Cape Department of Health (WCDOH) and Department of Education (WCDBE), nine representatives from the Implementing Organisations (IOs), fourteen teachers and principals from a representative sample of eight schools in the programmes; and fifteen semi-structured focus groups with peer educators and learners who were interviewed near the beginning of the programme, and again near the end.

The Most Significant Change methodology was used to emphasise the impact of the project experienced by various role-players at different levels. The open approach to self-identified changes, and the understanding that change is flexible and context specific underpinned the analysis of the data. This led to some interesting and unexpected findings. Some of these findings enriched key indicators, and some suggested areas that these pre-determined indicators did not cover. The MSC approach also emphasised the contextual understanding and determination of change, so that rather than predetermining cross-cutting experiences and making generalisations, it allowed us to examine the changes as specific to each site, and even to each person's experience. Given the varied social and historical contexts described in detail in Chapter 2, it is clear to see the importance of recording these particular impacts.

Despite the benefits the MSC approach offered, there were some limitations to its application in this evaluation. Firstly, though focus groups included a question on asking learners to identify the most significant change, there were problems with translating the exact meaning of the question into other languages. In addition, the question most often elicited a few words rather than the rich stories the approach requires, especially in the peer educator and learner focus groups.

This may also be because of the reluctance of learners to speak about their own experiences in the context of speaking to a strange adult about sex and sexual behaviour amongst a group of peers that they do not trust. Previous research has shown the difficulties in inter-generational communication about sex (Campbell, Foulis, Maimane, & Sibiyi, 2005b; Marston & King), though this has largely focussed on the difficulty of teachers and parents communication, little has been done to examine the role of 'strange' adults (such as researchers), thus the influence on the process of data gathering is an area that warrants further exploration. The fear of 'private' information becoming general knowledge, and the subject of gossip amongst peers was consistently raised by learners and peer educators as one of the key reasons why peer educators were not being regularly approached for advice. This lack of trust is bound to have had an impact on the data.

Thus the kinds of stories required for MSC were not forthcoming, except in rare instances. The MSC process also includes the creation of committees with representatives from various levels (in this case it might have been learners, implementing organisations, teachers and/or principals, the WCDOH and the WCDBE) to sit together and evaluate the stories, gradually sifting them to 'surface a typical story' which represents the impact of the project. Due to the limited time and resources available, this kind of approach was not possible. However, the framework proved an interesting addition to the methodology of data gathering and analysis.

Measuring against key indicators

Whilst the difficulty of measuring change has been discussed extensively, it has also been noted that it is important to develop indicators that can be used as tools for measurement. The indicators used in this study reflect the researchers understandings of change (Taylor & Soal, 2003), but they are also based on theory, experience and previous studies and remain important in our attempts to measure change. The following section uses qualitative data to

illustrate the limited changes that have occurred as a result of participation in the peer education programme under discussion.

Changes in sexual knowledge, attitudes and practices

The indicator 'changes in sexual knowledge, attitudes and practices' assumes that increased knowledge about sex and its implications might shift attitudes, and hopefully change the behaviour of learners to delay sexual debut and practise safer sex. Whilst all these changes link to sexual behaviour, they also suggest three distinct areas of change – in knowledge, beliefs and action.

Generally, the qualitative data seems to follow the pattern suggested by literature, that there is an overall increase in the level of knowledge and to some degree in positive attitudes, but not necessarily changed practices (Mason-Jones et al., 2013; Paul et al., 2010; Visser, 2011). The core message of the programme around delaying sexual debut was mentioned by many learners as one of the things they remembered:

Ayanda: We also learned about respect and respecting other people and that when we are young we shouldn't rush into sex⁸.

Andile's response suggests that this finding while present, might not be uniformly taken up by learners who have benefited from peer education:

Andile: Others have started the birth control injections and pills, others have postponed the start of having sex, they are now decided to abstain after we shared this information with them. Because they know the dangers of falling pregnant at an early age - that they will end up losing their future... I can say that others did take everything for granted and as a result they fell pregnant and now they are regretting⁹.

In other words, a generalised finding that behaviour has not changed significantly overall may obscure a more complex reality that the impact on learners differs, and has a range of results not easily captured in large scale surveys.

When asked about the impact of the project, one learner reported that there was a perception that the number of teenage pregnancies had declined, though the learner who raised the issue also raised that it may not be because of the programme:

Tyrone: I'm not sure about the peer education thing... but I think sometimes, I think the school takes a stand.¹⁰

This highlights the fact that even when behaviour change happens, it is difficult to isolate and attribute this to one factor or intervention. Sayer (2000) explains this in terms of the concept of 'emergence', that a particular result or outcome may 'emerge' as a result of combinations of two or more factors which cannot be reduced to single causal elements. In this case, the combination of the message of the peer education programme in conjunction with a stance taken by the school and communicated in a variety of ways may have combined to create the phenomena of the reduction in teen pregnancies.

These nuances which are revealed in the qualitative data suggest that though there is evidence that levels of knowledge have improved, and there have been some shifts in attitudes, the

⁸ Peer Educator Focus Group 1, School C

⁹ Peer Educator Focus Group 2, School C

¹⁰ Peer Educator Focus Group 2, School B

impact on behaviour change is varied and not well demonstrated.

Making smarter decisions

The Listen Up curriculum devotes a session to decision making, with the purpose of helping learners to understand that decision making is a process, sometimes a difficult one, and one that requires prior thought. They also learn that there are some decisions which are better than others, and the curriculum helps learners by conveying the process, assisting in evaluating the issues that impact on decision making, and become aware of how situations (like peer pressure) can influence these ("Listen Up: A Peer Education Curriculum," 2010). This could be summarised as learning to think through the consequences before taking an action. The session on decision making was consistently raised as a highlight by learners in all schools. Many indicated that the session got them to think more carefully before they took actions.

There was an indication for some learners that they have become more thoughtful about the consequences of their choices in various ways such as concentrating on their academic work, sexual debut and their choice of friends. Once again, this seems to have the biggest impact on the peer educators themselves, as typified by this interaction in a peer educator focus group:

Thabiso: - and not listen to my friends all the time because I want to fit in.

Yolanda: If someone you are dating wants you to sleep with him, then you know you don't have to sleep with him because your friends say so.

Noluthando: Previously I did not think about the consequences before doing anything, but now that I am with the peer education I am able to weigh the option - think about the advantages and disadvantages before I do anything¹¹.

These responses also identify that making smart decisions is difficult when there are high degrees of peer pressure. Selikow, Ahmed, Flisher, Mathews, and Mukoma (2009) identify that negative peer pressure encourages sexual activity as a way of belonging to a social group. The desire to fit in, meaning engaging in sexual activity, undermines the messages of peer education – delaying sexual debut and practising safer sex.

However, the sessions focussed less on prevention messaging, and more on the skills required in order to resist this kind of peer pressure. Assisting learners to think through the step by step process of how to think about making a decision is an important skill. One of the implementing organisations immediately included 'being empowered to make informed choices' as the key impact of the peer education programme as a whole.

This indicates that one of the areas of effectiveness of peer education has in this case been achieved amongst the participants.

Positive social behaviour

In the context of the Listen Up curriculum, positive social behaviour would be demonstrated by advice seeking, better decision making skills, delay of sexual debut, and decreased alcohol and drug use. ("Listen Up: A Peer Education Curriculum," 2010). Whilst some of these aspects are reflected in the sections above, a broader perspective on positive social behaviour has been taken to demonstrate that the programme can have impacts beyond the original scope. In this case, there were a number of responses and stories from participants that indicate that the programme resulted in the fostering of compassion and care, both within the school and more

¹¹ Peer Educator Focus Group 2, School C

widely in the community and families of learners. Given the context of the range of bullying experienced within the schools, and in many (though not all) cases, the level of violence present in families and communities, there seemed to be little else in the learners environments that encouraged this positive behaviour. Thus the development of a more caring attitude is a significant impact of the programme, and one which should be acknowledged and fostered.

A general trend in the responses to questions about what the programme meant to them was around the theme of responsibility to themselves, to others and in terms of creating caring communities. It indicates a commitment to practising values of respect, care, and challenging discrimination based on HIV and AIDS. What follows is a selection of responses from youth in focus groups which represent this more general trend:

I know how to care and love others
Not to laugh at people with HIV/AIDS
I am able to share now
Respect¹²

I value myself, how to set my goals, how to love each other, to respect my parents, behave well at home, to trust and believe in me¹³

I must be helpful all the time
I learnt not to discriminate others
To give someone an advice when they need one¹⁴

This selection of responses was elicited by asking learners what they thought the most significant change in their lives as a result of the peer education programme was (Davies & Dart, 2005). Whilst the question did not deliver the kinds of narratives envisaged by the framework, the responses captured a powerful impact which might have been missed by relying on interview questions built around predetermined indicators. This points to the necessity of using an additional approach like MSC which allows for a contextual, self-determined definition of change to be included in any evaluation process.

Positive behavioural change was not confined to the school context. It moved beyond into the community and family contexts:

Thato: I am no longer beating or bullying other kids on the street, I now know the consequences and that has been noticed in my street and my mother is very happy. She commended me in December, she actually asked what happened, she does not hear other people complaining about me bullying their children. I told her about this program and she was very happy to hear.¹⁵

Faizel: At home, I was very cheeky... but now since I have changed, my dad is talking to me on a daily basis about my sport and books, and he is treating me like an angel... Everyone was referring to me as that cheeky boy and my parents used to be called every day to come to school and they didn't like that. They told me they didn't want to be humiliated every day, but now everyone is asking me what happened because they can see change in me. I know sometimes I still say wrong things to my teacher and regret later, but I am a better person because I am able to say sorry now.¹⁶

¹² Learner Focus Group 2, School C

¹³ Peer Educator Focus Group 2, School D

¹⁴ Peer Educator Focus Group 2, School D

¹⁵ Learner Focus Group 2, School C

¹⁶ Learner Focus Group 2, School D

In addition to showing how a school based project can have a broader impact, these stories also illustrate that when attempting to measure change, the context beyond the school gates needs to be understood as intricately connected and intertwined with the school context, as argued in Chapter 2 on the importance of school climate in educational contexts. It also points to the necessity to find an approach that might evaluate improvements in a wide range of relationships.

Measuring the key effectiveness and functions of peer educators

Aside from the pre-determined indicators used above, a useful unit for ‘measuring change’ are the areas where peer educators are identified as especially *effective*, and the roles, or ‘*key functions*’ that a peer educator is meant to fulfil. A measure of success would be suggested by the degree to which these ‘*areas of effectiveness*’ and ‘*key functions*’ have been achieved. The areas of effectiveness are drawn from the Guidelines (Visser, 2011), and overlap in some ways, and differ in others from the key functions of peer educators identified by the *Rutanang* framework (Deutsch & Swartz, 2002) that the Guidelines themselves reference.

Table 3.1 shows the relatedness (or not) of the various factors, and how they have been used in analysing and presenting the data:

Table 3.1 Comparing elements of DBE’s peer education guidelines with Rutanang guidelines	
DBE Guidelines: Areas of Effectiveness	Rutanang: Key Functions
Modelling healthy behaviour	Informally role-model healthy behaviour
Setting & shifting peer group norms	--
Demonstrating academic, decision making & social skills	--
Supporting peers to find relevant information and help	Recognising youth in need of additional help and referring them for assistance
--	Educating peers in a structured manner
--	Advocating for resources and services for themselves and their peers

Though there is some relationship between role modelling as a key function and the first three areas of effectiveness the Guidelines suggest, it is only the role modelling that is condensed and examined under one heading. Because of the slight shift of emphasis on ‘setting and shifting peer group norms’ and ‘demonstrating academic, decision making and social skills’ these are examined separately. The direct overlap of referrals in the two systems is examined together, and then the last Rutanang functions of ‘educating peers in a structured manner’ and ‘advocating for resources and services for themselves and their peers’ are clearly distinct and examined separately.

Modelling healthy behaviour

Peer educators are perceived of as role models, people who have some form of social influence, and who demonstrate through their own actions the values that the programme aims to instil. The *Rutanang* standards identify three factors that assist in this aspect, that the peer educators are prominent and known amongst their peers and have some influence that either already exists, or can be built through their selection as peer educators; they are genuine, not necessarily flawless, but able to offer help to their youth cultural peer group; and that they are credible to their peers (Deutsch & Swartz, 2002). Peer educators are aware of this aspect of their role:

Thandiswa: For me, I know how important it is for me not to be pregnant at my age, and I now know that other learners are looking up to me and therefore I cannot stand in

front of them and say teenage pregnancy is bad with a big tummy.¹⁷

There is some difference of opinion about whether this function is achieved due to the intrinsic nature of the learners selected to be peer educators, or whether being selected creates this positive impact, as demonstrated by the reflections of teachers below. The first quote from Ms Clayton reflects not only on the desired qualities of a peer educator from a selector's point of view, but also comments on the learners' reactions to peer educators. Being a role model is not just about changing behaviour, but also about the way in which their 'demonstration' is received and therefore might impact on other learners, as illustrated by Ms De Goede's observation.

Ms Clayton: You see, certain individuals have become prominent in personal conduct, for instance you know, by setting an example all the time. I don't want to say just behaviour, I also want to say in the manner in which the people conduct themselves... how you present yourself, you know as an individual.¹⁸

Ms. De Goede: If it's the learners [peer educators] that are shy and they keep to themselves, the learners they don't really listen, they want the learners that's funny and make jokes so that's also a huge positive or influence on the peer group.¹⁹

There were also some doubts raised as to the effectiveness of Grade 8s to serve as role models in the school setting. The primary concern was about the maturity of these learners:

Connie: When you that age it's all about you and yourself and your hair.²⁰

Again, this was not just about the peer educators themselves, but about how they are perceived by other learners. Their relative youth was not seen as conducive to either setting an example, or having enough stature to be perceived as role models.

Mr. Scott: So up to now I don't think that peer educators have really had a major impact on the rest of the school, and that's partly because of the structure of the school and the grade 8s being at the bottom.²¹

Learners themselves also identified the youth of the peer educators as a potential drawback, this came up in nearly every focus group with learners, typified by the following comment:

Daniel: I don't think peer educators really get through to the learners because you can say something, but then the person will think maybe you're younger than me and you can't tell me this and you can't tell me that.²²

Whilst there is some evidence that many peer educators do act as role models, this seems to be inconsistent across schools and between learners. This may have something to do with the varied selection processes used by schools, or perhaps as a few schools have identified, that working with younger learners seemed to give peer educators more authority. One way of addressing this is to pay attention to the quality of relationships between peer educators and learners, as suggested by Riese, Samara, and Lillejord (2011), who also suggest some ways of measuring this.

¹⁷ Peer Educator Focus Group 2, School C

¹⁸ Teacher interview, School B

¹⁹ Teacher interview, School A

²⁰ Implementing Organisations, Grassroots Soccer

²¹ Teacher interview, School A

²² Learner Focus Group, School B

Setting and shifting peer group norms

The assumption that a select group of learners can through their own behaviour, leadership and lessons presented somehow exert positive peer pressure in order to set and shift peer group norms is at the heart of the theory of peer education (Deutsch & Swartz, 2002; Swartz et al., 2012; Visser, 2011). On the whole, when learners and peer educators were asked to provide examples of the ways in which people had changed their behaviour as a result of either being in or hearing about the peer education lessons, the question was generally met with a silence, with a “no, not really, no” and an occasional “uhm”. One peer educator identifies that they might have a future impact, though it seems to be an isolated response:

Simon²³: Some of our peers, now that we gave them advice, they stop, not stop doing that, but they will know what to do because we gave them advice. Now they will know what to do when it happens.

Whilst this is central tenet of peer education, it may be one of the impacts that is most difficult to measure. In part due to the difficulty of defining how this setting and shifting of norms might happen, and in part because as identified previously, these kinds of shifts might not happen just because of the programme, there may be other factors at play, as suggested by Sayer (2000) with his understanding of ‘emergence’.

Demonstrating academic, decision making and social skills

This ‘measurement’ is in some ways related to the idea of ‘role modelling’ and ‘modelling healthy behaviour’, as performing well in these areas demonstrates achievements which should exert some measure of influence in terms of being a positive role model. Decision making in terms of sexual behaviour has been discussed as one of the key indicators of peer education programmes, Listen Up included. This discussion now turns to a broader application of these skills, in order to measure a wider impact of the programme. Whilst related to decision making skills, academic and social skills are distinct categories, and dealt with in turn.

There was consensus that the programme had a positive impact on the academic performance of the peer educators themselves. The academic improvement is not only reflected in the improved marks that the occasional teacher and IO mentioned, but also in other aspects of the academic sphere:

Fred: I didn’t listen in class, but since becoming a peer educator, I pay attention and it helped me be more disciplined.

Pamela: I used to get home, put my bags down and go to play, but now I get home and do my homework before I go play.²⁴

These demonstrations of improved academic skills in a variety of forms does suggest that the peer educators are demonstrating academic achievement and associated skills and behaviour sets to their peers. What is not evident in any way is whether this demonstration has a wider impact on the learners.

The ability to make better decisions was identified consistently throughout interviews with the learners and peer educators as one of the biggest impacts the programme had on them, primarily through assisting in thinking through the process of decision making, and in becoming aware of the consequences of the decisions and the actions that result from these. One of the IOs

²³ Peer educator Focus Group, School B

²⁴ Peer Educator Focus Group, School B

ran their own evaluation with peer educators asking them to compare their own development to their peers. Peer educators consistently identified “I can make better life choices” as one of the programme’s major impacts.²⁵ .

In addition to the social skills defined as ‘positive social skills’ identified in relation to key indicators, the other social skills which the data suggests have been fostered by the project include leadership and communication, which is often identified with reference to improved self-belief and self-confidence. One of the teachers highlights that leadership qualities developed is often about nurturing natural abilities, or creating a context where these abilities can be encouraged:

Mr. Caseman: I think the best thing for me is that your learners who were kind of sleeping leaders are now active leaders and that for me is the best part. The programme has triggered their leadership, so they are now confident to come forward and work with learners where they would not have done it if it was not for the programme.²⁶

Likewise, an improvement in confidence was mentioned at least once in each peer education focus group as one of the most significant changes experienced by the peer educators. The following is a good illustration:

Fundani: One thing that has changed for most of us is behaviour even when we do presentations. They [our peers] come and confess they are like interested to know what did we do to become so confident.

Interviewer: Wow, how does that make you feel?

Fundani: We feel very good, and it boosts our self-esteem, at least we know that someone out there is realising or acknowledging the good work that we do.²⁷

Despite these illustrations of the achievements and demonstrations of skill, the development of self-confidence is not always a given. Factors such as the power dynamics within classrooms, language, and the level of preparation and training peer educators have received play a role, as does the level of support the school provides. Where this support is not forthcoming, the impact may be negative rather than a positive one:

Fanie: So, communication skills are one thing that comes from peer education from the beginning of the game. But if you are not well supported, wooooo, it is going to be a mess and the teachers will be very upset... That’s why I’m saying it depends on the functionality of the school... Yes, they think the kids will build self-esteem by entering a class and standing up and being recognised as peer educators – [but] sometimes it destroys the self-esteem more than building it.²⁸

This could be exacerbated by the fact that there is nothing in the peer educator’s training curriculum that works with them to develop their presentation skills. Whilst those who succeed as peer educators fulfil the function of demonstrating academic, decision making and social skills, once again, the level to which this is achieved varies across and within schools due to a range of factors which include the predispositions of the peer educators themselves as well as the context in which they operate. When they do demonstrate their skills and achievements, there is no evidence that this impacts on the broader group of learners. This might be because the majority of the data which describes these skills is gathered from interviews with the IOs and teachers, rather than from youth participants themselves.

²⁵ Implementing organisation interview, Life Choices

²⁶ Teacher interview, School G

²⁷ Peer Educator Focus Group, School A

²⁸ Implementing organisation interview, Life Choices.

Supporting peers to find relevant information and help

Rutanang identifies the referral role as one which is not only 'on request' but also relies on peer educators recognising learners in need with the aim of referring them to a teacher, official or organisation to get the appropriate assistance (Deutsch & Swartz, 2002). This aspect of the Peer Educators function is in some ways one of the easier ones to measure. It relies less on perceived qualities, and encompasses a practical, almost task based function that is far easier to monitor by collecting statistics on whether referrals have happened or not, what organisations learners have been referred to, and what the outcome of the referral was. However, whilst these kinds of monitoring activities were part of the reporting of IOs, this data was not gathered as part of looking at the impact of the programme, rather the perceptions of implementing organisations and educators were gathered during individual interviews. These responses were largely evaluative comments, with only a few examples illustrating the referral process. What these observations highlighted was the uneven implementation of this aspect of the project in different contexts. Overall this function was not well achieved or much utilised. The learners reflect:

Grant: Some of them they will say that you mustn't give them advice. You mustn't tell them what to do... some will just laugh at you²⁹.

Pam: No we have not used their services, for advice [big laughter].³⁰

When the interviewer probed why there was laughter, no one responded, but one interpretation is that the very idea of using peer educators for advice and referrals seemed laughable to the learners at that site. Grant's comment also highlights the way in which the aspect of peer educators identifying other learners in need and approaching them to offer assistance is not always a welcome intervention from a peer. This indicates that peer educators might not be the most effective referral agents, unless prior trust is built.

There were a number of theories offered as to why this aspect of the peer educators' role was not as developed as some of the others. One IO identified that there was no clear referral strategy, and after discussion amongst themselves, without consulting the learners, they decided that if there was a request for a referral, the IO supervisor would have to be informed, and after discussion with the principal that he would also need to be informed as he felt offended that an external organisation might know more about a situation than him. This may be one of the stumbling blocks for learners wanting to use peer educators for referrals: they know that the information will not be confidential, and some of the requests for referrals might be for 'sensitive' issues such as pregnancy or STI's. In addition, once the referral had been made, another IO identified their difficulty in deciding how far they should support the learner in the process:

Connie: Okay I told the Social Development and now I wipe the dust off my feet?³¹

For some, struggles with referrals were more about the context the school was operating in, and its lack of services:

Mazwai: The referral is to a variety of services. We send them to the rural areas so we don't have a lot of services to refer them to, and also they don't have confidence in that services for example at the clinic or maybe the police station.³²

²⁹ Peer Educator Focus Group 1, School B

³⁰ Learner Focus Group 2, School B

³¹ Implementing Organisation Interview, Elgin

³² Implementing Organisation Interview, Witzenburg.

The last issue identified by the IO is the issue of what support the peer educators might need in terms of debriefing if a learner came forward with a particularly distressing story. There were no structures or formal processes for what to do in these cases.

Aside from these systematic hindrances, learners consistently identified a lack of trust as a major stumbling block to using Peer Educators for advice or referrals:

Kyle: Not all learners want to talk to us, some of them are shy or think we might talk about what may be discussed... They're afraid that we might disclose that information. They don't trust us.³³

Trust requires an on-going demonstration of trustworthiness on the part of the Peer Educators, and this may be something they can only gain over time. However, it might also be a contextual issue, part of the mind-set of the learners' families and communities. In this case, there is little a peer education programme can do to overcome this.

Despite all of the drawbacks, there were a few success stories reported. One came from a peer educator who assisted a learner with advice about dealing with her parents impending divorce.

Whilst seemingly easy to measure, the issue of this aspect of peer educators' role is one that is not functioning as well as it could due to a number of systematic and contextual factors – amongst them the lack of trust– which need to be addressed.

Educate peers in a structured manner

The Listen Up curriculum is a set of five sessions, each of which has its own purpose and set of outcomes. They are clearly and thoroughly presented in the handbook, and there are optional additional sessions to add to the process. One of the responsibilities of peer educators was to present these lessons during a Life Orientation session to their peers.

Responses to the structure of the education programme came mainly from the IOs, and ranged from full support and enthusiasm for the structure to complaints about its rigidity:

Mike: I think it's structured well in a sense where all 5 lessons go hand in hand with each other³⁴

Martha: You have to follow that. You have to follow according to how they are written... so at times according to the recipients ... it might not be the more suitable way of doing things, the presentations given, the activities.³⁵

Martha goes on to suggest more flexibility, a wider range of exercises, and more interactive activities to be included in the sessions.

Further criticism included the fact that five sessions was not enough to ensure effective change in behaviour with learners, especially with the understanding that working toward behaviour change is a process which takes time. Recommendations included having on-going sessions, and providing additional materials in the form of hand-outs to assist in generating discussion in the session, and afterwards.³⁶

³³ Peer Educator Focus Group 1, School H

³⁴ Implementing organization interview, Spades

³⁵ Implementing organization interview: Partners in Sexual Health.

³⁶ Implementing organization interviews: Life Choices and Grassroots.

Although learners did not directly evaluate the structure of the sessions in their interviews, some of their responses indicate that the content was relevant and useful:

Matthew: They touched on something that we had already been through... because they like teach us about peer pressure. To make the right choices so it's like dealing with your life... They go more into detail, they explain stuff step by step.³⁷

This 'step by step' process, mentioned specifically in relation to the session on decision making indicates that the content was presented in a way that was coherent and useful to learners.

In some cases, despite the structure and preparation that peer educators put into running their sessions, they faced difficult audiences:

Kyle: The last session the kids didn't want to listen to us... They went on [talking to each other]

Byron: They spoke, they didn't have an interest in us anymore.³⁸

This example shows that whilst attention may be given to the structure and content of the sessions, there are other factors which might hinder the effective delivery of the message. It is difficult to say from this example what made the learners stop listening, though it might perhaps be because the last session was one which had a strong message for delaying sexual debut to an audience which for the most part indicated they had already started being sexually active. This was also the session that did not come up for many learners when they were asked about what they remembered, or their favourite session. Having a session which encompassed more choices for learners and some information about the consequences of early sexual debut might be better received.

Advocate for resources and services for themselves and their peers

This last function of peer educators as defined by *Rutanang* was conceptualised as promoting youth activism toward improving services and resources available to youth, for example health services, political voice, spending on youth services and addressing issues such as gender violence, discrimination, stigma and ignorance (Deutsch & Swartz, 2002). It is a factor, like referrals, which should be easy to measure by the number of campaigns and activities organised by peer educators.

However, there is no evidence of this kind of advocacy work from the learners and peer educators reflections on the programme, and the implementing organisations have a varied response. In one case, the question about advocacy was misunderstood as a question about the organisations' work³⁹, and if the implementing organisation was unsure about this aspect of the peer educators' function, it is highly unlikely that they would have been able to foster this with peer educators themselves. For others, the advocacy role is very close to that of a referral role, peer educators finding out about issues faced by learners and taking it further in order to help learners:

Martha: I think it's very effective like I was just telling you - that the peer educator, the fact that after he or she has engaged in a face to face discussion, the fact that she would decide to take that peer of his or hers to the peer educator supervisor. Somehow they are advocating for their peers.⁴⁰

³⁷ Learner Focus Group 1, School B

³⁸ Peer Educator Focus Group 1, School H

³⁹ Implementing Organisation Interview, Witzenburg

⁴⁰ Implementing organization interview, Partners in Health

Where implementing organisations identified projects, for example a ‘keeping our town clean’ initiative from learners in Villiersdorp⁴¹, and collecting and distributing clothes to the local community centre⁴², these activities were undertaken by Grade 10 and 12 learners, not the current cohort of Grade 8s. These activities, though admirable, are also not within the focus of activities envisaged in the *Rutanang* documents.

This lack of clarity about the extent and focus of potential advocacy indicates that this area of the functioning of peer educators needs to be developed further, communicated more clearly, and that some of the curriculum for training peer educators should involve speaking about what they think needs changing in their communities, and how they think that could happen. The implementation of such projects would demonstrate change.

Using most significant change: additional impacts

While some of the data that emerged from including a question based on the Most Significant Change framework supported the expected outcomes (as measured against the key indicators and functions of Peer Educators) it also unearthed two expected outcomes which are largely undocumented in existing literature about the impact of Peer Education programmes – namely that the programme can provide a safe space for learners to deal with traumatic life experiences; and that the programme can have a positive impact on teachers’ perceptions of learners. Both could be considered areas for further investigation.

These two aspects were evident in three comments. The first two relate to the same impact, namely creating a safe space for learners to discuss their own traumatic experiences:

Lucille: So with these lessons, those learners, that’s why I was saying it was effective because it created a platform for communication and that also showed that this project is very effective because if a peer educator breaks down... it has touched her to the extent that it *opens that locked door*.⁴³

Mr le Roux: One of the peer educators last year was so moved by the experience that after the presentation she shared with the school that she herself had been abused. So that gave her the confidence and the safety to feel that she could share that with the school. So that was one example of a powerful process.⁴⁴

These incidents highlight the need for trained and experienced counsellors to be part of the facilitation and mentoring team available to Peer Educators during training and implementation in order to deal sensitively with potential traumatic experiences, and minimise secondary trauma. In a context where psycho-social distress is hardly ever addressed or dealt with, and where community resources to deal with this may be scarce (Swartz et al., 2012) they also indicate the importance of learners having safe spaces to share and deal with their own potentially traumatic life experiences. The Peer Education programme provides one such platform in a school environment.

The third comment points to a shift in the teachers perceptions of learners who become peer educators:

Ms Levine: It’s nice to see that they want to take action. You don’t have to beg them, they want to do it.⁴⁵

⁴¹ Implementing organisation interview, Elgin

⁴² Implementing organization interview, Grassroots

⁴³ Implementing organisation interview, Life Choices

⁴⁴ Principal interview, School A

⁴⁵ Teacher interview, School A

Though a short sentiment, this comment points to an important impact of the programme, namely that if teachers perceptions of learners are improved, it creates a positive feedback loop, when teacher perceive that a learner is performing better they tend to treat that learner better, which in turn, improves that learner's performance (Cooper, 1979).

Conclusions

There are a number of stories that indicate radical impact on a small number of individuals, and while these stories are highlighted, they cannot be used as indicators of the general impact of the project. The majority of the findings suggest that the major impact (as suggested by the literature) is an increase in levels of knowledge and understanding, but not necessarily changes in sexual behaviour, though other areas of behaviour were influenced. This was also impacted by the complex interplay between the involvement of schools, IOs, their staff, and the learners themselves. This meant that there was certainly variation between schools, and in addition, disagreement amongst learners within focus groups about the level of impact of the programme.

Limitations

There are two key limitations that need to be highlighted in order to contextualise the findings presented above, including that key role players did not always separate the previous and current peer education projects when interviewed; and the fact that many of the answers to focus group questions were met by very short answers.

With regard to the interviews with school officials, IO staff, and WCDBE and WCDOH representatives, many have been involved in previous peer education programmes. As such, it is apparent that in some of their answers, they are referring to peer education programmes that are beyond the scope of the programme that is currently being implemented. However, they do not indicate this explicitly, and as a result some of the narratives may not apply to the current cohort of learners.

The other key point to note about the focus groups is that although the questions were quite straightforward, often the answers were very short, one or two words, stories to substantiate their responses were few and far between. One or two talkative respondents tended to dominate each group, and there was disagreement amongst participants. What is also very evident in many of the recordings and transcripts is an awkwardness and reluctance to engage with the questions. In some ways, this reluctance and awkwardness makes sense. The focus groups consisted of adolescents between 13 and 14 years old, talking about sex, relationships and their own lives within a group of people that they did not necessarily trust, and to a strange adult. Whilst some research has focused on the problems of inter-generational conversations about sex within the family (as mentioned previously), and some on the way that focus groups are implemented and interpreted (Belzile & Oberg, 2012; Ho, 2006), the use of focus groups as age-appropriate tools for this group does not seem to have been explored, and perhaps warrants further attention. In other studies including Swartz et al, 2012, and Swartz et al 2009, individual interviews were conducted with children and youth and data were richer. Budgetary constraints in this study constrained the use of individual interviews.

These limitations are highlighted to re-iterate the caution that while this evaluation presents a generally positive qualitative impact of the programme (with some important areas for improvement), these need to be read in conjunction with the findings from the quantitative data (see Chapter 4) to create a more representative view.

Recommendations

There are some recommendations for the evaluation of future programmes drawn from the lessons learned, and literature consulted.

- Using the data gathering techniques of the MSC approach could provide valuable and unexpected insight into the programme. This would require implementing organisations to continually gather stories from learners, peer educators, and teachers; and the research organisation to do similar work with IOs and departmental officials. A committee would need to meet regularly to evaluate these stories and select representative ones. The research organisation could coordinate and monitor this work.
- Even if not using the MSC approach, it is recommended to do a series of individual interviews with peer educators and learners to gather richer data. The sense from many of the researchers was that the focus groups did not elicit this level of sharing because of lack of trust in their peers, and unwillingness to share personal information in front of adult strangers.
- Riese et al. (2011) suggest that the qualities of relationships between peer educators and learners is one of the key, and often overlooked, aspects of a peer education programme that has the biggest effect on the impact. Designing ways to evaluate this could be important – although having same aged peer educators seemed at least qualitatively to be undesirable to learners.
- Linked to the issue of relationships, Sriranganathan et al. (2012) raise the issue of power and discrimination and their potential impact on peer education, and recommend that awareness building around these issues is built into the training of IOs and peer educators. This has especially strong implications especially for the referral function envisaged for peer educators.
- Sriranganathan et al. (2012) and Hildebrand et al. (2012) also suggest the use of new technologies and/or alternative methodologies such as arts-based approaches in order to evaluate programmes.

How learners use information is one thing, how this is measured is another. Ms deMoigne's statement captures succinctly the overall sense gleaned from the qualitative data, and suggests the challenge for evaluation: how best to measure the impact of a message on the behaviour of learners.

Ms deMoigne: In terms of the impact of the programme... I think if learners can use the information that they received from the programme to their advantage, we will achieve a great impact. But as you know this is a behavioural program, it depends on them. We give them information but how they use it again depends on the learners... I feel we managed to give the message that we wanted to give... but how they use them is another story, how they use it is another thing.⁴⁶

It is clear from the interviewees' stories and answers that the programme does have an impact, both in terms of improving knowledge, and in some cases changing behaviour and this is supported in the quantitative findings which emphasise an increase in self-efficacy in the short and long term. Where participants spoke about the impact, for the most part it was in positive terms, and in some instances it is clear it was profound.

Departmental officials, IOs, teachers and learners all indicated the value of the programme, and their desire to see it continue. In some cases they offered valuable insight about what might need to improve in order to meet key outcome indicators, and to assist peer educators in achieving their key functions. In addition, some attention needs to be paid to the ways in which

⁴⁶ Interview with WCDOH official

peer education programmes may provide a space for traumatised learners to open up for the first time, and what can be done to assist those who do.

However, these findings based on individual instances cannot be generalised to all participants, and as indicated by other research into peer education programmes, the biggest impact seems to be on the peer educators themselves (Paul et al., 2010; Sriranganathan et al., 2012). This is not always in the ways anticipated, or planned for, such as the change in sexual behaviour. The findings indicate rather that the biggest benefit of the programme may reside in the unintended consequences, such as creating a more caring and compassionate world view. These findings would not be uncovered if evaluations stuck only to using predetermined indicators to measure change.

These conclusions include aspects reflecting on both the quality and process of the Peer Education programme and are most readily available when using qualitative methods. The challenge remains how best to gather, sift and sort the data to find meaningful measures of change. Whilst the necessity of using predetermined indicators drawn from both theory and practice to provide yardsticks for measurement is important, the wider the range of sources for these indicators, and range of indicators themselves, the more complete the final impression of the impact will be. Exploring and using more creative evaluation techniques such as MSC can also be invaluable in enriching and expanding the scope of the findings for measuring the impact of peer education programmes.

CHAPTER 4: Measuring quantitative change in a school based peer education programme in the Western Cape

Summary

This chapter highlights the results obtained from the quantitative component of the study. The data obtained from three research phases (Baseline, Time 1 and Time 2) was collated and analysed to explore whether peer education in the intervention sample of schools had achieved the set objectives. This outlines of the quantitative methodology, reports results and discusses them. A comparison was drawn at baseline between the intervention and control samples, and some differences were found between the two groups which suggest that there may be differences that were not apparent during the random selection process. At baseline and Time 1, the intervention schools were compared, the results indicated that the interventions produced statistically better outcomes with regard to future orientation, self-efficacy in sexual decision making, knowledge regarding HIV transmission, knowledge regarding HIV prevention and knowledge of healthy relationships. Intervention schools were then compared between baseline and Time 2. Results indicated that over a longer period of time the intervention yielded statistically better outcomes with regard to self-efficacy in sexual decision making and knowledge of HIV transmission. These results at Time 2 are only statistically different from those at Time 1 with regard to self-efficacy in sexual decision making.

Introduction

The aim of this chapter is to explore the effectiveness of the 'Listen Up' peer education programme through quantitative measurement and analysis. Survey questionnaires formed the basis of the quantitative analysis (Addenda 1-3) which were used as a tool to explore change over time as well to as compare these results to those schools that did not received this intervention. Through this process, the study explored whether this initiative works in a South African context and whether there are any changes and recommendations that can be made for future programs that have similar aims.

The first part of this chapter highlights the demographic details of participants - drawn from 35 schools at three non-sequential points in time. This then leads into the analysis of the descriptive statistics which will be presented using frequency distributions and cross-tabulations. Data will also be presented graphically where possible. In this section of the analysis chi-square tests as well as t-tests were run to explore significant relationships and significant differences that may exist in comparing the groups of schools during the three time periods.

Methodology and analysis

SPSS version 20 was used for data entry and analysis. Where applicable, analyses were conducted at the 95% confidence level. Differences were considered significant at the level of $p < 0.05$ unless otherwise stated. Given the importance of 'sex' in various analyses, participants not indicating their sex were excluded from analysis distributed as follows: Baseline: $n=76$; Time 1: $n=91$; Time 2: $n=19$. Demographic data including socio-economic status, school data and community context represents data from the sample as a whole. Subsequent analysis will be conducted using students from both control and intervention schools at baseline. At time 1 and 2, only those students in the intervention schools are included in order to map progress based on the intervention. Final values with decimals of 5 and below are rounded down. Values therefore do not always add up to 100.

The comparative analysis between the control and intervention schools at baseline was calculated first, followed by a comparative analysis between two post-intervention tests and the baseline for intervention schools. This was done using the scales and indicators included in the questionnaire. The scales were first tested for internal consistency using Cronbach's alpha, and were thereafter used to explore, compare and contrast the different aspects of the study.

Descriptive analysis as well as analysis of variance (ANOVA) for each of the scales is presented. Descriptive statistics will highlight the standard error which is the standard deviation of the sampling distribution of the data. It will further describe the confidence intervals for the mean, specifying differences between the group school scores as well as the grand mean (total). *In all created scales a higher mean indicates positive behaviour and attitudes.* Finally, the ANOVA tables highlight the significance in terms of whether there is a statistically significant difference between groups.

Results

The findings of the survey are discussed in the order of the questions in the survey questionnaire. Univariate and bivariate statistical analysis was performed using cross-tabulations and chi-squared statistics. Key findings and tables that clarify these findings will be provided in text, while detailed tables are provided in Addendum 20.

The first section provides demographic details of the participants. The findings of each sample included in the study are presented together.

Demographic characteristics of students

Student ages ranged from 10 years to over 17 years. Students who indicated their age as being under 10 were classified as missing data/non response (as this was not the target group of the peer education intervention). The modal student age in the Baseline sample was 13 years and 14 years for Time 1 and 2 samples. Table 4.1 details the age and gender distribution across the three samples included in this study.

Table 4.1: Age and gender distributions

	Baseline sample N=2904			Time 1 sample N=2594			Time 2 sample N=2211		
	Within age gender breakdown (%)		Age group portion of total sample (%)	Within age gender breakdown (%)		Age group portion of total (%) sample	Within age gender breakdown (%)		Age group portion of total (%) sample
	Male	Female	Total	Male	Female	Total	Male	Female	Total
10 years	21	79	<1	77	23	1	50	50	<1
11 years	37	62	1	38	62	1	0	100	<1
12 years	37	63	10	27	73	4	55	45	1
13 years	37	63	35	39	61	26	36	63	10
14 years	43	57	23	44	56	36	40	60	36
15 years	52	48	12	49	50	16	47	53	27
16 years	59	41	4	59	41	6	53	47	12
+17 years	56	44	14	56	44	11	57	43	13
Total	43	56	100	45	55	100	45	54	100

Roughly half of the students included in Baseline sample and Time 1 sample identified themselves as being Coloured with fewer (40.9%) in Time 2 sample. Black/African students were the second most populous group constituting 50% of Baseline sample and 40 to 45% in Time 1 and 2 samples. The number of White and Indian students was relatively small. This population profile is fairly close to that of the population as a whole for the Western Cape.

Statistics South Africa (2011) estimated that the 49% of Western Cape's population could be described as Coloured, 33% as Black/African, 15% as White and 1% as Indian.

Socio-economic characteristics

In all three samples, most students reported living with at least one of their parents with the majority being cared for by their biological mother. The mean household size was just over five people across all three samples. Most students (Baseline sample: 78%, Time 1 sample: 81% Time 2 sample: 82%) in the three phases of the study lived in formal housing followed by informal settlements. Only a small portion of students lived in traditional housing.

School Data

School level data describes the characteristics of students in each school in each sample. At baseline and Time 1, the majority of children sampled were in grade 8. At Time 2, the majority of children sampled were in grade 9 as might be expected.

Samples selected from each school ranged in size from 15 to 161 students across the three samples included in the study. Sex was almost equally represented in each of the school samples.

Fewer than 10% of students reported being absent in the previous term for more than two weeks across all three sample periods. Approximately two thirds of students in each sample reported repeating a grade at school.

Community Context

Drug and alcohol abuse is highlighted as the most important issue facing youth by all three samples, followed by teenage pregnancy. HIV and AIDS was reported by 15% of students in the Baseline sample to be an important issue facing the youth in their community. Slightly lower reports were noted for time 1 and 2 samples at 13% for both samples. Involvement in social activities encompassed a range of activities both around the house and in the community. In terms of activities engaged in on a daily basis, across all three samples, students primarily watched television.

Exposure to Prevention Education

In the 12 months preceding the survey, 26%, 32% and 29% of students in the respective samples indicated that they had attended a youth group where HIV and AIDS were discussed.

- ***Involvement in Peer education programs***

Attendance at peer education programmes revealed that at baseline, less than a fifth were participants (Baseline sample: 18%) with a smaller portion being involved as peer educators (Baseline sample: 14%). Following intervention, participation improved. Only those students that were involved in peer education programmes are considered in the subsequent analysis for this section. At baseline, students from both control and intervention schools are included in the analysis. At time 1 and 2, only those students in the intervention schools are included.

- **Peer Educators types of programmes**

Table 4.2 shows the frequency of peer educators' engagement with their facilitators (the adults helping them with peer education) during peer education programmes. The majority of peer educators had engaged in both one-on-one meetings and classroom discussions with the peer education facilitator once a week. A sizeable portion of peer educators had no interaction with their adult facilitators in the classroom as well as on a one-on-one basis across all three samples – although this decreased over time.

Table 4.2: Frequency of peer educators' engagement with their adult facilitators during peer education programmes across the three waves of the study

Baseline sample* N=417*					Time 1 sample N=418*				Time 2 sample N=319*			
N (Classroom discussions)= 255 N (One-on-one meeting)= 242					N (Classroom discussions)=319 N (One-on-one meeting)=299				N (Classroom discussions)=250 N (One-on-one meeting)= 233			
Portion (%) of engagement	Once a month	Once a week	3+ times a week	Never	Once a month	Once a week	3+ times a week	Never	Once a month	Once a week	3+ times a week	Never
Classroom discussion	16	33	27	24	18	39	31	12	16	40	33	10
One-on-one meeting	13	31	26	30	13	40	28	19	11	42	26	21

*Missing data was excluded from the analysis but are included in the N value

- **Types of peer education involvement by students**

Table 4.3 indicates the number of peer education classes attended by learners in high school. Twenty per cent of students in the Baseline sample had not attended peer education programmes since entering high school. This was 11% and 12% for Time 1 and 2 samples, respectively. Of the students from Time 1 and 2 samples who had attended peer education classes in high school, most had attended between one and three classes while those in Time 2 sample attended between 4 and 10 classes.

Table 4.3: Breakdown (%) of peer education classes attended in high school by learners across the three waves of the study

Baseline sample N=2904				Time 1 sample N=2036				Time 2 sample N=2211			
0	1-3	4-10	11+	0	1-3	4-10	11+	0	1-3	4-10	11+
20	50	26	5	11	41	35	13	12	34	37	17

Students involvement in peer education activities in the month preceding the study show that the majority of students across all three sample were involved in listening/discussing the peer education lessons of the month and group discussions with a peer educator. A smaller portion of students across the three samples had engaged in one-on-one discussions with a peer educator in the month preceding each wave of the questionnaire. Of those students who had been involved in peer education activities, the majority in all samples had engaged in each of the activities at least once a week. Table 4.4 provides a detailed indication of the number of learners who had engaged with their peer educators in various activities across the three samples.

Table 4.4: Percentage of learners engaging with their peer educators in various activities across the three waves of the study

		Listening/ discussing P.E lessons of the month	Group discussion	One-on-one meeting
Baseline sample	Not involved	27	38	46
	Once a month	16	12	11
	Once a week	31	28	23
	3+ times a week	26	22	19
Time 1 sample	Not involved	16	22	32
	Once a month	17	15	18
	Once a week	37	35	28
	3+ times a week	29	29	22
Time 2 sample	Not involved	17	25	37
	Once a month	20	15	15
	Once a week	39	37	28
	3+ times a week	24	24	20

- ***The quality and rating of peer education programmes***

In order to assess quality of peer education programmes, learners were asked a number of questions pertaining to the availability of adult facilitators and the content and coverage of the classes.

While just over half of the participants in all three samples felt the need to have a one-on-one discussion with their peer education facilitator, of which over two-thirds (70%) were unable to do so. The most important reasons included that the adult facilitator could not be found, the facilitator had to see another class and being too afraid to approach the facilitator.

In terms of the coverage of the content, most learners found the classes on HIV and AIDS increased their knowledge and understanding of HIV and AIDS. Learners found the materials used in the programmes useful, provided interesting information on HIV and AIDS and was easy to understand. Nevertheless, learners found some of the materials included in the programme embarrassing. Table 4.5 summarises these views.

Table 4.5: Evaluation of the coverage of peer education classes and the nature of the materials by those learners that attended peer education classes across the three waves of the study

Proportion (%) of students that agree with the statements below	Baseline sample N=2904	Time 1 sample N=2036	Time 2 sample N=2211
The classes on HIV/AIDS help me to protect myself from getting HIV/AIDS	90	92	93
The classes on HIV/AIDS help me to understand more about HIV/AIDS	92	93	93
The materials give useful information	86	89	85
The materials on HIV/AIDS are interesting	84	88	86
Some of the materials embarrass me	50	48	41
The materials on HIV/AIDS are easy to understand	81	85	85

Just less than three quarters of learners involved in peer education found the classroom discussions very useful in all three samples. When asked how they feel about the peer education programme as a whole, just over half the learners responded positively (56%) in the Baseline sample, with 64% and 67% of students in time 1 and 2 samples responding similarly.

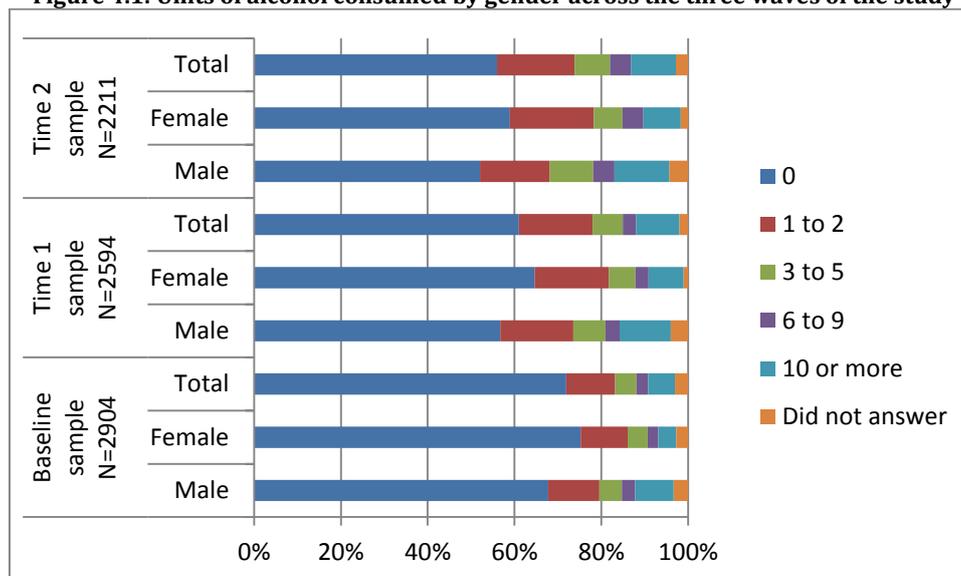
- **Social and health benefits of peer education programmes**

Of the students who participated in the peer education programme, just over half felt that they have access to more health, social or counselling services following participation in peer education classes in all three samples.

Drug use, alcohol use and other risky behaviours

When asked how many times students had used alcohol in the past 6 months, most students across the three samples indicated that they had not used alcohol. Of the students that had indicated consuming alcohol, the majority were female who mostly consumed alcohol only on 1 or 2 occasions. There is a statistically significant relationship between gender and alcohol use in all three samples (Baseline sample: $\chi^2 (8, N=2904) = 41.59, p=0.00$, Time 1 sample: $\chi^2 (8, N=2036) = 21.40, p=0.01$, Time 2 sample: $\chi^2 (8, N=2211) = 40.89, p=0.00$). Figure 4.1 provides a detailed account of alcohol consumption by gender for each wave of this study.

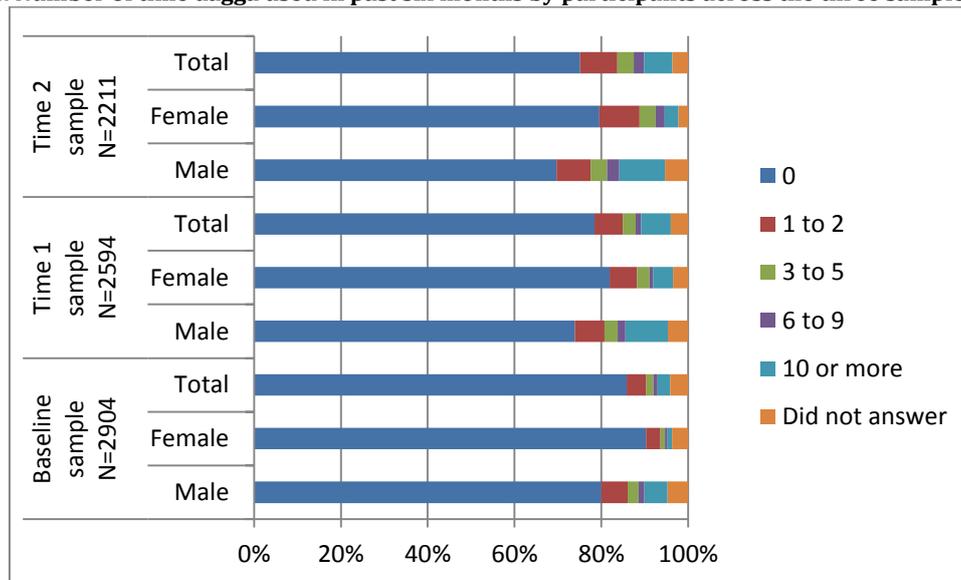
Figure 4.1: Units of alcohol consumed by gender across the three waves of the study



Less than a third of students in all samples reported getting into a fight in the past 6 months, with just over half of these being male. Furthermore, of these students who had gotten into a fight, 83% reported not to have consumed any alcohol in the preceding month (Baseline sample), with even lower rates in Time 1 (70%) and 2 samples (64%).

When asked how often in the preceding 6 months students had smoked dagga, in all samples most students indicated that they had not smoked at all. In the Baseline sample, 10% indicated having used dagga, in Time 1 sample, 16% indicated dagga use and in Time 2 sample the highest portion of students reported dagga use in the preceding 6 months of 21%. Of those students the majority was male (Baseline sample: 66%, Time 1 sample: 56%, Time 2 sample: 53%). There is a statistically significant relationship between gender and dagga use (Baseline sample: $\chi^2 (8, N=2904) = 105, p=0.00$, Time 1 sample: $\chi^2 (8, N=2036) = 56, p=0.00$, Time 2 sample: $\chi^2 (8, N=2211) = 72, p=0.00$). This relationship is detailed in Figure 4.2.

Figure 4.2: Number of time dagga used in past six months by participants across the three samples



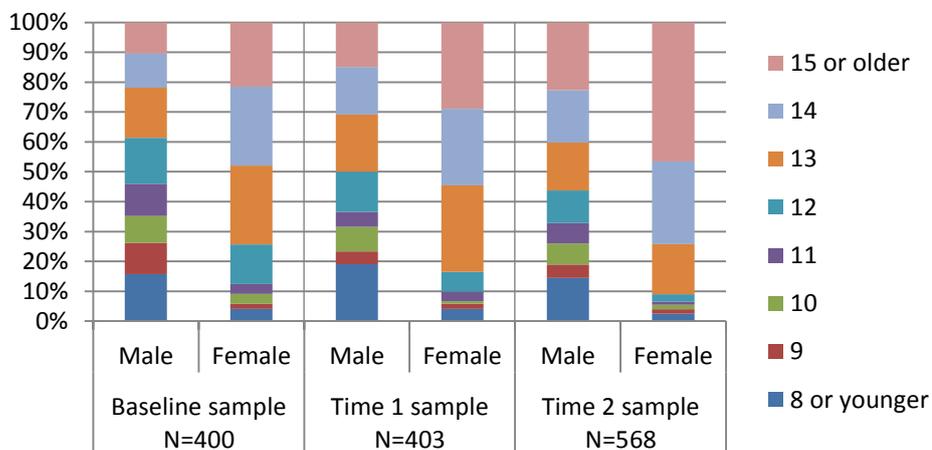
Sexual Experience

In analysing questions pertaining to sexual experience, the sample was limited to those students who had consistently answered all questions relating to sexual experience (Questions 77 to Questions 86) to ensure valid comparisons. In doing so, the sample size used for this section is considerably smaller than the total (Baseline sample: N=400, Time 1 sample: N=403, Time 2 sample: N=568). Furthermore, the sample is now skewed with about two males for every female included in each sample. Values reported in this section should therefore be interpreted with caution.

- **Sexual Debut**

Thirteen percent of students in the Baseline sample reported being sexually active. The corresponding figures for Time 1 and 2 samples were 20% and 26%, respectively, with most being male (Baseline sample: 70%, Time 1 sample: 70%, Time 2 sample: 64%). The modal age of sexual debut for the Baseline and Time 1 samples was 13 years. In Time 2 sample, the modal age category of sexual debut was 15 or older. Figure 4.3 provides a detailed account of age of debut for male and female students sampled in this study.

Figure 4.3: Age of sexual debut by gender across the three samples included in this study



About a third of students who reported being sexually active wanted it to happen ‘*very much*’ at first time of sex across all three samples.

Just over half of the sexually active students reported using condoms at sexual debut (Baseline sample: 51%, at sexual debut (Baseline sample: 62%, Time 1 sample: 59%, Time 2 sample: 64%) and males were more likely to report using no form of protection in samples 1 and 2 (Baseline sample: 52%, Time 1 sample: 49%). In Time 2 sample, males reported condoms as their protection of choice on sexual debut (50%). The relationship between gender and the use of protection is statistically significant (Baseline sample: $\chi^2 (3, N= 400) = 43, p=0.00$, Time 1 sample: $\chi^2 (3, N= 403) = 13, p=0.00$, Time 2 sample: $\chi^2 (3, N= 568) = 39, p=0.00$).

- **Current sexual practices**

A large number of students indicated they had sex within the last year across the three samples (Baseline sample: 69%, Time 1 sample: 71%, Time 2 sample: 75%). Males were statistically more likely to have sex within the past year than females at baseline and Time 1, (Baseline sample: $\chi^2 (1, N= 400) = 13, p=0.00$, Time 1 sample: $\chi^2 (1, N= 403) = 8, p=0.01$. In terms of the last time students had had sex, condoms was the primary choice of protection in all three samples (Baseline sample: 57%, Time 1 sample: 59%, Time 2 sample: 60%).

Table 4.6 provides student descriptions of the relationship status of the last sexual encounter. In all three samples, most students describe their last sexual partner as their girlfriend/boyfriend followed by a friend. Those individuals who reported their last sexual encounter being with someone they had just met or a distant acquaintance were more likely to be male in all samples (Baseline sample: 80%, Time 1 sample: 82%, Time 2 sample: 81%). This relationship is statistically significant (Baseline sample: $\chi^2 (3, N= 400) = 20.85, p=0.00$, Time 1 sample: $\chi^2 (3, N= 403) = 12.64, p=0.01$, Time 2 sample: $\chi^2 (3, N= 568) = 33.36, p=0.00$).

Table 4.6: Classification of sexual partner by gender across the three waves of the study

		Baseline sample			Time 1 sample			Time 2 sample		
		Male (%)	Female (%)	Total (%)	Male (%)	Female (%)	Total (%)	Male (%)	Female (%)	Total (%)
Classification of last sex partner	Just met	16	7	13	13	6	11	10	4	8
	Acquaintance	15	10	13	10	6	8	13	6	10
	We are friends	21	10	17	23	16	21	22	9	17
	Partner	48	73	56	54	73	60	55	80	64

When asked how much they wanted to have sex at their last encounter, the largest portion of students indicated that they wanted it to happen ‘*very much*’ (Baseline sample: 29%, Time 1 sample: 37%, Time 2 sample: 32%).

Between a quarter and a third of sexually active students reported having had sex after consuming alcohol or taking drugs (Baseline sample: 37%, Time 1 sample: 26%, Time 2 sample: 21%). Most students across all three samples indicated that they have not been pregnant or had not made someone pregnant.

HIV/AIDS knowledge

In all samples, students received information about HIV and AIDS most often from their teachers followed by clinics, parents' and school curricula. Information about HIV and AIDS was considered to be most believable if it came from clinics, then teachers and finally parents in all three samples.

HIV/AIDS behaviours and intention

Over 60% of students have not been for an HIV test – 64% in Baseline, 61% in Time 1 and 52% in Time 2 sample. Based on current sexual practices, overall, both males and females favoured male condoms as their preferred form of contraception for pregnancy prevention in all three samples. Table 4.7 provides details as to preferred method of contraception by sex across the three samples included in this study.

Table 4.7: Preferred contraceptive method by sex across the three waves of the study

Baseline sample				Time 1 sample				Time 2 sample			
Male	%	Female	%	Male	%	Female	%	Male	%	Female	%
Male condom	47	Male condom	24	Male condom	50	Male condom	23	Male condom	53	Male condom	26
Female condom	14	Female condom	23	Female condom	12	Female condom	22	Female condom	16	Contraceptive injection	25
Contraceptive pill	9	Contraceptive injection	19	Contraceptive injection	10	Contraceptive injection	20	Contraceptive pill	9	Female condom	25
Contraceptive injection	8	Contraceptive pill	18	Contraceptive pill	9	Contraceptive pill	18	Contraceptive injection	9	Contraceptive pill	20
Any form of gel	6	Emergency contraception	4	Any form of gel	5	Emergency contraception	5	Any form of gel	6	Any form of gel	4
Emergency contraception	5	Any form of gel	4	Emergency contraception	4	Any form of gel	4	Emergency contraception	5	Loop / IUD	4
Loop / IUD	4	Norplant	2	Loop / IUD	4	Loop / IUD	2	Loop / IUD	4	Emergency contraception	3
Norplant	2	Loop / IUD	2	Norplant	3	Norplant	2	Norplant	4	Norplant	2

Note: Methods are ranked from largest proportion to smallest.

Health and social support

This section attempts to ascertain the health services available to students as well as uncover their social support structures. Questions on social support should however be interpreted with caution as the response rate in all samples was only approximately 50%.

- **Health services**

Access to health services in the form of a hospital or clinics was rated as being better by female students than by male students. This may be a function of clinics being perceived as more female “friendly” than male “friendly” given that most students have not made use of these services. Table 4.8 provides further detail on access to and usage of health services.

Table 4.8: Access to and usage of health services by sex across the three waves of the study

		There is a clinic or hospital I can go to for help with SRH	This place is easily accessible	I have made use of such services in the past.	I would use the services again
Baseline sample	Male (%)	38	40	47	44
	Female (%)	62	60	53	56
	Total (%)	63	53	31	81
Time 1 sample	Male (%)	41	41	49	42
	Female (%)	60	59	51	52
	Total (%)	68	62	36	84
Time 2 sample	Male (%)	38	40	47	48
	Female (%)	48	60	53	52
	Total (%)	68	64	38	88

Of those students who have made use of these services, just over half are female across the three samples. Of those students who used the health services in the past, more than 4 out of 5 would use the service again across all samples.

- ***Social support***

Students were more likely to turn to mothers for assistance with problems, advice or help with school, home or with a problem friend. In dealing with problems and requiring help or advice relating to home matters, students turn to the fathers next. In school matters, teachers are a secondary source of support. When requiring advice in relation to problems with friends, friends form the secondary source of support.

Assessment of the peer education programme

This section provides comparative analysis between control and intervention schools based on descriptive statistics and analysis of variance (ANOVA) for each of the scales.

Reliability of scales

Cronbach's alpha, a coefficient of internal consistency, is commonly used as an estimate of reliability regarding psychometric tests of a sample (Field, 2009). In our study, the scales found in the Table 4.9 highlight the measured alpha. For the purposes of this study, an alpha below 0.5 was rejected. The scale measuring future orientation had the lowest internal consistency, with the rest having acceptable to excellent consistency. Decision making had the highest internal consistency of 0.97. All scales were sourced from published literature.

Table 4.9: Scale reliability

Scales	Cronbach's alpha
Future Orientation	0.53
Sensation Seeking	0.65
Self-Efficacy	0.87
HIV transmission knowledge	0.70
HIV prevention knowledge	0.78
HIV attitudes	0.72
Sexual attitudes	0.67
Decision Making	0.97
Healthy Relationships	0.93
Social Support	0.86

Analysis of Data

This section provides details pertaining to the descriptive statistics, Levene's statistics and the analysis of variance (ANOVA) for each of the scales in the Baseline (pre-intervention), Time 1 (post-intervention 1) and Time 2 (post-intervention 2) tests.

Descriptive statistics indicate the standard error which is the standard deviation of the sampling distribution of the data. It further describes the confidence intervals for the mean, specifying differences between the intervention and control group school scores, as well as the grand mean (total). In all created scales a higher mean indicates positive behaviour and attitudes.

The key objective of the ANOVA is to highlight whether any significant results were found looking at the F-ratio. The F-ratio therefore tests whether the means are the same or significantly different.

- **Pre-Intervention Test (Baseline)**

As expected for the pre-intervention test, the calculated means indicate little variation in most scales comparing the intervention schools with the control schools. The confidence intervals for both groups overlap. This overlap highlights that conclusions cannot be drawn with regard to any difference between the control and intervention school scores during the pre-intervention test. Since a significant conclusion cannot be drawn from this table, the ANOVA will either confirm or reject these conclusions.

Table 4.10: Descriptive statistics, Intervention–Control group Baseline comparison

Indicator/Scale	Group	Mean (95% Confidence Intervals)	Standard Deviation	Standard Error
Future Orientation (2 point scale)	Control	1.83 (1.80-1.86)	0.18	0.02
	Intervention	1.83 (1.81-1.85)	0.18	0.01
	Total	1.83 (1.82-1.84)	0.18	0.01
Sensation Seeking (5 point scale)	Control	3.16 (3.10-3.23)	0.69	0.03
	Intervention	3.09 (3.05-3.12)	0.71	0.02
	Total	3.10 (3.08-3.13)	0.71	0.02
Self-Efficacy in Sexual Decision Making (3 point scale)	Control	2.14 (2.09-2.19)	0.63	0.03
	Intervention	2.08 (2.05-2.11)	0.64	0.02
	Total	2.09 (2.07-2.12)	0.64	0.01
HIV transmission knowledge (2 point scale)	Control	1.79 (1.76-1.82)	0.25	0.02
	Intervention	1.79 (1.78-1.81)	0.24	0.01
	Total	1.79 (1.78-1.81)	0.24	0.01
HIV prevention knowledge (2 point scale)	Control	1.59 (1.55-1.64)	0.28	0.02
	Intervention	1.57 (1.55-1.60)	0.31	0.01
	Total	1.58 (1.55-1.60)	0.31	0.01
HIV attitudes (2 point scale)	Control	1.65 (1.60-1.70)	0.25	0.03
	Intervention	1.66 (1.63-1.69)	0.28	0.02
	Total	1.66 (1.63-1.68)	0.27	0.01
Sexual attitudes (3 point scale)	Control	2.49 (2.42-2.57)	0.56	0.04
	Intervention	2.57 (2.53-2.61)	0.55	0.02
	Total	2.55 (2.52-2.59)	0.55	0.02
Decision Making (5 point scale)	Control	3.32 (3.23-3.42)	0.92	0.05
	Intervention	3.42 (3.37-3.48)	0.98	0.03
	Total	3.40 (3.35-3.45)	0.97	0.02
Healthy Relationships (5 point scale)	Control	3.60 (3.51-3.68)	0.96	0.04
	Intervention	3.55 (3.51-3.59)	0.90	0.02
	Total	3.56 (3.52-3.60)	0.92	0.02
Social Support (4 point scale)	Control	3.07 (3.01-3.12)	0.48	0.03
	Intervention	3.09 (3.07-3.12)	0.47	0.01
	Total	3.09 (3.06-3.11)	0.48	0.01

Although significance cannot be drawn from Table 4.10, it is interesting to note that in comparing the mean scores, there is some variation between intervention school and control school means during this pre-intervention phase. Since the schools were selected at random, it was expected that there would be no variation between the two groups of schools with regard to the measured indicators. The variations suggest that there may be differences in the control and intervention schools that were not apparent during the random selection process, which may have an impact on this evaluation.

Table 4.11 describes the details of the ANOVA conducted between the intervention and control groups at baseline

Table 4.11: Intervention-control group ANOVA at Baseline

Indicator/Scales	Sum of Squares & Mean square	F ⁴⁷
Future Orientation	.003	.088
Sensation Seeking	2.173	4.353*
Self-Efficacy in Sexual Decision Making	1.655	4.049*
HIV Transmission Knowledge	.001	.014
HIV Prevention Knowledge	.033	.354
HIV Attitudes	.001	.016
Sexual Attitudes	1.004	3.321
Decision Making	2.876	3.086
Healthy Relationships	.932	1.111
Social Support	.185	.817

*p<0.05

The results in Table 4.11 show two significant results, sensation seeking and self-efficacy in sexual decision making. For both, sensation seeking and self-efficacy in sexual decision making, significantly higher means were noted for control schools when compared to the intervention schools.

The fact that intervention and control groups differed on sensation seeking and self-efficacy in sexual decision making at the pretest phase indicate that the two groupings are not the same at baseline. Since the schools were selected randomly it is therefore expected that there would be no differences between the two groups of schools. These differences suggests that there may be some differences in the control and intervention schools that were not apparent during the random selection process and which has an impact on this evaluation. Any differences noted at Time 1 must take account of these pre-existing differences.

- **Intervention - Control group Time 1 comparison**

An initial test was administered immediately after the end of peer education programme intervention. The characteristics of the control and intervention schools at time 1 are compared and described in Table 4.12.

Table 4.12: Descriptive statistics, Intervention-Control group Time 1 comparison

Indicator/Scale	Group	Mean (95% Confidence Intervals)	Standard Deviation	Standard Error
Future Orientation (2 point scale)	Control	1.83 (1.79-1.86)	0.18	0.02
	Intervention	1.85 (1.83-1.86)	0.17	0.01
	Total	1.84 (1.83-1.86)	0.17	0.01
Sensation Seeking	Control	3.1 (3.03-3.16)	0.70	0.03

⁴⁷ANOVAs are calculated to determine whether there is a statistically significant difference between two mean values. The F-ratio measures whether the variance (if any) is systematic or unsystematic. The higher the F-ratio the more likely, the findings would be significant. P-values which indicate significance are denoted by asterisk.

(5 point scale)	Intervention	3.04 (3.00-3.07)	0.71	0.02
	Total	3.05 (3.02-3.080)	0.71	0.02
Self-Efficacy in sexual decision making (3 point scale)	Control	2.19 (2.14-2.24)	0.59	0.03
	Intervention	2.15 (2.12-2.17)	0.60	0.01
	Total	2.15 (2.13-2.18)	0.60	0.01
HIV transmission knowledge (2 point scale)	Control	1.84 (1.81-1.87)	0.22	0.01
	Intervention	1.85 (1.83-1.86)	0.19	0.01
	Total	1.84 (1.83-1.86)	0.20	0.01
HIV prevention knowledge (2 point scale)	Control	1.61 (1.55-1.67)	0.32	0.03
	Intervention	1.63 (1.60-1.66)	0.29	0.01
	Total	1.63 (1.60-1.65)	0.29	0.01
HIV attitudes (2 point scale)	Control	1.65 (1.59-1.70)	0.25	0.03
	Intervention	1.7 (1.67-1.72)	0.26	0.01
	Total	1.68 (1.66-1.71)	0.26	0.01
Sexual attitudes (3 point scale)	Control	2.58 (2.50-2.66)	0.58	0.04
	Intervention	2.61 (2.57-2.65)	0.56	0.02
	Total	2.6 (2.57-2.64)	0.57	0.02
Decision Making (5 point scale)	Control	2.42 (2.27-2.56)	0.68	0.07
	Intervention	2.38 (2.32-2.44)	0.64	0.03
	Total	2.39 (2.33-2.45)	0.65	0.03
Healthy Relationships (5 point scale)	Control	3.62 (3.53-3.71)	0.98	0.05
	Intervention	3.62 (3.58-3.67)	0.92	0.02
	Total	3.62 (3.58-3.66)	0.93	0.02
Social Support (4 point scale)	Control	3.04 (2.98-3.10)	0.52	0.03
	Intervention	3.07 (3.04-3.10)	0.48	0.02
	Total	3.06 (3.04-3.09)	0.49	0.01

At Time 1, the calculated means indicate little variation in most scales comparing the intervention schools with the control schools. The confidence intervals for both groups overlap highlighting that conclusions cannot be drawn with regard to any difference between the control and intervention schools. The ANOVA will either confirm or reject these conclusions.

Table 4.13: Intervention-control group ANOVA at Time 1

Indicator/Scales	Sum of Squares & Mean square	F
Future Orientation	0.058	1.917
Sensation Seeking	1.128	2.223
Self-Efficacy	0.820	2.280
HIV transmission knowledge	0.002	0.048
HIV prevention knowledge	0.043	0.499
HIV attitudes	0.150	2.304
Sexual attitudes	0.116	0.362
Decision Making	0.087	0.206
Healthy Relationships	0.009	0.010
Social Support	0.258	1.068

The results in Table 4.13 show no significantly different means between intervention and control schools at Time 1. This therefore may imply that the peer-education intervention did not change attitudes and behaviour with regard to the indicators mentioned above in the short term.

- **Intervention Baseline-Time 1 comparison**

A second test was administered immediately post the peer education programme intervention. The characteristics of the intervention schools at both baseline and time 1 are compared and described in Table 4.14

Table 4.14: Descriptive statistics, Intervention group Baseline-Time 1 comparison

Indicator/Scale	Group	Mean (95% Confidence Intervals)	Standard Deviation	Standard Error
Future Orientation (2 point scale)	Baseline	1.83(1.81- 1.85)	0.18	0.01
	Time 1	1.85(1.84-1.87)	0.17	0.01
	Total	1.84(1.83-1.85)	0.18	0.01
Sensation Seeking (5 point scale)	Baseline	3.09(3.05-3.12)	0.71	0.02
	Time 1	3.06(3.03-3.09)	0.70	0.02
	Total	3.07(3.05-3.10)	0.70	0.01
Self-Efficacy (3 point scale)	Baseline	2.08(2.05-2.11)	0.64	0.01
	Time 1	2.14(2.11-2.17)	0.60	0.01
	Total	2.11(2.09-2.13)	0.63	0.01
HIV transmission knowledge (2 point scale)	Baseline	1.79(1.78-1.81)	0.24	0.01
	Time 1	1.84(1.83-1.85)	0.19	0.01
	Total	1.82(1.80-1.83)	0.22	0.01
HIV prevention knowledge (2 point scale)	Baseline	1.57(1.55-1.60)	0.31	0.01
	Time 1	1.62(1.60-1.65)	0.29	0.01
	Total	1.60(1.58-1.68)	0.30	0.01
HIV attitudes (2 point scale)	Baseline	1.66(1.62-1.69)	0.28	0.02
	Time 1	1.70(1.67-1.73)	0.26	0.02
	Total	1.68(1.65-1.70)	0.27	0.01
Sexual attitudes (3 point scale)	Baseline	2.57(2.53-2.61)	0.55	0.02
	Time 1	2.61(2.57-2.65)	0.56	0.02
	Total	2.59(2.56-2.62)	0.55	0.01
Decision Making (5 point scale)	Baseline	3.42(3.37-3.47)	0.98	0.03
	Time 1	3.40(3.35-3.45)	0.88	0.03
	Total	3.41(3.38-3.45)	0.93	0.02
Healthy Relationships (5 point scale)	Baseline	3.55(3.51-3.59)	0.90	0.02
	Time 1	3.63(3.58-3.67)	0.92	0.02
	Total	3.58(3.55-3.62)	0.91	0.02
Social Support (4 point scale)	Baseline	3.09(3.07-3.12)	0.47	0.01
	Time 1	3.07(3.04-3.10)	0.49	0.02
	Total	3.08(3.06-3.10)	0.48	0.01

The results indicate an overlap of confidence intervals in comparing most indicators in the two time periods for intervention schools. Two indicators, however, do not follow this overlap, that is, self-efficacy in sexual decision making and knowledge regarding HIV transmission. In both cases, time 1 scores better than the baseline which may indicate a positive outcome. Since, here again, a significant conclusion cannot be drawn from this table, the ANOVA will either confirm or reject these conclusions. Table 4.15 describes the details of the ANOVA conducted between the intervention groups at baseline and time 1

Table 4.15: Intervention schools Baseline-Time 1 ANOVA

Indicator/Scales	Sum of Squares & Mean square	F
Future Orientation	0.119	3.840*
Sensation Seeking	0.635	1.281
Self-Efficacy in sexual decision making	3.582	9.173*
HIV transmission knowledge	0.780	16.691***

HIV prevention knowledge	0.582	6.423**
HIV attitudes	0.235	3.271
Sexual attitudes	0.599	1.962
Decision Making	0.207	0.239
Healthy Relationships	5.193	6.261*
Social Support	0.389	1.694

***p<0.001 **p<0.01 *p<0.05

The results in Table 4.15 show a significantly higher mean for five indicators at Time 1 compared to the baseline. These indicators include: future orientation, self-efficacy, knowledge regarding HIV transmission, knowledge regarding HIV prevention and knowledge in terms of a healthy relationship. This therefore may imply that the peer-education intervention has positively changed attitudes and behaviour with regard to the indicators mentioned above.

- **Intervention group: Baseline-Time 2 comparison**

A third test was administered post the peer education program intervention on a similar cohort in the intervention schools. These tests were conducted six months after the conclusion of the peer education programme. The characteristics of the performance of the intervention schools at both Baseline and Time 2 are compared and described in Table 4.16.

Table 4.16: Descriptive statistics, Intervention group: Baseline-Time 2 comparison

Scales	Group Baseline	Mean (95% Confidence Intervals)	Standard Deviation	Standard Error
Future Orientation (2 point scale)	Baseline	1.83(1.81-1.85)	0.18	0.01
	Time 2	1.84(1.83-1.86)	0.17	0.01
	Total	1.84(1.83-1.85)	0.17	0.01
Sensation Seeking (5 point scale)	Baseline	3.09(3.05-3.12)	0.71	0.02
	Time 2	3.08(3.04-3.11)	0.72	0.02
	Total	3.08(3.06-3.11)	0.71	0.01
Self-Efficacy in Sexual Decision Making (3 point scale)	Baseline	2.08(2.05-2.11)	0.64	0.01
	Time 2	2.18(2.15-2.21)	0.61	0.01
	Total	2.13(2.11-2.15)	0.63	0.01
HIV transmission knowledge (2 point scale)	Baseline	1.79(1.78-1.81)	0.24	0.01
	Time 2	1.86(1.85-1.87)	0.20	0.01
	Total	1.83(1.82-1.84)	0.22	0.01
HIV prevention knowledge (2 point scale)	Baseline	1.57(1.55-1.60)	0.31	0.01
	Time 2	1.60(1.57-1.63)	0.30	0.01
	Total	1.59(1.57-1.61)	0.31	0.01
HIV attitudes (2 point scale)	Baseline	1.66(1.63-1.69)	0.28	0.02
	Time 2	1.67(1.65-1.70)	0.26	0.01
	Total	1.66(1.64-1.68)	0.27	0.01
Sexual attitudes (3 point scale)	Baseline	2.57(2.53-2.61)	0.55	0.02
	Time 2	2.61(2.57-2.64)	0.58	0.02
	Total	2.59(2.56-2.62)	0.57	0.01
Decision Making (5 point scale)	Baseline	3.42(3.37-3.47)	0.98	0.03
	Time 2	3.38(3.34-3.43)	0.86	0.02
	Total	3.40(3.37-3.44)	0.92	0.02
Healthy Relationships (5 point scale)	Baseline	3.55(3.51-3.59)	0.90	0.02
	Time 2	3.59(3.55-3.64)	0.96	0.02
	Total	3.57(3.54-3.60)	0.93	0.02
Social Support (4 point scale)	Baseline	3.09(3.07-3.12)	0.47	0.01
	Time 2	3.07(3.04-3.10)	0.48	0.01
	Total	3.08(3.06-3.10)	0.48	0.01

The results indicate an overlap of confidence intervals for all scales excluding self-efficacy in sexual decision making. The total mean for the intervention group at baseline is higher than Time 2 on two scales namely sensation seeking and decision making. Table 4.17 below reflects the ANOVA conducted for the intervention group at baseline and Time 2. The intervention group at Time 2 indicated a significantly higher mean for self-efficacy and HIV transmission knowledge, indicating more positive self-belief and improved HIV transmission knowledge post intervention.

Table 4.17: ANOVA, Intervention group: Baseline-Time 2 comparison

Scales	Sum of Squares & Mean square	F
Future Orientation	0.052	1.71
Sensation Seeking	0.129	0.25
Self-Efficacy	10.362	26.31*
HIV transmission knowledge	1.646	35.11*
HIV prevention knowledge	0.17	1.79
HIV attitudes	0.037	0.51
Sexual attitudes	0.589	1.84
Decision Making	0.917	1.09
Healthy Relationships	1.783	2.07
Social Support	0.328	1.43

*p<0.05

- **Intervention group: Time 1-Time 2 comparison**

The characteristics of the performance of the intervention group at Time 1 and Time 2 are described and compared in Table 4.18.

Table 4.18: Descriptive statistics, Intervention group: Time 1-Time 2 comparison

Scales	Group	Mean (95% Confidence Intervals)	Standard Deviation	Standard Error
Future Orientation (2 point scale)	Time 1	1.85(1.84-1.87)	0.17	0.01
	Time 2	1.84(1.83-1.86)	0.17	0.01
	Total	1.85(1.84-1.86)	0.17	0.01
Sensation Seeking (5 point scale)	Time 1	3.06(3.03-3.09)	0.70	0.02
	Time 2	3.08(3.04-3.11)	0.72	0.02
	Total	3.07(3.04-3.09)	0.71	0.01
Self-Efficacy in Sexual Decision Making (3 point scale)	Time 1	2.14(2.11-2.17)	0.60	0.01
	Time 2	2.18(2.15-2.21)	0.61	0.01
	Total	2.16(2.14-2.18)	0.61	0.01
HIV transmission knowledge (2 point scale)	Time 1	1.84(1.83-1.85)	0.19	0.01
	Time 2	1.86(1.85-1.87)	0.20	0.01
	Total	1.85(1.84-1.86)	0.19	0.00
HIV prevention knowledge (2 point scale)	Time 1	1.62(1.60-1.65)	0.29	0.01
	Time 2	1.60(1.57-1.63)	0.30	0.01
	Total	1.61(1.59-1.63)	0.30	0.01
HIV attitudes (2 point scale)	Time 1	1.70(1.67-1.73)	0.26	0.02
	Time 2	1.67(1.65-1.70)	0.26	0.01
	Total	1.68(1.66-1.70)	0.26	0.01
Sexual attitudes (3 point scale)	Time 1	2.61(2.57-2.65)	0.56	0.02
	Time 2	2.61(2.57-2.64)	0.58	0.02
	Total	2.61(2.58-2.63)	0.57	0.01
Decision Making (5 point scale)	Time 1	3.40(3.35-3.45)	0.88	0.03
	Time 2	3.38(3.34-3.43)	0.86	0.02
	Total	3.39(3.36-3.43)	0.87	0.02
Healthy Relationships (5 point scale)	Time 1	3.63(3.58-3.67)	0.92	0.02
	Time 2	3.59(3.55-3.64)	0.96	0.02
	Total	3.61(3.58-3.64)	0.94	0.02
Social Support (4 point scale)	Time 1	3.07(3.04-3.10)	0.49	0.02
	Time 2	3.07(3.04-3.10)	0.48	0.01
	Total	3.07(3.05-3.09)	0.48	0.01

The results indicate an overlap of confidence intervals for all scales when comparing the two groups. On a number of scales, higher mean values for the intervention group at Time 1 were noted compared to Time 2. Table 4.19 reflects the ANOVA conducted between the intervention groups at Time 1 and Time 2.

Table 4.19: Intervention group: Time 1-Time 2 ANOVA

	Sum of Squares & Mean square	F
Future Orientation	0.02	0.70
Sensation Seeking	0.21	0.42
Self-Efficacy in Sexual Decision Making	1.50	4.05*
HIV transmission knowledge	0.12	3.29
HIV prevention knowledge	0.12	1.41
HIV attitudes	0.10	1.51
Sexual attitudes	0.00	0.01
Decision Making	0.23	0.31
Healthy Relationships	0.89	1.01
Social Support	0.00	0.02

*p<0.05

The intervention group at the delayed post test of Time 2 indicated a significantly higher mean for self-efficacy when compared to Time 1 values. This suggests that following the intervention, longer standing improvements in self-efficacy in sexual decision making were noted.

Analysis of selected intervention schools

Table 4.20: Mean values for intervention schools selected for qualitative evaluation

		Future Orientation	Sensation Seeking	Self-Efficacy	HIV Transmission Knowledge	HIV Prevention Knowledge	HIV Attitudes	Sexual Attitudes	Decision Making	Healthy Relationships	Social Support
School G	Baseline	1.64	2.85	1.94	1.76	1.60	1.52	2.51	3.73	3.35	3.03
	Time 1	1.83	3.00	2.11	1.83	1.48	1.74	2.40	3.13	3.40	3.05
	Time 2	1.80	2.76	2.22	1.89	1.71	1.66	2.52	3.41	3.58	3.19
School F	Baseline	1.85	3.00	2.13	1.87	1.49	1.52	2.74	2.83	3.43	3.24
	Time 1	1.89	2.98	2.32	1.78	1.74	1.76	2.68	3.61	3.96	3.15
	Time 2	1.79	3.08	1.98	1.85	1.65	1.86	2.60	3.66	3.62	3.05
School D	Baseline	1.88	3.00	2.37	1.85	1.59	1.67	2.74	3.39	3.69	3.16
	Time 1	1.88	2.95	2.24	1.89	1.56	1.61	2.67	3.44	3.79	3.13
	Time 2	1.89	3.39	2.14	1.79	1.63	1.55	2.61	3.25	3.34	3.16
School B	Baseline	1.92	3.23	2.51	1.86	1.66	1.77	2.82	3.66	3.77	3.23
	Time 1	1.93	3.22	2.49	1.93	1.73	1.79	2.79	3.43	3.97	3.25
	Time 2	1.87	3.02	2.30	1.94	1.57	1.60	2.61	3.37	3.63	3.15
School E	Baseline	1.91	2.99	2.37	1.88	1.61	1.70	2.69	3.78	3.84	3.13
	Time 1	1.93	2.95	2.26	1.88	1.69	1.76	2.61	3.40	3.80	3.13
	Time 2	1.78	3.01	2.11	1.76	1.58	1.77	2.37	3.37	3.42	2.94
School A	Baseline	1.85	3.33	1.96	1.64	1.55	1.47	2.61	3.18	3.79	3.01
	Time 1	1.88	3.36	2.22	1.84	1.74	1.65	2.59	3.20	3.61	3.18
	Time 2	1.87	2.83	2.24	1.94	1.83	1.79	2.55	3.27	3.76	3.21
School H	Baseline	1.64	2.98	1.83	1.71	1.60	1.75	2.40	3.75	3.11	2.99
	Time 1	1.72	2.99	2.07	1.91	1.56	1.59	2.50	3.55	3.53	3.07
	Time 2	1.67	3.02	1.86	1.80	1.59	1.75	2.57	3.42	3.37	3.04
School C	Baseline	1.62	3.21	1.93	1.83	1.58	1.64	2.42	3.75	3.50	3.15
	Time 1	--	--	--	--	--	--	--	--	--	--
	Time 2	1.91	3.21	2.32	1.92	1.65	1.74	2.53	3.56	3.92	3.03

Qualitative analysis was conducted on eight intervention schools (and is reported in Chapters 2 and 3). The mean values for each of the scales for these schools are displayed in Table 4.20. The results of all interventions schools are available in Addendum 20 (Table 13).

Table 4.21: Ranking of schools for climate and positive gains

	Rank - based on largest total gains between Baseline and Time 2	School Climate Rank
School G	3	3
School F	2	1
School D	6	8
School B	7	6
School E	8	7
School A	4	3
School H	5	2
School C	1	5

Varying results were found across the eight selected schools. The relationship between school climate reported in Chapter 2 and the effects of peer education in each of these schools require further analysis. However, by summing up the gains for all indicators made by each school between baseline and Time 2, it can be seen that these gains largely follow the rank order of most positive school climate (see Table 4.21).

Exceptions to this conclusion are School H (a historically Coloured and rural school) - who despite a positive school climate made only average gains; and School C (a school established after 1994 in a periurban township) who despite an average school

climate made the highest gains between Baseline and Time 2. This comparison is an important site for future research.

Discussion and conclusion

The intervention and control samples performed slightly differently at the Baseline phase indicating there may be differences between the school groups that were not evident during the random selection process. This may have had an impact on this evaluation. At Time 1, no significant differences were noted between intervention and control schools. However, the comparison of the intervention schools between Baseline and Time 1 indicates improved outcomes on five of the scales namely *future orientation*, *self-efficacy in sexual decision making*, *knowledge of HIV transmission*, *knowledge of HIV prevention* and *healthy relationships*.

The comparison of Time 2 sample with the Baseline sample indicates a statistical difference between the outcomes of *self-efficacy in sexual decision making* and *knowledge of HIV transmission*. However the results at Time 2 are only statistically different from those at Time 1 on the *self-efficacy in sexual decision making* scale. The increased performance of intervention schools across the three waves of this study indicate that substantial differences are noted between the pre-intervention position and the first post-test intervention. However over the longer term, 5 to 7 months following the first post-test interview, statistically significant improvements are noted for self-efficacy in sexual decision making and HIV transmission knowledge. This suggests that the peer education programme improved the knowledge of learners with respect to the various methods of transmitting HIV in addition to improving their self-efficacy in sexual decision making or what might be termed 'sexual self-efficacy' – confidence in their ability to protect themselves from HIV risk through a combination of abstinence, delaying sexual debut and using prophylactics.

CHAPTER 5: Goals, standards and systems for peer education: A field-generated perspective for youth HIV/AIDS intervention in South Africa

Summary

It is widely held that peer education has great potential as a health promotion and disease prevention strategy that integrates prevention, early intervention and support. However, despite peer education's sound theoretical basis, practical advantages and widespread use, there is little agreement on what constitutes shared goals or standards of best practice. Without such common language, goals, systems or standards, programmes evolve haphazardly, operate independently and inconsistently, and are difficult to evaluate and improve. Drawing on the South African experience of setting practice standards over 14 years through both consultation and evaluations of peer education programmes, and alongside the South African Department of Basic Education's guidelines for school-based peer education, this chapter aims to advance the science of peer education. It does so by reflecting on the study described in this report along with recent literature and other selected evaluations. These are used to critique current definitions and standards of practice and to offer a set of evidence-based aims and goals, implementation standards and infrastructural-based systems necessary for successful peer education programmes in a school-based context. Recommendations for future practice include having simpler aims and goals, and broadening the systems necessary for effective outcomes.

The state of practice for peer education and why we need standardisation

Peer education is frequently employed as a health promotion and disease prevention strategy using peer-to-peer interaction as an education approach that integrates prevention, early intervention and support. It educates and trains older or same-age peers as peer educators to deliver curriculum-based prevention knowledge, develop positive attitudes, model low-risk behaviour and support peers in help-seeking strategies (Chandan et al. 2008). Properly structured and implemented, peer education can stimulate memorable learning among youth in a variety of settings, while also taking advantage of the informal interpersonal influences these peers have in their natural situations (Swartz, Deutsch, Makoe et al., 2012).

However, in spite of peer education's sound theoretical basis, practical advantages and widespread use, there has never been agreement on what constitutes good practice, and how context affects good practice. By defining the standards for peer education, the roles different stakeholders need to play in implementing peer education programmes and the systems required to be in place, the strategy may be substantially strengthened. A consultative process (the *Rutanang* process documented by Deutsch and Swartz, 2002) and a number of programme evaluations have been conducted over the past 14 years, including the one this report documents. Most notable among these have been Ward (2008), Mukoma and Flisher (2009), Visser (2007) and Swartz et al (2009 and 2012). In addition the South African Department of Basic Education (Visser, 2011) guidelines for peer education have contributed to this process of standard setting. In this chapter we incorporate the learnings from each of these evaluations, consultations and documents and reflect on the findings from our own evaluation of a peer education programme implemented by DBE and DOH in the Western Cape, South Africa. Table 5.1 summarises the goals, implementation standards and infrastructural systems (if any) each reports on.

	Conceptual Standards	Implementation standards	Infrastructure systems
Rutanang 2002	Four roles of peer educators: 1. Educate peers in a structured manner. 2. Identify youth for referrals. 3. Role-model healthy behaviour. 4. Advocate for gender equity, resources and services.	1. Planning. 2. Mobilising community resources. 3. Developing an adult infrastructure of training and support. 4. Training and supporting a cohort of trained and peer educators. 5. Managing and rewarding performance. 6. Monitoring and evaluating inputs and impact.	1. Developing linkages for follow up and referral. 2. Devising a learning programme and pedagogical frame. 3. Ensuring/choosing a supportive and inviting school climate that includes good relationships, leadership, capacity and receptiveness. 4. Ensuring an enabling funding and oversight environment for implementing organisations.
Ward 2008	Draws heavily on the <i>Rutanang</i> Framework, and includes <i>Rutanang</i> aims and goals.	1. Planning: A needs assessment that takes into account local needs is essential. 2. Mobilising support from the leadership of the institution/community which you are working. 3. Supervisor infrastructure. 4. Peer educator infrastructure. 5. Management: Are peer educators and supervisors well managed. 6. Recognition and credentialing. 7. Having a realistic monitoring and evaluation plan in place.	1. Linkages – including partners and support structures. 2. Learning programme with interactive methodologies. 3. A practical and operative sustainability plan dealing with compliance, public relations, staffing, funding and peer ownership.
Mukoma et. al 2009	--	1. Training of teachers. 2. Necessary training and facilitation resources. 3. Materials.	1. Learning programme should include participatory activities. 2. Curriculum should be sensitive to gender and heterosexism. 3. Policy based/inclusion.
Visser 2007	1. Raising awareness and knowledge of HIV by presenting participative activities in schools. 2. Mobilising learners' involvement and participation in the promotion of healthy behaviour. 3. Facilitating change in peer group norms by creating a context to discuss sexual relationships, gender issues and values. 4. Being available to peers for informal conversation, support and guidance. 5. Being role models of healthy behaviour.	1. Adult infrastructure. 2. Peer educators should work under close supervision of a supportive adult. 3. Including supportive teacher involvement. 4. Training and support to deal with difficult personal and interpersonal situations.	1. Learning programme. 2. A curriculum with games and exercises should be provided to peer educators as a resource to engage their peers. 3. A sound school-based policy that supports HIV interventions. 4. Community resources should be made available to peer educators for the referral of learners with serious problems. 5. A healthy school and community environment that is conducive to the healthy behaviour patterns that peer educators try to promote.

Swartz et al., 2009	<p>Draws heavily on <i>Rutanang</i> conceptual standards.</p>	<p>In addition to <i>Rutanang</i> Implementation Standards, identifies different levels of implementation:</p> <ol style="list-style-type: none"> 1. Organisational leadership level: Organisational leaders who know what the programme is about and are supportive, materially and morally, of grass-level staff. 2. At mid-management level: Mid-level managers who are empowered to help supervisors to solve problems on the ground, and supply ongoing training. 3. At the site level: Supervisors who are present and able to interact with youth and assist peer educators on a week by week basis. 4. At the group level: A good venue, with a safe and relaxing space where lessons can occur and for informal 'hanging out' to take place before and after lesson; peer educators who facilitate rather than 'teach' lessons. 	<ol style="list-style-type: none"> 1. Learning programme that includes curriculum materials that encourage facilitation, dialogue and discussion rather than monologue. 2. Finances available for peer educator's snacks, transport and incentives.
DBE 2011	<p>A combination of education and support:</p> <ol style="list-style-type: none"> 1. Educator: Provide basic information and skills to facilitate norm forming about health. 2. Role-model: Provide positive role models for healthy behaviour and reinforce values and attitudes. 3. Supporter: Build trusting relationships with peers. 4. Referral agent: Identify peers with problems that impact their behaviour and educational performance, support them and, if necessary, refer them to community agencies. 5. Advocate: Raise awareness of issues like inequities and services available; make school management aware of the learner's needs and advocate for resources. 	<ol style="list-style-type: none"> 1. Conduct a situational analysis, needs assessment, and implementation plan. 2. Mobilise stakeholders. 3. Develop a management plan. 4. Develop skills of peer mentors. 5. Plan monitoring and evaluation. 	<ol style="list-style-type: none"> 1. Develop the peer education curriculum. 2. Establish linkages and referral system.

Rutanang (Deutsch and Swartz, 2002), produced by the Harvard School of Public Health, together with collaborators in South Africa and support from the Centres for Disease Control resulted in a series of publications that documented rigorous but incremental standards of practice that guide peer education programmes through a process of self-assessment and continual improvement. *Rutanang's* basic manual (2002) describes a set of twelve multi-level standards or guidelines, ranging from what programmes must have, to what they should and could have as they engage in self-reflection and growth planning. The *Rutanang* framework has been used as the basis for many of the peer education programmes that have subsequently emerged. Ward et. al's (2008) mapping and review of peer education programmes, draws heavily on the *Rutanang* framework. She includes the need for a sustainability plan that includes public relations, funding and peer ownership as central in the model to ensure the continuation of the programme. Mukoma et al., (2009) describes a slightly different study since the focus is on training teachers to implement a programme on sexual decision-making. The emphasis is only on the implementation of a training programme and not on the overall peer education programme. This evaluation emphasises the need for relevant participatory activities such as role-plays that teachers (themselves) are comfortable facilitating. This evaluation also recommends that the programme be included in policy initiatives to have the necessary departmental support for sustainable implementation.

Visser (2007) conducted research with 13 schools in the Tswane District. She has separated the educator role into two separate roles - raising awareness and facilitating change in peer group norms. She recommends a sound, school-based policy that support HIV Interventions and notes the importance of including community resources and emphasising a healthy, school enabling environment. Swartz et al (2009), also draws heavily on the *Rutanang* framework, particularly the conceptual and implementation standards. In addition to the similar implementation standards to *Rutanang*, it sketches different levels of oversight and management that could be helpful in large, extensive programmes. Additionally, it emphasises the venue and financial resources for rewarding peer educators. Visser (2011) draws on some elements of *Rutanang* to produce the South African Department of Basic Education Guidelines for a Peer Education Programme for Learners within South African Schools (DBE, 2011). These guidelines emphasize the role of support as central in defining 'what' a peer educator does. This is important in the South African context and in communities where there is a dearth of referral agencies. Additionally, it focuses on the need for a management plan and a management committee that coordinates the function of the peer education programme.

Key components for peer education strategies

A shared understanding and approach to peer education would serve to structure interventions and scaffold and define various responsibilities and roles for each stakeholder in the process. In this chapter, the notion of standards are best considered as three distinct types: *conceptual standards* which are foundational aims and goals and that inform both what should be done and how it should be done; *implementation standards* that has to do with planning, running and evaluating the process as a whole including setting clear expectations of volunteer and full time staff; and *infrastructural standards* as the systemic requirements of contexts, networks, ideology and policy that influences a programme's success and contributes towards achieving its intended outcomes. Data from numerous research evaluations are beginning to offer evidence that following these guidelines in designing curricula and implementing peer education programmes materially affect a programme's effectiveness (Ward at al. 2008; Swartz et al. 2009). In this chapter we propose a consolidated and evidence-based sets of standards in three domains based on this evaluation and previously produced studies and guidelines in the South African context.

Key to this schema are the *Rutanang* standards (Deutsch & Swartz, 2002) which have been used in prior evaluations, along with the South African Department of Basic Education's 'Guidelines

for the Implementation of the Peer Education Programme for Learners in South African Schools' (Visser, 2011). In summary, these standards require that peer education programmes devote adequate attention to shared conceptual aims and goals, implementation standards and infrastructural systems – to which we now turn.

Shared conceptual aims and goals for peer education

Aims and goals for peer education draw on the philosophy of peer education and the consequent roles envisaged for peer educators. *Rutanang's* description of the role of peer educators has within it the definition of peer education:

Peer educators above all create a safe place for candid and genuine examination of attitudes, choices, and situations. And it is by virtue of their ability to create such safe learning places that they become educators, models, referral agents, and activists against the HIV/AIDS pandemic and other health threats to young people (Deutsch and Swartz 2002, p 37).

Fundamental to *Rutanang's* field-generated standards is a definition of peer education as the process whereby trained supervisors assist a diverse group of youth (peer educators) to perform four functions – educate peers, recognise and refer those in need of help, model healthy behaviour and advocate for resources and justice. These will be considered in turn before adding an additional role - that of support advocated by Visser (2007).

Educate their peers in a structured manner

Of the four complementary and interrelated roles peer educators play, the pivotal role, on which all others depend, is the role of educator. Peer educators need to be trained to use lesson plans and learner-centred teaching materials to achieve educational objectives in structured, scheduled sessions. The content of lessons should be informed by two factors: what peer educators are best suited to present (as opposed to adult professionals) and by the topics that evaluations have determined have the greatest impact. This said, it is also important to note that it may be the fact that learners are engaged in peer education at all that has an impact on certain outcomes (in this evaluation, for example on self-efficacy in sexual decision making).

This evaluation indicated that peer educators struggled with the role of educator, and that this role becomes reduced to merely conducting 'lesson deliveries'. This occurred partly because the training curriculum did not include a specific section on 'the role as educator' with an accompanying skills development section and partly because these same-age peers struggled to gain legitimacy and trust from fellow classmates. This issue of trust extended to the referral role (as we will see later). During the interviews with peer educators many of them reported that their peers did not trust them, and highlighted the fact that same age peers were particularly disruptive and uncooperative when they were presenting lessons. This study has highlighted that without training and an emphasis on this role, it is not easily performed. The quote below is an indication of the way the way in which peer educators perceived their roles, indicating uncertainty and breadth:

Paul⁴⁸: Like I said to provide support to their buddies or peers, you know have talks with learners at the school around certain topics, again about HIV/AIDS or whatever else - social challenges they face within that community. Ja, basically that and create awareness - have lessons implemented in the schools that they facilitate and prepare also.

⁴⁸ Implementing Organisation, Elgin

The role of educator is central to influencing behaviour change. If the role of educator is poorly performed, the possibility of behaviour change is decreased since without skills and information learners will not be equipped to make strategic choices.

Recognising youth in need of additional help and referring them for assistance

The role of identifying or recognising peers in need of help and referring them for assistance is the second important role of a peer educator. In this way, peer education creates support groups whereby peer educators can facilitate help seeking strategies. In practice, Ward et al.'s (2008) findings revealed that although peer educators fulfilled this role of recognising problems within their group, and referring individuals to various services, this often did not ultimately help the young person. In our study peer educators and learners argued that when youth reach referral sources such as a clinic or approach a social worker with an issue of teenage pregnancy, or to test for STIs or HIV, adult practitioners often treat them with indignity and chastise their 'immoral behaviour'. A worker from one of the implementing organisations explains this difficulty further:

Melissa⁴⁹: The referral is to a variety of services and we don't have a lot of services to refer to in the rural areas. And also they [the youth] don't have confidence in that service. For example at the clinic or maybe the police - because I think ... the clinics are not teenage friendly.

This role assumes that the necessary services will be available, and accessible to young people, which in many rural communities is not the case. Resource-poor communities have to find alternative sources of social support and assistance for the young people in their programmes. Possibly peer support might be all the help that these youth receive.

On a less positive note however, peer educators face mistrust from their peers – especially those who are same aged. The role of referral is a specialised skill, built on trust, and sometimes misinterpreted as 'telling on someone'. Trust – to enable peers to reveal personal and intimate information and to respond to overtures of help - is an essential component of the peer education process. Such a role requires specialised capacity building – hence the inclusion of 'supporter' as an additional role later. The degree of trust between peer educators and peer learners is influenced by the degree of trust and social cohesion (or 'school climate' as described in Chapter 2) within schools, and in families and communities in which peer education programmes are located. If the social norms within the class or school are one of mistrust or ridicule for sharing personal problems then the role of referral will be very difficult to perform – especially as in the case of our study – for thirteen and fourteen year olds.

Role modelling healthy behaviour

The idea of role-modelling healthy behaviour is the third crucial role peer educators need to play since many have few adult role models for positive health-related behaviour. While talking and relating in groups allows youth to open up and confront issues they may not readily discuss with adult educators, it is also important that peer educators provide visual portrayals of healthy behaviour and resilience in the face of adversity. This is not to say he or she needs to have an untainted record regarding anti-social or high risk sexual behaviour. In fact between the team of peer educators elected or selected young people should be able to see a range of possible ways of being healthy e.g. abstaining from sex or using protection when having sex; abstaining from alcohol or having boundaries in place when using alcohol. Candice's comment hints at this diversity of role models:

⁴⁹ Implementing Organisation, Witzenburg

Candice⁵⁰: So I think the role for them would be to be positive role models and leaders in the school. To take that stand to assist the teachers in helping making decisions... What works for them, what don't work for them... For me it's all about the leadership qualities that they can hand over.

This varied role modelling aim only works well when peer educators are chosen from among diverse learners from various youth cultural groups. If learners are elected by their peers this is more likely to be the case than if they are selected by educators. Furthermore this informal role should not be limited only to sexual health behaviour but also to academic and social skills, and ways in which setting and shifting peer group norms is possible.

Advocates for resources, services and equity

There are numerous advantages to encouraging peer educators to fulfil a role as an advocate for gender equity, resources and services for themselves, their peers and their communities. Foremost the outcomes of these advocacy actions are crucial for young people's on-going well-being. Equally important are the self-efficacy and help-seeking skills peer educators and peer learners develop in the process of activism.

In our study, a number of schools had vibrant advocacy projects initiated by peer educators, whereas at others this role was almost non-existent. The complexity of this role and the commitment required to succeed in it should not be underestimated – especially for young peer educators. Central to their success is support in the training programme, the learning curriculum itself, and from adult facilitators. Youth need assistance in 'learning how to be an advocate' as Melissa describes:

Melissa⁵¹: We've got various advocacy campaigns. We need to advocate about health issues. We engage them into that and then also if we have seasonal activities we try and ask them to come and help us. We had a fun walk where we asked them [peer educators] to participate... also they make some posters promoting the peer education programme.

The strength of the advocacy role is to work within groups to make change happen. For young people this is particularly important, because their peer groups are influential in how they think about themselves and the communities in which they live.

Supporter

A fifth role, gleaned from Visser (2007) contributes the role of 'supporter' to peer educators. By this she means being able to build trusting relations with peers in order to better perform the other roles – upon which trust depends. Without trust and support - education, referral, advocacy and role modelling will be extremely difficult.

These conceptual standards, or an agreement regarding the shared aims and goals of both peer education and the peer educators' role in it, is also dependent on social context. The context within which the peer education programmes are delivered circumscribes the possibilities for achieving these five aims. So for example, if referral resources are not readily available, or if a community's social norms exclude confidentiality or help seeking, then asking peer educators to promote this behavioural activity is extremely challenging and might be impossible or at least met with resistance. These roles therefore need to be contextually evaluated prior to a commencement of a programme, and either modified or additional training offered. This

⁵⁰ Implementing Organisation, Spades

⁵¹ Implementing Organisation, Witzenberg

overlap between conceptual aims and shared goals leads to a discussion of the training and other implementation standards required for a successful peer education programme.

Implementation standards

Structured peer education programmes work well and are sustainable when they are thoroughly planned, include adequate staffing and management and are carefully evaluated. Below we describe what we consider to be the fundamental elements to ensure that school-based peer education programmes achieve maximum impact.

Mobilise and plan

Key to planning and mobilising is the need to conduct an initial needs assessment to inform the planning and mobilising strategy. In most programmes this initial step is omitted, partly due to a lack of funding and partly due to a lack of awareness of the benefits that planning brings to implementation.

For a programme to be effective, tested and delivered successfully, it is reliant on mobilising its various stakeholders and necessary resources that will ensure broad support for the programme. Within school contexts, planning and mobilisation is dependent on the school timetable and the school calendar and hence peer education programmes have to be conducted within these time constraints. In this evaluation, the implementation of the programme was delayed in several implementing organisations, schools and districts. The primary reason for the delays was a lack of inter-organisational coordination. In addition access to learners was dependant on access provided by the schools which usually relied on the openness and flexibility of the school principal. In some instances, these delays resulted in a rush to meet the 'targets' as explained by an implementing organisation staff member:

Damian⁵²: We have this one school for instance where the peer education is vibrant and smart. When you discuss a certain topic with them, they can discuss it in great detail. The school however, is not too interested in the programme, but because it's from the department, they need to make us feel welcome. We had an instance where we got to the school in January then they told us to come back in February. In February they told us to come back in March. We ended up only getting to the school in November then we had to complete our programme in a short period of time. They also failed to send their learners to the camp. The children wanted to participate and they wanted to meet with the other learners. Their training took place over two days and we did it at the school.

Schools do not necessarily value the importance of peer education and the emphasis that has been placed on 'contact time' for the core curriculum has reduced the opportunity for peer education training and lessons during the school day. Mobilising learners and the teaching staff and planning for the programme within a context of contradictions has its own difficulties, and as in the cases above, can result in delays and 'a watered down' version of a peer education programme. The Department of Basic Education (2011) promotes a version of a peer education programme that comprises a steering committee that includes all stakeholders, but directed by the Life Orientation teacher. In this model, the school participates more fully in the planning, design, implementation and monitoring of the peer education programme.

⁵² Implementing Organisation, Wagon of Hope

Develop an adult infrastructure

Peer education is multi-layered and complex and requires highly skilled staff to oversee its implementation (Walker and Avis 1999). Swartz et al. (2009) recognised that capacity development for supervisors was of paramount importance in order to ensure quality programmes and that standards were uniformly implemented. On-going training and on-going support of supervisors is a key principle in personnel infrastructure. This needs to include support from the agency providing training and technical support. In the various evaluations, when this occurred, adult supervisors had clear lines of communication, accountability and support that resulted in strong peer education programmes.

Develop a peer educator infrastructure

In general all the evaluations report that peer educators who are rigorously selected (rather than volunteer) are the ones who perform best in the programmes. The varied reasons for joining peer education programmes was of particular interest to Flisher et al. (2006) who report that the reasons peer educators joined,

spoke volumes for the success that lie ahead for the peer education programme as peer educators are committed to being part of the process of turning the tide on HIV/AIDS. They also made clear that for the most part peer educators are filled with enthusiasm about their roles and the difference they can make. Although this initial enthusiasm may be dampened once learners are confronted with the reality of the responsibilities attached to being a peer educator, this initial enthusiasm nonetheless bodes well for the programme in the future (Flisher et al. 2006, p 85).

In the quote below, an implementing organisation staff member notes that within one of the schools that she worked in, after the training has been completed, the peer educators just disappeared:

Jennifer⁵³: School E has been one of the most difficult schools to work with. The trained peer educators, after the training you won't get them, they are at large. They actually run away. So we just hope that it worked out at least maybe we reached out to some of the people that were in the school. [Interviewer: Where did they go?] By the time that the, let's say the [adult] peer facilitator comes in and is calling them so that they prepare the lessons, they would be nowhere to be found... They just disappear. They didn't want to engage in the lesson deliveries yet they were trained for that. So we would just get maybe one in class out of the four that would be trained. There would be one who would just be willing to help us. ...the peer facilitator ...was also frustrated with the way that the learners behaved.

Ward et al. (2008) conclude that with high levels of peer educator attrition, more attention needed to be paid to developing clearly defined roles for peer educators with high performance standards and graduated responsibilities.

Ensure gender sensitivity

Since one of the main drivers of HIV is unsafe sex that happens predominantly within heterosexual relationships in South Africa, gender relations is paramount to HIV and AIDS preventative interventions. Swartz et al. (2009) recognised that gender is not always well

⁵³ Implementing Organisation, Partners in Sexual Health

integrated into programme designs and implementations. They also observed complex interactions between male and female peer educators that had both positive and negative impacts: 'the positive aspect was that it enhanced participation during the session, while the negative aspect was that it often led to quarrelling' (Swartz et al 2009, p 81). At times, programme's gender segregation did not sit well with participants. For instance, one peer educator said that boys should be included in discussions of teen pregnancy, as it did not concern only girls as boys were the ones who impregnated girls (Ward et al. 2008, p 62). However, peer educators felt that gender representation should be equal, so that girls could seek help from female peer educators, and boys from male peer educators. They also felt that it was important to have role models of both sexes on a peer education team (ibid., p 71). The role and responsibility of teaching about 'right and wrong' when it came to sex and sexuality, which is characteristic of peer education programmes, is typically the role of women. To a large extent the peer education literature has acknowledged these gender impacts but has not systematically addressed them. NGOs explained that most of their peer educators were girls, and they reflected on their many attempts to attract boys to the programme. We have retained the length of this quote because it describes so clearly the problems of gendered divisions in peer educator programmes, as one of the NGO workers explains:

Charles⁵⁴: Unfortunately it's a sad story to say that we've been doing peer education for like 6-7 years and I can tell you the truth is that 90% of our peer educators has been girls, 90%. It's always been, we've done a lot of stuff. We even changed facilitators. We figured maybe because it's a guy he attracts a lot of girls and we swop we put a girl there and it's still the same reaction.

If find that the boy child shows that he doesn't have to get involved in these things, you know his task is to play soccer, play rugby you know, do cricket and just go through school and do whatever he has to do. And I believe that a boy child forgets that he also has a responsibility in terms of changing the community. I mean we have brilliant leaders that come through our programme who are boys you know - men now - but there are very few than the girls.

You know we've done everything, we've tried recruiting, we've tried everything to really reach out to them but it's as if they've been bombarded that in order for you to be popular you must be the guy who plays for the 18 rugby team if it's a coloured school, and black school you must be the soccer guy, that's famous for boys. Anything but that is not important.

If you are not sporty then forget it, you won't shine, you won't be famous in anything else. They just blend in, you know they disappear into the school. But I believe that boys have a place in peer education, they've got a voice because they can talk to their peers. You know it's boys who do drugs at school mostly. It's boys who smoke dagga at school.

Girls cannot really talk especially in many different communities - you find that the boys don't listen to girls. No they believe you can't speak to me. When it's a boy to boy - then the conversation can go deep and it can go better. Boys are the ones who are aggressive struggling even with authority at schools. They need to hear from another boy, from another man. But we still struggle to get them involved. I don't know why but that's the problem.

⁵⁴ Implementing Organisation, YFC George

Charles highlights eloquently, the relational nature of gender and how the construction of masculinities is conventionally 'opposed' to femininities. Peer education programmes need to be cognisant of using different approaches to include boys and younger men. There should be systematic and well-thought through methodologies to recruit, select, train and sustain boys' involvement in peer education programmes.

Manage and reward performance

In Swartz et al. (2009) supervisors felt there was a gap in communication between them and middle or higher management. They concluded that greater consultation and unhurried planning should occur to help the management process of a peer education programme. Peer educators were tired after school, had added stress from homework and were often battling with their own psychosocial problems (Ward et al. 2008; Swartz et al. 2009). The ability to effectively manage a peer education programme depended on the organisation's own history and structure. Successful organisations in peer education had a few years of experience and effectively built in support structures for the programme.

Peer educators often report that while they get satisfaction out of helping peers and gaining knowledge that is relevant to their own lives too, they feel under-valued. Flisher et al. (2006), Ward et al. (2008), and Swartz et al. (2009) all agree that recognising and rewarding peer educators and supervisors can help incentivise their contribution to the programme and reduce attrition. In this evaluation, small incentives and rewards were shown to matter. Peer educators proudly wore their peer educator badges in the schools.

Monitor and evaluate inputs and impact

It is said that programmes that include rigorous and ongoing monitoring and evaluation will be sustainable. But in reality, this is often difficult to maintain. In the field, some M&E tools designed by implementing organisations have reporting mechanisms that are stringent and add an additional burden to implementing a programme. Swartz et al. (2009) found that

reporting mechanisms served to increase the burden on partners which was exacerbated by the current complex delivery structure. There is an urgent need to simplify the organisational structure by reducing the layers through which implementation and communication flow ...so that sustainability is not sacrificed to unattainable standards (Swartz et al 2009, p 107).

In reality, very few programmes had any budget for monitoring and evaluation (Ward et al. 2008). However, Swartz et al (2009) document the crucial role that observers play when peer educators deliver lessons. Such a role (played by teachers or peer educators) was critical to documenting peer educator delivery and gathering information from participants to be discussed in next lessons, or for individual attention.

In this peer education evaluation, there was a well-developed monitoring and evaluation tool and protocol to which all organisations had to adhere. Some organisations found that there were some technical difficulties but overall this was a well -developed aspect of the programme.

Caitlin⁵⁵: I think coming into it I have never seen a programme with such a good M&E system hands down. To be able to trace a child, for signed documentation on a quarterly basis ...[seeing] the days they attended, this is the facilitator, this is the peer educator. You just don't get that - to put it

⁵⁵ Western Cape Department of Health Official

bluntly. And the fact that now peer education is rounding off and ... [our staff] hit the ground running to do M&E in an entire Global Fund programme using the course that was developed in peer education - I think it was absolutely brilliant ...because of the support it gave us.

While M&E tools measured inputs and outputs rigorously, it did not adequately capture qualitative change, a shortcoming we have addressed in Chapter 3, and confirmed by CSPE:

Patricia⁵⁶: I think the M&E - there should have been some qualitative things built in. We didn't give it thought and I really think it would have helped you with the longitudinal study... I think that that is something we could have done better.

Implementation standards require that all organisations have equal resources to adequately conduct a peer education programme. Within schools as well as in implementing organisations, where resources either in the participation of personnel or the lack of rewards were not present or were limited, the impact of the programme was affected. Implementation standards require strong collaborative networks and significant investment, including personnel, time and resources to develop a sustainable programme.

Necessary infrastructural systems for peer education in a school setting

Schools are important settings in which to implement a peer education programme. Flisher et al. (2006) reported that peer education programmes aimed at reducing HIV/AIDS prevalence amongst school-going adolescents were important because schools have 'a high proportion of young people [who] are sexually active' and that 'the influence that peers exert on the sexual activity of adolescents in the school-setting is pronounced and there is a connection of the school to wider community structures' (Flisher et al. 2006, p ix). Also the accessibility of health-care facilities to the majority of adolescents in South Africa, in terms of geographical distance, cost and barriers such as a lack of friendliness of clinic staff make the school setting a better site for acquiring important health knowledge and referral (Flisher et al. 2006, p 2). CSPE clearly promotes the school as an ideal setting for peer education:

Patricia⁵⁷: For me the best place for kids to actually get a formal, structured peer education programme is school... essentially peer education is really suitable for Secondary School and I don't think for Primary school. I think that kids are too young unless there's a high school and a primary school on the same campus which is not often found. So for me the first prize is always a school-based programme because you have the best access, you have the best reach and you reach kids that will never volunteer to come and that's always the case.

Ward et al. (2008) however has noted that peer education set in school environments often fail or have a high attrition rates because many schools in South Africa lack the capacity to support the peer education programme. Schools also frequently lack the capacity to link peer education programmes to community support structures. Other factors that might potentially undermine the success of peer education programmes in school settings include: the highly regulated nature of the school environment, teacher's control (or neglect) of the programme, emphasis of biomedical over social content of discussions, gender dynamics among peer educators and negative learner attitudes to the programme (Ward et al 2008, p 21).

⁵⁶ Technical assistance organisation, CSPE

⁵⁷ Technical assistance organisation, CSPE

Schools do not exist in isolation. The following systems seem to be necessary in order to ensure positive outcomes in peer education.

Policy articulations

Perhaps most central is the need for policy articulations between education and health departments to enable peer education to operate at its most optimal. So for example, the access of NGOs to schools, the use of learners across grades or only within grades, and the messages permissible in schools regarding sexual health must be clearly articulated.

In the current study, while the programme was designed for older aged peers to conduct peer education with younger peers in the course of the Life Orientation curriculum, this changed as the programme was rolled out without policy articulation. An education official explained her view of peer education as being co-curricular:

Merle⁵⁸: Because it is co-curricular from our national mandate it should happen after school... like you have your theatre, your choir and your drama, your interact group and then you have your peer educator group as well... Also, you know the Representative Learner Council they also operate after school. They have their meetings after school or during intervals. You want the peer education to be the same. When they talk to other learners it must happen in assemblies, in school events. It must happen at break time and after school. So that normally you would have about thirty five children per club, per peer education group, they can easily be a club. We have a very successful junior peer education programme that operates as a club.

This view was the antithesis of how the programme was designed. Having peer education operate co-curricularly also means that its usefulness is not fully realised since limited numbers of youth will join such a volunteer activity.

Linkages

There is an argument that a peer education programme and the specific roles peer educators take on needs broader social support and 'must have the support of teachers, administrators, parents and other learners in a school-based setting, and the support of relevant groups and care-givers in a community-based setting' (Deutsch and Swartz 2002, p 30). Linkages depend on two sets of relationships: relationships between organisations that are directly involved such as NGOs and schools, and relationships between the peer education system (including schools) and the broader community. In contexts where parents are struggling for economic survival and don't have the time or resources to participate in school activities, developing linkages becomes a lengthy process.

A recognised gap in peer education programmes in schools has been the absence of parental involvement. Ward et al. (2008) noticed that members from the broader community and parents especially were not aware of the peer education programme, and this had a residual impact on its successful implementation. Swartz et al. (2009) also noted the need for implementing partners to be in touch and maintain communication with the sites delivering the peer education programme. With little support from partners, and little information sharing going on between the programme and its stakeholders, programmes become isolated and falter in effective delivery. Some organisations excelled at developing linkages even though youth participants struggled with the referrals, as Melissa describes:

⁵⁸ Western Cape Department of Basic Education Official

Melissa⁵⁹: Peer education worked a lot because - our first one - it's I think 100 teenagers attended and 50 decided to go on contraceptives. And some of them of the males also were there and were very interested. They engaged a lot into the discussions, they didn't know the school nurse.

Bringing in different stakeholders provides learners with some degree of anonymity, particularly if meetings or events happen outside the school. What remains clear however, is the importance of providing a space - as peer education programmes with the correct linkages to support do - and opening doors for learners to get help, support and engage with their own traumatic experiences.

Learning programme

Programmes need to establish the topics they want to address and plan their curriculum content and activities around these identified issues. Swartz et al. (2009) found gaps in the planning of curriculum content. They reported a failure by implementing organisations to cover topics such as substance abuse, sexual abuse and rape, and condom use - which were critical issues in the communities. In this study peer educators notably commented on the suitability and the relevance of the 'Listen Up' curriculum, as described by the following respondent:

Interviewer: Is it relevant to what teenagers experience in your communities?
Simone⁶⁰: Yes, it is relevant.
Interviewer: What sessions were most important to you? What was the most helpful?
Simone: Healthy relationships
Interviewer: Why do you say that?
Simone: Well, we are teenagers ourselves and sometimes we also make the wrong decisions. Like to enter into a relationship where your boyfriend does not love you, but only wants to use you. I think this is important to me because we as young people also need true love. What happens is that we sometimes enter relationships where our partners cheats on us and abuses us. We end up not knowing what to do and this results in young people committing suicide when this happens.

Another peer educator describes a deep, painful intimacy with the information presented in the curriculum when he says:

Abdillah⁶¹: I think child abuse is also relevant because if a child does something wrong then the parents are angry, they take it out on the children. They get angry and stressed and they take it out on the children... [I have] experienced myself.

In South Africa, where there are high incidences of child abuse, it is not uncommon for peer educators to disclose personal experiences of abuse⁶². Teachers involved in the peer education programme have tried to accommodate and link the programme with the life orientation syllabus that they are required to teach. Ms De Villiers⁶³ confirms the relevance of the curriculum when she says: "It is about things that the children experience on a daily basis and I do think it is relevant for the learners".

⁵⁹ Implementing organisation, Witzenburg

⁶⁰ Peer educator, focus group, School F

⁶¹ Peer educator, focus group, School B

⁶² The interviewer responded to this disclosure by reminding the focus group of the confidentiality of the group and then dealt with the participant according to the HSRC's ethically prescribed code of practice.

⁶³ School H, teacher

While in theory, the ages of 12-14 years old should be appropriate to introduce a peer education programme, in reality the implementing organisations complained that this age group was too young to fully comprehend the depth of the content with which they were dealing. Again, the school-community context in which peer education programme operates plays a crucial role in determining its effectiveness. In some communities topics might not yet be encountered by learners, whilst in others they have long been exposed to them. In the same vein, in some communities youth might have the social and cognitive skills to deliver lessons about sensitive topics, whilst in others they are not equipped to do so. All these factors need to be taken into account when implementing a peer education learning programme. In this current study, NGOs described learners as 'playful', 'immature' and sometimes 'just too tired' to learn or deliver the content required from them, as the following quotes illustrate:

Melissa⁶⁴: It was a challenge for us because now it is grade 8 and 9 ... Now you got learners that just come from primary so they are a little bit still very childish. So they still want to enjoy the new environment of being at high school so they are not that focused or that responsible.

Dale⁶⁵: I think it was actually a good idea to take the kids and do training with them and stuff but the period was a bit short. Like the weekend thing because I mean the kids are tired when they come from school of course and they young. They don't want to listen straight away after school - jump in a taxi - we going to this place - now you have to listen to other people. But we try to make it as fun as possible but by the end of the day they are so tired like by 8 already ...but because everything is interesting and is new for them, they try to stay awake. Then by the Saturday when we have to do like facilitation skills and stuff like that - how to approach and how to dress when you do your facilitation and the lessons and stuff they are so tired, they can barely open their eyes. So it's a difficult thing.

Patricia⁶⁶: I believe that still is the right age group. I do believe there are other things that one can do in primary school to prime them for when they come into the high school setting. But I still believe that eights and nines are important. I think tens are important as well for different things because it's a continuation from your eights and nines so they just need a continued programme.

Furthermore, the programme was facilitated in English which was difficult for organisations where learners spoken Afrikaans as a first language. The organisations in the rural communities complained mostly about this aspect of the programme. It required that they work 'double' the amount of time translating and finding examples in Afrikaans that the learners could understand.

Melissa⁶⁷: For us in Youth-In-Action the language was a huge barrier because our people are Afrikaans speaking and then that is why the males are also not into it because when they see it's in English. We can just translate up to a point. And then also you've got children from different schools so you have to accommodate the people that only speak English. ... they promised us that they will have it in Afrikaans but it's been two years - we didn't get it.

⁶⁴ Implementing organisation, Witzenburg

⁶⁵ Implementing organisation, YFC Knysna

⁶⁶ Technical assistance organisation, CSPE

⁶⁷ Implementing organisation, Witzenburg

Melissa highlights the need that all resources be completed and ready for use before the programme begins in order to increase the effectiveness of the overall programme.

Funding and oversight

Without funding and adequate financial resources peer education programmes are not sustainable. Funding human capacity and resources is the most necessary for the implementation of peer education programmes. There needs to be an investment into implementation standards such as adult infrastructure and peer educator infrastructure, since the program is unworkable without it. Since peer education programmes utilises young people without educational degrees or diploma's the programme has to emphasise skills building and skills sharing in a meaningful manner that has committed funding. This evaluation of peer education in Western Cape schools has demonstrated the insecurity and instability of peer education programmes that are not well funded. It shows that skills dissipate and the effectiveness of the programme dwindles when funding is reduced or removed.

School climate

The notion of 'school climate' has been interrogated in various ways (see for example Anderson, 1982; Bosworth et al., 2011; Zullig et al., 2010). For this study Haynes et al's (1997) conceptualisation was particularly useful. Whereas some notions of school climate have focused primarily on the school itself, Haynes et al. recognise that the surrounding community, and its relationship with the school, forms part of the 'school climate'. In addition to some expected ingredients, such as 'student interpersonal relations', 'student-teacher relations' and 'order and discipline', they also acknowledge the importance of 'parent involvement', 'school-community relations', 'achievement motivation', 'staff dedication to student learning' and 'leadership'.

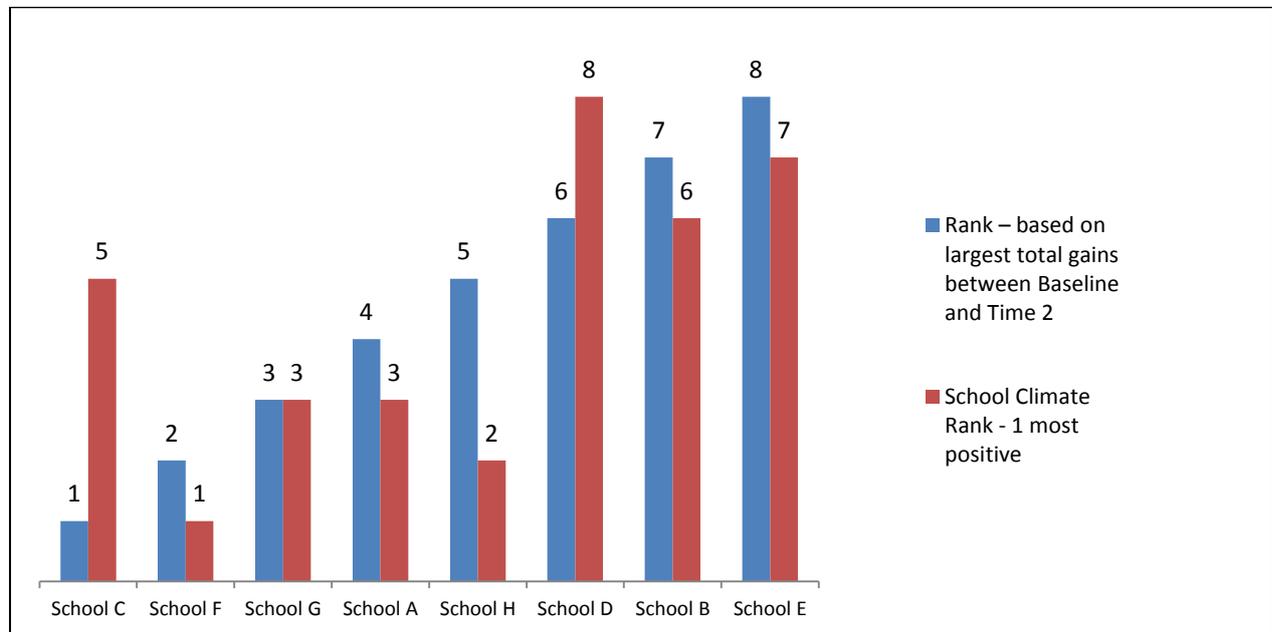
Our hypothesis with regard to the relationship between school climate and effective peer education was that where school climates are characterised by positive and collaborative interactions and include positive roles models, they are more likely to generate new perspectives on ways of being and ensuing decisions including those of healthy and prosocial behaviour (Campbell & MacPhail, 2002; Haynes et al., 1997). So for example, where there is a high achievement motivation, we believe young people are more likely to consider the consequences of their sexual and other decisions, because they are focused on their futures. Similarly, the extent to which order and discipline are maintained is also indicative of learners' attitudes toward the consequences of their choices and actions. Where there are positive interpersonal relations between the learners themselves, these relationships could enhance peer education programmes by contributing to positive regard for and trust of the peer educators. It would also make for classroom cultures conducive to open discussion. Both the approach to leadership and the student-teacher relations can be indicative of the levels of trust that exist in the school, as well as the general relational climate. Where this is positive, it is likely that when the programme is established it could appropriate some of this trust to benefit the programme.

As reported in Chapter 2 we found that the historically coloured rural schools (i.e. Schools F, G and H) and the extremely well-resourced suburban school (i.e. School A) displayed the most positive school climate. These schools (see Chapter 4) also tended to show the highest net gains across all indicators between the baseline questionnaire and the 5-7 month later questionnaire (although School H only showed moderate gains). Conversely, the previously Coloured-only schools (Schools B and E) and the previously Black-only school (School D) in urban locations displayed the least positive school climate characteristics. These schools also tended to show the lowest net gains across all indicators between the baseline questionnaire and the 5-7 month later questionnaire. One outstanding exception is School C (a school established after 1994 in a periurban township) who despite an average school climate with a mix of positive and negative

characteristics, made the highest gains between Baseline and Time 2. So while this relationship between school climate and the effects of peer education in each of these schools are at best related, in order to act on these conclusions further research is required.

Figure 5.1 depicts these relationships graphically.

Table 5.1 The relationship between school climate and net gains in peer education



A key concern in this study was the youths’ environmental exposure to high-risk behaviours at school, home and in their community at large. This is due to an association between youths’ experiences of positive relationships that show high levels of mutual respect (i.e. potential promoters of positive behaviour and choices) and having earlier sexual debuts or exposure to related risky behaviour (Evans & Tripp, 2006). After all, it has been found that a lack of positive adult role models, specifically with regards to sexual relationships, can significantly undermine the success of a peer education programme (Campbell & MacPhail, 2002). Further support for this is provided by Brookes et al. (2004) who found that where parents or guardians have been involved in HIV-focused interventions there was a greater chance that correct knowledge about HIV transmission would be received. An appropriate school climate can have the effect of fostering a caring and compassionate attitude in learners, especially when this is not an attitude readily available from their circumstances.

Conclusion

Table 5.2 summarises the goals, standards and systems recommended for peer education programmes in schools based on an extensive review of existing evaluations, consultations and guidelines, and from this evaluation of peer education in the Western Cape.

Table 5.2 A summary of the goals, standards and systems recommended for peer education programmes in schools

<i>Conceptual aims and goals</i>	<i>Implementation standards</i>	<i>Necessary infrastructural systems</i>
<ol style="list-style-type: none"> 1. Build trusting relationships with peers as a supporter. 2. Educate their peers in a structured manner. 3. Role-model diverse healthy behaviours. 4. Recognise youth in need of additional help and refer them for assistance. 5. Advocate for gender equity, resources and services for youth and their communities. 	<ol style="list-style-type: none"> 1. Plan. 2. Mobilise. 3. Develop an adult infrastructure. 4. Develop a peer educator infrastructure. 5. Ensure gender sensitivity. 6. Manage and reward performance. 7. Monitor and evaluate inputs and impact. 	<ol style="list-style-type: none"> 1. The school setting. 2. Policy articulations. 3. Linkages. 4. Learning programme. 5. School climate. 6. Funding and oversight.

What this study has especially highlighted is that the aims and goals of peer education, particularly with regard to the five roles of peer education is an extensive and ambitious objective in resource-poor communities and schools. Contextual factors need to be prioritised, and where gaps are apparent expectations might need to be modified or additional training and support provided. Both schools and communities need to be actively encouraging particular social norms such as ‘going for help’, ‘talking about your problems’, ‘trusting people’, ‘finding support systems’, and ‘working collaboratively’ if these aims, systems and standards are to be realised.

Limitations

The limitations of this study have been in the inability to complete a one year later post-test follow-up to see whether the changes measured have lasting effect beyond the programme immediately and the five to seven month period after. A second limitation has been the limited nature of the qualitative study. Whilst this was a choice due to the fact that previous evaluations tended to focus on qualitative evaluation with weakly designed and implemented quantitative designs, it is clear that in-depth and thorough elements of both are desirable. In particular, as reported in Chapter 3, methods used to gather qualitative data could have been expanded upon. To gather stories on the kind of attitudinal and behavioural change that this study hoped to bring about requires ‘time from people and time with people’, particularly youth who are still formulating concepts and opinions about their day-to-day experiences. Youth do not necessarily have the language or the skill to explain ‘in detail’ personal change on sensitive topics such as sexual experience, substance abuse and healthy relationships and are not necessarily forthcoming in focus groups. Individual interviews, though more time consuming and therefore more expensive, are essential.

With regards to attempting to circumscribe aims, goals and standards for peer education from the South African experience, this chapter has noted how difficult it is to generalise standards across varying socio-economic contexts. Adaption of these standards remains an important part of ensuring their usefulness.

Recommendations

While the previous discussion has made key recommendations for peer education programmes in general and in keeping with the past 14 years of peer education theorising and implementation in South Africa, we now turn to more specific recommendations emanating from the evaluation of this peer education programme.

Conceptual Goals

1. *Smaller, attainable goals*

Youth who are aged 13-15 years old have limited developmental ability and increasing academic and social demands. This needs to be factored in when expectations for their performance in peer education programmes are outlined. Limiting roles from the five desirable roles to possibly two or three key roles (educator, supporter, role model) will ensure programme sustainability and high quality delivery. Older youth should be tasked with the role of advocate and referral agent.

Implementation Standards

2. *Strong organisational management*

The importance of a steering committee is essential for communication and accountability, and to ensure ongoing stakeholder involvement. Teachers and principals' participation in the programme demonstrate leadership and 'positive social behaviour' which in turn influences learners' behaviour. Schools need to be encouraged to have such a steering committee in place.

3. *Programme planning*

Needs assessments, integral to an in-depth understanding of the community-school context (including school climate), are frequently overlooked. This is an essential element of a peer education programme and needs to be conducted prior to its commencement especially given the relationship between school climate and peer education programme effectiveness.

4. *Age of peer educators and peer learners*

As literature and recent evaluations identify, there should be at least a two year age-gap between peer educators and peer learners. Same age peer educators struggle with issues of trust with their peers. The five roles of peer educators become more difficult to attain in same age peer education programmes.

5. *Use of youth organisations as supporters of peer education*

Youth organisations have experience of youth development trajectories and in working with youth. They are ideally situated to supporting peer education programmes in school. They are also able to provide assistance to young people beyond the programme and because of this they are invaluable assets.

6. *Gender sensitivity*

Steps need to be taken to encourage the participation of boys in peer education programmes. As in many other peer education programmes there seems to be more young women than young men involved as peer educators.

Infrastructural Systems

7. *New ways of measuring behavioural change*

This study highlights that risky behaviours increase as youth move from 13 to 15. There are also concerns with initial underreporting of sexual behaviour at the outset of programmes. New techniques for measuring risk behaviours amongst this age group need to be devised, along with innovative interventions.

8. *Sustainable collaboration and uninterrupted funding*

This study has highlighted the need for sustained and effective organisational collaboration in the arena of infrastructural systems throughout the programme that include funding and funding partnerships that are sustained. This funding and collaboration needs to be secured at the outset of the programme.
9. *Community linkages*

The absence of parents' involvement in peer education programmes in schools leads to difficulty in understanding the broader environment and in providing social support for learners. Parents are also invaluable in assisting youth to sustain positive social behaviour. Peer education programmes should include strategies to engage parents.
10. *Policy*

While implementation of peer education programmes should consult and adhere to the suggestions as outlined in the Department of Basic Education Guidelines, there are two places in which research and practice does not easily articulate with these policy guidelines. The first concerns age of learners described earlier. This means that it would be most effective if learners could be peer educators in classes two years below their own. Current policy does not allow this. The second concerns the fact that the current DBE policy identifies peer education programmes as co-curricular. This results in peer education being understood and practiced as 'an optional extra', since it is in the same category as 'extra-mural' activities. For peer education to succeed in South African schools, its status has to be elevated to be integrated into the formal curriculum, with subsequent policy changes.
11. *School climate*

The importance of school climate has been emphasised in this report. School climate can be strengthened through school and community relations, in particular through the participation of parents and visibility of teachers and school principals. Further research in this domain is needed.
12. *Learning programme*

Given the unsurprising weakness displayed by peer educators in facilitating lessons, it is critical that facilitation skills be a central feature of the training programme for all involved in peer education. These skills need to be incrementally learnt and monitored. Referral and advocacy skills also need to be developed among peer educators, along with issues of gender violence and forms of citizenship that respects the human rights of individuals and learners in schools and communities.
13. *Technical support from experts*

CSPE made an invaluable contribution to the implementation of this programme. They provided the expert training for the programme as well as the monitoring and evaluation framework that guided the recording and capture of data, that substantially enhanced the participation of implementing organisations. Use of an external agency to supply training and monitoring seems to be key to the programme's success.

There are benefits to be gained from standardising peer interventions. However, it remains important to agree together on which are essential minimum standards, and move from considering them provisional to considering them fundamental. It is only in this way that we advance the science of peer education.

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“Opening locked doors”
**Evaluating peer education in schools in the Western Cape Province: A
mixed methods longitudinal study**

*Sharlene Swartz, Arvin Bhana, Benita Moolman, Emma Arogundade, Jean-Paul Solomon, Furzana
Timol and Mohamed Vawda*

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Addendum 1

Survey questionnaire (English)

For office use only

Pre Test	Post Test 1	Post Test 2	Post Test 3	Site	Date
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What do you think?

A questionnaire for young people in South Africa

Respondent's demographic data.

1	How old were you at your last birthday? Age of respondent	
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Instruction

Circle the correct answer

2	Are you...	Circle one
	Male	1
	Female	2

3	How do you identify yourself?				
	African	White	Coloured	Indian / Asian	Other
	1	2	3	4	5

4	What grade are you in at school?	Circle one
	Grade 8	1
	Grade 9	2

5	Who do you live with?	Circle all that apply
	Mother	1
	Father	2
	Brother	3
	Sister	4
	Grandmother	5
	Grandfather	6
	Uncle	7
	Aunt	8
	Friend	9
	Cousin	10
	Other	11

6	How many people usually live in your house (including yourself)?	
---	--	--

7	How would you describe the place where you live?	Circle one
	A shack in an informal settlement or backyard	1
	Traditional house or hut	2
	A flat	3
	A house with an inside toilet	4
	Other (specify):	

8	Which of the following is true of your home?	Circle one
	We don't have enough money for food	1
	We have enough money for food, but not other basic items such as clothes	2
	We have enough money for food and clothes, but are short for other things	3
	We have enough money for food and clothes, and also a bit extra for other things	4

9	Who is the main person who looks after you in your home?	Circle one
	Biological mother	1
	Biological father	2
	Both parents	3
	Grandmother	4
	Grandfather	5
	Sister / brother 18 years or older	6
	Aunt / uncle	7
	Myself /or any another person or sibling under 18 years old	8
	Other (specify):	

10	Is your biological mother still alive?	Circle one
	Yes	1
	No	2
	I don't know	3

11	Is your biological father still alive?	Circle one
	Yes	1
	No	2
	I don't know	3

12	What do you think is the most important issues or problems facing youth in your community?	Circle all that apply
	Poverty	1
	Crime	2
	HIV / AIDS	3
	Teenage pregnancy	4
	Unemployment	5
	Poor education	6
	Drug and alcohol abuse	7
	Other	8

How many days a week do you do the following? Answer each statement by circling the correct answer.				
		Never / hardly ever	A few times a week	Every day of the week
13	Listen to radio	1	2	3
14	Watch television	1	2	3

15	Read a magazine / newspaper	1	2	3
16	Use internet	1	2	3
17	Use a cell phone	1	2	3
18	Participate in sports- at school or with a club	1	2	3
19	Do home work	1	2	3
20	Take extra lessons at school	1	2	3
21	Go to church or choir or youth group or Muslim school	1	2	3
22	Spend time at or drop into at a youth or community centre or NGO	1	2	3
23	Spend time with friends	1	2	3
24	Do chores around the house – cooking, cleaning, looking after siblings	1	2	3
25	Do casual work for which you get paid	1	2	3

26	In the past 12 months, have you attended a youth group in which HIV & AIDs was discussed?	Circle one
Yes		1
No		2

Respondent's school data.

Circle the correct answer

27	During the previous school term, were you absent from school for two weeks or more?	Circle one
Yes		1
No		2
Not sure		3

28	Have you ever been out of school for an entire year?	Circle one
Yes		1
No		2
Not sure		3

29	Have you ever repeated a grade at school? If yes, which grade / grades did you repeat?	Circle all that apply
I have not repeated a grade		0
Grade 1		1
Grade 2		2
Grade 3		3
Grade 4		4
Grade 5		5
Grade 6		6
Grade 7		7
Grade 8		8

Exposure to Peer Education

Circle the correct answer

30	Have you ever participated in a Peer Education programme?	Circle all that apply
Yes, as a participant		1

Yes, as a Peer Educator	2
No	3

31	If you were not a Peer Educator, skip this question only. Answer each statement by circling the correct answer. If you are a Peer Educator , how often have you had...				
	Once a month	Once a week	Three or more times a week	Never	
	A classroom discussion with the Peer Education facilitator (the adult helping you with Peer Education)	1	2	3	4
	A one-on-one meeting with your Peer Education facilitator (the adult helping you with Peer Education)	1	2	3	4

32	How many Peer Education classes have you attended since entering high school?	Circle one
	None	0
	One	1
	Two	2
	Three	3
	Four	4
	Five	5
	Six	6
	Seven	7
	Eight	8
	Nine	9
	Ten	10
	Eleven or more	11
	Don't know	12

How often were you involved in the following activities at school in the past month? Answer each statement by circling the correct answer.

		Once a month	Once a week	Three or more times a week	Never
33	Listening to / discussing the Peer Education lessons of the month	1	2	3	4
34	Group discussion with a Peer Educator (the person your age teaching the class)	1	2	3	4
35	One-on-one meeting with a Peer Educator (the person your age teaching the class)	1	2	3	4

36	How useful did you find the classroom discussions with Peer Educators?	Circle one
	Very useful	1
	Very little use	2
	No use at all	3
	I did not attend the discussions	4

37	If you needed to see a Peer Education facilitator (the adult in charge) for a one-on-one discussion and couldn't, what was the main reason?	Circle one
	I have not needed to see a Peer Education facilitator	1
	I could not find the Peer Education facilitator	2
	The Peer Education facilitator had to see another class	3
	I was too afraid to approach the Peer Education facilitator	4
	The Peer Education facilitator forgot to set up an appointment	5
	I did not have time to set up an appointment with the Peer Education facilitator	6
	There was no private space at my school to have a counselling session	7
	I was able to meet with a Peer Educator facilitator	8

38	Has a Peer Education facilitator (the adult in charge) ever spoken to you or someone from your home?	Circle one
	Yes	1
	No	2
	Don't know	3

39	On a scale from 1 to 5, how do you feel about the Peer Education Programme?	Circle one
	Very disappointed	1
	Disappointed	2
	I don't know	3
	Excited	4
	Very excited	5

Below is a list of statements about Peer Education in your school. Please indicate how much you agree or disagree with each statement... Answer each statement by circling the correct answer.

		Agree	Don't know	Disagree
40	The classes on HIV/AIDS help me to protect myself from getting HIV/AIDS	1	2	3
41	The classes on HIV/AIDS help me to understand more about HIV/AIDS	1	2	3

42	The materials give useful information	1	2	3
43	The materials on HIV/AIDS are interesting	1	2	3
44	Some of the materials embarrass me	1	2	3
45	The materials on HIV/AIDS are easy to understand	1	2	3

Future Orientation

Circle the correct answer

Below is a list of statements about your future. Please indicate how much you agree or disagree with... Answer each statement by circling the correct answer.

		Agree	Don't know	Disagree
46	Dreams can be achieved	1	2	3
47	It's not possible to change negative thoughts into positive thoughts	1	2	3
48	Education is the most powerful thing in the world	1	2	3
49	It is okay for people my age to not come to school when they don't feel like it	1	2	3
50	I have a good idea of where I'm headed in the future	1	2	3
51	It is useless to plan for the future because you don't have any control over it	1	2	3

Sensation Seeking and Risk Taking Behaviour

Circle the correct answer

How would you describe yourself? Answer the questions below... Answer each statement by circling the correct answer.

		Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree
52	I would like to explore strange or new places	1	2	3	4	5
53	I would like to take off on a trip with no pre-planned routes or timetables	1	2	3	4	5
54	I get restless when I spend too much time at home	1	2	3	4	5
55	I prefer friends who do things on the spur of the moment	1	2	3	4	5
56	I like to do frightening things	1	2	3	4	5
57	I would like to try bungee jumping	1	2	3	4	5
58	I like wild parties	1	2	3	4	5
59	I would love to have new and exciting experiences, even if they are illegal	1	2	3	4	5

Drug and Alcohol Use

Circle the correct answer

60	In the last SIX months how many times have you used alcohol?	Circle one
	0 times	1

1 - 2 times	2
3 - 5 times	3
6 - 9 times	4
10 - 19 times	5
20 - 39 times	6
40 or more times	7

61	In the last SIX months have you gotten into a fight?	Circle one
	No	1
	Yes, once	2
	Yes, a few times	3
	Yes, many times	4

Below is a list of statements about drinking alcohol. Please indicate how much you agree or disagree with each statement as being true... Answer each statement by circling the correct answer.						
		Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree
62	Drinking alcohol this weekend would be cool	1	2	3	4	5
63	Drinking alcohol this weekend would be stupid	1	2	3	4	5
64	Drinking alcohol this weekend would be positive	1	2	3	4	5
65	Drinking alcohol this weekend would be pleasant	1	2	3	4	5
66	Drinking alcohol this weekend would be wise	1	2	3	4	5

67	In the last SIX months how many times have you smoked dagga?	Circle one
	0 times	1
	1 - 2 times	2
	3 - 5 times	3
	6 - 9 times	4
	10 - 19 times	5
	20 - 39 times	6
	40 or more times	7

Sexual Efficacy
<i>Circle the correct answer</i>

What if the following things happened to you? Imagine that these situations were to happen to you. Then tell us how sure are you that you could do what is described. Answer each statement by circling the correct answer.				
Imagine that...	Not sure at all	Kind of sure	Totally sure	
68	Imagine that you met someone at a party who wants to have sex with you. Even though you are very attracted to each other, you're not ready to have sex. How sure are you that you could keep from having sex	1	2	3

69	Imagine that you and your partner have been in a relationship, but you have not had sex. Your partner really wants to have sex. Still, you don't feel ready. How sure are you that you could keep from having sex until you feel ready	1	2	3
70	Imagine that you and your partner decide to have sex, but your partner would not use a condom. You do not want to have sex without a condom. How sure are you that you could keep from having sex, until your partner agrees its OK to use a condom	1	2	3
71	Imagine that you are having sex with someone you just met. You feel it is important to use condoms. How sure are you that you could tell that person that you want to use condoms	1	2	3
72	Imagine that you use birth control pills to prevent pregnancy. You want to use condoms to keep from getting STDS or HIV. How sure are you that you could convince your partner that you also need to use condoms	1	2	3
73	How sure are you that you could use a condom correctly or explain to your partner how to use a condom correctly	1	2	3
74	If you want to get a condom, how sure are you that you could go to the store and buy one or go to the clinic and get free condoms	1	2	3
75	If you decide to have sex, how sure are you that you could have a condom with you when you needed it	1	2	3

Sexual Experience

<i>Circle the correct answer</i>

76	Have you ever had sex? ("Going all the way")	Circle one
	Yes	1
	No	2
	I don't know	3

77	How old were you when you first had sex?	Circle one
	I have never had sex	1
	8 or younger	2
	9	3
	10	4
	11	5
	12	6
	13	7
	14	8
	15 or older	9

78	Before or during the FIRST time you had sex, were you drinking alcohol or taking drugs?	Circle one
	I've never had sex	1
	Yes	2
	No	3

79	The FIRST time you had sex, how much did you want it to happen?	Circle one
	I've never had sex	1
	Not at all	2
	Very little	3

Somewhat	4
Quite a bit	5
Very much	6
I don't know	7

80	What type of protection did you use the FIRST time you had sex?	Circle one
	I've never had sex	1
	Nothing	2
	Condoms	3
	Birth control pills	4
	The injection	5

81	When was the LAST time you had sex?	Circle one
	I've never had sex	1
	Less than a week ago	2
	Between 1 week and 1 month ago	3
	Between 3 months and 1 year ago	4
	More than 1 year ago	5

82	What type of protection did you use the LAST time you had sex?	Circle one
	I've never had sex	1
	Nothing	2
	Condoms	3
	Birth control pills	4
	The injection	5

83	Thinking about the last time you had sex, how would you describe your partner?	Circle one
	I've never had sex	1
	Just met	2
	Talked with once in a while before but nothing serious	3
	We are friends	4
	He/she is my boyfriend/girlfriend	5

84	The LAST time you had sex, how much did you want it to happen?	Circle one
	I've never had sex	1
	Not at all	2
	Very little	3
	Somewhat	4
	Quite a bit	5
	Very much	6
	I Don't know	7

85	Have you ever had sex after taking drugs or alcohol?	Circle one
	I've never had sex	1
	Yes	2
	No	3
	Don't know	3

86	Have you ever been pregnant or made someone pregnant?	Circle one
	Yes	1
	No	2

Don't know	3
------------	---

HIV / AIDS Knowledge

Circle the correct answer

87	From where have you received information about HIV and AIDS in the past year?	Circle all that apply
	Have not had information about HIV / AIDS	1
	Friends	2
	Churches	3
	Film or video	4
	Parents	5
	School curriculum	6
	Peer educators	7
	Radio or television	8
	Clinics	9
	Teachers	10
	Other	11

88	Which one of the following sources of HIV / AIDs information do you believe the most?	Circle all that apply
	Have not had information about HIV / AIDS	1
	Friends	2
	Churches	3
	Film or video	4
	Parents	5
	School curriculum	6
	Peer educators	7
	Radio or television	8
	Clinics	9
	Teachers	10
	Other	11

Is it possible to transmit HIV by means of the following? Answer each statement by circling the correct answer.

	Yes	No	Don't know	
89	Drinking from the same cup	1	2	3
90	Unprotected sex (sex without a condom)	1	2	3
91	Sitting on the same toilet seat used by a person with HIV/AIDS	1	2	3
92	From a mother to her unborn baby	1	2	3
93	From a mother during breast-feeding	1	2	3
94	Touching someone who has HIV/AIDS	1	2	3

Can you tell me all the ways you know that HIV infection can be prevented? Answer each statement by circling the correct answer.

	Yes	No	Don't know	
95	Using condoms	1	2	3
96	Not having sex	1	2	3
97	Sticking to one partner, having only one sexual partner	1	2	3
98	Not having sex before marriage	1	2	3
99	Avoiding contact with blood, using gloves when touching blood	1	2	3
100	Using drugs to prevent transmission from mother to child	1	2	3

101	Male circumcision	1	2	3
102	Taking antiretroviral drugs	1	2	3
103	Not sharing toothbrushes	1	2	3

HIV / AIDS Attitudes

Circle the correct answer

Do you agree or disagree with the following statements? Answer each statement by circling the correct answer.

		Agree	Disagree	Don't know
104	There is a cure for AIDS	1	2	3
105	AIDS is caused by witchcraft	1	2	3
106	HIV causes AIDS	1	2	3
107	AIDS is cured by having sex with a virgin	1	2	3
108	HIV/AIDS is God's punishment on sinners	1	2	3
109	Men who are circumcised are less likely to get infected with HIV	1	2	3
110	A person with HIV can look healthy	1	2	3
111	If a person has two or more sexual partners in the same month, he/she is more likely to get infected with HIV	1	2	3
112	Christian healers can cure AIDS	1	2	3
113	It is against the law for a man to have sex with a girl younger than 16, even if she agrees to it	1	2	3
114	HIV-positive persons tend to get TB more easily	1	2	3
115	It is easier for girls than for boys to get HIV	1	2	3

This time we want to know what you think makes a person "cool" or popular. Answer each statement by circling the correct answer.

		Strongly Agree	Agree	Disagree	Don't know
116	Having sexual intercourse makes a boy or girl popular	1	2	3	4
117	Having sexual intercourse at my age is a "cool" thing for a boy or girl to do	1	2	3	4
118	Having sexual intercourse with someone besides a steady partner makes a boy or girl "cool" or popular	1	2	3	4
119	If I decided not to have sex until I was at least 18 years old, I can still be cool	1	2	3	4
120	If I do not have sex, I will lose some of my friends	1	2	3	4

HIV / AIDS Behaviours and Intentions

Circle the correct answer

121	Have you ever been for an HIV test?	Circle one
	Yes	1
	No	2
	I don't know	3

In the next six months, how likely are you to... Answer each statement by circling the correct answer.

		Very likely	Don't know	Not likely
122	Be sexually active	1	2	3

123	Have more than one sexual partner	1	2	3
124	Practise safe sex	1	2	3
125	Not have any sex during the next 3 months	1	2	3
126	Go for an HIV test	1	2	3

127	Which contraceptive method would you, being a girl or a boy, prefer using for pregnancy prevention?	Circle all that		
	None	1		
	Male condom	2		
	Female condom	3		
	Contraceptive pill	4		
	Contraceptive injection	5		
	Loop / IUD	6		
	Norplant	7		
	Emergency contraception	8		
	Any form of gel	9		
	Other (specify):			

128	Is there a local clinic or hospital you can go to for help with sexual and reproductive health such as contraception, STIs, pregnancy, HIV/AIDS, etc?	Circle one
	Yes	1
	No	2
	I don't know	3

129	Can you get to this place easily?	Circle one
	Yes	1
	No	2
	I don't know	3

130	Have you made use of such services in the past?	Circle one
	Yes	1
	No	2
	I don't know	3

131	Would you use the services again?	Circle one
	Yes	1
	No	2
	I have never used these services	3

Decision Making
<i>Circle the correct answer</i>

The following statements describe how you might make a decision in everyday life. Circle the number that best corresponds to how often you did what is described in the last 30 days. For example, if you circle 5 for a statement, it means you always do what is described in the statement.						
	When I have a decision to make,	Never	Rarely	Sometimes	Often	Always
132	I easily identify my problem	1	2	3	4	5
133	I think about the problem before I take action	1	2	3	4	5

134	I look for information to help me understand the problem	1	2	3	4	5
135	I ask others to help me identify my problem.	1	2	3	4	5
136	I think about ways of dealing with my problem	1	2	3	4	5
137	I think before making a choice	1	2	3	4	5
138	I discuss choices with my friends before making a decision.	1	2	3	4	5
139	I discuss choices with my parents before making a decision	1	2	3	4	5
140	I look for positive points of possible choices	1	2	3	4	5
141	I look for negative points of possible choices	1	2	3	4	5
142	I consider the risks of a choice before making a decision	1	2	3	4	5
143	I consider the benefits of a choice before making a decision	1	2	3	4	5
144	I make decisions based on what my parents tell me	1	2	3	4	5
145	When faced with a decision, I realise that some choices are better than others	1	2	3	4	5
146	I make a decision by thinking about all the information I have about the different choices	1	2	3	4	5
147	I prioritise my choices before making a decision	1	2	3	4	5
148	Before making another decision, I think about how the last one turned out	1	2	3	4	5
When I have a decision to make,		Never	Rarely	Sometimes	Often	Always
149	I do think of past choices when making new decisions	1	2	3	4	5
150	If I experience negative consequences, I change my decision the next time	1	2	3	4	5
151	Decision-making is easy for me	1	2	3	4	5

Rate how often the following factors influence your decisions. What factors influence your decisions? Answer each statement by circling the correct answer.						
		Never	Rarely	Sometimes	Often	Always
152	Personal experience	1	2	3	4	5
153	Close friends	1	2	3	4	5
154	Feelings or emotions	1	2	3	4	5
155	Parents	1	2	3	4	5
156	Brothers and sisters	1	2	3	4	5
157	Personal values	1	2	3	4	5
158	Advertising	1	2	3	4	5
159	Television or movies	1	2	3	4	5
160	Peer pressure	1	2	3	4	5

161	Other adults	1	2	3	4	5
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Healthy and Unhealthy Relationships and Gender

Circle the correct answer

Below is a list of statements about your relationships with your boyfriend / girlfriend. Please indicate how much you AGREE or DISAGREE with each statement as being true... Answer each statement by circling the correct answer.

		Agree a lot	Agree a little	Neither agree nor disagree	Disagree a little	Disagree a lot
162	If a boy gives a girl presents, she must have sex with him	1	2	3	4	5
163	I think it's okay for a girl to have many boyfriends	1	2	3	4	5
164	A man cannot control himself when he gets sexually excited	1	2	3	4	5
165	If a girl suggests using a condom to her partner, it suggests she does not trust him	1	2	3	4	5
166	Sometimes a boy may have good reason to hit his girlfriend	1	2	3	4	5
167	I think it's okay for a boy to have many girlfriends	1	2	3	4	5

Social Support

<i>Circle the correct answer</i>

Below is a list of statements about your relationships with family and friends. Please indicate how much you AGREE or DISAGREE with each statement as being true... Answer each statement by circling the correct answer.

		Strongly Agree	Agree	Disagree	Strongly Disagree
168	My friends respect me	1	2	3	4
169	My family cares for me very much	1	2	3	4
170	I am not important to others	1	2	3	4
171	My family holds me in high esteem	1	2	3	4
172	I am well liked	1	2	3	4
173	I can rely on my friends	1	2	3	4
174	I am really admired by my family	1	2	3	4
175	I am respected by other people	1	2	3	4
176	I am loved dearly by my family	1	2	3	4
177	My friends don't care about me	1	2	3	4
178	Members of my family rely on me	1	2	3	4
179	I am held in high esteem	1	2	3	4
180	I can't rely on my family for support	1	2	3	4
181	People admire me	1	2	3	4
182	I feel a strong bond with my friends	1	2	3	4
183	My friends look out for me	1	2	3	4
184	I feel valued by other people	1	2	3	4
185	My family really respects me	1	2	3	4
186	My friends and I are important to each other	1	2	3	4
187	I feel like I belong	1	2	3	4
188	If I died tomorrow, very few people would miss me	1	2	3	4
189	I don't feel close to members of my family	1	2	3	4
190	My friends and I have done a lot for each other	1	2	3	4

191	Do you have someone who helps you when you have a problem?	Circle correct one for each statement
No		No one
Yes, 1 person		Mother, father, brother, sister, teacher, neighbour, religious leader or friend?
Yes, more than 1 person		Mother, father, brother, sister, teacher, neighbour, religious leader or friend?

When would you ask for help?		Circle correct one for each statement
192	I would not ask	1
193	When I need advice, or someone to help me with a problem at school	Mother, father, brother, sister, teacher, neighbour, religious leader or friend
194	When I need advice, or someone to help me with a problem at home	Mother, father, brother, sister, teacher, neighbour, religious leader or friend
195	When I need advice, or someone to help me with a problem-friend	Mother, father, brother, sister, teacher, neighbour, religious leader or friend

196	Have you accessed more health or social or counselling services	Circle one
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	(in and out of school) following attendance at peer education classes?	
Yes		1
No		2
Don't use any services		3

Thank you for your participation in this research study.

Addendum 2

Survey questionnaire (Afrikaans)

For office use only

Pre Test	Post Test 1	Post Test 2	Post Test 3	Site	Date
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Wat is U mening?

n' Vraelys vir jong mense in Suid Afrika

Respondent se demografiese data.

1	Hoe oud was jy met jou laaste verjaarsdag? Ouderdom van respondent	
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Omsirkel die korrekte antwoord

2	Jy is...	Omsirkel een v/d volgende
	Manlik	1
	Vroulik	2

3	Hoe identifiseer jy jouself?				
	African	Wit	Kleurling	Indier / Asier	Ander
	1	2	3	4	5

4	Watter graad is jy in op skool?	Omsirkel een v/d volgende
	Graad 8	1
	Graad 9	2

5	Saam met wie woon jy?	Omsirkel wat alles van toepassing is
	Moeder	1
	Vader	2
	Broer	3
	Suster	4
	Ouma	5
	Oupa	6
	Oom	7
	Tante	8
	Vriend	9
	Niggie/Neef	10
	Ander	11

6	Hoeveel mense woon gewoonlik in jou huis (jouself ingesluit)?	
---	---	--

7	Hoe sal jy die plek beskryf waarin jy woon?	Omsirkel een v/d volgende
---	---	---------------------------

Opslaanhuis in informeel nedersetting of agterplaas	1
Traditionele huis of hut	2
Woonstel	3
Huis met binne toilet	4
Ander (spesifiseer):	

8	Watter v/d volgende is waar of vals?	Omsirkel een v/d volgende
	Ons het nie genoeg geld vir kos nie	1
	Ons het genoeg geld vir kos maar nie genoeg vir ander basiese items soos klere nie	2
	Ons het genoeg geld vir kos en klere, maar tekort aan ander dinge	3
	Ons het genoeg geld vir kos en klere en ook 'n bietjie ekstra vir ander dinge	4

9	Wie sien hoofsaaklik om na jou? (persoon)	Omsirkel een v/d volgende
	Biologiese moeder	1
	Biologiese vader	2
	Beide ouers	3
	Ouma	4
	Oupa	5
	Suster / broer 18 jaar en ouer	6
	Tante / Oom	7
	Myself of enige ander persoon of broer/suster onder 18 jaar oud	8
	Ander (spesifiseer):	

10	Lewe jou biologiese moeder nog?	Omsirkel een v/d volgende
	Ja	1
	Nee	2
	Ek weet nie	3

11	Lewe jou biologiese vader nog?	Omsirkel een v/d volgende
	Ja	1
	Nee	2
	Ek weet nie	3

12	Wat dink jy is die mees belangrike kwessie of probleem wat die jeug in die gesig staar in jou gemeenskap?	Omsirkel die wat van toepassing is
	Armoede	1
	Misdaad	2
	HIV / AIDS	3
	Tiener Swangerskap	4
	Werkloosheid	5
	Swak onderig	6
	Dwelms en alkohol misbruik	7
	Ander	8

Hoeveel dae per week doen jy die volgende? Antwoord elke stelling deur korrekte antwoord te omsirkel.			
	Nooit /	Paar keer	Elke dag v/d

		Soms	per week	week
13	Luister na radio	1	2	3
14	Kyk televisie	1	2	3
15	Lees tydskrif/koerant	1	2	3
16	Gebruik internet	1	2	3
17	Gebruik selfoon	1	2	3
18	Neem deel in skoolsport of klubsport	1	2	3
19	Doen tuiswerk	1	2	3
20	Neem ekstra klasse by skool	1	2	3
21	Gaan kerk toe of na jeuggroep of Muslim skool	1	2	3
22	Spandeer tyd of besoek jeug of gemeenskap sentrum of NGO	1	2	3
23	Spandeer tyd met vriende	1	2	3
24	Verrig huistake- kook, maak skoon, pas broertjies of susterjies op	1	2	3
25	Verrig los werkies waarvoor jy betaling kry	1	2	3

26	In die afgelope 12 maande, het jy 'n jeuggroep bygewoon waar HIV & AIDs bespreek was?	Omsirkel een
Ja		1
Nee		2

Respondent se skool data.

Omsirkel die korrekte antwoord.

27	Gedurende die vorige skool termyn was jy afwesig van skool vir twee weke of meer?	Omsirkel een v/d volgende
Ja		1
Nee		2
Onseker		3

28	Was jy ooit uit die skool uit vir 'n hele jaar?	Omsirkel een v/d volgende
Ja		1
Nee		2
Onseker		3

29	Het jy ooit 'n graad herhaal op skool? Indien ja, watter graad/grade het jy herhaal?	Omsirkel die wat van toepassing is
Ek het nog nooit 'n graad herhaal nie		0
Grade 1		1
Grade 2		2
Grade 3		3
Grade 4		4
Grade 5		5
Grade 6		6
Grade 7		7
Grade 8		8

Blootstelling aan Portuur Onderrig (Peer Education)

Omsirkel die korrekte antwoord.

30	Het jy al ooit deelgeneem aan Portuur Onderrig (Peer Education)?	Omsirkel een v/d volgende
	Ja, as `n deelnemer	1
	Ja, as `n Portuur Onderigter (Peer Educator)	2
	Nee	3

31	As jy nie `n Portuur Onderigter (Peer Educator) is nie, moet hierdie vrae nie beantwoord nie. Antwoord elke stelling deur die korrekte antwoord te omsirkel. Indien jy `n Portuur Onderigter is, hoe gereeld het jy?				
		Een maal `n maand	Een maal `n week	Drie maal of meer `n week	Nooit
	`n Klaskamer bespreking met `n Portuur Onderrig Fasiliteerder (Peer Education Facilitator) (die volwasse persoon wie jou help met Portuur Onderrig/Peer Education)	1	2	3	4
	Een-tot-een ontmoeting met jou Portuur Onderrig Fasiliteerder (die volwasse persoon wie jou help met Portuur Onderrig/Peer Education)	1	2	3	4

32	Hoeveel Portuur Onderrig (Peer Education) klasse het jy bygewoon nadat jy hoerskool bewoon het?	Omring een v/d volgende
	Geen	0
	Een	1
	Twee	2
	Drie	3
	Vier	4
	Vyf	5
	Ses	6
	Sewe en meer	7
	Agt	8
	Nege	9
	Tien	10
	Elf of meer	11
	Ek weet nie	12

Hoe gereeld was jy betrokke in die volgende aktiwiteite by die skool die afgelope maand? Antwoord elke stelling deur die korrekte antwoord te omsingel.					
		Een maal `n maand	Een maal `n week	Drie maal of meer `n week	Nooit
33	Luister na/ bespreek die Portuur Onderrig (Peer Education) les vir die maand	1	2	3	4
34	Groep bespreking met `n Portuur Onderigter (die persoon jou ouderdom wie die klas onderig)	1	2	3	4
35	Een-tot-een vergadering met `n Portuur Onderigter (die persoon jou ouderdom wie die klas onderig)	1	2	3	4

36	Hoe nuttig het jy die klaskamer besprekings met die Portuur Onderrigters gevind?	Omring een v/d volgende
	Baie nuttig	1
	Van baie min nut	2
	Van geen nut	3
	Ek het nie die besprekings bygewoon nie	4

37	As jy nodig gehad het om `n Portuur Onderrig Fasiliteerder (die volwasse persoon in beheer) te sien vir een-tot-een bespreking en konnie, wat was die hoof rede?	Omring een v/d volgende
	Ek het nie nodig gehad om `n Portuur Onderig Fasiliteerder te sien nie	1
	Ek kon nie die Portuur Onderig Fasiliteerder vind nie	2
	Die Portuur Onderig Fasiliteerder moes `n ander klas sien	3
	Ek was te bang om die Portuur Onderig Fasiliteerder te benader	4
	Die Portuur Onderig Fasiliteerder het vergeet om `n afspraak op te set	5
	Ek het nie tyd gehad om `n afspraak met die Portuur Onderig Fasiliteerder te maak nie	6
	Daar was geen private ruimte by my skool om `n berading sessie te hou nie	7
	Ek was in staat om met my Portuur Onderig Fasiliteerder te ontmoet	8

38	Het `n Portuur Onderrig Fasiliteerder (die volwasse persoon in beheer) ooit met jou of met iemand anders van jou huis gepraat?	Omring een v/d volgende
	Ja	1
	Nee	2
	Ek weet nie	3

39	Op `n skaal van 1-5, hoe voel jy oor die Portuur Onderrig Program?	Omring een v/d volgende
	Baie teleurgesteld	1
	Teleurgesteld	2
	Ek weet nie	3
	Opgewonde	4
	Baie opgewonde	5

Onderaan is n lys stellings oor Portuur Onderrig in jou skool. Dui asseblief aan tot watter mate jy saamstem of nie saamstem met elke stelling as die waarheid. Antwoord elke stelling deur die korrekte antwoord te omsirkel.				
		Stem saam	Weet Nie	Verskil
40	Die klasse help my oor HIV/AIDS help om my te beskerm teen HIV/AIDS	1	2	3
41	Die klasse oor HIV/AIDS help my om meer oor HIV/AIDS te leer	1	2	3
42	Die materiaal bied nuttige inligting aan	1	2	3
43	Die materiaal oor HIV/AIDS is interessant	1	2	3
44	Sommige van die materiaal stel my in die verleentheid	1	2	3
45	Die materiaal oor HIV/AIDS is maklik verstaanbaar	1	2	3

Toekomstige Orientasie***Omsirkel die korrekte antwoord***

Onder is 'n lys stellings oor jou toekoms. Dui asseblief aan tot watter mate jy saamstem of nie saamstem met elke stelling as die waarheid... Antwoord elke stelling deur die korrekte antwoord te omsirkel.

		Stem saam	Weet Nie	Verskil
46	Drome kan bereik word	1	2	3
47	Dit is onmoontlik om negatiewe denke te verander in positiewe denke	1	2	3
48	Opvoeding is die mees kragtige ding in die wêreld	1	2	3
49	Dit is okay vir mense my ouderdom om skool toe te kom wanneer hulle nie so voel nie	1	2	3
50	Ek het 'n goeie idee waarheen ek oppad is in die toekoms	1	2	3
51	Dit baat nie om vir die toekoms te beplan nie want jy het geen beheer oor dit nie	1	2	3

Soeke na Sensasie en Waaghalsige Gedrag***Omsirkel die korrekte antwoord***

Hoe sal jy jouself beskryf. Antwoord die vraag hier onder... Omring die korrekte stelling

		Verskil sterk	Verskil	Onseker	Stem saam	Stem volkome saam
52	Ek sou graag wil vreemde en nuwe plekke wil exploreer	1	2	3	4	5
53	Ek sou graag op 'n reis wil gaan met geen vooraf beplande roetes en tydroosters	1	2	3	4	5
54	EK word onrustig as ek te veel tyd by die huis spandeer	1	2	3	4	5
55	Ek verkies vriende wie dinge op die oorhaastig doen	1	2	3	4	5
56	Ek hou van vreesaanjaende dinge doen	1	2	3	4	5
57	Ek sou graag bungee jumping wil doen	1	2	3	4	5
58	Ek hou van wilde partytjies	1	2	3	4	5
59	Ek is lief vir nuwe en opwindende ondervinde, selfs al is dit onwettig	1	2	3	4	5

Dwelms en Alkohol Gebruik***Omsirkel die korrekte antwoord***

	In die laaste SES maande hoeveel keer het jy alkohol gebruik?	Omsirkel een
60	0	1
	1 - 2	2
	3 - 5	3
	6 - 9	4
	10 - 19	5

20 - 39	6
40 of meer	7

61	Was jy in die afgelope SES maande in 'n geveg betrokke?	Omsirkel een
Nee		1
Ja, een keer		2
Ja, 'n paar keer		3
Ja, baie keer		4

Onder is 'n lys van stellings oor die drink van alkohol. Dui asseblief aan tot watter mate jy saamstem of nie saamstem met elke stelling as die waarheid... Antwoord elke stelling deur die korrekte antwoord te omsingel.

		Verskil sterk	Verskil	Onseker	Stem saam	Stem volkome saam
62	Dit sal koel wees om hierdie naweek alkohol te drink	1	2	3	4	5
63	Dit sal dom wees om hierdie naweek alkohol te drink	1	2	3	4	5
64	Dit sal iets positief wees om hierdie naweek alkohol te drink	1	2	3	4	5
65	Dit sal aangenaam wees om hierdie naweek alkohol te drink	1	2	3	4	5
66	Dit sal wyse ding wees om hierdie naweek alkohol te drink	1	2	3	4	5

67	In die afgelope SES maande hoeveel keer het jy dagga gerook?	Omsirkel een
0 tye		1
1 - 2 tye		2
3 - 5 tye		3
6 - 9 tye		4
10 - 19 tye		5
20 - 39 tye		6
40 of meer tye		7

Seksuelle Aanpasbaarheid

Omsingel die korrekte antwoord

Wat van die volgende dinge het met jou gebeur? Veronderstel hierdie dinge het met jou gebeur. Vertel ons hoe seker jy is dat jy sal kan doen wat voorgeskryf word. Antwoord elke stelling deur die korrekte antwoord te omsingel.

Veronderstel dat...	Onseker	Soort van Sekere	Totaal seker	
68	Veronderstel jy ontmoet iemand by 'n partytjie wie seksueel met jou wil verkeer. Alhoewel julle baie aangetrokke tot mekaar is, jy is nog nie gereed om seks te hê nie. Hoe seker is jy dat jy sal weerhou om seks te hê	1	2	3

Veronderstel dat...		Onseker	Soort van Sekere	Totaal seker
69	Veronderstel dat jy en jou metgesel is in `n verhouding en julle het nog nie seks gehad nie. Jou metgesel wil baie graag seks hê. Jy voel nogtans nie gereed nie. Hoe seker is jy dat jy sal weerhou van seks totdat jy gerreed voel	1	2	3
70	Veronderstel jy en jou metgesel besluit om seks te hê, maar jou metgesel wil nie `n kondoom gebruik nie. Jy wil nie seks hê sonder `n kondoom nie. Hoe seker is jy weerhou van seks totdat jou metgesel instem dit is OK om `n kondoom te gebruik	1	2	3
71	Veronderstel jy het seks met iemand wie jy pas ontmoet het. Jy voel dit is belangrik om kondome te gebruik. Hoe seker is jy dat jy die persoon kan sê dat jy kondome will gebruik	1	2	3
72	Veronderstel jy gebruik voorbehoedmiddels om swangerskap te voorkom. Jy wil kondome gebruik om te verhoed dat jy STI of HIV kry Hoe seker is jy dat jy jou metgesel kan oortuig dat jy ook sal nodig hê om kondome te gebruik	1	2	3
73	Hoe seker is jy dat jy `n kondoom op die regte manier kan gebruik of aan jou metgesel te verduidelik hoe om dit korrek te gebruik	1	2	3
74	As jy `n kondoom wil bekom, hoe seker is jy dat jy na die winkel kan gaan en een te koop of na die kliniek sal gaan om vry kondome te bekom	1	2	3
75	As jy besluit om seks te hê, hoe seker is jy dat jy `n kondoom sal hê as jy dit benodig	1	2	3

Sexuele Ondervinding

Omsirkel die korrekte antwoord.

76	Het jy ooit seks gehad? ("Volut")	Omsirkel een
	Ja	1
	Nee	2
	Ek weet nie	3

77	Hoe oud was jy toe jy die eerste keer seks gehad het?	Omsirkel een
	Ek het nog nooit seks gehad nie	1
	8 of jonger	2
	9	3
	10	4
	11	5
	12	6
	13	7
	14	8
	15 of ouer	9

78	Voor of gedurende die EERSTE keer wat jy seks gehad het, het jy alkohol of dwelms geneem?	Omsirkel een
	Ek het nog nooit seks gehad nie	1
	Ja	2
	Nee	3

79	Die EERSTE keer toe jy seks gehad het, hoe graag wou jy hê dit moes gebeur?	Omsirkel een
	Ek het nog nooit seks gehad nie	1
	Glad nie	2
	Baie min	3
	Ietwat	4
	Nogal `n bietjie	5
	Baie	6
	Ek weet nie	7

80	Watter tipe beskerming het jy gebruik gedurende die EERSTE keer jy seks gehad het?	Omsirkel een
	Ek het nog nooit seks gehad nie	1
	Niks	2
	Kondome	3
	Voorbehoedmiddels (pille)	4
	Die inspuiting	5

81	Wanneer was die LAASTE keer dat jy seks gehad het?	Omsirkel een
	Ek het nog nooit seks gehad nie	1
	Minder as `n week gelede	2
	Tussen 1 week en `n maand gelede	3
	Tussen 3 maande en `n 1 jaar gelede	4
	Meer as 1 jaar gelede	5

82	Watter tipe beskerming het jy gebruik gedurende die LAASTE keer jy seks gehad het?	Omsirkel een
	Ek het nog nooit seks gehad nie	1
	Niks	2
	Kondome	3
	Voorbehoedmiddels (pille)	4
	Die inspuiting	5

83	Dink aan die laaste keer dat jy seks gehad het, hoe sal jy jou maat beskryf?	Omsirkel een
	Ek het nog nooit seks gehad nie	1
	Pas ontmoet	2
	Af en toe gesels voorheen maar niks ernstig nie	3
	Ons is vriende	4
	Hy/sy is my "boyfriend/girlfriend"	5

84	Die LAASTE keer toe jy seks gehad het, hoe graag wou jy hê dit moes gebeur?	Omsirkel een
	Ek het nog nooit seks gehad nie	1
	Glad nie	2
	Baie min	3
	Ietwat	4
	Nogal `n bietjie	5
	Baie	6
	Ek weet nie	7

85	Het jy ooit seks gehad nadat jy dwelms of alcohol gebruik het?	Omsirkel een
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Ek het nog nooit seks gehad nie	1
Ja	2
Nee	3
Ek weet nie	4

86	Was jy ooit verwagting of het jy ooit iemand anders verwagting.	Omsirkel een
	Ja	1
	Nee	2
	Ek weet nie	3

HIV / AIDS Kennis
<i>Omsirkel die korrekte antwoord</i>

87	Waarvandaan het jy inligting oor HIV and AIDS in die afgelope jaar gekry?	Omsirkel wat van toepassing is
	Het nie inligting omtrent HIV / AIDS gekry nie	1
	Vriende	2
	Kerke	3
	Film of video	4
	Ouers	5
	Skool curriculum	6
	Portuur Onderrigters	7
	Radio or televisie	8
	Klinieke	9
	Onderwysers	10
	Ander	11

88	Watter van die volgende bronne van HIV/ AIDS inligting glo jy die meeste in?	Omsirkel wat van toepassing is
	Het nie inligting omtrent HIV / AIDS gekry nie	1
	Vriende	2
	Kerke	3
	Film of video	4
	Ouers	5
	Skool curriculum	6
	Portuur Onderrigters	7
	Radio or televisie	8
	Klinieke	9
	Onderwysers	10
	Ander	11

Is dit moontlik dat HIV kan oorgedra word in die volgende wyses? Antwoord elke stelling deur die korrekte antwoord te omsirkel.				
		Ja	Nee	Weet nie
89	Drink uit dieselfde koppie	1	2	3
90	Sex sonder `n kondoom	1	2	3
91	Deur op dieselfde toiletbank te sit wat gebruik is deur `n HIV/AIDS besmette person	1	2	3
92	Vanaf `n moeder na `n ongebore baba	1	2	3
93	Vanaf `n moeder tydens borsvoeding	1	2	3
94	Om te raak aan iemand wie HIV/AIDS het	1	2	3

Kan jy al die maniere noem waardeur HIV infeksie verhoed kan word? Antwoord elke stelling deur die korrekte antwoord te omsirkel.				
		Ja	Nee	Weet nie
95	Kondome te gebruik	1	2	3
96	Te weerhou van seks	1	2	3
97	Te bly by een maat, net een seks maat hê	1	2	3
98	Geen seks voor die huwelik	1	2	3
99	Vermyn bloed kontak, gebruik handskoene as jy met bloed werk	1	2	3
100	Gebruik dwelms om die oordrag van moeder na kind	1	2	3
101	Mans besnydenis	1	2	3
102	Neem antiretroviral	1	2	3
103	Nie tandeborsel gesamentlik te gebruik nie	1	2	3

Houdings teenoor HIV / AIDS

Omsirkel die korrekte antwoord.

Stem jy saam of verskil jy met die volgende stellings? Antwoord elke stelling deur die korrekte antwoord te omsirkel.				
		Stem Saam	Verskil	Weet nie
104	Daar is n oplossing vir AIDS	1	2	3
105	AIDS word veroorsaak deur toordery	1	2	3
106	HIV veroorsaak AIDS	1	2	3
107	AIDS is geneesbaar deur sex te hê met 'n maagd	1	2	3
108	HIV/AIDS is God se straf vir sondaars	1	2	3
109	Mans wie besny is is minder geneig om met HIV besmet te word	1	2	3
110	`n Persoon met HIV kan gesond lyk	1	2	3
111	As `n persoon twee of meer seksuele maats in dieselfde maand het, is dit meer waarskynlik dat hy/sy besmet sal word met HIV	1	2	3
112	Christian geneesers kan AIDS genees	1	2	3
113	Dit is teen die wet vir `n man om seks te hê met `n jonger meisie onder 16, al stem sy in	1	2	3
114	HIV-positiewe persone is geneig om TB makliker te kry	1	2	3
115	Dit is makliker vir meisies as seuns om HIV te kry	1	2	3

Nou wil ons weet wat jy dink maak `n persoon "cool" of populêr. Antwoord elke stelling deur die korrekte antwoord te omsingel.

		Stem sterk saam	Stem saam	Verskil	Weet nie
116	Om seksuele omgang te hê maak `n seun of n meisie populêr	1	2	3	4
117	Om seksuele omgang te hê op my ouderdom is `n "cool" ding om te doen as a seun of a meisie	1	2	3	4
118	Om seksuele omgang te hê met iemand	1	2	3	4

	buitenbehalwe 'n vaste maat maak 'n meisie of a seun "cool" of populer				
119	As ek besluit om nie seks te hê totdat ek ten minste 18 jaar oud , kan ek nog altyd 'cool' wees	1	2	3	4
120	As ek nie seks het nie, sal ek van my vriende verloor	1	2	3	4

HIV / AIDS Gedrag en Intensies

Circle the correct answer

121	Was jy ooit getoets vir HIV?	Omsirkel een
	Ja	1
	Nee	2
	Ek weet nie	3

In die volgende SES maande, wat is die waarskynlikheid dat jy... Antwoord elke stelling deur die korrekte stelling te omring.

		Baie Waarskynlik	Weet nie	Nie Waarskynlik
122	Seksueel aktief sal wees	1	2	3
123	Meer as een seks maat sal hê	1	2	3
124	Veilige seks sal beoefen	1	2	3
125	Geen seks sal hê tydens die volgende 3 maande	1	2	3
126	Gaan vir 'n HIV toets	1	2	3

127	Watter voorbehoedmiddel metode sal jy verkies om te gebruik, as n seun of a meisie, om swangerskap te voorkom?	Omsirkel een
	Geen	1
	Manlike kondoom	2
	Vroulike kondoom	3
	Voorbehoed pil	4
	Voorbehoed inspuiting	5
	Lus / IUD	6
	Norplant	7
	Nood Voorbehoeding	8
	Enige smeermiddel	9
	Ander (spesifiseer):	

128	Is daar 'n kliniek of 'n hospital waar jy kan gaan vir hulp vir seksuele en reproductiewe gesondheid soos voorbehoeding, STIs, swangerskap, HIV/AIDS ensovoorts?	Omsirkel een
	Ja	1
	Nee	2
	Ek weet nie	3

129	Kan jy die plek maklik vind?	Omsirkel een
	Ja	1
	Nee	2
	Ek weet nie	3

130	Het jy gebruik gemaak van die dienste in die verlede?	Omsirkel een
	Ja	1
	Nee	2
	Ek weet nie	3

131	Sal jy weer die dienste gebruik?	Omsirkel een
	Ja	1
	Nee	2
	Ek het nog nooit hierdie hulpbronne gebruik nie	3

Besluitneming

Omsirkel die korrekte antwoord

Die volgende stellings beskryf hoe jy 'n alledaagse besluit sal neem. Omsirkel die nommer wat beste korrespondeer hoe jy dikwels gedoen het soos beskryf word in die laaste 30 dae. Byvoorbeeld, as jy 5 vir 'n stelling omsirkel, beteken dit jy altyd doen soos beskryf in die stelling.

Wanneer ek 'n besluit het om te neem, sal ek...	Nooit	Selde	Soms	Dikwels	Altyd	
132	Maaklik 'n probleem identifiseer	1	2	3	4	5
133	Dink oor die probleem voor ek 'n besluit neem	1	2	3	4	5
134	Soek vir inligting om my te help die probleem op te los	1	2	3	4	5
135	Vra vir ander vir help om die probleem op te los	1	2	3	4	5
136	Ek dink oor maniere om die probleem op te los	1	2	3	4	5
137	Ek dink voor ek 'n keuse maak	1	2	3	4	5
138	Ek bespreek keuses met my vriende voor ek 'n keuse maak	1	2	3	4	5
139	Ek bespreek keuses met my ouers voor ek 'n keuse maak	1	2	3	4	5
140	Ek kyk uit vir positiewe punte van moontlike keuses	1	2	3	4	5
141	Ek kyk vir negatiewe punte in moontlike keuses	1	2	3	4	5
142	Ek oorweeg die risikos van 'n keuse voor ek 'n keuse maak	1	2	3	4	5
143	Ek oorweeg die voordele van 'n keuse voor ek 'n keuse maak	1	2	3	4	5
144	Ek maak my keuses gebaseer op wat my ouers vir my sê	1	2	3	4	5
145	As ek voor 'n keuse te stan kom besef ek dat sommige keuses beter as ander is	1	2	3	4	5
146	Ek maak 'n besluit deur te dink oor al die inligting wat ek het oor verskillende keuses	1	2	3	4	5
Wanneer ek 'n besluit het om te neem, sal ek...	Nooit	Selde	Soms	Dikwels	Altyd	
147	Ek prioritiseer al my keuses voor ek dit maak	1	2	3	4	5
148	Voor ek 'n volgende keuse maak, dink ek hoe die laaste een uitgewerk het	1	2	3	4	5
149	Ek dink aan keuses van die verlede as ek nuwe besluite neem	1	2	3	4	5
150	Wanneer ek negatiewe gevolge ondervind,	1	2	3	4	5

	verander ek my besluite volgende keer					
151	Besluitneming is maklik vir my	1	2	3	4	5

Bepaal hoe dikwels die volgende faktore jou besluite beïnvloed. Watter faktore beïnvloed jou besluite? Antwoord elke stelling deur die korrekte antwoord te omsingel.

		Nooit	Selde	Soms	Dikwels	Altyd
152	Persoonlike ondervinding	1	2	3	4	5
153	Goeie vriende	1	2	3	4	5
154	Gevoelens en emosies	1	2	3	4	5
155	Ouers	1	2	3	4	5
156	Broers en sisters	1	2	3	4	5
157	Persoonlike waardes	1	2	3	4	5
158	Advertensies	1	2	3	4	5
159	Televisie of movies	1	2	3	4	5
160	Portuur druk	1	2	3	4	5
161	Ander volwassenes	1	2	3	4	5

Gesonde en Ongesonde Verhoudings an Geslag

Omsirkel die korrekte antwoord

Onder is `n lys van stellings oor jou verhoudinge met jou kêrel/meisie. Dui asseblief aan tot watter mate jy SAAMSTEM of NIE SAAMSTEM met elke stelling as die waarheid... Antwoord elke stelling deur die korrekte antwoord te omsingel.

		Stem baie saam	Stem `n bietjie saam	Onseker	Stem effens nie saam nie	Verskil baie
162	As `n seun `n meisie `n geskenk gee, moet sy seks met hom hê	1	2	3	4	5
163	Ek dink dit is OK vir `n meisie om baie kêrels te hê	1	2	3	4	5
164	`n Man kan homself nie beheer as hy seksueel opgewonde raak nie	1	2	3	4	5
165	As `n meisie voorstel aan haar kêrel om `n kondoom te gebruik, stel sy voor dat sy hom nie vertrou nie	1	2	3	4	5
166	Sommige kere kan `n seun goeie rede het om sy meisie te slaan	1	2	3	4	5
167	Ek dink dit is OK vir `n seun om baie meisies te hê	1	2	3	4	5

Sosiale Ondersteuning

Omsirkel die korrekte antwoord

Hieronder is `n lys van stellings oor jou verhoudings met familie en vriende. Dui asseblief aan tot watter mate jy SAAMSTEM of NIE SAAMSTEM met elke stelling as die waarheid. Antwoord elke stelling deur die korrekte antwoord te omsingel.

		Stem sterk saam	Stem saam	Verskil	Verskil sterk
168	My vriende respekteer my	1	2	3	4
169	My familie gee baie om vir my	1	2	3	4
170	Ek is nie belangrik vir andere nie	1	2	3	4
171	My familie dink baie van my	1	2	3	4

172	Ek is baie van gehou	1	2	3	4
173	Ek kan op vriende staatmaak	1	2	3	4
174	Ek word regtig geadmireer deur my familie	1	2	3	4
175	Ek word gerespek deur ander mense	1	2	3	4
176	Ek word gekoester deur my familie	1	2	3	4
177	My vriende gee nie om vir my nie	1	2	3	4
178	Lede va my familie maak staat op mye	1	2	3	4
179	Ek word hoog geag	1	2	3	4
180	Ek kan nie staat maak op my familie se ondersteuning nie	1	2	3	4
181	Mense admirer my	1	2	3	4
182	Ek voel `n sterk band met my vriende	1	2	3	4
183	My vriende kyk uit vir my	1	2	3	4
184	Ek voel gewaardeer deur ander mense	1	2	3	4
185	My familie het regtig respek vir my	1	2	3	4
186	Ek en my vriende is belangrik vir mekaar	1	2	3	4
187	Ek voel ek behoort	1	2	3	4
188	Indien ek more moes sterf, sal min mense my mis	1	2	3	4
188	Ek voel nie naby aan familieledede nie	1	2	3	4
190	Ek en my vriendinne doen baie vir mekaar	1	2	3	4

191	Het jy iemand wie jou help as jy `n problem het?	Sirkuleer die korrekte stelling
	Nee	1
	Ja, een persoon	Moeder, Vader, broer, suster, onderwyser, buurman/vrou, godsdienstige leier of vriend?
	Ja, meer as een persoon	Moeder, Vader, broer, suster, onderwyser, buurman/vrou, godsdienstige leier of vriend?

Wanneer vra jy vir hulp?		Sirkuleer die korrekte stelling
192	Ek sal nie vra nie	1
193	Wanneer ek advies nodig het, of iemand help my met 'n probleem by die skool.	Moeder, Vader, broer, suster, onderwyser, buurman/vrou, godsdienstige leier of vriend
194	Wanneer ek advise nodig het, of iemand help my met 'n probleem by die huis	Moeder, Vader, broer, suster, onderwyser, buurman/vrou, godsdienstige leier of vriend
195	Wanneer ek advies nodig het, of iemand help my met 'n probleem met 'n vriend	Moeder, Vader, broer, suster, onderwyser, buurman/vrou, godsdienstige leier of vriend
196	Het jy gebruik gemaak van meer dienste soos gesondheid, sosiaal of beradingsdienste (binne en buite skool) na bywoning van portuur onderig klasse?	Omsirkel een
Ja		1
Nee		2
Nie gebruik gemaak van enige dienste		3

Baie Dankie vir u deelname in hierdie navorsing studie.

Addendum 3

Survey questionnaire (isiXhosa)

Eyokusetyenziswa yi ofisi kuphela

Pre Test	Post Test 1	Post Test 2	Post Test 3	Site	Date
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Ucinga Ntoni Wena

Imibuzo elungiselelwe ulutsha lwase Mzantsi Afrika

Iinkcukacha ngomthabathi nxaxheba

1	Wawungakanani ngomhla wakho wokugqibela wokuzalwa? Iminyaka yomthabathinxaxheba.	
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Biyela impendulo eyiyo

2	Ungu...	Biyela ibenye
	Mntu oyindoda	1
	Mntu ongumama	2

3	Unjani ngebala?				
	umAfrika	umHlophe	UngoWebala	Indiya / iTshayina	Olunye uhlobo
	1	2	3	4	5

4	Ukweliphi ibanga esikolweni?	Biyela ibenye
	Ibanga 8	1
	Ibanga 9	2

5	Uhlala nabani?	Biyela yonke into oyiyo
	Mama	1
	Tata	2
	Bhuti	3
	Sisi	4
	Makhulu	5
	Tatomkhulu	6
	Tatomncinci/ TaTatomncinci	7
	Dadobawo	8
	Mhlobo	9
	Mzala	10
	Omnye	11

6	Bangaphi abantu abahlala kokwenu (Kuquka nawe)?	
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7	Ungayichaza njengenani indawo ohlala kuyo?	Biyela ibenye
	Umkhukhu ematyotyombeni okanye emvakwendlu	1
	Yindlu yesintu	2
	Indlu elingeneyo	3
	Yindlu enegumbi langasese ngaphakathi kuyo	4
	Ezinye (cacisa):	

8	Yeyiphi kwezizilandelayo eyinyaniso ngekhaya lakho?	Biyela ibenye
	Asinamali yaneleyo yokuthenga ukutya	1
	Sinemali eyaneleyo yokuthenga ukutya, kodwa hayi ezinye izinto ezingundoqo njengeempahla	2
	Sinemali eyaneleyo yokuthenga ukutya neempahla, kodwa ayizanelanga ezinye izinto	3
	Sinemali eyaneleyo yokuthenga ukutya neempahla kwaye iyoneli ukuba kuthengwe ezinye izinto zokongeza	4

9	Ngowuphi oyena mntu unijongileyo ekhaya?	Biyela ibenye
	Mama wakho okuzalayo	1
	Tata wakho okuzalayo	2
	Abazali bakho bobabini	3
	Makhulu	4
	Tatomkhulu	5
	Sisi / Bhuti one 18 leminyaka nangaphezulu	6
	Malumekazi / malume	7
	Ndim / omnye umntu ongaphantsi kweminyaka eli 18	8
	Omnye (cacisa):	

10	Ingaba usaphila umama wakho okuzalayo?	Biyela ibenye
	Ewe	1
	Hayi	2
	Andazi	3

11	Ingaba usaphila utata wakho okuzalayo?	Biyela ibenye
	Ewe	1
	Hayi	2
	Andazi	3

12	Ucinga ukuba yeyiphi eyonanto ibalulekileyo kwiingxaki ulutsha lwendawo ohlala kuyo olujongene nayo?	yenza isanqa kwindowa efanekileyo
	Yindlala	1
	Ulwaphulo mthetho	2
	Intsholongwane kaGawulayo noGawulayo	3
	Ukukhulelwa kwabafikisayo	4
	Ukungaphangeli	5
	Imfundo ekumgangatho ophantsi	6
	Ukusetyenziswa kwezinyobisi notywala	7
	Ezinye	8

Uzenza iintsuku ezingaphi ezizilandelayo ngeveki? Phendula UMBUZO ngamnye ngokubiyela impendulo nganye.				
		Zange / ingabile	Kambalwa ngeveki	Yonke imihla evekini
13	Phulaphula unomathotholo	1	2	3
14	Bukela umabonakude	1	2	3
15	Funda imagazini / phephandaba	1	2	3
16	Sebenzisa i intanethi	1	2	3
17	Usebenzisa unomyayi	1	2	3
18	Ndidlala ezemidlalo esikolweni okanye kwiqela lezemidlalo	1	2	3
19	Ndenze ihome-work	1	2	3
20	Ndithabatha izifundo ezongezelelweyo esikolweni	1	2	3
21	Uye enkonzweni okanye kwikwayara okanye kwindibanisela yabantu abatsha okanye kwisikolo samaSulumani	1	2	3
22	Ndichithe ixesha nabantu abatsha okanye kwindawo ekudityanwa kuyo ekuhlaleni okanye kumbutho ongekho ngaphantsi korhulumente.	1	2	3
23	Uchitha ixesha nabahlobo	1	2	3
24	Wenza umsebenzi wasekhaya – ukupheka, ukucoca, ukujonga abantwana basekhaya	1	2	3
25	Wenza umsebenzi osisigxina othi uhlawulwe ngawo	1	2	3

26	Kwinyanga ezili 12 ezadlulayo, uke waya na kwintlangano yabantu abatsha ekuthethwa kuyo ngeSandulelaGawulayo noGawulayo?	Biyela ibenye
Ewe		1
Hayi		2

Incukacha ezingesikolo kumthamthabathi nxaxheba

Biyela impendulo eyiyo

27	Kwelixesha lidlulileyo usesikolweni, wake wangabikho esikolweni isithuba esingangeveki ezimbini okanye ngaphezule?	Biyela ibenye
Ewe		1
Hayi		2
Andiqinisekanga		3

28	Wake awabikhoesikolweni unyaka wonke?	Biyela ibenye
Ewe		1
Hayi		2
Andiqinisekanga		3

29	Wake waphinda ibanga esikolweni? Ukuba kunjalo, lelaphi ibanga / amabanga owawaphindayo?	yenza isanqa kwindawo efanelikileyo
	Khange ndiphinde banga	0
	Ibanga 1	1
	Ibanga 2	2
	Ibanga 3	3
	Ibanga 4	4
	Ibanga 5	5

Ibanga 6	6
Ibanga 7	7
Ibanga 8	8

Ulwazi ngokufunda kuntanga wakho

Biyela impendulo eyiyo

30	Wakhe wathatha inxaxheba ekufundeni koontanga bakho?	yenza isanqa kwindowa efanelikileyo
	Ewe, njengomthabathinxaxheba	1
	Ewe, njengo mfundisi woontanga	2
	Hayi	3

31	Ukuba awuyiyo iPeer Educator, wutsibe lo umbuzo, phendula incazelo nganye ngokwenza isanqa kwimpendulo echanekileyo. Ukuba uyiPeer Educator , kukangaphi wenza				
	Kanye ngenyanga	Kanye ngeveki	Kathathu nangaphezulu ngeveki	Zange	
	Ingxoxo eyenziwa kwigumbi lokufundela kunye nomkhokeli wokufunda koontanga (umntu omdala oninceda kwimfundo eyenziwa ngoontanga)	1	2	3	4
	Intlanganiso yobuso ngobuso nomkhokeli wokufunda koontanga (umntu omdala oninceda kwimfundo eyenziwa ngoontanga)	1	2	3	4

32	Zingaphi izifundo zoontanga owakhe wazenza oko waqala amabanga aphakamileyo?	Biyela ibenye
	Ayikho	0
	Inye	1
	Zimbini	2
	Zintathu	3
	Zine	4
	Zintlanu	5
	Zintandathu	6
	Zisixhenxe	7
	Isibhoza	8
	Ithoba	9
	Ishumi	10
	ishumi elinanye nangaphezulu	11
	Andazi	12

Uke wabandakanyeka kangakanani nezizinto esikolweni kwinyanga egqithileyo? Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.

	Kanye ngenyanga	Kanye ngeveki	Kathathu nangaphezulu ngeveki	Zange	
33	Ukuphulaphula/ ukuxoxa ngezifundo ezenziwa ngoontanga zenyanga	1	2	3	4
34	Ingxoxo yeqela kunye nomfundisi oyintanga (umntu olingana nawe ofundisa abafundi)	1	2	3	4

35	Intlanganiso nganye-nganye nomfundisi oyintanga (umntu olingana nawe ofundisa abafundi)	1	2	3	4
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36	Uyibone iluncedo kangakanani ingxoxo yakwigumbi lokufunda kunye nabafundisi abangoontanga?	Biyela ibenye			
	Iluncedo kakhulu	1			
	Iluncedo kancinci	2			
	Ayiloncedo konkekonke	3			
	Zange ndabakhona kuzo	4			

37	Ukuba ubudinga ukudibana nomkhokeli wemfundo yoontanga (umntu omdala ophetheyo ukuzesithethe ubuso ngobuso kodwa akwenzekanga, ibiyintoni isizathu?	Biyela ibenye			
	Khange ndibenasidingo sakubona umkhokeli wokufunda koontanga	1			
	Khange ndikwazi ukumfumananomkhokeli wokufunda koontanga	2			
	Umkhokeli wokufunda koontanga bekufuneka abone abanye abafundi	3			
	Bendisoyika kakhulu ukuya kumkhokeli wokufunda koontanga	4			
	Umkhokeli wokufunda koontanga uye walibala ukulungiselela idinga	5			
	Bendingenalo ixesha lokucela ukubanedinga nomkhokeli wokufunda koontanga	6			
	Ibingekho indawo ekhuselekileyo esikolweni sam yokuqhuba ulwaluleko	7			
	Ndiye ndakwazi ukudibana nomkhokeli wemfundo yoontanga	8			

38	Ingaba umkhokeli wemfundo yoontanga (umntu omdala ophetheyo) wake wathetha nawe okanye nomntu wakowenu?	Biyela ibenye			
	Ewe	1			
	Hayi	2			
	Andazi	3			

39	Phakathi kweyo 1 ukuyotsho kweyesi 5, uzivanjani ngenqubo yokufunda koontanga?	Biyela ibenye			
	Ndiphoxakele kakhulu	1			
	Ndiphoxakele	2			
	Andazi	3			
	Ndonwabile	4			
	Ndonwabile kakhulu	5			

Ngezantsi yimiqolo emalunga nokufunda koontanga esikolweni sakho. Nceda cacisa ukuba uvumelana okanye awuvumelani kangakanani nomqolo... Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.				
		Ndiyavuma	Andazi	Andivumi
40	Izifundo ngesandulelaGawulayo noGawulayo zindincedile ukuze ndikwazi ukuzikhusela ekufumaneni isandulelaGawulayo noGawulayo	1	2	3
41	Izifundo ngesandulelaGawulayo noGawulayo zindincedile ukuze ndiqonde ngcono ngesandulelaGawulayo noGawulayo	1	2	3
42	Iincwadi ezisetyenziswayo zinolwazi oluluncedo	1	2	3
43	Iincwadi ezithetha ngesandulelaGawulayo noGawulayo	1	2	3

	zinika umdla			
44	Ezinye zeencwadi zindenzele iintloni	1	2	3
45	Iincwadi ezithetha ngesandulelaGawulayo noGawulayo kulula ukuqonda okubhalwe kuzo	1	2	3

Iingcinga ngekamva

Biyela impendulo eyiyo

Ngezantsi luhlu lwemiqolo emalunga nekamva lakho. Nceda ubonakalise ukuba uvumelana okanye awuvumelani kangakanani ne.... Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.

		Ndiyavuma	Andazi	Andivumi
46	Amaphupha angafezeka	1	2	3
47	Akukwazeki ukutshintsha iingcinga ezimbi zibe ziingcinga ezintle	1	2	3
48	Imfundo yeyonanto ibalulekileyo ehlabathini	1	2	3
49	Kulungile ukuba abantwana abalingana nam ukuba bangayi esikolweni xa benganamdla	1	2	3
50	Ndinembono entle yokuba ikamva lam libheka ngaphi	1	2	3
51	Akubalulekanga ukulungiselela ikamva kuba awunalulawulo kulo	1	2	3

Ukufuna ukuva ngemizwa nokuziphatha okunomngcipheko

Biyela impendulo eyiyo

Ungazichaza njengomntu onjani? Phendula imibuzo engezanti... Phendula umqolo ngamnye ngoku biyela impendulo eyiyo

		Andivumi kakhulu	Andivumi	Ndiphakathi naphakathi	Ndiyavuma	Ndivuma ngamandla
52	Ndingathanda ukuya kwiindawo ezingaqhelekanga okanye ezintsha	1	2	3	4	5
53	Ndingathanda ukuthabatha uhambo olungenazindlela namaxesha acwangcwiswe phambi kokuba luqale uhambo	1	2	3	4	5
54	Ndiyadikwa kukuchitha ixesha elide kakhulu ekhaya	1	2	3	4	5
55	Ndiyabakhetha abahlobo abazenza izinto ngentshisakalo	1	2	3	4	5
56	Ndithanda ukwenza izinto ezoyikisayo	1	2	3	4	5
57	Ndinqwenela ukuzama umdlalo	1	2	3	4	5

	wokutsiba imiphakamo ngentambo					
58	Ndiyazithanda iipati ezitshisayo	1	2	3	4	5
59	Ndiyathanda ukuba namava amatsha awonwabisayo nokuba alulwaphulomthetho	1	2	3	4	5

Ukusetyenziswa kwezinyobisi notywala

Biyela impendulo eyiyo

60	Kwiinyanga ezintandathu ezidlulileyo ubusebenzise kangaphi utywala?	Biyela ibenye				
0 kange ndibusenzise		1				
1 – 2 amatyeli		2				
3 – 5 amatyeli		3				
6 – 9 amatyeli		4				
10 – 19 amatyeli		5				
20 – 39 amatyeli		6				
Amatyeli angama 40 ukubhekaphezulu		7				

61	Kwiinyanga ezintandathu uke wabandakanyeka na kumlo?	Biyela ibenye				
Hayi		1				
Ewe, kanye		2				
Ewe, amatyeli ambalwa		3				
Ewe, amatyeli amaninzi		4				

Ngezantsi luhlu lwemiqolo emalunga nokusela utywala. Nceda ubonakalise ukuba UVUMELANA uphinde UNGAVUMELANI kangakanani nalemiqolo njengenyanisileyo. Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.

		Andivumi kakhulu	Andivumi	Ndiphakathi nendawo	Ndiyavuma	Ndivuma kakhulu
62	Ukusela utywala kulempelaveki kungayinto elungileyo	1	2	3	4	5
63	Ukusela utywala kulempelaveki kungabayinto ebububhanxa	1	2	3	4	5
64	Ukusela utywala kulempelaveki kungabayinto elungileyo ephilileyo	1	2	3	4	5
65	Ukusela utywala kulempelaveki kungabayinto eyonwabisayo	1	2	3	4	5
66	Ukusela utywala	1	2	3	4	5

	kulempelaveki kungabubulumko					
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67	Kwiinyanga ezintandathu ezidlulileyi uyitshaye kangaphi intsangu?	Biyela ibenye
	0 khange ndisetshaye intsangu	1
	1 – 2 amatyeli	2
	3 – 5 amatyeli	3
	6 – 9 amatyeli	4
	10 – 19 amatyeli	5
	20 – 39 amatyeli	6
	Amatyeli angama 40 nangaphezulu	7

Ezesondo ngendlela eyiyo

Biyela impendulo eyiyo

Ungathini ukuba ezizinto zilandelayo zingenzeka kuwe? Khocinge ezizinto bezisenzeka kuwe. Khosixelele ukuba uqiniseke kangakanani ukuba ungayenza lento ichazwa apha. Phendula umqolo ngamnye ngoku biyela impendulo eyiyo.

Khocinge ukuba....	Andiqinisekanga kwaphela	Ndiqiniseke kancinane	Ndiqiniseke ngokupeleleyo
68 Khocinge xa ungadibana nomntu kumjuxuzo wolonwabo afune ukwabelana nawe ngesondo. Nokuba ninomdla kangakanani na omnye komnye, awukakulungeli ukwabelana ngesondo. Uqiniseke kangakanani ukuba ungazigcina ekungazibandakanyeni naye ngezesondo	1	2	3
69 Khocinge kuthiwa wena neqabane lakho niyathandana kodwa anikabelani ngesondo. Iqabane lakho lifuna nide nabelane ngesondo. Noxa kunjalo awuziva ngathi sowukulungele ukwabelana ngesondo. Uqiniseke kangakanani ukuba ungangazibandakanyi nezesondo ude ukulungele ukwenza oko	1	2	3
70 Khocinge, wena neqabane lakho nigqibe kwelokuba manabelane ngesondo, kodwa iqabane lakho alifuni kusebenzisa idyasi kamkhwenyane. Uqiniseke kangakanani ukuba ungangabelani ngesondo lidelivume iqabane lakho ukusebenzisa idyasi kamkhwenyana	1	2	3
Khocinge ukuba....	Andiqinisekanga kwaphela	Ndiqiniseke kancinane	Ndiqiniseke ngokupeleleyo
71 Khocinge wabelana ngesondo nomntu okungakudalanga udibene naye. Uqonde ukuba kubalulekile ukusebenzisa idyasi kamkhwenyana. Uqiniseke kangakanani ukuba	1	2	3

	ungamxelela lamntu ukuba ufuna ukusebenzisa idyasi kamkhwenyana			
72	Khocinge sithi usebenzisa iipilizi zokuthintela ukukhulelwa. Ufuna ukusebenzisa idyasi kamkhwenyana ukuze uzikhusele ekusulelekeni zizifo ezosulela ngokwabelana ngesondo nesandulelaGawulayo. Uqiniseke kangakanani ukuba ungalenza liyiqonde iqabane lakho into yokuba uyayidinga nedyasi kamkhwenyana	1	2	3
73	Uqiniseke kangakanani ukuba ungayisebenzisa idyasi kamkhwenyana ngendlela eyiyo okanye ucacisele iqabane lakho ukuba isetyenziswa kanjani idyasi kamkhwenyana ngendlela eyiyo	1	2	3
74	Ukuba ufuna ukufumana idyasi kamkhwenyana, uqiniseke kangakanani ukuba ungaya evenkileni okanye eklinikhi okanye ufumane idyasi kamkhwenyana yamahala	1	2	3
75	Ukuba ugqibe kwelokwabelana ngesondo, uqiniseke kangakanani ukuba uzokube unayo idyasi kamkhwenyana xa uyidinga	1	2	3

Amava ngezesondo

Biyela impendulo eyiyo

76	Wake wazibandakanya na ngezesondo? (“Ukubheka phambili”)	Biyela ibenye
Ewe		1
Hayi		2
Andazi		3

77	Wawungakanani ukuqala kwakho ukuzibandakanya ngezesondo?	Biyela ibenye
Iminyaka esi 8 okanye ngaphantsi		1
9		2
10		3
11		4
12		5
13		6
14		7
Eli 15 okanye ngaphezulu		8
Zange ndazibandakanye ngezesondo		9

78	Phambi kokuba uqale okanye ngoku wawuqala ukuzibandakanya nezesondo wawusela utywala okanye usebenzisa iziyobisi?	Biyela ibenye
Ewe		1
Hayi		2
Zange ndazibandakanya ngezesondo		3

79	Ngelixesha wawuqala ukuzibandakanya ngezesondo, wawufuna kangakanani ukuba oko kwenzeke?	Biyela ibenye
	Zange ndazibandakanya ngezesondo	1
	Ndandingafuni konke konke	2
	Ndandifuna kancinci khakhulu	3
	Ndandifuna nje	4
	Ndandifuna kancinci	5
	Ndandifuna kakhulu	6
	Andazi	7

80	Loluphi uhlobo lokhuseleko owalusebenzisayo xa wawuQALA ukuzibandakanya ngezesondo?	Biyela ibenye
	Zange ndazibandakanya ngezesondo	1
	Alukho	2
	Idyasi yomkhwenyana	3
	Ipilisi zokucwangcisa	4
	Isitofu	5

81	Ugqibele nini ukuzibandakanya ngezesondo	Biyela ibenye
	Zange ndazibandakanya ngezesondo	1
	Kwisithuba esingaphantsi kweveki	2
	Kuphakathi kweveki enye nyenanga	3
	Kuphakathi kweenyanga ezintathu nonyaka	4
	Ngaphezulu konyaka owadlulayo	5

82	Loluphi uhlobo lokhuseleko owalisebenzisayo ukugqibela kwakho ukuzibandakanya nezesondo?	Biyela ibenye
	Zange ndazibandakanya nezesondo	1
	Alukho	2
	Idyasi kamkhwenyana	3
	Ipilisi zokucwangcisa	4
	Isitofu	5

83	Xa ucinga ngexesha lakho lokugqibela ukuzibandakanya ngezesondo, ungamchaza njani umlingane wakho?	Biyela ibenye
	Zange ndazibandakanya ngezesondo	1
	Bekungakudalanga sidibene	2
	Besike sathetha ngaphambili kodwa zange kwenzekento ibalulekileyo	3
	Singabahlobo	4
	Ngumntu endithandana naye	5

84	Ngexesha lakho LOKUGQIBELA lokuzibandakanya ngezesondo, wawufuna kangakanani ukuba yenzeke lonto?	Biyela ibenye
	Zange ndazibandakanya ngezesondo	1
	Ndandingafuni konke konke	2
	Ndandifuna kancinane kakhulu	3
	Ndandifuna nje	4
	Ndandifuna kancinci	5
	Ndandifuna kakhulu	6
	Andazi	7

85	Wake wazibandakanya na ngezesondo ugqiba kusebenzisa iziyobisi	Biyela ibenye
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	okanye ugqiba kusela utywana?	
Zange ndobelana namntu ngesondo		1
Ewe		2
Hayi		3
Andazi		4

86	Wakhe wakhulelwa okanye wenza intombazana ikhulelwe?	Biyela ibenye
Ewe		1
Hayi		2
Andazi		3

Ulwazi ngesandulela sikaGawulayo noGawulayo

Biyela impendulo eyiyo

87	Ulufumenephi ulwazi malunga nesandulela sikaGawulayo noGawulayo kwisithuba sonyaka esidlulileyo?	Biyela yonke eyiyo
Khange ndifumane lwazi ngesandulelaGawulayo noGawulayo		1
Kubahlobo		2
Ezinkonzweni		3
Filim okanye into edlala kumabonakude		4
Kubazali		5
Kwizifundo zesikolo		6
Abafundisi abaziintanga		7
Kunomathotholo okanye kumabona kude		8
Klinikhi		9
Kootitshala		10
Engenye		11

88	Yeyiphi eyona ndawo yolwazi nge sandulelaGawulayo noGawulayo okholelwa kuyo kakhulu kwezi zilandelayo?	Biyela yonke eyiyo
Zange wafumana lwazi ngesandulelaGawulayo kunye noGawulayo		1
Abahlobo		2
Iinkonzo		3
Filim okanye into edlala kumabonakude		4
Abazali		5
Imfundo yasesikolweni		6
Abafundisi abaziintanga		7
Unomathotholo okanye umabona kude		8
Kilinihi		9
Ootitshala		10
Ezinye		11

Kungenzeka na ukuseleleka ngesandulelaGawulayo ngezi zilandelayo? Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.				
		Ewe	Hayi	Andazi
89	Ukusela ngekomityi enye	1	2	3
90	Ukuzibandakanya ngezesondo okungakhuselekanga (ukuzibandakanya ngezesondo ngaphandle kokusebenzisa idyasi kamkhwenyana)	1	2	3
91	Ukusebenzisa isihlalo sangasese esinye kunye nomntu onesandulelaGawulayo	1	2	3
92	Isuka kumama iyakumntwana ongekazalwa	1	2	3
93	Isuka kumama isiya kumntwana ngexesha lokuncancisa	1	2	3
94	Ukuchukumisa umntu onesandulelaGawulayo noGawulayo	1	2	3

Khawundixelele ngazozonke iindlela umntu angazikhusela ngazo ekusulelekeni sisandulelaGawulayo? Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.				
		Ewe	Hayi	Andazi
95	Ngokusebenzisa idyasi kamkhwenyana	1	2	3
96	Ngokungazibandakanyi ngezesondo	1	2	3
97	Ngokuthi nca kumlingani omnye, ubenomlingane omnye ozibandakanya naye ngezesondo	1	2	3
98	Ngokungazibandakanyi ngezesondo ungatshatanga	1	2	3
99	Ngokuphepha ukudibana negazi, usebenzise izikhuseleli zezandla xa uzokuphatha igazi	1	2	3
100	Ukusebenzisa iipilisi ukukhusela usuleleko olusuka kumama lusiya emntwaneni	1	2	3
101	Ukoluka kwamadoda	1	2	3
102	Ukusebenzisa iipilisi zikaGawulayo (Antiretroviral)	1	2	3
103	Ukungabelani ngesixubho	1	2	3

Indlela obonangayo isandulelaGawulayo nogawulayo
Biyela impendulo eyiyo

Uyavumelana okanye uyaphikisana nalemiqolo ingezantsi? Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.				
		Ndiyavuma	Andivumi	Andazi
104	Likhona ichiza likaGawulayo	1	2	3
105	uGawulayo ubangelwa kukuthakathwa	1	2	3
106	IsandulelaGawulayo senza uGawulayo	1	2	3
107	uGawulayo unyangwa kukuzibandakanya ngezesondo nomntu ongazaniyo nandoda	1	2	3
108	IsandulelaGawulayo noGawulayo sisohlwayo esisuka kuThixo sisiya kuboni	1	2	3
Uyavumelana okanye uyaphikisana nalemiqolo ingezantsi? Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.		Ndiyavuma	Andivumi	Andazi
109	Amadoda olukileyo anamathuba amancinane wokusuleleka sisandulelaGawulayo	1	2	3
110	Umntu onesandulelaGawulayo angakhangeleka esempilweni	1	2	3
111	Ukuba umntu unabalingane ababini nangaphezulu abalingane abelana nabo ngezesondo kwinyanga enye, unamathuba amaninzi wokusuleleka	1	2	3

	sisandulelaGawulayo			
112	Abaphilisi bezenkolo bangamnyanga uGawulayo	1	2	3
113	Inxamnye nomthetho into yendoda eyabelena ngezesondo nomntwana ongaphantsi kweminyaka eli 16, nokuba bayavumelana	1	2	3
114	Umntu onesandulelaGawulayo wosuleleka lula sisifo sephepha	1	2	3
115	Kulula kakhulu ukusuleleka kwamantombazana sisandulelaGawulayo kunokuba kusenzeka emakhwenkweni	1	2	3

Kwesisithuba sifuna ukwazi ukuba ucinga ukuba yintoni emenza umntu ukuba adume okanye abe alunge. Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.

		Ndivuma kakhulu	Ndiyavuma	Andivumi	Andazi
116	Ukuzibandakanya ngezesondo kwenza intombazana okanye inkwenkwe idume	1	2	3	4
117	Ukuzibandakanya ngezesondo kuleminyaka yam yinto elungileyo engenziwa yinkwenkwe ne ntombazana	1	2	3	4
118	Ukwabelana ngezesondo nomntu ongenguye othandana naye kwenza intombazana okanye inkwenkwe idume	1	2	3	4
119	Ukuba ndandikhethe ukungabelani ngezesondo ndide ndibeneminyaka eli 18, abahlobo bam bebezakundamkela ngokuthandabuza	1	2	3	4
120	Ukuba andizibandakanyi ngezesondo, ndizakuphulukana nabanye babahlobo bam	1	2	3	4

Imeko yokuziphatha nenjongo malunga nesandulelaGawulayo noGawulayo

Biyela impendulo eyiyo

121	Wakhe wahlolelwa na isandulelaGawulayo?	Biyela ibenye
	Ewe	1
	Hayi	2
	Andazi	3

Kwiinyanga ezintandathu ezizayo, angakanani amathuba wokuba u... Phendula umqolo ngamnye ngokuthi ubiyele impendulo eyiyo.

		Makhulu kakhulu	Andazi	Akhekho
122	Zibandakanye ngezesondo	1	2	3
123	Benomntu ozibandakanya naye ngezesondo ongaphezulu kwesinye	1	2	3
124	Uzibandakanye kwezesondo ngokukhuselekileyo	1	2	3
125	Ungazibandakanyi ngezesondo kwiinyanga ezintathu ezizayo	1	2	3
126	Ukuyokuhlolela isandulelaNgculaza	1	2	3

127	Yeyiphi indlela yothintelo ongayikhetha yokuthintela ukukhulelwa? Xa uyintombazana okanye xa uyinkwenkwe.	Biyela ibenye
	Ayikho	1
	Idyasi kamkhwenyana enxitywa ngamadoda	2
	Idyasi kamkhwenyana enxitywa ngamabhingqa	3
	Ipilisi zokucwangcisa	4
	Isitofu sokucwangcisa	5
	iLoop / IUD	6
	Norplant	7
	Ucwangciso olukhawulezileyo	8
	Nokuba yeyiphi na intlobo ye jel	9
	Enye (yichaze):	

128	Ingaba ikhona na iklinikhi okanye isibhedlela esikufuphi ongaya kuso xa ufuna uncedo ngezondo, ngezokukhulela okusempilweni njengokuthintela, izifo ezosulela ngokwabelana ngesondo, ukukhulelwa, isandulelaGawulayo noGawulayo njalo-njalo.	Biyela ibenye
	Ewe	1
	Hayi	2
	Andazi	3

129	Kufikeka lula na kulendawo?	Biyela ibenye
	Ewe	1
	Hayi	2
	Andazi	3

130	Uke wazisebenzisa na ezinkonzo ngaphambili?	Biyela ibenye
	Ewe	1
	Hayi	2
	Andazi	3

131	Ingaba uzophinda na uzisebenzise ezinkonzo kwakhona?	Biyela ibenye
	Ewe	1
	Hayi	2
	Zange ndazisebenzisa ezinkonzo	3

Ukuthabatha isigqibo
Biyela impendulo eyiyo

Imiqolo engezantsi ibonakalisa indlela ongathi wenze ngayo isigqibo kwimihla ngemihla yobomi bakho. Biyela inani elibonakalisa kakuhle ukuba uyenze kangaphi lento uyenzileyo kwiintsuku ezinga 30 adlulileyo. Umzekelo, ukuba ubiyela u 5, lonto ithetha ukuthi uhlala uyenza lonto etshiwo ngulomqolo.

Xakunesigqibo ekufuneka ndisenze, ndi...	Zange	Manqapha-nqapha	Maxawambi	Kaninzi	Rhoqo	
132	Ndiyibona lula ingxaki yam	1	2	3	4	5
133	Ndiqale ndicinge ngengxaki phambikokuba ndenze into	1	2	3	4	5
134	Ndifuna ulwazi olungandinceda ukuze ndiyiqonde ingxaki yam	1	2	3	4	5
135	Ndicela abanye bandincede	1	2	3	4	5

	ukuze ndiyibone ingxaki yam					
136	Ndicinga ngeendlela zokuhlangabezana nengxaki yam	1	2	3	4	5
137	Ndiyacinga phambi kokuba ndikhetha	1	2	3	4	5
138	Ndiye ndixoxe nabahlobo bam ngezinto endizakukhetha kuzo phambi kokuba ndithabathe isigqibo	1	2	3	4	5
139	Ndizixoxa nabazali bam izinto endingakhetha kuzo phambi kokuba ndithabathe isigqibo	1	2	3	4	5
Xakunesigqibo ekufuneka ndisenze, ndi...		Zange	Manqapha-nqapha	Maxawambi	Kaninzi	Rhoqo
140	Ndijonga izinto ezintle kwizinto endingathi ndikhetha kuzo	1	2	3	4	5
141	Ndijonga izinto ezimbi kwizinto endingakhetha kuzo	1	2	3	4	5
142	Ndiyabucinga ubungcipheko okwinto endingathi ndiyikhetha phambi kokuthabatha isigqibo	1	2	3	4	5
143	Ndiyazinga iziqhamo eziyinzuzo kwinto endingathi ndiyikhetha phambi kokuthabatha isigqibo	1	2	3	4	5
144	Ndisithabatha isigqibo ngokukhokelwa yinto abazali bam abathi mandiyenze	1	2	3	4	5
145	Xandijongene nokukuthabatha isigqibo, ndifumanisa into yokuba ezinye izinto endingathi ndizikhetha zingcono kunezinye	1	2	3	4	5
146	Ndithabatha isigqibo ngokucinga ngalolonke ulwazi endinalo malunga nezinto ezahlukeneyo endigakhetha kuzo	1	2	3	4	5
147	Ndiqale ndijonge izinto ezingundoqo kwezi ndizakukhetha kuzo phambi kokuba ndenze isigqibo	1	2	3	4	5
148	Phambi kokuba ndithabathe esinye isigqibo, ndiqale ndicinge ukuba siyesandiphatha kanjani isigqibo ebendisenzile	1	2	3	4	5
149	Ndiyacinga ngezinto endiye ndazikhetha kwilixa elingaphambili phambi kokuba ndithabathe izigqibo ezitsha	1	2	3	4	5

150	Ukuba ndibenamava weziqhamo ezingezihlanga, ndiyasitshintsha isigqibo kwilixa elizayo	1	2	3	4	5
151	Ukuthabatha isigqibo kulula kum	1	2	3	4	5

Bonakalisa ukuba kukangakanani ukuba ezizinto zilandelayo zithi zibenegalelo kwisigqibo othi usithabathe. Zinto zini ezilifuthe lokuthabatha isigqibo? Phendula umbuzo ngamnye ngokubiyela impendulo eyiyo

		Zange	Manqapha-nqapha	Maxawambi	Kaninzi	Rhoqo
152	Amava wam	1	2	3	4	5
153	Abahlobo abakufuphi	1	2	3	4	5
154	Imizwa nemvakalelo	1	2	3	4	5
155	Abazali	1	2	3	4	5
156	Oobhuti noosisi	1	2	3	4	5
157	Imigaqo yomntu	1	2	3	4	5
158	Ezentengiso	1	2	3	4	5
159	Umabonakude okanye imidlalo kamabonakude	1	2	3	4	5
160	Ifuthe loontanga bam	1	2	3	4	5
161	Abanye abantu abadala	1	2	3	4	5

Ubudlelwane obusempilweni nobungekho sempilweni kunye nesini

Biyela impendulo eyiyo

Ngezantsi yimiqolo emalunga nobudlelwano onabo nomntu othandana naye. Nceda ubonakalise ukuba UVUMELANA uphinde UNGAVUMELANI kangakanani nalemiqolo njengonyanisileyo. Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.

		Vumelana kakhulu	Vumelana kancinane	Ndiphakathi nendawo	Andivumelani kancince	Andivumelani kakhulu
162	Ukuba inkwenkwe ipha intombazana isipho kufuneka lontombazana yabelane ngezesondo nalonkwenkwe	1	2	3	4	5
163	Ndicinga into yokuba kulungile ukuba intombazana ithandane namakhwenkwe amaninzi	1	2	3	4	5
164	Indoda ayikwazi ukuzilawula xa inomnqweno wokwabelana ngezesondo	1	2	3	4	5
Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.		Vumelana kakhulu	Vumelana kancinane	Ndiphakathi nendawo	Andivumelani kancince	Andivumelani kakhulu
165	Ukuba intombazana ithi makusetyenziswe idyasi	1	2	3	4	5

	kamkhwenyana kwiqabanelayo, lonto ibonakalisa ukuba ayilithembanga iqabane layo					
166	Ngamanye amaxesha inkwenkwe inganezizathu ezivakalayo zokubetha intombazana ethandana nayo	1	2	3	4	5
167	Ndicinga kulungile ukuba inkwenkwe ithandane namantombazana amaninzi	1	2	3	4	5

Inxaso yasekuhlaleni

Biyela impendulo eyiyo

Ngezantsi yimiqolo emalunga nobudlelwane bakho nekhaya lakho kunye nabahlobo. Nceda ubonakalise ukuba UVUMELANA uphinde UNGAVUMELANI kangakanani nomqolo njengonyanisileyo. Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.

		Ndivumelana kakhulu	Ndiyavumelana	Andivumelani	Andivumelani kakhulu
168	Abahlobo bam bayandihlonipha	1	2	3	4
169	Usapho lwam lundikhathalele kakhulu	1	2	3	4
170	Andibalulekanga kwabanye	1	2	3	4
171	Usapho lwam lundithatha njengomntu obalulekileyo	1	2	3	4
172	Ndiyathandwa kakuhle	1	2	3	4
173	Ndingathembela kubahlobo bam	1	2	3	4
174	Ndiyathandwa lusapho lwam	1	2	3	4
	Phendula umqolo ngamnye ngokubiyela impendulo eyiyo.	Ndivumelana kakhulu	Ndiyavumelana	Andivumelani	Andivumelani kakhulu
175	Ndihlonitshiwe ngabanye abantu	1	2	3	4
176	Ndithandwa kakhulu lusapho lwam	1	2	3	4
177	Abahlobo bam abandikhathalelanga	1	2	3	4
178	Amalungu osapho lwam athembele kum	1	2	3	4
179	Ndithathwa njengomntu obalulekileyo	1	2	3	4
180	Andinothembela	1	2	3	4

	kusapho lwam xandifuna inkxaso				
181	Abantu bayandithanda	1	2	3	4
182	Ndiva unxibelelwano oluqinileyo nabahlobo bam	1	2	3	4
183	Abahlobo bam bandihoyile	1	2	3	4
184	Ndiziva ndibalulekile kwabanye abantu	1	2	3	4
185	Usapho lwam lundihlonipha nyani	1	2	3	4
186	Abahlobo bam kunye nam, omnye ubalulekile komnye	1	2	3	4
187	Ndiziva ndinendawo	1	2	3	4
188	Ukuba ndiyasweleka ngomso bambalwa abantu abangandikhumbula	1	2	3	4
189	Andiziva ndisondele kumalungu osapho lwam	1	2	3	4
190	Abahlobo bam nam kukhulu okuhle esenzelana kona	1	2	3	4

191	Ingaba unaye na umntu okuncedayo xa unengxaki?	Biyela ibenye kumqolo ngamnye
	Hayi	1
	Ewe, ngumntu omnye	Mama, tata, bhuti, sisi, titshala, umakhelwane, okanye umhlobo, umfundisi
	Ewe ngaphezulu komntu omnye	Mama, tata, bhuti, sisi, titshala, makhelwane okanye umhlobo, umfundisi

	Ungalucela xakunini uncedo?	Biyela ibenye kumqolo ngamnye
192	Andinolucela	1
193	Xa ndidinga ingcebiso, okanye umntu ongandinceda ngengxaki esesikolweni	Mama, tata, bhuti, sisi, titshala, makhelwane okanye umhlobo, umfundisi
194	Xa ndidinga ingcebiso, okanye umntu ozokundinceda ngengxaki esekhaya	Mama, tata, bhuti, sisi, titshala, makhelwane okanye umhlobo, umfundisi
195	Xa ndidinga ingcebiso, okanye umntu ongandinceda kwingxaki nomhlobo wam	Mama, tata, bhuti, sisi, titshala, makhelwane okanye umhlobo, umfundisi

196	Uzisebenzisile iinkonzo ezininzi (ngaphakathi nangaphandle kwesikolo) emva kokuya kwizifundo ezenziwa ngontanga bakho?	Biyela ibenye
	Ewe	1
	Hayi	2
	Andisebenzisi kwankonzo	3

Enkosi ngegalelo lakho lokuphando nzulu.

Addendum 4

Rapid Ethnography Schedule

Evaluating peer education in schools in the Western Cape Province: A longitudinal study

General Guidelines

- ✓ Introduce yourself to the school principal and secretary.
- ✓ Say what you're doing there, how you will spend some time in the school and some in the community.
- ✓ Make appointments to observe Grade 8's in their classrooms.
- ✓ Observe playgrounds, sport events, homes, community.
- ✓ Accessing a school, introducing and explaining yourself
- ✓ Dress smartly on the first day for school staff, more relaxed thereafter with principals permission.
- ✓ Speak to a range of students and teachers.
- ✓ Write up field notes carefully and thoroughly but not always in the presence of participants.
- ✓ Leaving the school by meeting with the principal and say when you'll be back for the next stage of the study.

Basic demographic information

1. How many students at the school?
2. How many students in a class?
3. What's the racial, class, language and gender makeup?
4. What are school facilities like? (Sports, computers etc)
5. How many teachers are there? What's the teacher: student ratio in various classes?
6. What's daily attendance like?
7. Poverty levels: Do children come to school hungry do they travel far distances to get to school, how do they travel to school?

Geographic location

8. Where is the school?
9. What's the main industry?
10. What's it like growing up in this community?

School climate

11. What are relationships between youth and teachers like? (Teacher support)
12. Is the school organised or not? What evidence is there?
13. What are relationships between youth and teachers like.' (Teacher support)
14. What kinds of academic support are evident?
15. What characterises the teaching style in the classroom?
16. What's the moral climate of the school like? Graffiti, toilets, safe spaces, respect?
17. What characterises discipline and punishment or behaviour management in the school?
18. Peer support: What are relationships like between youth themselves? Are there gender differences?
19. Attendance: Are children disciplined or not, do they come to school regularly for the whole day or play truant?
20. What is the atmosphere in the classroom like? Is there controlled discussion and general happiness or do teachers struggle to maintain control?

21. Playground: Is there fear or happiness at school? Are there lots of fights happening during break time/intervals? How is this behaviour managed? Is there a teacher on playground duty?
22. Do the teachers seem supportive of each other?
23. What's the school's academic performance like?

In the classroom

24. Who speaks, who listens?
25. What's the racial and gender makeup in the class you're observing?
26. Do youth listen to their teachers?
27. Are they engaged in the topic? Are they interested in learning or do they seem bored and restless?
28. When they don't listen, how are they disciplined?

Home

29. What kinds of homes do children live in – flats, huts, houses? What do we learn about poverty levels from this?
30. Is there running water and electricity in the house?
31. Are both parents present in the household? If not, who do the children live with? Who do children come home to after school?

Community

32. What are the prevailing views in the community (Christian, Muslim, traditional, modern)?
33. Are people working, employed? If they are unemployed what are they doing?
34. Is the community a 'village' i.e. other parents look out for children, or do neighbours to know each other?
35. Is there *ubuntu*, collectivism, neighbourliness?
36. Is there crime, lots of young people (women or men?) in jail, in gangs?

Streets (Youth culture)

37. What are the recreational practices and places of the children?
38. What are the streets like during the day; at night?
39. Is there lots of violence in the community?
40. Do the police patrol the streets?

Health and Social Support

41. Are there social services in the area? Is there a Child Welfare or a Family Support organisation?
42. Is there a library in the community? Is it well attended?

Peer education

43. Who are the teachers and students involved in peer education?

Addendum 5

Focus Group Discussion Schedules

Evaluating peer education in schools in the Western Cape Province: A longitudinal study

Focus Group Discussion Guide: Peer Learners

Instructions:

- *Introduce the purpose of the research*
- *Explain the research guidelines such as anonymity, confidentiality, group rules, length of interview, listening to each other*
- *These questions are intended to elicit more details and stories from adolescents that respond to the indicators we want to measure. Please use probes such as 'tell me more', 'what else', 'what else would you do?'*

Social Support, Alcohol and Drug Abuse and Decision-Making:

- 1) What kind of problems do young people have? What can we do about these problems?
- 2) How often do young people drink alcohol or take drugs? What kind of alcohol/what kind of drugs?
- 3) What does it feel like to make decisions?

Life Orientation Class and Exposure to Peer education:

- 4). In your opinion, where, or from whom do young people receive the most information about HIV/AIDS/sex/relationships? (Probe, in or outside of the classroom?)
- 5). How has the information in the peer education class been different from things you learn in Life Orientation class? Was there anything you learnt that you did not know before? (Probe, What do you talk about? Is it more comfortable? How did the material in the lessons make you feel?)
- 6). Which sessions did you find most useful? Least useful?

HIV Risk and Protection:

- 7). What are some of the things that young people may do that put them at risk of HIV infection?
- 8). Let's talk about how young people can protect themselves from getting HIV. (For young people in a sexual relationship too).

Healthy and Unhealthy Relationships:

- 9). What types of violence is common in young people's dating relationships? What leads to violence in dating relationships? Can you give an example?
- 10). How often or common is it for girls/boys to have many girlfriends/boyfriends at one time? Explain

Delaying and negotiating sex:

- 11). Not all young people your age are sexually active – what helps them to wait to have sex for the first time? What prevents them from waiting to have sex? Is it different for boys and girls?

- 12). If your partner wanted to have sex and you don't want to, what are some of the things you would say or do?
- 13). Sometimes, young people don't use condoms every time they have sex. What gets in the way of using condoms every time?

VCT:

- 14). Did the lessons cover VCT? Which one in particular? Is testing important? Why do you think young people don't go for testing?

Alcohol and Drug Abuse and Social Support:

- 15). How do you think drinking alcohol/taking drugs affects the sexual behaviour of young people?

- 16). Let us speak about some experiences when you have asked for help and gotten it – or asked for help and have not gotten what you needed.

Decision-making:

- 17). How has peer education helped you to make decisions?
- 18). Has a peer educator helped you with a difficult choice or decision? Tell me the story.

Peer Educators:

- 19). Do peer educators need to be older than you or the same age (from the same grade?) Why do you think this is important?
- 20). How are the peer educators different from the L/O teachers?
- 21). Was there ever a question that the peer educator could not answer? Tell me what happened and how did he/she handle the situation?

School climate:

- 22). What changes have occurred at school because of peer education? Are these positive or negative? What would happen if the programme didn't continue?
- 23). Is there anything else that you would like to tell us that you feel is important and was not covered in the discussion?

Thank you for participating in this discussion.

Addendum 6

Focus group schedule for Peer Educators

Evaluating peer education in schools in the Western Cape Province:

Instructions:

- *Introduce the purpose of the research*
- *Explain the Research Guidelines such as anonymity, confidentiality, group rules, length of the interview, listening to each other*
- *These questions are intended to elicit more details and stories from adolescents that respond to the indicators we want to measure. Please use probes such as 'tell me more', 'what else', 'what else would you do?'*

Programme evaluation, curriculum content, and peer educator roles

- 1) Please tell me about the programme in which you are involved and why it is offered at your school?
- 2) What do you think the goals/key messages of the programme are?
- 3) Let's discuss the content of the 'Listen Up' curriculum: what important issues does it deal with? Is it relevant to the youth in your community?
- 4) Which sessions were the most valuable or relevant to learners in the school?
- 5) What did you find the least useful of the sessions?
- 6) What changes would you have made to the curriculum? What's missing in the curriculum?

Peer Education

- 7) How did the material in the lessons make you feel? Please specify.
- 8) Which sessions did you most enjoy presenting? Which were most difficult? Why?
- 9) Which sessions did you feel poorly prepared for? Why?
- 10) What could have helped you to better perform as a peer educator? How does the school/ngo/teacher help you?
- 11) Can you tell me about a time a young person came to you asking for help? What was it for? What did you do? Did you feel trained enough to help him/her?
- 12) How valuable has the support from the adults been, either from teachers or ngo's ?

Personal impact

- 13) What has changed for you since becoming a peer educator? (Probe for benefits, negative impact). What new skills and abilities have you learnt since becoming a peer educator? How has this programme helped you to deal with your own struggles? How?
- 14) If this group had been available for you when you were in primary school, how would it have made a difference in your life?
- 15) Was there anything that you learnt that you did not know before?

Impact of programme on others

- 16) What praise/criticism have you heard about the peer education programme from staff and adolescents?
- 17) How did the youth behave before the programme compared to the way they act now – after attending the lessons. Give an example or story. (Probe, sexual behaviour, school attendance or performance, home life, etc)
- 18) In five years' time what do you think will be the results of this programme in the lives of the young people with whom you have worked?

Thank you for participating in this discussion.

Addendum 7

Second round focus group interview schedule: Peer Learners

Evaluating peer education in schools in the Western Cape Province: A longitudinal study

Introduction:

- *Explain the research guidelines such as anonymity, confidentiality, group rules, length of interview, listening to each other*
- *These questions are intended to elicit more details and stories from adolescents that respond to the indicators we want to measure. Please use probes such as 'tell me more', 'what else', 'what else would you do?'*

TIME DEEPENING STRATEGY QUESTIONS:

School context influence on social life:

1. How many of your friends are people that you met at your school?
2. Tell me about the people that you go to for help when something has happened to you? Is it someone in your family, community, or someone at school?
3. What do you think about the peer educators after the training? How do people/students use them for advice?
4. How has what you've learned at school about HIV and AIDS, relationships, etc. changed the way you behave at home? In your community?
5. Last time we spoke about drugs, alcohol, sex and HIV. What have you learned in your peer education programme that has changed the way you think about these?
6. What was your least favourite session since last time, your most favourite?

Sexual practice

7. How much do you think that what people learn at school changes people's decisions about when to start having sex? Who to have sex with? Whether to use a condom or not? Do you have any stories to tell about any of these?

Social agency

8. Tell me about whether you think that anything you've learned at school has changed the way you make decisions in your life, or made you feel like you are better able to deal with a particular situation, or handle situations better on your own?

Participation

9. How did the way that other people in your class reacted to the peer educators change the way that you thought about them? If yes, then how, do you have a story? If no, then why not?

MOST SIGNIFICANT CHANGE QUESTIONS

Changes in qualities of people's lives?

10. What about the things that you've learned in the peer education programme has made your life better? Or worse? Do you have any stories about this?

Changes in nature of people's participation

11. Did anything you learned in the peer education programme make you decide to get involved in helping other people in any way? If so, how?

Changes in sustainability of people's organisations & activities

(no appropriate question for learners, will ask peer educators something around this)

General MSC question

12. What do you think the most significant change in your life is from what you learned in the peer education classes? (ensure that this last question is a go around and get everyone to answer as a way of closing the focus group)

Thank you for participating in this discussion

Addendum 8

Second round focus group interview schedule: Peer Educators

Evaluating peer education in schools in the Western Cape Province: A longitudinal study

Instructions:

- *Remind participants about the purpose of the research*
- *Explain the research guidelines such as anonymity, confidentiality, group rules, length of interview, listening to each other*
- *These questions are intended to elicit more details and stories from adolescents that respond to the indicators we want to measure. Please use probes such as 'tell me more', 'what else', 'what else would you do?'*

TIME DEEPENING STRATEGY QUESTIONS:

School context influence on social life:

1. How has being a peer educator changed the way you behave at home? With your friends, In your community?

Sexual practice

2. How much do you think that being a peer educator has changed other learners decisions about when to start having sex? Who to have sex with? Whether to use a condom or not? Do you have any stories to tell about any of these?

Social agency

3. Tell me about whether you think that anything you've learned at school has changed the way you make decisions in your life, or made you feel like you are better able to deal with a particular situation, or handle situations better on your own?

Participation

4. How has being a peer educator changed who you make friends with at school?
5. Do you think that other people want to be peer educators because they saw you doing what you were doing? Why?
6. Would you want to carry on doing this programme and being a peer educator? Why?
7. How did the reactions of the learners change the way you felt about being a peer educator?

MOST SIGNIFICANT CHANGE QUESTIONS

Changes in qualities of people's lives?

8. How do you think that anything you have learned in the peer education programme has made your life better? Or worse? Do you have any stories about this?

Changes in nature of people's participation

9. How has what you've learned in the peer education programme influenced you in terms of wanting to help people?

Changes in sustainability of people's organisations & activities

10. Do you think that this program should continue? Why?
11. What would you change about it?
12. What was the best part of being a peer educator? And the worst?

13. What was your favourite session to present? What was your least favourite session to present?
14. Do you think that the learners you worked with changed in any way because of the programme? Do you have a story to tell about that?

General MSC question

15. What do you think the most significant change in your life is from what you learned by being a peer educator? (ensure that this last question is a go around and get everyone to answer as a way of closing the focus group)

Thank you for participating in this discussion

Addendum 9

Stakeholder interview guide: Implementing organisations: District Co-ordinators

Evaluating peer education in schools in the Western Cape Province: A longitudinal study

Introduction

Explain purpose of interview, confidentiality, consent form, permission to record.

1. Please explain your role in your organisation/institution?
2. What is the history of your involvement in peer education, and in this Western Cape Peer Education project?

Conceptual

3. Please explain your understanding of peer education? What is necessary for an effective programme?
4. Could you specifically comment on:
 - a. What are its desired outcomes?
 - b. The specific roles and responsibilities that peer educators should have?
 - c. The place of gender in peer education
 - d. The difference between what peer educators should discuss with their peers compared to professionals such as teachers, nurses, NGO workers?
 - e. The best place or venue for peer education (in school, after school, at church etc)
 - f. Handling referrals to external organisations such as clinics or local NGO'S
 - g. Advocacy role

Infrastructure

5. What is your opinion of the current peer education strategy being implemented in Western Cape schools?
6. In particular can you comment on the effectiveness of:
 - a. The curriculum?
 - b. The kinds of youth who are chosen to be peer educators?
 - c. The ages of youth who might benefit from peer education?
 - d. Adult supervision of peer educators?
 - e. The training and support that both peer educators and their supervisors receive?
 - f. The way in which the programme is implemented at schools (when, to whom, for how long, over what period)?
 - g. The support or encouragement it receives from gatekeepers such as parents, school heads, department officials etc.?
7. What do you consider to be the main barriers to running a successful programme?
8. In your opinion, how could the existing peer education programme currently being implemented in Western Cape schools, be improved?
 - a. Technical support
 - b. Implementing organisations
 - c. Training
 - d. Curriculum (relevance, content, length)

- e. Strategy for delivery in schools

Implementation

9. Describe your experience and communication in dealing with peer educators.
10. Do you meet with the peer educators?
 - a. If no, why don't you meet? Do you think it is important to meet? Why do you feel this way?
 - b. If yes, how often do you meet? How do you meet? What do you discuss? Do you think it is important to meet? Why do you feel this way?
11. Do you have suggestions on how they can be helped or supported to be better facilitators? What is the school doing extra to help peer educators?
12. Describe your experience and communication in dealing with school staff.
13. Do you meet with the contact teachers?
 - a. If no, why don't you meet? Do you think it is important to meet? Why do you feel this way?
 - b. If yes, how often do you meet? How do you meet (telephonically/face-to-face)? What do you discuss? Do you think it is important to meet? Why do you feel this way?
14. How are parents involved in the programme?
15. Can you identify your best practice and worst practice school. What factors or conditions make you define them as such?

Monitoring and Management

16. What are your (or your organisation's) responsibilities and duties in the Western Cape programme roll-out? (What support do you give to schools running peer education?)
17. If you could give the programme a score out of 10, what would your score be? Why would you give this programme that score?
18. How is the programme being monitored, and what is your role in its monitoring?
19. What are your thoughts about the monitoring? Please comment on:
 - a. Methods
 - b. Outcomes
 - c. Importance
20. Overall, in terms of monitoring and managing the programme, what roles should each of the following play?
 - a. Technical Advisor - CSPE
 - b. Implementing organisations – NGO'S
 - c. Funders - Global Fund on HIV/AIDS
 - d. Government officials - Department of Health and the Department of Education
 - e. Teachers - who are responsible for the peer education programme

f. School leadership - Principal/Deputy Principal

21. How is the programme managed? (Who provides strategic leadership? Who provides on-site management)?
22. Have you had the support from the Department of Education for your programme?
23. How has the peer education programme impacted on the peer educators, the peer learners and the broader community?

Thank you for participating in this interview.

Addendum 10

Stakeholder Interview Guide – Principal and Life Orientation teacher

Evaluating peer education in schools in the Western Cape Province: A longitudinal study

Instructions:

- *Introduce the purpose of the research and thank the respondent for her/his time and participation*
 - *Explain the research guidelines such as anonymity, confidentiality, and the length of interview*
- 1) What are your views about the programme?? (Probe. What is your understanding of peer education? Why should it be offered in school? How did it change the LO class? Is there anything that they did for the very first time?)
 - 2) How are the peer educators effective in the school? (Probe, Do they engage learners? Do you think the students are able to share their views in the peer education group?)
 - 3) What feedback have you got from learners?
 - 4) How do you feel about the curriculum, its structure and content? What other issues should it deal with? Why are these issues important for this programme to address?
 - 5) How has HIV/AIDS been dealt with by the community? (Probe). Are there other high risk sexual behaviours prominent in the community – (probe -teenage pregnancy)?
 - 6) What do you think the role of the school should be in educating young people about HIV/AIDS and sex? (Probe). Are there particular interventions on HIV and sex education and prevention? Are there additional services a school might offer (testing, supporting children who are caretakers of HIV positive parents)?
 - 7) What should the young people be taught about HIV/AIDS and sex? (Probe. Abstinence, condoms?)
 - 8) What are the religious or cultural influences within the school? How do you think the religious and/or cultural influence impact on the HIV and AIDs education programme? Do you think peer educators can effectively get these messages across?
 - 9) How is sex education an important component of the life orientation curriculum ?
 - 10) What have you learned from this whole process of peer education?
 - 11) How have parents and the broader community reacted to the programme?
 - 12) How would you describe the learners involved in peer education? (Probe – are they high academic achievers? Are they from vulnerable households?)
 - 13) How would you like this programme to be continued? Is it useful in its current form or are there revisions/changes you would like to see?
 - 14) Describe your experience and communication in dealing with peer educators. Do you have suggestions on how they can be helped or supported to be better facilitators?
 - 15) What is your role in the programme? (Probe, what are your responsibilities, duties?)
 - 16) If the programme were to end next year, what would happen?
 - 17) How can you help to make peer education sustainable in this school? Who else can help to make it sustainable?
 - 18) What changes or effects have you witnessed since the initiation of peer education at the school? (Probe for changes in behaviours of learners and peer educators, changes in overall school climate?)
 - 19) If you could give the programme a score out of 10, what would your score be? Why would you give this programme that score?
 - 20) What do you consider to be the main barriers or problems to the success of the programme? What do you think the solution would be?

Thank you for participating in this interview.

Addendum 11

Stakeholder interview guide: Funders and Government Officials.

Evaluating peer education in schools in the Western Cape Province: A longitudinal study

Introduction

Explain purpose of interview, confidentiality, consent form, permission to record.

1. Please explain your role in your organisation/institution?
2. What is the history of your involvement in peer education, and in this Western Cape Peer Education project?

Conceptual

3. Please explain your understanding of peer education? What is necessary for an effective programme?
4. Could you specifically comment on:
 - a. What are its desired outcomes?
 - b. The specific roles and responsibilities that peer educators should have?
 - c. The place of gender in peer education
 - d. The difference between what peer educators should discuss with their peers compared to professionals such as teachers, nurses, NGO workers?
 - e. The best place or venue for peer education (in school, after school, at church etc)
 - f. Handling referrals to external organisations such as clinics or local NGO'S
 - g. Advocacy role

Infrastructure

5. What is your opinion of the current peer education strategy being implemented in Western Cape schools?
6. In particular can you comment on the effectiveness of:
 - a. The curriculum?
 - b. The kinds of youth who are chosen to be peer educators?
 - c. The ages of youth who might benefit from peer education?
 - d. Adult supervision of peer educators?
 - e. The training and support that both peer educators and their supervisors receive?
 - f. The way in which the programme is implemented at schools (when, to whom, for how long, over what period)?
 - g. The support or encouragement it receives from gatekeepers such as parents, school heads, department officials etc.?
7. What do you consider to be the main barriers to running a successful programme?
8. In your opinion, how could the existing peer education programme currently being implemented in Western Cape schools, be improved?
 - a. Technical support
 - b. Implementing organisations
 - c. Training

- d. Curriculum (relevance, content, length)
- e. Strategy for delivery in schools

Monitoring and Management

- 9. What are your (or your organisation's) responsibilities and duties in the Western Cape programme roll-out? (What support do you give to schools running peer education?)
- 10. If you could give the programme a score out of 10, what would your score be? Why would you give this programme that score?
- 11. Can you identify the school that is doing best in terms of implementation and effectiveness?
- 12. Can you identify the school that is doing poorest?
- 13. What factors or conditions describe them as such?
- 14. How is the programme being monitored, and what is your role in its monitoring?
- 15. What are your thoughts about the monitoring?
 - a. Methods
 - b. Outcomes
 - c. Impact
 - d. Importance
- 16. Overall, in terms of monitoring and managing the programme, what roles should each of the following play?
 - a. Technical Advisor - CSPE
 - b. Implementing organisations – NGO'S
 - c. Funders - Global Fund on HIV/AIDS
 - d. Government officials - Department of Health and the Department of Education
 - e. Teachers - who are responsible for the peer education programme
 - f. School leadership - Principal/Deputy Principal

Thank you for participating in this interview.

Addendum 12

CONSENT FORMS Parents or Legal Guardians for Youth Questionnaire



Evaluating peer education in schools in the Western Cape Province: A longitudinal study

Who we are

Hello, my name is Benita. I am working for the Human Sciences Research Council.

What we are doing

We are conducting research in schools in the Western Cape on youth sexual health risks and prevention education. We are asking adolescents and all stakeholders about prevention education in schools and people's views of it and its impact on the lives of young people. We are asking youth in schools in different areas in the province to complete a questionnaire, and after combining all people's answers, we hope to learn more about youth sexual health risks of which will help us make useful recommendations to the relevant authorities and organisations about prevention education.

Your permission

We are asking your permission for your child to complete a questionnaire about their sexual health risks and prevention education. The questionnaire will take them 1 hour to complete. They will complete the questionnaire at school.

Please understand that **your child's participation is voluntary** and they are not being forced to take part in this study. The choice of whether they can participate or not, is yours alone. If you choose not to give your permission, you or your child will not be affected in any way whatsoever. If you agree to their participate, you may stop them participating in the research at any time and tell me that you don't want him or her to continue. If you do this there will also be no penalties to you or your child and you and your child will not be prejudiced in any way.

However, because your child is under the age of 18, we need to have your permission BEFORE he or she can participate in this study. There is a separate form for them to complete, sign and return.

Confidentiality

Your child's answers will be not be linked to their name. We will assign a pseudonym (another name) to them. Only the researchers will have access to the questionnaires. All identifying information will be kept in a locked file cabinet and will not be available to others.

Risks/discomforts

Some questions may be of a personal and/or sensitive nature. If a question makes your child feel sad or upset, they do not have to answer it. If they need any assistance later, a professional person can be reached at [Childline on 08000 55 555, a free call from a landline.](tel:0800055555)

Benefits

There are no immediate benefits to you or your child from allowing them to participate in this study. However, this study will be extremely helpful to us in making recommendations to the

Western Cape Department of Education that we hope will promote prevention education in schools and its role in the lives of adolescents.

Who to contact if you have been harmed or have any concerns

This research has been approved by the HSRC Research Ethics Committee. If you have any complaints about ethical aspects of the research or feel that you have been harmed in any way by participating in this study, please call the HSRC's tollfree ethics hotline 0800 212 123 (tollfree when phoned from a landline from within South Africa) or the REC Administrator, Khutso Sithole, at the Human Sciences Research Council on 012 302 2012, e-mail ksithole@hsrc.ac.za / research.ethics@hsrc.ac.za.

If you have concerns or questions about the research you may call the following people:

Dr. Sharlene Swartz (Principal Investigator) 021-466-7874

Dr. Benita Moolman (Project Manager) 021-466-7956

**CONSENT FORM Parents or Legal Guardians for Youth
Questionnaire**



**Evaluating peer education in schools in the Western Cape Province:
A longitudinal study**

CONSENT

I hereby give permission for my child to participate in research on prevention education its role in the lives of young people. I understand that I am allowing my child to participate freely and without forcing them in any way to do so. I also understand that my child can stop participating at any point should they not want to continue and that this decision will not in any way affect my child negatively.

I understand that this is a research project whose purpose is not necessarily to benefit me or my child personally in the immediate or short term.

I understand that this consent form will not be linked to the questionnaire, and that my child's participation will remain confidential.

I have received the telephone number of a person to contact should I or my child need to speak about any issues that may arise from my child's participation

I understand that the information collected during this research project will be recorded, stored electronically in a secure environment and used for research purposes now or at a later date.

I understand that if at all possible, feedback will be given to my community on the results of the completed research.

.....
Signature of participant

.....
Date

Addendum 13

KONSENT VORM Vir Ouers en Voogde Vir Die Jeug Vraelys



Evalueering van Gelyks Opvoeding in skole in die Wes – Kaap 'n Longitudinale Studie

Wie is ons?

Hallo, my naam is Benita. Ek werk vir die Human Science Research Council (HSRC).

Wat doen ons?

Ons is besig met 'n studie in skole in die Wes-Kaap oor seksuele gesondheidsrisiko's onder die jeug en hoe om hierdie probleem te voorkom. Ons vra adollesente en alle belangstellendes oor opvoeding oor voorkoming in skole en hoe jong mense se lewens daardeur beïnvloed word. Jeug in verskillende areas in die provinsie word benader om 'n vraelys te voltooi. Alle antwoorde word dan gekombineer, en op hierdie wyse leer ons meer oor die seksuele risikos wat die jeug raak. Dit help ons ook om waardevolle aanbevelings te maak aan die relevante owerhede en organisasies wie in die area van voorkomings opvoeding werk.

U Konsent

Ons vra u toestemming vir u kind om 'n vraelys te voltooi oor hulle eie seksuele gesondheids risiko's en ook oor voorkomings opvoeding wat hulle ontvang. Die vraelys sal minstens 1uur neem om te voltooi. Die voltooiing van die vraelys vind na skool plaas.

Verstaan asseblief dat u kind se deelname vrywillig is en dat hulle nie gedwing word om in hierdie studie deel te neem nie. Die keuse of hulle mag deelneem of nie, berus by u. Indien u sou toestemming weier, sal dit geensins u kind negatief affekteer nie. Indien u toestemming sou gee, mag u enige tyd hul deelname aan die proses stop sit. Indien u dit sou doen, sal u kind op geen manier gepenaliseer word of bevooroordeel word nie.

Omdat u kind egter onder die ouderdom van 18 is, benodig ons u toestemming **VOORDAT** hy of sy in hierdie studie mag deelneem. Daar is 'n aparte vorm wat deur hulle voltooi moet word Hierdie vorm moet geteken word en aan ons terug besorg word.

Vertroulikheid

U kind se antwoorde sal nie met hul name verbind word nie. Elke kind sal 'n skuilnaam kry. Net die navorsers het toegang tot die vraelyste. Alle informasie sal in 'n geslote kabinet gehou word, en hierdie kabinet sal **NIE** toeganklik wees vir ander mense nie. Sommige vrae is persoonlik of sensitief van aard. Indien 'n vraag u kind onstel, hoef hulle dit nie te antwoord nie. Indien hulle op 'n later stadium hulp nodig het, kan 'n professionele persoon geraadpleeg word by Childline, skakel by 08000 55 555 (dit is 'n tolvry nommer indien hulle vanaf 'n landlyn wil skakel)

Voordele

Daar is geen onmiddellike voordele betrokke vir u of u kind indien hulle in die studie deelneem nie. Hierdie studie sal egter van groot hulp vir ons wees indien ons enige voorstelle wil maak aan die WesKaapse Onderwys Departement. Ons hoop om daardeur voorkoming in ons skole te bemiddel so wel as in die lewens van ons adollesente.

Wie kan u kontak indien u enigsins benadeel was of as u enige bekommernisse het?

Hierdie studie dra die goedkeuring weg van die Human Science Research Council Navorsings Etiese Komitee. Indien u enige klagtes het oor enige etiese aspekte van die navorsing, of indien u voel dat u op enige manier benadeel was deur deel te neem aan die studie, skakel asseblief **0800 212 123** (tolvry indien van 'n landlyn af binne in SA), of skakel **Khutso Sithole by 012 302 2012**, of e-pos ksithole@hsrc.ac.za /research.ethics@hsrc.ac.za

Indien U enige kwelling of navrae het, u mag ook die volgende persone kontak:

Dr. Sharlene Swartz (Hoof Navorsers) 021 466 7874

Dr. Benita Moolman (Projek Bestuurder) 021 466 7956

KONSENT VORM Vir Ouers en Voogde Vir Die Jeug Vraelys



Evalueering van Gelyks Opvoeding in skole in die Wes - Kaap 'n Longitudinale Studie

KONSENT

Hiermee gee ek toestemming dat my kind _____ mag deelneem in navorsing oor Portuur Opvoeding en die rol wat dit speel in die lewens van jong mense. Ek verstaan dat ek my kind vrywillig toelaat om deel te neem sonder om hulle te forseer. Ek verstaan ook dat my kind enige tyd die proses kan stop sit sonder om hom / haar negatief te beïnvloed.

Ek verstaan dat hierdie 'n navorsingsprojek is en die doel is nie noodwendig om my of my kind persoonlik in die kort termyn of oor 'n langer termyn sal bevoordeel nie.

Ek verstaan dat hierdie toestemmingsvorm nie aan die vraelys aangeheg sal word nie en dat my kind se deelname vertroulik sal bly.

Telefoon nommers van 'n kontak person was aan my voorsien indien ek of my kind dit nodig vind aan met die benoemde person te praat oor moontlike voorvalle.

Ek verstaan dat die inligting wat versamel word, aangeteken sal word, elektronies geberg sal word in 'n veilige omgewing en dat dit gebruik sal word vir navorsings doeleindes, nou of op 'n later datum.

Ek verstaan dat indien moontlik, terugvoering aan my gemeenskap geage sal word oor die resultate van die voltooide navorsing.

.....

.....

Handtekening van deelnemer / ouer

Datum

Addendum 14

IFOMU YESIVUMO yabazali okanye abalondolozisi babantwana ngokusemthethweni yempephamibuzo yabantu abatsha



Uphando ngokufunda koontanga kwezikolo zaseNtshona Koloni: Uphando lwexesha elide

Singobani

Molweni, igama lam ngu Benita ndixelengela iqumrhu elibizwa ngokuba yi Human Sciences Research Council.

Senzani

Senza uphando kwizikolo eziseNtshona Koloni malunga nemingcipheko yezempilo kubantu abatsha ethi ize ngokwabelana ngesondo kunye nezifundo ngezothintelo. Sibuzwa abasafikisayo kunye nababandakanyekayo malunga nezifundo ngezothintelo ezikolweni kunye nembono yabantu ngayo nenxaxheba yayo kubomi babantu abatsha. Sicela abantu abatsha ezikolweni kwindawo ezahlukeneyo zephondo ukuba bagcwalise impepha mibuzo, emveni kokudibanisa zonke iimpindulo zabantu, sinethemba lokufunda nzulu malunga nemingcipheko ezangokwabelana ngesondo ezakusinceda ekuziseni iingcebiso ekuzizo kwabasemagunyeni nakwimibutho efundisa ngothintelo.

Imvume yakho

Sicela imvume yakho yokuba umntwana wakho agcwalise impepha-mibuzo emalunga nomnciphe kwezempilo ngenxa yezesondo kunye nezifundo ngothintelo. Izakubathatha ithuba elingangeyure ukuyigcwalisa impepha-mibuzo. Bazakuyigcwalisela impepha-mibuzo esikolweni.

Nceda uqonde ukuba **ukuthabatha inxaxheba komntwana wakho** kungokuzikhethela kwaye abanyanzelwa ukuba athabathe inxaxheba koluphando. Ukukhetha ukuba bangayithabatha inxaxheba okanye bangayithabathi, lonto inikwa wena weda. Ukuba uyabavumela ukuba bathabathe inxaxheba, ungabayekisa ukuthabatha inxaxheba koluphando nanini na kwaye undixelele ukuba awufuni baqhubeleke. Xa uthe wayenza lonto akuzukubana sohlwayo kuwe noba kukumntwana wakho kwaye umntwana wakho akazukuvula ngendlela embi nangayiphi na indlela.

Ngenxa yokuba umntwana wakho ungaphantsi kweminyaka elishumi elinesibhozo, sifuna imvume yakho PHAMBI kokuba athabathe inxaxheba koluphando. Ikhona ifomu eyahlukileyo abazakuyigcwalisa, bayityikitye baze bayibuyise.

Imfihlo

Iimpendulo zomntwana wakho azizukunxulunyaniswa negama lakhe. Zizakumnika elinye igama. Ngabaphandi kuphela abazakuzibona iimpepha-mibuzo. Zonke iinkcukacha ezimchazayo umntu zizakugcinwa kumgcini miqulu kwaye azizukufumaneka kwabanye abantu.

Umngcipheko/ukungakhululeki

Eminye yemibuzo ingafuna iimpendulo eziyimfihlo kwaye ezibuthathaka. Ukuba umbuzo uyamkhathazo okanye uyamphazamisa umntwana wakho, akunyanzelekanga ukuba awuphendule. Ukuba udinga ukuncedwa, umntu oqeqeshelwe lonto angafumaneka kwinombolo yomnxeba elandelay(Umbutho ongekho phantsi korhulumente osekuhlaleni) wena okanye yena angafowunela [kwinkonzo yezoncedo lwabantwana ku 08000 55 555, ngumnxeba ongahlawulelwayo xa ufowona ngomnxeba wasendlini.](tel:0800055555)

Inzuzo

Akukhu nzuzo izakufunyanwa nguwe okanye ngumntwana wakho ngenxa yokuba umvumele ukuba athabathe inxaxheba koluphando. Kodwa oluphando luzakubaluncedo kuthi ekunikeni iingcebiso kwiSebe lezeMfundo apha eNtshona Koloni ezizakunceda ekukhuthazeni uthintelo ezikolweni nakubomi babasafikisayo.

Ungaqhakamshelana nabani ukuba uhlukunyeziwe okanye xa unamaxhala onawo

Oluphando lupasiswe liqumrhu elijongene nemigaqo yophando ekhusela amalungelo abathabathi nxaxheba lase HSRC. Ukuba unazo izikhalazo malunga namalungelo wakho koluphando okanye uziva uhlukumezekile nangeyiphi na indlela ngenxa yokuthabatha inxaxheba kwam koluphando, nceda tsalela umnxeba ongahlawulelwayo wase HSRC omayelana nemigaqo yokuziphatha kwabaphandi ukukhusela amalungelo abathabathi nxaxheba ku 08000 212 123 (ngumnxeba ongahlawulelwayo xa uwutsalela ngomnxeba wasendlini walapha eMzantsi Afrika) okanye umququzeleli wase REC ongu Khutso Sithole, kwiqumrhu elibizwa ngoba yi Human Sciences Research Council ku 012 302 2012, [e-mail ksithole@hsrc.ac.za / research.ethics@hsrc.ac.za.](mailto:ksithole@hsrc.ac.za)

Ukuba kukhona izinto ezikuxhalabisayo okanye malunga nophando ungatsalela umnxeba ababalandelayo:

Gqirha Sharlene Swartz (Umphandi oyintloko) 021-466-7874

Gqirha Benita Moolman (Manejala woPhando) 021-466-7956

**IFOMU YESIVUMO yabazali okanye abalondoloz
babantwana ngokusemthethweni yempephamibuzo
yabantu abatsha**



**Uphando ngokufunda koontanga kwezikolo zaseNtshona Koloni:
Uphando lwexesha elide**

ISIVUMO

Ndiyayinika imvume yokuba umntwana wam ongu..... ukuba athabathe inxaxheba kuphando ngemfundo yezokuthintela nenxaxheba yayo kubomi babantu abatsha. Ndiyayiqonda into yokuba ndiyamvumela umntwana wam ukuba athabathe inxaxheba ngokukhululeka kwaye ngaphandle kokumnyanzela nangayiphi na indlela. Ndiyayiqonda kananjalo into yokuba umntwana wam angayeka ukuthabatha inxaxheba koluphando nanini na xa engafuni ukuqhubeleka kwaye esosigqibo asizukumchaphazela ngendlela embi umntwana wam.

Ndiyayiqonda into yokuba oluluphando olunjongo yalo eyingekukuxhamlisa mna siqu okanye umntwana wam ngoku okanye kwakufuphi nje.

Ndiyayiqonda into yokuba le fomu yesivumo sokuthabatha inxaxheba ayizukunxulunyaniswa nempephamibuzo, kwaye inxaxheba yomntwana wam izohlala iyimfihlo.

Ndiyifumene inombolo yomnxeba yomntu endingaqhakamshelana naye ukuba kukhona into engumvuka koludliwanondlebe endingathi mna okanye umntwana wam afune ukuthetha ngayo. Ndiyayiqonda into yokuba ulwazi oluqokelelwe koluphando luzakugcinwa, lugcinwe kubuxhakaxhaka belixesha kwindawo ekhuselekileyo ngenjongo zokuba isetyenziswe kuphando ngoku okanye ngexesha elizayo.

Ndiyayiqonda into yokuba ukuba kuyenzeka, ingxelo ngophando izakubuyiselwa ekuhlaleni malunga neziphumo zoluphando xasele lufikelele esiphelweni.

.....
Utyikityo lomthabathi nxaxheba/umzali

.....
Umhla

Addendum 15

ASSENT FORM - Youth Questionnaire



Evaluating peer education in schools in the Western Cape Province: A longitudinal study

Who we are

Hello, my name is Benita. I am working for the Human Sciences Research Council.

What we are doing

We are conducting research on prevention education in schools in the Western Cape and its impact on youth sexual health risks, behaviour and attitudes. We are conducting a preliminary study with all stakeholders and key community role players to investigate the programme and people's views of the programme and its impact on the lives of youth. We are talking with other young people in schools in different areas in the province, and after combining all the people's answers, we hope to learn more about youth sexual health behaviour and attitudes of which will help us make useful recommendations to the relevant authorities and organisations.

Your participation

We are asking you whether you would complete a questionnaire about your sexual health knowledge and attitudes. The questionnaire will take 1 hour to complete.

Please understand that **your participation is voluntary** and you are not being forced to take part in this study. The choice of whether to participate or not, is yours alone. If you choose not to take part, you will not be affected in any way whatsoever. If you agree to participate, you may stop participating in the research at any time and tell me that you don't want to continue. If you do this there will also be no penalties and you will not be prejudiced in any way.

However, because you are under the age of 18, we need to have permission from your parent or guardian BEFORE you to participate in this study. There is a separate form for them to complete, sign and return.

Confidentiality

I will not be recording your name anywhere and no one will be able to link you to the answers you give. We will assign a pseudonym (another name) to you. Only the researchers will have access to the questionnaires. All identifying information will be kept in a locked file cabinet and will not be available to others.

Risks/discomforts

I will make every effort to keep what you say confidential. However, while I ask that other members of the discussion group keep what is said confidential, I cannot guarantee that they will do so. Thus you need to be aware of what you disclose to the group. Another risk to confidentiality is that if you tell me about anyone who is mistreating or abusing a young person, I am required by law to report it to someone who can take the appropriate action. Some questions may be of a personal and/or sensitive nature. If a question makes you feel sad or upset, you do not have to answer it. If you need to speak with anyone after we have left, a

professional person can be reached at the following telephone number, Childline on 08000 55 555, a free call from a landline.

Risks/discomforts

Some questions may be of a personal and/or sensitive nature. If a question makes you feel sad or upset, you do not have to answer it. If you need any assistance later. If you need to speak with anyone after we have left, a professional person can be reached at phone Childline on 08000 55 555, a free call from a landline.

Benefits

There are no immediate benefits to you from participating in this study. However, this study will be extremely helpful to us in making recommendations to the Western Cape Department of Education that we hope will promote peer education in schools and its role in the lives of youth.

Who to contact if you have been harmed or have any concerns

This research has been approved by the HSRC Research Ethics Committee. If you have any complaints about ethical aspects of the research or feel that you have been harmed in any way by participating in this study, please call the HSRC's tollfree ethics hotline 0800 212 123 (tollfree when phoned from a landline from within South Africa) or the REC Administrator, Khutso Sithole, at the Human Sciences Research Council on 012 302 2012, e-mail ksithole@hsrc.ac.za / research.ethics@hsrc.ac.za.

If you have concerns or questions about the research you may call the following people:

Dr. Sharlene Swartz (Principal Investigator)	021-466-7874
Dr. Benita Moolman (Project Manager)	021-466-7956

ASSENT FORM - Youth Questionnaire



**Evaluating peer education in schools in the Western Cape Province:
A longitudinal study**

ASSENT

Ihereby agree to participate in research on peer education and its role in the lives of youth. I understand that I am participating freely and without being forced in any way to do so. I also understand that I can stop participating at any point should I not want to continue and that this decision will not in any way affect me negatively.

I understand that this is a research project whose purpose is not necessarily to benefit me personally in the immediate or short term.

I understand that this assent form will not be linked to the questionnaire, and that my participation will remain confidential.

I understand that if at all possible, feedback will be given to my community on the results of the completed research.

I understand that the information collected during this research project will be recorded, stored electronically in a secure environment and used for research purposes now or at a later date.

I have received the telephone number of a person to contact should I need to speak about any issues that may arise in this interview.

My parent/guardian has completed and signed a consent form giving me permission to participate.

.....

Signature of participant

.....

Date

Addendum 16

TOESTEMMING/BEVESTING VORM: Jeug Vraestel



Evalueering van Pontuur Onderig in skole in die Wes - Kaap 'n Longitudinale studie

Wie is ons?

Hallo, my naam is Benita. Ek werk vir die Human Science Research Council.

Wat doen ons?

Ons is besig met 'n studie in skole in die Wes-Kaap oor seksuele gesondheidsrisiko's onder die jeug en hoe om hierdie probleem te voorkom. Ons vra adollesente en alle belangstellendes oor opvoeding oor voorkoming in skole en hoe jong mense se lewens beïnvloed word daardeur. Jeug in verskillende areas in die provinsie word genader om 'n vraelys te voltooi. Alle antwoorde word dan gekombineer, en op hierdie wyse leer ons meer oor die seksuele risikos wat die jeug raak. Dit help ons ook om waardevolle aanbevelings te maak aan die relevante owerhede en organisasies wie in die area van voorkomings opvoeding werk.

U Deelname

Ons vra u deelname om 'n vraelys te voltooi oor jou eie seksuele gesondheids risiko's. Die vraelys sal minstens 1uur neem om te voltooi.

Verstaan asseblief dat u deelname vrywillig is en dat jy nie geforseer word om in hierdie studie deel te neem nie. Die keuse om te deelneem of nie, is u sin alleen. Indien jy jou toestemming weier, sal dit geensins jou negatief affekteer nie. Indien u deelneem, mag u enige tyd jou deelname aan die proses stop sit. Indien jy dit sou doen, sal jy op geen manier gepenaliseer word of bevooroordeel word nie.

Omdat jy onder die ouderdom van 18 is, benodig ons die toestemming van jou ouer **VOORDAT** jy in hierdie studie mag deel neem. Daar is 'n aparte vorm wat deur hulle voltooi moet word Hierdie vorm moet geteken word en aan ons terug besorg word.

Vertroulikheid

Ons sal nie jou naam enige plek afskryf nie en niemand sal jou naam aan enige van die vroe link nie. Elke kind sal 'n skuilnaam kry. Net die navorsers het toegang tot die vraelyste. Alle informasie sal in 'n geslote kabinet gehou word, en hierdie kabinet sal **NIE** toeganklik wees vir ander mense nie.

Ongerieflikheid

Ons sal seker maak om al jou informasie konfidensiaal te hou. Sommige vroe is persoonlik of sensitief van aard. Indien 'n vraag u onstel, hoef jy dit nie te antwoord nie. Indien jy op 'n later stadium hulp nodig het, kan 'n professionele persoon geraadpleeg word by die volgende telefoon nommer. Hulle kan ook Childline skakel by 08000 55 555 (hierdie nommer is gratis indien hulle skakel vanaf 'n landlyn). Ons is by legaslasie verbind om kindermishandeling te rapporteer indien ons van enige saak hoor.

Voordele

Daar is geen onmiddellike voordele betrokke vir jou nie indien jy in die studie deelneem nie. Hierdie studie sal egter van groot hulp vir ons wees indien ons enige voorstelle wil maak aan die WesKaapse Onderwys Departement. Ons hoop om daardeur voorkoming in ons skole te bemiddel en ook in die lewens van ons adolessente.

Wie kan u kontak indien u benadeel was of as u enige bekommernisse het?

Hierdie studie dra die goedkeuring weg van die Human Science Research Council Navorsings Etiese Komitee. Indien u enige klagtes het oor enige etiese aspekte van die navorsing, of indien u voel dat u op enige manier benadeel was deur deel te neem aan die studie, skakel asseblief die by **0800 212 123** (tolvry indien van 'n landlyn af binne in SA), of skakel **Khutso Sithole by 012 302 2012**, of e-pos ksithole@hsrc.ac.za / research.ethics@hsrc.ac.za

U mag ook die volgende persone kontak met enige van u bekommernisse of vrae oor die navorsing:

Dr. Sharlene Swartz (Hoof Navorsers) 021 466 7874

Dr. Benita Moolman (Projek Bestuurder) 021 466 7956



**Evalueering van Pontuur Onderig in skole in die Wes - Kaap
'n Longitudinale studie**

BEVESTING

Ek, _____ stem saam dat ek sal deelneem in navorsing oor voorkomings opvoeding en die rol wat dit speel in die lewens van jong mense. Ek verstaan dat ek vrywillig toelaat om deel te neem sonder om geforseer te word deur enige persoon. Ek verstaan ook dat ek enige tyd die proses kan stop sit sonder om dit my te negatief te beïnvloed.

Ek verstaan dat hierdie 'n navorsingsprojek is en die doel is nie noodwendig om my persoonlik in die kort termyn of oor 'n langer termyn sal bevoordeel nie.

Ek verstaan dat hierdie bevestig vorm nie aan die vraelys gekoppel sal word nie en dat my deelname vertroulik sal bly.

Ek het telefoon nommers of 'n persoon om te kontak indien ek dit nodig vind om te praat indien enigiets sou voorval.

Ek verstaan dat die inligting wat versamel word, aangeteken sal word, elektronies geberg sal word in 'n veilige omgewing en dat dit gebruik sal word vir navorsings doeleindes, nou of op 'n later datum.

Ek verstaan dat indien dit moontlik is, terugvoering aan my gemeenskap gedoen sal word oor die resultate van die voltooide navorsing.

My ouer het n toestemming vorm ingevul en het n toestemming vorm geteken om my te laat deelneem in hierdie navorsings projek.

.....

.....

Handtekening van deelnemer

Datum

Addendum 17

IFOMU YESIVUMO impepha mibuzo yabantu abatsha



Uphando ngokufunda koontanga kwezikolo zaseNtshona Koloni: Uphando lwexesha elide

Singobani

Molweni, igama lam ndingu.....ndixelengela iqumrhu elibizwa ngokuba yi Human Sciences Research Council.

Senzani

Senza uphando kwizikolo eziseNtshona Koloni malunga nemingcipheko yezempilo kubantu abatsha ethi ize ngokwabelana ngesondo kunye nezifundo ngezothintelo. Sibuzwa abasafikisayo kunye nababandakanyekayo malunga nezifundo ngezothintelo ezikolweni kunye nembono yabantu ngayo nenxaxheba yayo kubomi babantu abatsha. Sicela abantu abatsha ezikolweni kwindawo ezahlukeneyo zephondo ukuba bagcwalise impepha mibuzo, emveni kokudibanisa zonke iimpindulo zabantu, sinethemba lokufunda nzulu malunga nemingcipheko ezangokwabelana ngesondo ezakusinceda ekuziseni iingcebiso ekuzizo kwabasemagunyeni nakwimibutho efundisa ngothintelo.

Imvume yakho

Sicela imvume yakho yokuba ugcwalise impepha-mibuzo emalunga nomnciphe kwezempilo ngenxa yezesondo kunye nezifundo ngothintelo. Izakubathatha ithuba elingangeyure ukuyigcwalisa impepha-mibuzo.

Nceda uqonde ukuba **ukuthabatha inxaxheba kwakho** kungokuzikhethela kwaye awunyanzelwa ukuba uthabathe inxaxheba koluphando. Ukukhetha ukuba uyayithabatha inxaxheba okanye awuyithabathi, lonto inikwa wena weda. Ukuba uyavuma ukuba uthabathe inxaxheba, ungayeka ukuthabatha inxaxheba koluphando nanini na kwaye undixelele ukuba awufuni ukuba uqhubeleke. Xa uthe wayenza lonto akuzukubana sohlwayo kuwe awuzukavela ngendlela embi nangayiphi na indlela.

Kuba ungaphantsi kweminyaka engama 18, sicela ukufumana imvume kumzali okanye kumgcini wakho PHAMBI kokuba uthabathe inxaxheba kwesisifundo. Kune Fomu abazakuyigcwalisa bayityikitye ze uyibuyise.

Imfihlo

Asizikulitshicilela igama lakho naphi na yaye impendulo zakho azizukunxulunyaniswa negama lakho. Uzakunikwa elinye igama. Ngabaphandi kuphela abazakuzibona iimpepha-mibuzo. Zonke iinkcukacha ezimchazayo umntu zizakugcinwa kumgcini miqulu kwaye azizukufumaneka kwabanye abantu.

Umngcipheko/ukungakhululeki

Ndizakuzenza inzame zokukugcina kuyimfihlelo konke okuthethayo. Noxa ndizakuwazisa amanye amalungu eliqela sifunda kunye nalo andinokuqinisekisa ukuba bayokwenza njalo. Ngoko ke kufanele uyithathele inqalelo into othi uyithethe phaya kubo. Enye into engumngcipheko malunga nemfihlelo, yeyokuba kusionyaziso somthetho ukuba kukhona umntu omtsha ophatheke kabi okanye ohlukunyezwayo ukuba kube namanyathelo athatyathwayo. Eminye yemibuzo ingafuna iimpindulo eziyimfihlo kwaye ezibuthathaka. Ukuba umbuzo uyakukhathaza okanye uyakuphazamisa akunyanzelekanga ukuba uwuphendule. Ukuba ngaba ufuna ukuthi uthethe nomntu oqeqeshiweyo emveni kokuba sihambile, ungatsalela umnxeba [kwinkonzo yezoncedo lwabantwana ku 08000 55 555, ngumnxeba ongahlawulelwayo xa ufowna ngomxeba wasendlini.](tel:0800055555)

Umngcipheko/ukungakhululeki

Eminye yemibuzo ingafuna iimpindulo eziyimfihlo kwaye ezibuthathaka. Ukuba umbuzo uyakukhathaza okanye uyakuphazamisa akunyanzelekanga ukuba uwuphendule. Ukuba ufuna uncedo emveni kwexesha. Ukuba ngaba ufuna ukuthi uthethe nomntu oqeqeshiweyo emveni kokuba sihambile, ungatsalela umnxeba [kwinkonzo yezoncedo lwabantwana ku 08000 55 555, ngumnxeba ongahlawulelwayo xa ufowna ngomxeba wasendlini.](tel:0800055555)

Inzuzo

Akukhu nzuzo izakufunyanwa nguwe ngokukhawulezileyo. Kodwa oluphando luzakubaluncedo kuthi ekunikeni iingcebiso kwiSebe lezeMfundo apha eNtshona Koloni ngethemba lokuba lokhuthaza iphulo lokufundiswa ngoontanga nenxaxheba oluyidlalayo kulutsha

Ungaqhakamshelana nabani ukuba uhlukunyeziwe okanye xa unamaxhala onawo

Olushando lupasiswe liqumrhu elijongene nemigaqo yophando ekhusela amalungelo abathabathi nxaxheba lase HSRC. Ukuba unazo izikhalazo malunga namalungelo wakho kolushando okanye uziva uhlukumezekile nangeyiphi na indlela ngenxa yokuthabatha inxaxheba kwam kolushando, nceda tsalela umnxeba ongahlawulelwayo wase HSRC omayelana nemigaqo yokuziphatha kwabaphandi ukukhusela amalungelo abathabathi nxaxheba ku 08000 212 123 (ngumnxeba ongahlawulelwayo xa uwutsalela ngomnxeba wasendlini walapha eMzantsi Afrika) okanye umququzeleli wase REC ongu Khutso Sithole, kwiqumrhu elibizwa ngokuba yi Human Sciences Research Council ku 012 302 2012, [e-mail ksithole@hsrc.ac.za / research.ethics@hsrc.ac.za.](mailto:ksithole@hsrc.ac.za)

Ukuba kukhona izinto ezikuxhalabisayo okanye malunga nophando ungatsalela umnxeba ababalandelayo:

Gqirha Sharlene Swartz (Umphandi oyintloko) 021-466-7874

Gqirha Benita Moolman (Manejala woPhando) 021-466-7956

IFOMU YESIVUMO

Impepha mibuzo yabantu abatsha



Uphando ngokufunda koontanga kwezikolo zaseNtshona Koloni: Uphando lwexesha elide

ISIVUMO

Mna.....ndiyavuma ukuthabatha inxaxheba kuphando olumalunga nokufunda kuntanga wakho nenxaxheba yalo kubomi babantu abatsha. Ndiyayiqonda into yokuba ndiyithatha inxaxheba ngokukhululeka nangaphandle kokunganyanzelwa nangeyiphi na indlela. Ndiyayiqonda kananjalo into yokuba ndingayeka nanini na ukuthabatha inxaxheba xandingafuni kuqhubeleka ndenjenjalo kwaye esosigqibo asizukundichaphazela ngendlela embi,

Ndiyayiqonda into yokuba oluluphando onjongo yalo eyingekukuxhamlisa mna siqu ngoku okanye kwakufuphi nje.

Ndiyayiqonda into yokuba le fomu yesivumo sokuthabatha inxaxheba ayizukunxulunyaniswa nempepha mibuzo, kwaye inxaxheba yam izohlala iyimfihlo.

Ndiyayiqonda into yokuba ukuba kuyenzeka, ingxelo ngophando izakubuyiselwa ekuhlaleni malunga neziphumo zoluphando xasele lufikelele esiphelweni.

Ndiyayiqonda into yokuba ulwazi oluqokelelwe koluphando luzakugcinwa, lugcinwe kubuxhakaxhaka belixesha kwindawo ekhuselekileyo ngenjongo zokuba isetyenziswe kuphando ngoku okanye ngexesha elizayo.

Ndiyifumene inombolo yomnxeba yomntu endingaqhagamshelana naye ukuba kukhona into engavuka koludliwanondlebe endingathi ndifune ukuthetha ngayo.

Umzalali/umlondolosi wam uyigcwalisile waze wayitykitya ifomu yesivumo endinika ilungelo lokuthabatha inxaxheba.

.....
Utyikityo lomthabathi nxaxheba

.....
Umhla

Addendum 18

CONSENT FORM Parents or Legal Guardians for Youth Focus Group Discussions



Evaluating peer education in schools in the Western Cape Province: A longitudinal study

Who we are

Hello, my name is Benita Moolman, I am working for the Human Sciences Research Council.

What we are doing

We are conducting research on peer education in schools in the Western Cape and its impact on youth sexual health behaviour and attitudes. We are interested in finding out more about how peer education works in the school setting and the strengths and weaknesses of the programme. We want to assess the impact of the programme on the youth who are involved, and whether there is a change in their sexual health behaviour after they receive the programme.

We have chosen your child because they are involved in peer education at school. We are talking with youth in different schools in the province, and after combining all people's answers, we hope investigate how peer education impacts on their lives. This will help us make useful recommendations to the relevant authorities and organisations.

Your permission

We are asking your permission for your child to participate in a focus group discussion with other peers for 1 hour. I will be asking them questions about peer education at school and ask that they are as open as possible in answering these questions.

We are also asking you to give us permission to tape record the discussion. We tape record discussions so that we can accurately record what is said.

Please understand that **your child's participation is voluntary** and they are not being forced to take part in this study. The choice of whether they can participate or not, is yours alone. If you choose not to give your permission, you or your child will not be affected in any way whatsoever. If you agree to their participation, you may stop them participating in the research at any time if you don't want them to continue. If you do this there will also be no penalties to you or your child and you and your child will not be prejudiced in any way.

Because your child is under the age of 18, we need to have permission from their parent or guardian BEFORE they participate in this study. If you agree, please sign the form and return it.

Confidentiality

Your child's answers will be not be linked to their name. We will assign a pseudonym (another name) to them. Only the researchers will have access to the questionnaires. All identifying information will be kept in a locked file cabinet and will not be available to others.

Risks/discomforts

Some questions may be of a personal and/or sensitive nature. If a question makes your child feel sad or upset, they do not have to answer it. If they need any assistance later, a professional person can be reached at the following telephone number, Childline on 08000 55 555, a free call from a landline.

Benefits

There are no immediate benefits to you or your child from allowing them to participate in this study. However, this study will be extremely helpful to us in making recommendations to the Western Cape Department of Education that we hope will promote prevention education in schools and its role in the lives of adolescents.

Who to contact if you have been harmed or have any concerns

This research has been approved by the HSRC Research Ethics Committee. If you have any complaints about ethical aspects of the research or feel that you have been harmed in any way by participating in this study, please call the HSRC's tollfree ethics hotline 0800 212 123 (tollfree when phoned from a landline from within South Africa) or the REC Administrator, Khutso Sithole, at the Human Sciences Research Council on 012 302 2012, e-mail ksithole@hsrc.ac.za / research.ethics@hsrc.ac.za.

If you have concerns or questions about the research you may call the following people:

Dr. Sharlene Swartz (Principal Investigator)	021-466-7874
Dr. Benita Moolman (Project Manager)	021-466-7956

CONSENT FORM Parents or Legal Guardians for Youth Focus Group Discussions



**Evaluating peer education in schools in the Western Cape Province:
A longitudinal study**

CONSENT

I hereby give permission for my child to participate in research on prevention education its role in the lives of youth. I understand that I am allowing my child to participate freely and without forcing them in any way to do so. I also understand that my child can stop participating at any point should they not want to continue and that this decision will not in any way affect my child negatively.

I understand that this is a research project whose purpose is not necessarily to benefit me or my child personally in the immediate or short term.

I understand that this consent form will not be linked to the questionnaire, and that my child's participation will remain confidential.

I have received the telephone number of a person to contact should I or my child need to speak about any issues that may arise from my child's participation

I understand that the information collected during this research project will be recorded, stored electronically in a secure environment and used for research purposes now or at a later date.

I understand that if at all possible, feedback will be given to my community on the results of the completed research.

.....
Signature of participant

.....
Date

I hereby agree to the tape-recording of my participation in the study.

.....
Signature of participant

.....
Date

Addendum 19

ASSENT FORM - Youth Focus Group Discussions



Evaluating peer education in schools in the Western Cape Province: A longitudinal study

Who we are

Hello, my name is Benita Moolman, I am working for the Human Sciences Research Council.

What we are doing

We are conducting research on peer education in schools in the Western Cape and its impact on youth sexual health behaviour and attitudes. We are interested in finding out more about how peer education works in the school setting and the strengths and weaknesses of the programme. We want to assess the impact of the programme on the young people who are involved, and whether there is a change in their sexual health behaviour after they receive the programme.

We have chosen you because you are involved in peer education at your school. We are talking with other youth in different schools in the province, and after combining all people's answers, we hope investigate how peer education impacts on the lives of youth. This will help us make useful recommendations to the relevant authorities and organisations.

However, because you are under the age of 18, we need to have permission from your parent or guardian BEFORE you to participate in this study .There is a separate form for them to complete, sign and return.

Your participation

We are asking you whether you would participate in a focus group discussion with some of your peers for 1 hour after school. I will be asking you questions and ask that you are as open as possible in answering these questions.

We are also asking you to give us permission to tape record the discussion. We tape record discussions so that we can accurately record what is said.

Please understand that **your participation is voluntary** and you are not being forced to take part in this study. The choice of whether to participate or not, is yours alone. If you choose not to take part, you will not be affected in any way whatsoever. If you agree to participate, you may stop participating in the research at any time and tell me that you don't want to go continue. If you do this there will also be no penalties and you will not be prejudiced in any way.

Confidentiality

Your answers will be recorded, but not linked to your name. We will assign a pseudonym (another name) to you. Only the researchers will have access to the tape recordings and notes. All identifying information will be kept in a locked file cabinet and will not be available to others.

Risks/discomforts

I will make every effort to keep what you say confidential. However, while I ask that other members of the discussion group to keep what is said confidential, I cannot guarantee that they will do so. Thus you need to be aware of what you disclose to the group. Another risk to

confidentiality if that if you tell me about anyone who is mistreating or abusing a young person, I am required by law to report it to someone who can take the appropriate action. Some questions may be of a personal and/or sensitive nature. If a question makes you feel sad or upset, you do not have to answer it. If you need to speak with anyone after we have left, a professional person can be reached at the following telephone number Childline on 08000 55 555, a free call from a landline.

Benefits

There are no immediate benefits to you from participating in this study. However, this study will be extremely helpful to us in making recommendations to the Western Cape Department of Education that we hope will promote peer education in schools and its role in the lives of young people.

Who to contact if you have been harmed or have any concerns

This research has been approved by the HSRC Research Ethics Committee. If you have any complaints about ethical aspects of the research or feel that you have been harmed in any way by participating in this study, please call the HSRC's tollfree ethics hotline 0800 212 123 (tollfree when phoned from a landline from within South Africa) or the REC Administrator, Khutso Sithole, at the Human Sciences Research Council on 012 302 2012, e-mail ksithole@hsrc.ac.za / research.ethics@hsrc.ac.za.

If you have concerns or questions about the research you may call the following people:

Dr. Sharlene Swartz (Principal Investigator)	021-466-7874
Dr. Benita Moolman (Project Manager)	021-466-7956



**Evaluating peer education in schools in the Western Cape Province:
A longitudinal study**

ASSENT

Ihereby agree to participate in research on peer education its role in the lives of youth. I understand that I am participating freely and without being forced in any way to do so. I also understand that I can stop participating at any point should I not want to continue and that this decision will not in any way affect me negatively.

I understand that this is a research project whose purpose is not necessarily to benefit me personally in the immediate or short term.

I understand that this assent form will not be linked to the discussion, and that my participation will remain confidential.

I have received the telephone number of a person to contact should I need to speak about any issues that may arise in this interview.

I understand that if at all possible, feedback will be given to my community on the results of the completed research.

I understand that the information collected during this research project will be recorded, stored electronically in a secure environment and used for research purposes now or at a later date.

My parent/guardian has completed and signed a consent form giving me permission to participate.

.....
Signature of participant

.....
Date

I hereby agree to the tape-recording of my participation in the study.

.....
Signature of participant

.....
Date

Addendum 20

Additional statistical tables

Table1: Population groups

	Baseline Sample		Time 1 Sample		Time 2 Sample	
	Frequency	Percent	Frequency	Percent	Frequency	Percent
Black/African	1452	50	1167	45	946	43
White	89	3	75	3	25	1
Coloured	1186	41	1221	47	1127	51
Indian/Asian	5	0	11	<1	6	0
Other	17	1	35	1	33	1
No response	155	5	85	3	74	3
Total*	2904	100	2594	100	2211	100

Table 2: Household characteristics

	Baseline Sample	Time 1 Sample	Time 2 Sample
	%		
Live with at least one parent	86	86	85
Main Person who looks after you			
Biological mother	39	44	45
Biological father	5	6	5
Both parents	26	32	30
Household size (mean)	5.35	5.20	5.2
Dwelling type			
Formal house/flat (with an inside toilet)	78	81	82
Informal house	17	15	15
Traditional house	5	4	3
Household economic status			
Not enough money for food	16	9	9
Enough money for food but not enough money for other basic items such as clothes	18	15	14
Enough money for food and clothes but are short for other things	37	27	30
Enough money for food and clothes, and also a bit extra for other things	29	50	47

Table 3: Key issues facing youth

	Baseline Sample	Time 1 Sample	Time 2 Sample
Poverty	18	19	17
Crime	32	36	40
HIV/AIDS	15	13	13
Teenage pregnancy	39	44	48
Unemployment	24	22	24
Poor education	11	11	11
Drug and alcohol abuse	43	47	53
Other	6	6	5

Table 4: Social Activity

	Baseline Sample			Time 1 Sample			Time 2 Sample		
	Never/ hardly ever	A few times a week	Every day of the week	Never/ hardly ever	A few times a week	Every day of the week	Never/ hardly ever	A few times a week	Every day of the week
	%								
Listen to radio	28	40	20	30	42	20	32	41	19
Watch television	3	15	73	3	16	75	3	16	75
Read a magazine / newspaper	18	53	17	18	58	16	19	60	13
Use internet	38	32	14	31	40	21	29	39	23
Use a cell phone	15	20	51	12	21	60	11	21	60
Participate in sports- at school or with a club	31	31	27	36	32	24	38	32	23
Do home work	4	18	70	7	28	58	6	32	56
Take extra lessons at school	45	23	18	51	28	13	50	30	10
Go to church or choir or youth group or Muslim school	18	38	36	21	41	32	24	39	32
Spend time at or drop into at a youth or community centre or NGO	52	26	9	54	28	10	59	26	7
Spend time with friends	7	38	46	7	35	52	77	37	51
Do chores around the house – cooking, cleaning, looking after siblings	13	34	45	12	37	45	12	38	45
Do casual work for which you get paid	55	27	9	51	34	9	52	33	10

Note: Numbers do not add up to 100 due to no/incorrect responses.

Table 5: Reasons adult Peer Education Facilitator were not available

	Baseline Sample	Time 1 Sample	Time 2 Sample
I could not find the Peer Education facilitator	22	15	9
The Peer Education facilitator had to see another class	17	18	16
I was too afraid to approach the Peer Education facilitator	13	13	20
The Peer Education facilitator forgot to set up an appointment	5	5	4
I did not have time to set up an appointment with the Peer Education facilitator	7	12	10
There was no private space at my school to have a counselling session	6	6	9
I was able to meet with a Peer Educator facilitator	29	30	31

Table 6: Usefulness of peer education programmes

	Baseline Sample			Time 1 Sample			Time 2 Sample		
	Very useful	Very little use	No use at all	Very useful	Very little use	No use at all	Very useful	Very little use	No use at all
Usefulness of classroom discussion	73	18	9	72	20	8	72	24	4

Table 7: Alcohol consumption by gender

Alcohol consumption in last six months											
			0	1-2	3-5	6-9	10-19	20-39	40 or more	Did not answer	Total
Baseline Sample	Male	Row%	68	12	5	3	3	1	4	3	100
		Col%	41	45	47	49	57	58	70	48	67
	Female	Row%	75	11	5	2	2	0	1	3	100
		Col%	59	55	53	51	43	42	30	52	33
Total		Row%	72	11	5	3	2	1	3	3	100
Time 1 Sample	Male	Row%	58	17	8	3	2	2	5	3	100
		Col%	42	44	51	47	43	45	59	65	44
	Female	Row%	64	17	6	3	2	2	3	1	100
		Col%	58	56	49	53	57	55	41	35	56
Total		Row%	62	17	7	3	2	2	4	2	100
Time 2 Sample	Male	Row%	52	16	10	5	3	3	7	4	100
		Col%	42	41	56	46	47	57	59	68	45
	Female	Row%	59	19	7	5	3	2	4	2	100
		Col%	58	59	44	54	53	43	41	32	55
Total		Row%	56	18	8	5	3	2	5	3	100

Table 8: Portions of students having got into fights

			No	Yes, once	Yes, a few times	Yes, many times	Did not answer	Total
Baseline Sample	Male	Row%	59	22	10	5	3	100
		Col%	38	51	65	68	45	43
	Female	Row%	74	16	4	2	3	100
		Col%	62	49	35	32	55	57
	Total	Row%	68	19	7	3	3	100
Time 1 Sample	Male	Row%	58	23	9	6	4	100
		Col%	39	50	62	69	63	31
	Female	Row%	73	18	4	2	2	100
		Col%	61	49	38	31	37	39
	Total	Row%	47	14	4	3	2	100
Time 2 Sample	Male	Row%	64	18	7	5	5	100
		Col%	41	50	59	75	69	45
	Female	Row%	77	15	4	2	2	100
		Col%	59	50	41	25	31	55
	Total	Row%	71	17	6	3	3	100

Table 9: Use of protection during sexual debut and currently

			Protection used during sexual debut					Protection used during last sexual encounter				
			Nothing	Condoms	Birth control pills	The injection	Total	Nothing	Condoms	Birth control pills	The injection	Total
Baseline Sample	Male	Row%	52	46	1	1	100	41	56	2	2	100
		Col%	84	63	33	22	70	83	67	56	22	70
	Female	Row%	23	62	3	12	100	20	62	3	15	100
		Col%	16	37	67	78	30	17	33	44	78	30
	Total	Row%	43	51	1	4	100	34	57	2	6	100
Time 1 Sample	Male	Row%	49	48	2	1	100	40	57	1	1	100
		Col%	77	66	71	25	70	78	68	50	27	70
	Female	Row%	35	59	2	5	100	27	64	2	7	100
		Col%	23	34	29	75	30	22	32	50	73	30
	Total	Row%	45	51	2	2	100	36	59	1	3	100
Time 2 Sample	Male	Row%	49	50	1	0	100	40	59	2	0	100
		Col%	75	59	57	0	64	72	63	86	0	64
	Female	Row%	29	64	1	6	100	27	61	0	11	100
		Col%	26	41	43	100	36	27	37	14	100	36
	Total	Row%	41	55	1	2	100	35	60	1	4	100

Table 10: Engaging in sexual activities following consuming alcohol

			Yes	No	Total
Baseline Sample	Male	Row%	38	62	100
		Col%	72	68	70
	Female	Row%	34	66	100
		Col%	28	32	30
	Total	Row%	37	63	100
Time 1 Sample	Male	Row%	22	78	100
		Col%	61	73	70
	Female	Row%	34	66	100
		Col%	39	27	30
	Total	Row%	26	74	100
Time 2 Sample	Male	Row%	21	79	100
		Col%	63	65	64
	Female	Row%	22	78	100
		Col%	37	35	36
	Total	Row%	21	79	100

Table 11: Source of HIV/AIDS knowledge

	Sources of HIV/AIDS knowledge			Source of HIV/AIDS believe		
	Baseline Sample	Time 1 Sample	Time 2 Sample	Baseline Sample	Time 1 Sample	Time 2 Sample
Friends	19	18	13	8	8	8
Churches	9	9	20	6	6	6
Film and Video	18	17	9	11	11	10
Parents	26	27	18	22	22	24
School curricula	26	25	26	18	18	15
Peer Educators	24	25	24	7	7	18
Radio or TV	22	20	22	12	12	11
Clinics	35	31	35	36	36	45
Teachers	43	42	44	34	34	29
Other	9	9	9	5	5	6

Table 12: Mean scales outcomes by intervention schools across the three waves of the study

		Future Orientation	Sensation Seeking	Self-Efficacy	HIV transmission knowledge	HIV prevention knowledge	HIV attitudes	Sexual attitude	Decision Making	Healthy Relationships	Social Support
Arcadia	Baseline	1.92	2.93	2.20	1.83	1.56	1.69	2.63	3.36	3.62	3.21
	Time 1	1.87	2.71	2.37	1.87	1.71	1.73	2.81	3.78	4.00	3.31
	Time 2	1.88	2.79	2.33	1.85	1.65	1.65	2.74	3.40	3.52	2.90
Buren	Baseline	1.86	2.74	2.26	1.86	1.65	1.63	2.74	3.50	3.72	3.24
	Time 1	1.79	3.11	1.97	1.90	1.61	1.56	2.71	3.64	3.73	3.02
	Time 2										
Ceres	Baseline	1.67	2.94	1.96	1.83	1.55	1.67	2.61	3.70	3.49	3.08
	Time 1	1.86	2.86	2.26	1.76	1.61	1.59	2.58	3.17	3.58	3.10
	Time 2	1.83	3.13	2.10	1.92	1.56	1.63	2.72	3.58	3.70	3.15
Crystal High	Baseline	1.86	3.06	2.27	1.85	1.57	1.61	2.79	3.32	3.70	3.26
	Time 1	1.88	3.15	2.18	1.84	1.65	1.77	2.88	3.63	4.00	2.97
	Time 2	1.76	2.93	2.22	1.78	1.56	1.61	2.71	3.15	3.43	3.02
George	Baseline	1.56	3.12	2.10	1.73	1.49	1.77	2.72	3.82	3.69	3.08
	Time 1	1.79	3.05	1.95	1.80	1.45	1.56	2.59	3.08	3.42	2.75
	Time 2	1.83	3.24	2.30	1.91	1.62	1.67	2.80	3.45	3.98	3.06
Groendal	Baseline	1.52	3.10	1.98	1.75	1.32	1.79	2.42	3.45	3.52	2.93
	Time 1	1.79	2.95	2.17	1.90	1.51	1.60	2.56	3.46	3.48	3.12
	Time 2	1.88	2.78	2.25	1.85	1.49	1.64	2.69	3.32	3.67	3.08
Hawston	Baseline	1.64	2.85	1.94	1.76	1.60	1.52	2.51	3.73	3.35	3.03

	Time 1	1.83	3.00	2.11	1.83	1.48	1.74	2.40	3.13	3.40	3.05
	Time 2	1.80	2.76	2.22	1.89	1.71	1.66	2.52	3.41	3.58	3.19
Intshukumo	Baseline	1.92	3.25	1.83	1.77	1.54	1.51	2.12	2.16	3.40	2.93
	Time 1	1.89	3.22	2.28	1.85	1.67	1.66	2.61	3.50	3.74	2.89
	Time 2	1.86	3.12	2.24	1.81	1.59	1.52	2.50	3.28	3.44	3.03
Khanyolwethu	Baseline	1.88	3.12	2.15	1.84	1.70	1.60	2.85	3.35	3.96	3.06
	Time 1	1.88	3.63	2.29	1.77	1.30		2.21	3.32	3.80	3.12
	Time 2	1.88	3.23	2.11	1.77	1.54	1.57	2.38	3.17	3.28	2.95
Kulani	Baseline	1.59	2.89	1.88	1.62	1.49	1.77	2.33	3.88	3.27	3.21
	Time 1	1.74	2.84	2.07	1.73	1.73	1.82	2.53	3.62	3.44	3.17
	Time 2	1.90	3.44	2.43	1.79	2.00	1.43	3.00	3.57	3.98	3.02
Kylemore	Baseline	1.85	3.00	2.13	1.87	1.49	1.52	2.74	2.83	3.43	3.24
	Time 1	1.89	2.98	2.32	1.78	1.74	1.76	2.68	3.61	3.96	3.15
	Time 2	1.79	3.08	1.98	1.85	1.65	1.86	2.60	3.66	3.62	3.05
Manenberg	Baseline	1.88	3.16	2.01	1.87	1.66	1.43	2.44	2.87	3.68	3.08
	Time 1	1.89	3.23	1.93	1.77	1.74	1.67	2.46	2.93	3.44	2.95
	Time 2	1.83	2.81	2.24	1.85	1.57	1.65	2.60	3.50	3.64	2.99
Masiyile	Baseline	1.89	3.18	1.93	1.80	1.73	1.62	2.40	2.72	3.30	2.89
	Time 1	1.79	3.19	2.07	1.78	1.58	1.76	2.18	3.02	3.38	2.91
	Time 2	1.90	3.22	2.01	1.76	1.57	1.79	2.49	3.14	3.32	3.06
Matthew Goniwe	Baseline	1.88	3.00	2.37	1.85	1.59	1.67	2.74	3.39	3.69	3.16
	Time 1	1.88	2.95	2.24	1.89	1.56	1.61	2.67	3.44	3.79	3.13
	Time 2	1.89	3.39	2.14	1.79	1.63	1.55	2.61	3.25	3.34	3.16
Ned Doman	Baseline	1.92	3.23	2.51	1.86	1.66	1.77	2.82	3.66	3.77	3.23
	Time 1	1.93	3.22	2.49	1.93	1.73	1.79	2.79	3.43	3.97	3.25
	Time 2	1.87	3.02	2.30	1.94	1.57	1.60	2.61	3.37	3.63	3.15
Oaklands	Baseline	1.50	3.13	1.79	1.50	1.29	1.29	2.61	3.49	3.17	2.92
	Time 1	1.87	3.21	2.21	1.82	1.43	1.48	2.51	3.41	3.63	3.03
	Time 2	1.88	3.07	2.44	1.94	1.59	1.74	2.69	3.37	3.94	3.26
Plettenberg Bay	Baseline	1.61	2.91	1.91	1.82	1.59	1.71	2.62	3.97	3.42	3.15
	Time 1	1.77	2.92	1.97	1.82	1.49	1.67	2.58	3.11	3.35	3.06
	Time 2	1.86	3.00	2.34	1.72	1.54	1.71	2.83	3.82	3.69	3.07
Scottville	Baseline	1.91	2.99	2.37	1.88	1.61	1.70	2.69	3.78	3.84	3.13
	Time 1	1.93	2.95	2.26	1.88	1.69	1.76	2.61	3.40	3.80	3.13
	Time 2	1.78	3.01	2.11	1.76	1.58	1.77	2.37	3.37	3.42	2.94
Sea Point	Baseline	1.85	3.33	1.96	1.64	1.55	1.47	2.61	3.18	3.79	3.01
	Time 1	1.88	3.36	2.22	1.84	1.74	1.65	2.59	3.20	3.61	3.18
	Time 2	1.87	2.83	2.24	1.94	1.83	1.79	2.55	3.27	3.76	3.21
Simanyene	Baseline	1.80	3.15	2.09	1.78	1.78	1.60	2.23	3.24	3.50	3.26
	Time 1	1.76	2.84	2.17	1.83	1.70	1.81	2.55	3.78	3.48	3.20
	Time 2	1.80	3.20	2.23	1.81	1.58	1.73	2.57	3.23	3.47	2.93
Siphamandla	Baseline	1.77	3.03	2.16	1.75	1.48	1.77	2.25	3.68	3.52	3.06
	Time 1										
	Time 2	1.85	3.35	2.25	1.91	1.57	1.63	2.36	3.62	3.84	3.16
Soa Bras	Baseline	1.64	2.98	1.83	1.71	1.60	1.75	2.40	3.75	3.11	2.99
	Time 1	1.72	2.99	2.07	1.91	1.56	1.59	2.50	3.55	3.53	3.07
	Time 2	1.67	3.02	1.86	1.80	1.59	1.75	2.57	3.42	3.37	3.04
Strand	Baseline	1.78	3.52	1.88	1.72	1.27	1.23	2.14	2.67	3.06	2.57
	Time 1	1.73	3.30	1.81	1.59	1.44		2.25	2.64	2.97	2.64
	Time 2	1.87	2.88	2.27	1.84	1.63	1.69	2.67	3.56	3.67	3.12
Thembelihle	Baseline	1.62	3.07	1.90	1.77	1.47	1.60	2.73	3.77	3.50	2.92
	Time 1	1.77	3.00	1.92	1.84	1.65	1.86	2.63	3.46	3.66	2.93
	Time 2	1.76	3.21	2.08	1.81	1.43	1.51	2.40	2.54	3.35	2.72
Villiersdorp	Baseline	1.77	3.38	2.13	1.76	1.68	1.57	2.25	2.94	3.65	3.17
	Time 1	1.80	3.24	2.04	1.87	1.68	1.68	2.61	3.43	3.80	3.06
	Time 2	1.80	3.16	1.79	1.90	1.65	1.67	2.48	3.41	3.54	3.08
Vuyiseka	Baseline	1.62	3.21	1.93	1.83	1.58	1.64	2.42	3.75	3.50	3.15
	Time 1										
	Time 2	1.91	3.21	2.32	1.92	1.65	1.74	2.53	3.56	3.92	3.03
Wolseley	Baseline	1.83	3.09	2.08	1.79	1.57	1.66	2.57	3.42	3.55	3.09
	Time 1	1.85	3.06	2.14	1.84	1.62	1.70	2.61	3.40	3.63	3.07
	Time 2	1.91	3.32	2.14	1.92	1.68	1.61	2.62	3.66	3.60	3.12

