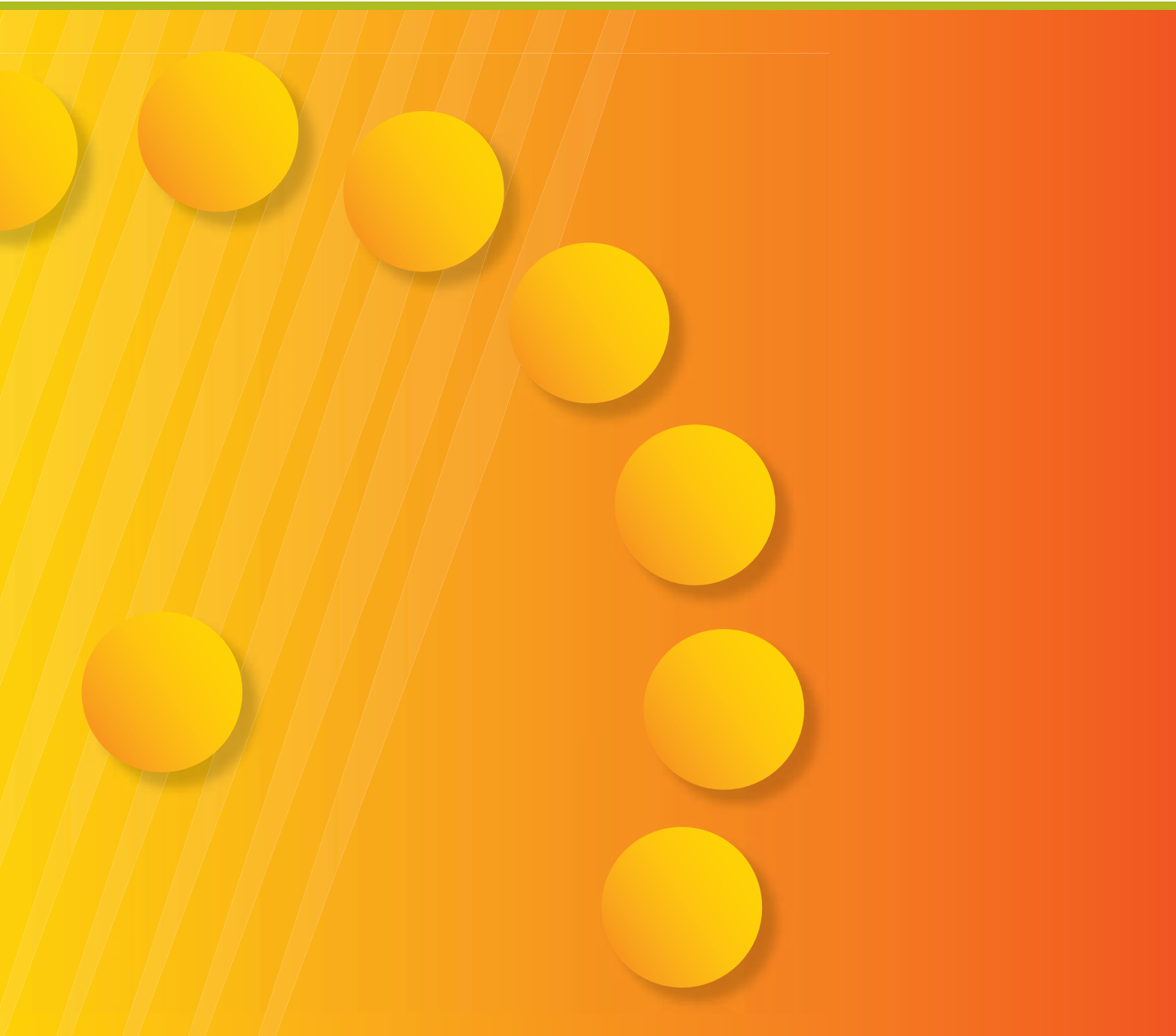


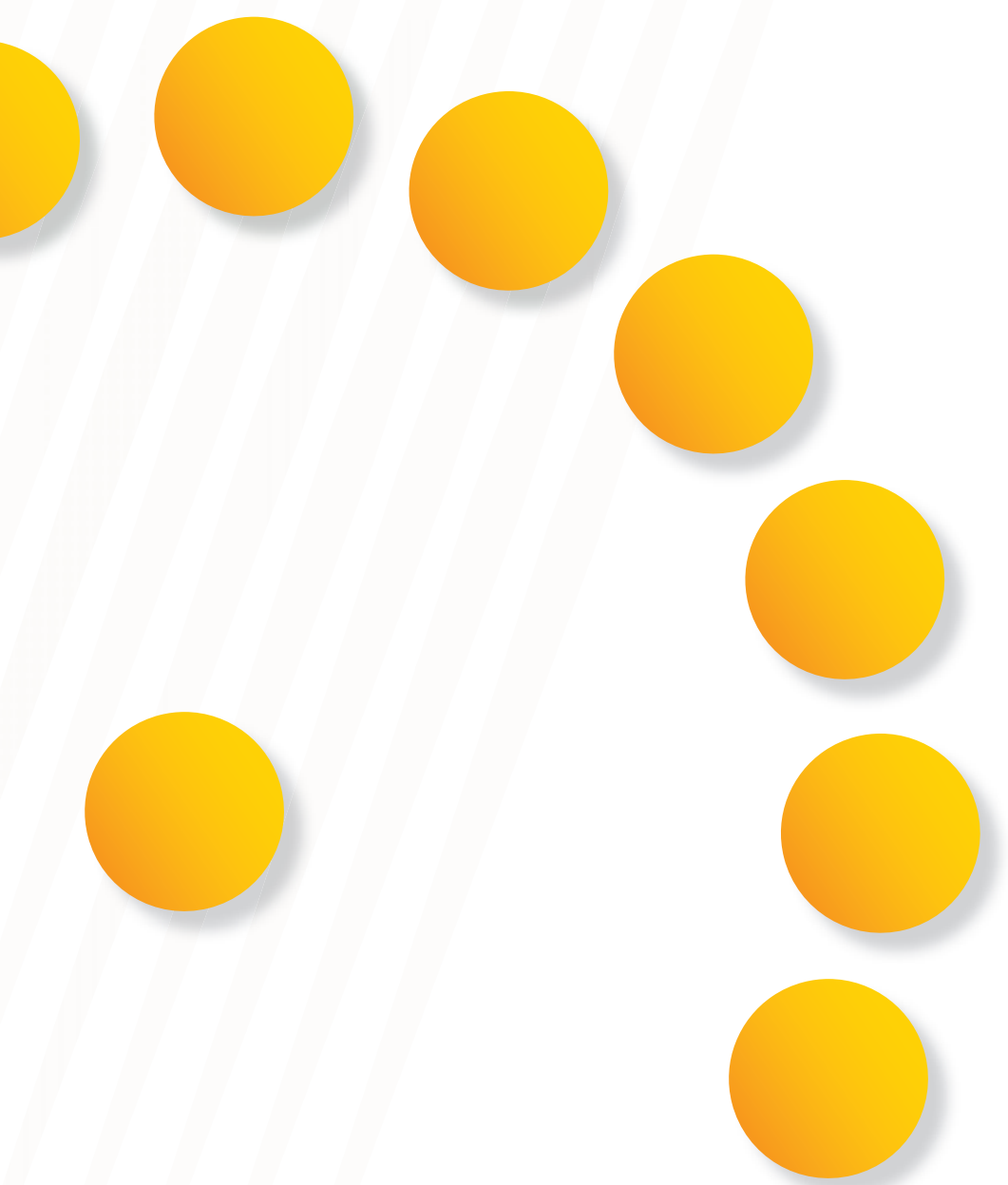
# Evidence-Based Guidelines for Youth Peer Education



Interagency  
Youth  
Working  
Group



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## Table of Contents

<b>Introduction</b>	<b>4</b>
<b>Peer Education Overview</b>	<b>6</b>
<b>Guidelines</b>	<b>9</b>
1. Program Planning	11
2. Recruitment and Retention of Peer Educators	17
3. Training Youth to Be Peer Educators	23
4. Leading Peer Education Sessions	29
5. Supervision and Program Management	33
6. Monitoring and Evaluation	37
<b>Checklist and Action Planning Tool</b>	<b>41</b>
<b>Annexes</b>	<b>45</b>
1. Group Exercise: Putting Youth Peer Education Guidelines into Practice	45
2. Code of Conduct	48
3. Logic Models: Example and Blank Form	50
4. Tools and Resources	52
5. References	58
6. Glossary	59

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## Introduction

Peer education is a popular and versatile approach for promoting reproductive health and HIV prevention among young people around the world. Well-designed and well-implemented programs can improve young people's health-related knowledge, attitudes, and skills and their access to health services. However, the quality of peer education varies tremendously (Adamchak 2006, Svenson et al. 2008). Difficulty in recruiting and retaining peer educators, lack of community support, and poor training and supervision of peer educators can adversely affect a program's impact. *Evidence-Based Guidelines for Youth Peer Education* can be used to overcome these and other challenges. Readers can follow the guidelines to develop new, high-quality peer education programs for young people ages 10 to 24 years or to improve existing programs. Although this publication focuses on peers working with young people to improve their sexual and reproductive health, these guidelines can be applied more broadly to other types of peer education programs as well.

### What information can be found in this publication?

This publication is divided into four main sections:

- **Peer Education Overview.** This section defines peer education and its benefits, differentiates peer education from other peer-led approaches, discusses some of the challenges faced by program managers and other peer education advocates, and briefly explains how research findings can help improve programs.
- **Guidelines.** This section provides evidence-based guidelines, developed by worldwide experts, on how to run a successful youth peer education program. This section features:
  - Important cross-cutting issues that are relevant to all areas of a peer education program
  - Evidence-based, practical guidelines and specific tips for implementing them, covering program planning, recruitment and retention of peer educators, training youth to be peer educators, leading peer education sessions, supervision and management, and monitoring and evaluation
  - Boxes labeled “What the research tells us” that explain the available evidence on what works in peer education
  - Boxes labeled “Example” that provide real-world examples of how the guidelines are used in successful programs
- **Checklist and Action Planning Tool.** This checklist can be used to plan a new peer education program or to assess the extent to which an existing program is implementing these guidelines.
- **Annexes.** Annexes provide a comprehensive list of tools and publications on peer education, references used in the development of this publication, a sample code of conduct for peer education programs, a group exercise for organizations to use in their programs, and a glossary of key terms. **For easy reference, glossary terms are shown in the text in bold typeface.**

## Who can use these guidelines?

This publication can be used by any individual or organization with a stake in developing or running a successful peer education program. Audiences for the publication include:

- **Policymakers and decision makers.** Government ministries, development partners, and other policymakers can ensure that these guidelines are followed in programs they support and oversee.
- **Program managers.** Program managers can use the guidelines and resources to design and implement a new peer education program. The guidelines also can be used to evaluate and improve existing peer education programs. The Checklist and Action Planning Tool includes space for program managers and others to comment on whether and to what extent their organization is implementing the guidelines.
- **Supervisors.** Those who supervise peer educators might be especially interested in the sections on recruitment, training, leading peer education sessions, and supervision and program management.
- **Trainers.** The section on training peer educators provides guidelines about selecting a high-quality curriculum, using qualified trainers, organizing a training agenda, and other topics.
- **Peer educators.** Some of the guidelines are intended to help peer educators understand their role in a peer education program, plan and implement education sessions, and effectively communicate with their supervisors. The resources section describes many tools—activities, ice breakers, and manuals—that peer educators can use.
- **Other stakeholders.** This publication can be useful to parents, religious and community leaders, program coordinators, teachers, and local government officials. If they know what factors contribute to a program's success, these stakeholders can better advocate for strong peer education programs in their community.

### **Who is a program manager?**

*Whether you are called a director, coordinator, associate, or officer, in this document you are considered a program manager if you direct, coordinate, manage, or control many aspects of a peer education program.*

## Why follow these guidelines?

The recommendations in this book are called guidelines because they propose actions to take when implementing peer education programs. There are several ways in which following these guidelines can make a positive impact on your peer education work. The guidelines offer:

- **Recommendations about peer education practices that are tested and useful.** These guidelines can help ensure that programs are evidence-based and draw from the lessons and experiences of other successful programs.
- **A framework for quality assurance.** The guidelines can help program managers check the quality of a program at each stage of its development, implementation, monitoring, and evaluation.

- **The opportunity to increase a program’s capacity to help young people.** Use of these guidelines will strengthen an organization and its ability to implement high-quality programs.
- **A basis for recognition.** Managers who follow these guidelines and document their adherence to them will be better able to show that their programs are rooted in practices recommended by worldwide experts in peer education.
- **A chance for programs to attract financial support.** Compliance with the guidelines can assure funders that programs are well designed and implemented.

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## Peer Education Overview

Youth peer education is defined as the process by which well-trained and motivated individuals lead organized educational and skills-building activities with their peers to support and improve young people’s health and well-being. In this document, we refer to youth peer education simply as “peer education.” In general, a peer is someone who belongs to the same social group as another person, meaning that they share at least one important social or demographic characteristic such as age, education, occupation, or risk behavior.

Peer education is based on the premise that young people are more likely to change their behavior if peers they like and trust advocate change. Social norms, community contexts, media messages, parents, teachers, health workers, and religious leaders also play important roles in young people’s lives. Peer education programs do not take place in a vacuum and require careful understanding of the context in which young people live. Peer education programs also rarely stand alone. Frequently, peer education is the community-based outreach component in an organization’s larger youth initiative. Other components might have different goals or be aimed at different audiences.

### How does peer education differ from other peer-led approaches?

Peer education activities are participatory and generally take place over an extended period, as opposed to a one-time event. Venues for peer education include schools, parks, bars, social clubs, churches, work settings, and markets—any place where young people spend time together. Peers can play various roles in helping other young people maintain and improve their health. Some of these roles require more training and involvement than others. Information sharing could involve young people distributing health-related materials at a special event and might require only brief training and short-term involvement. Peer education typically provides ongoing sessions aimed at helping young people build skills and change risky behaviors and involves more than information sharing. Peer counseling, on the other hand, goes beyond peer education to provide psychological support and should only be conducted by well-trained counselors.

Table 1 illustrates in more detail how information sharing, peer education, and peer counseling differ. This document focuses on how peer educators interact as leaders in structured learning sessions with their peers.

**Table 1: Types of Peer Interaction**

	Information Sharing	Peer Education	Peer Counseling
Objectives	Awareness Information Attitude change	Awareness Information Attitude change Skills building	Information Attitude change Self-esteem Psychological support
Coverage	High	Medium	Low
Intensity	Low	Medium/high	High
Confidentiality	None	Important	Essential
Focus	Community Large groups	Small groups In some cases, individuals	Individuals In some cases, homogeneous groups
Training required	Brief	Structured workshop and refresher courses	Intense and long
Examples of activities	Informative theater or puppet show	Repeated group events based on a curriculum	Counseling of young people living with HIV Clinic-based youth counseling

Adapted from: Training of Trainers Manual, United Nations Population Fund, 2005.

### What have we learned from research on peer education?

Global research on the benefits of peer education (Adamchak 2006) shows that this approach can:

- Positively influence young people’s attitudes and knowledge about reproductive health and **HIV**
- Influence youth to decrease their number of sexual partners and increase their use of condoms and other contraception
- Reach groups of youth with education and health materials, such as brochures and condoms
- Increase the use of sexual and reproductive health services by vulnerable young people
- Improve **community** norms about youth and sexual behavior

A recent review on the effectiveness of peer education interventions for HIV prevention among diverse populations in developing countries found no significant impact on biological outcomes such as HIV and other sexually transmitted infections (STIs), although few studies have measured this impact



(Medley 2009). Global evidence also points to some potential disadvantages of or challenges to conducting peer education (Adamchak 2006).

- Effectiveness varies considerably depending on the quality of the peer education **program**. For instance, projects that promote abstinence without addressing other behaviors that might protect or improve young people's sexual and reproductive health have succeeded in delaying sex in the short term but are unsuccessful at changing long-term behaviors. The effects of peer education programs also appear more evident among young women than young men. But, even among young women, the results are not consistent across all interventions. In many circumstances, effectiveness is most evident for peer educators themselves.
- Training young people to become peer educators and providing them with necessary supervision can be expensive and time intensive. Peer educators might find it difficult to move beyond simply sharing information to helping build skills for behavior change.
- Turnover of peer educators is high. Because young people are busy working or in school, they are usually unpaid, volunteer peer educators. And because they eventually age out of peer programs, new peer educators must be trained frequently.
- Meaningful youth involvement is critical for motivating and retaining peer educators. Building successful youth–adult partnerships can be challenging. Adults must adjust to sharing decision making and other responsibilities with young people.
- **Program managers** have to earn broad community support to ensure project productivity, sustainability, and protection for peer educators.
- In environments where young people's sexual and reproductive health needs are not acknowledged or supported, peer education alone will not create lasting change among young people and the community. Peer education programs should be one part of a comprehensive response to ensure that policies, community norms, health services, and media also support positive health behavior change of young people.

These guidelines are based on research findings about youth and peer education, on lessons learned from many peer education programs, and from the experiences of experts around the world. This section presents guidelines on:

- Cross-cutting issues that apply to every part of the peer education process
- Program planning
- Recruitment and retention
- Training peer educators
- Leading peer education sessions
- Supervision and management
- Monitoring and evaluation

Throughout, we provide examples of programs that implement these guidelines and research findings that support them. Guidelines and tips are generally ordered sequentially, although many activities can happen simultaneously (for example, once peer educators are recruited, their supervision occurs throughout the life of a program). Review the guidelines holistically to set priorities and action plans for your program.

### **Cross-cutting issues**

The following fundamental guidelines apply to the entire peer education process rather than specific stages of a program, which are discussed later.

- Provide youth with opportunities to participate in all aspects of the program. Youth should be fully involved in program planning, implementation, and evaluation. If a program is designed to benefit young people, youth should have input into how the program is developed and administered.
- Involve stakeholders, including parents and other community members. Program managers sometimes overlook two factors that are critical to the success of their peer education programs: the attitudes of peer educators' parents and the degree to which the program's staff and the community cooperate.

### **Youth–adult partnerships**

*Youth–adult partnerships refer to relationships between youth and adults where both have an equal ability to learn from one another, make decisions, use their skills, and create change. A true partnership between youth and adults in a professional setting, in contrast to a personal relationship, has several distinguishing characteristics:*

- *It integrates the diverse perspectives and experiences of young people and adults.*
- *It offers each party the opportunity to make suggestions and decisions.*
- *It recognizes the values and contributions of both the young person and the adult.*
- *It allows young people and adults to work in full partnership—envisioning, developing, implementing, and evaluating programs.*

Adapted from: YouthNet/FHI, 2005.

- Show respect for the culture of the young people who will benefit from your program. Communicate in the language that youth participants and other stakeholders prefer and hold meetings and other activities at times that are most suitable for young people.
- Be aware of gender issues. Ensure that your program and the peer education activities themselves operate in a way that is **gender** sensitive, appropriate, and gender equitable. The code of conduct on pages 48–49 provides specific suggestions for improving **gender equity**.
- Acknowledge the diversity of young people. Recognize that the terms “youth” or “young people” include diverse subgroups (such as married, in-school, rural, or street youth) and a wide age range (10 to 24 years). Successful programs focus on specific subgroups and present information according to their needs, circumstances, and abilities.
- Consider the sexual expression and identity of young people. Do not discriminate based on sexual identity. Address issues of **sexuality** in ways that are relevant to sexual minorities when appropriate.

### What the research tells us

Involving parents, community members, and other **stakeholders** can increase young people’s motivation and the community’s acceptance of and support for the peer education program (Svenson 2005).

*This section offers guidelines about developing your program's goals, objectives, and operational plans while working closely with parents, the community, and other stakeholders. These activities typically occur before you implement a program, but the guidelines can be used to improve an existing program as well. It is assumed that program staff are already in place to operate and coordinate the program.*

## 1-1. Determine whom your program will serve

- Consider the following questions:
  - What are the needs of young people in the local community?
  - What other programs are already available?
  - Can you reach your audience with the human and financial resources available to you?
- Focus on specific subgroups of young people rather than on young people as a whole. Consider shared characteristics such as age, sex, occupation, educational level, vulnerability, marital and socioeconomic status, and level of **risk** for HIV, other STIs, and unintended pregnancy.
- Consider a geographical coverage and scope that is realistic for your organization's resources and capacity. You might create a map of where your program's beneficiaries spend their time (clubs, schools, bars, and other places) and where youth-friendly referral sites are located.
- Reach those most in need of your program's offerings. It might be easier to target motivated, educated, or healthy youth, but they might not be the people who most require your program's services. However, do not assume that wealthier or more educated young people are less at risk. Learn about the needs of young people in your area by talking with staff from HIV organizations, teachers, staff at drop-in centers, and others who interact frequently with young people.

## 1-2. Identify the needs of those who will benefit from your program

- Conduct group discussions and other information-gathering activities to identify your target group's needs for reproductive health and HIV services. A rigorous, quantitative **needs assessment** is often beyond the budget and expertise of many programs and is mostly unnecessary if national- or local-level data are available. Interviews with youth, parents, and professionals will provide a more affordable and useful picture of local conditions and promising strategies.
- Use reliable data about your target group when available (e.g., census data, ministry of health service statistics, Demographic Health Survey [DHS] data, **AIDS** indicator surveys, program reports, and behavioral research).
- Select assessment approaches that are within your program's budget and capabilities and that provide useful information for program planning. Determine whether other activities would need to be postponed, reduced, or canceled in order to conduct the assessment.

## What the research tells us

Evidence from past peer education efforts indicates the importance of understanding the broader social context in which young people live. An assessment of this context can help identify factors that might hinder behavior change and undermine well-intentioned programs (Joint United Nations Programme on HIV/AIDS 1999).

### 1-3. Coordinate with other programs

- Work with local and national reproductive health and HIV programs to help ensure that your program contributes to the national, regional, and local plans. Where available, follow national and local policies on young people.
- Determine whether any mass media campaigns on youth reproductive and sexual health are under way in your area. Consider whether your program's messages might complement any of those already being widely disseminated on radio or television.
- Identify and coordinate with existing programs and networks to avoid duplication of efforts, to harmonize planning, and to share resources. Look beyond programs that are strictly health related and consider working with youth sports clubs, faith-based youth groups, and others.
- Develop collaborations and joint activities that benefit all parties equitably, cost-sharing as appropriate.

### Example

I Choose Life, an HIV behavior change program using peer education in Kenyan universities, recruits peer educators from existing programs that serve youth. After being trained, the recruits conduct peer education sessions within the groups to which they already belong. This sort of collaboration improves the sustainability of the peer education program.

### 1-4. Engage young people in program planning

- Develop a formal process for engaging young people, seeking their input, and encouraging their participation. This process should occur in partnership with adults, who retain responsibility for technical quality and effective planning.
- Select a mix of diverse young people from the group your program will serve, including some with experience in collaborating with adults and some who are new to such working relationships.

## Example

In Turkey, the National Education Program on Reproductive Health and HIV was entirely designed by medical students with some technical assistance from the AIDS Prevention Society. Although it is unusual for young people to have the opportunity to develop national programs or policies, this example demonstrates that youth can assume significant responsibility when they are given the opportunity and support and if they can incorporate the expertise of others when necessary.

### 1-5. Engage parents, community members, and other stakeholders

- Identify people who have a stake in your program's peer education activities as well as the local decision makers who may influence the program. Begin with a small group of committed stakeholders and plan to expand over time as needed. Remember that all stakeholders will not be equally engaged and that their interests in your program are likely to differ. Parents, for example, might be more involved in day-to-day activities, whereas funders or traditional community leaders might want to be kept informed but not play an active role in running the program.
- Consider creating a document that defines the roles and responsibilities of stakeholders over the life of the program. Think about what you would like different stakeholders to contribute and what stakeholders should expect in return (for example, regular status reports, stakeholder meetings, and input into the program's activities).
- Hold meetings with the key stakeholders to build consensus and to get recommendations and feedback. Plan for periodic updates to stakeholders throughout the project. In discussions with stakeholders, use evidence-based data to advocate for the relevance and effectiveness of peer education programs. (See Annex 4, page 52, for a list of publications about peer education.)
- Provide a brief, concrete description of the program to all relevant stakeholders, including parents, community members, religious leaders, and others, before conducting activities.

### 1-6. Develop your program's goals and objectives

- Develop goals for your program based on the needs of your target audience, feedback from stakeholders, and goals of local or national reproductive health and HIV prevention policies and action plans.
- Write goals that answer the question, "What do you hope to achieve by the end of the project?" Next, define objectives that answer the question, "What, specifically, would you like to change through this project?" (See the example on page 14 for goals and objectives of a program in Tanzania.)
- Ensure that your goals and objectives are SMART: **S**pecific about the knowledge, skills, and behavior you hope your program will change; **M**easurable; **A**chievable; **R**esourced; and **T**ime-bound.
- Solicit input from partners and youth themselves on your proposed goals and objectives. Based on their feedback, revise and refine as needed.

## Example

In Tanzania, the goal of the SUMASESU's Makete Youth Against HIV/AIDS Project was to reduce HIV infection among youth ages 10 to 24 years in the Iringa region by June 2008.

The project had three objectives:

- To increase knowledge and skills on how to prevent HIV (specific) among 14,960 out-of-school youth (measurable) ages 10 to 24 years from 10 villages of Makete District by June 2008 (time-bound).
- To improve entrepreneurial skills (specific) among 50 out-of-school young people (measurable) ages 10 to 24 years from 10 villages by June 2008 (time-bound).
- To increase demand for and uptake of voluntary counseling and testing services (specific) among 53,360 youth (measurable) ages 10 to 24 years from 10 villages in Makete District by June 2008 (time-bound).

## 1-7. Develop a work plan and logic model to help you implement your program

- Develop a work plan that includes your goals, objectives, activities, partners, resources, budget, and time line.
- Determine what activities will address your program's objectives. Most work plans should include strategies for recruitment, training, communication, advocacy campaigns, development or acquisition of materials and tools, and monitoring and evaluation of the program.

(See Guideline 3-1, page 23, for more details on developing a training strategy.)

- Prioritize your activities. Plan to implement first those activities that are essential for the program's launch. Then, add other activities over time.
- Determine whether the activities are realistic for the organization's resources and capacity. Identify potential barriers to implementation and discuss ways to reduce their effects.
- Develop a **logic model**, which illustrates the human and financial resources your program requires, the activities to be conducted, and the short- and long-term outcomes that will result. Donors and program evaluators frequently request logic models to understand a program's design and organizational capacity and to see how their money will be spent. In addition, logic models can be very helpful for monitoring your program as it progresses.

## Example

An example of a generic logic model as well as a blank logic model for your organization to use are located in Annex 3, page 50. (See Annex 4, page 52, for more resources on logic models.)

## 1-8. Establish a health and social services referral system

- Identify organizations or institutions to which peer educators might refer young people for services. Establish relationships with these organizations. Referral sites can include adolescent-friendly reproductive health services, youth centers, **counseling** services, microfinance organizations, and employment and legal services. If few health or social services exist for young people in your area, advocate for these sorts of services and work with providers to expand adult services to young people.
- Visit potential referral sites. Talk to providers there, tour the facilities, and ensure that they are safe and accredited. Consider asking peer educators to visit the sites as well, to determine how youth friendly they are and to learn how and when the services are provided.
- Plan to provide peer educators with a list of approved referral sites, including contact information, cost, details on what services are offered, and guidance on how to make and track referrals. Ask peer educators to follow up with youth they refer to services to see if they are satisfied with their experiences.

### What the research tells us

A major goal of many youth peer education programs in Zambia is to refer youth to clinics and voluntary counseling and testing (VCT) centers. An FHI/YouthNet survey in seven clinics in Zambia found that 74 percent of youth attending those clinics reported being exposed to peer education (Svenson 2008).

## 1-9. Develop a monitoring and evaluation (M&E) plan

- Use experts, as necessary, to help develop an M&E plan that defines how to measure the results of your program. The M&E plan should cover qualitative and quantitative indicators, data collection instruments and systems, time frames, roles and responsibilities, and documentation of results and how to report them to funders and other stakeholders.

(See Section 6, page 37, for more information on monitoring and evaluation.)

## 1-10. Create a resource development and sustainability plan

- Determine what financial and nonfinancial resources you will need to implement each activity in your work plan. Categorize each of these resources as available, readily accessible, or currently unavailable.
- As you identify gaps in resources, consider whether you can obtain funds, materials, or other contributions (such as incentives for peer educators or in-kind donations), from partners, community members, youth organizations, volunteers, government, or the private sector.



- Determine which of your program's activities are most important and outline steps for ensuring that they can be sustained beyond your initial funding. If it is not practical to continue all activities, set priorities. Diversify sources of funding to reduce reliance on a single funder or a few sources.

### **Example**

In Jamaica, the Ashe Caribbean Performing Arts Ensemble and Academy requested technical assistance from its donors to develop a financial management and staff sustainability plan. As a result of the plan, Ashe developed a board of directors composed of prominent community members, who contacted local businesses for support and ensured long-term sustainability.

### **1-11. Establish ways to receive feedback about the program**

- Create a friendly and flexible environment that actively encourages feedback. People should not feel nervous about stating their opinions about your program.
- Establish practical ways for stakeholders to share views and suggestions for improvement throughout the life of the program. A suggestion box is one way to encourage peer educators and the young people with whom they work to provide confidential feedback. Develop systems to investigate and act upon complaints.
- Gather in-depth information about the program through group discussions and periodic interviews of stakeholders, peer educators, and young people. These methods allow you to follow up on comments and clarify feedback.
- Develop a method for formally responding to feedback, so that respondents will know that you value their suggestions. If you implement something new based on feedback, make a point of acknowledging that a respondent's comment prompted the change.
- Remember that feedback, while extremely useful, is not the same as a formal evaluation. Positive feedback does not guarantee that the program is effective.

*This section explains how to attract and recruit peer educators and keep them involved in the program through proper support, incentives, and rewards.*

## Recruitment

### 2-1. Develop criteria for selecting peer educators

- Develop criteria for selecting peer educators. Some examples include the ability and willingness to dedicate adequate time to the program; age, sex, and educational level; acceptability to the peers they will be educating; previous experience; and pertinent personal traits (motivation, team orientation, volunteer spirit, discretion, tolerance, potential for leadership, and flexibility).
- Recruit peer educators from among your target group, especially when working with special groups such as sex workers, street children, or drug users. Recruit in a way that balances the need to find the best peer educators against the need to include youth who will derive the greatest benefit from your program.
- Develop a balanced team of peer educators that represents the important criteria across the group; each peer educator might not meet all criteria. Seek candidates with a diverse array of skills and demographic characteristics instead of choosing only from those who volunteer.
- Decide how many peer educators you will need. Base the number of peer educators on the proposed number of youth you want to reach and the achievements that you expect each peer educator to meet. Be sure to account for projected turnover—you might want to recruit more educators than you will need in case some drop out or do not complete the training. On the other hand, be careful not to over-recruit. A common problem in peer education is having too many peer educators with not enough resources to support them.

### What the research tells us

A common pitfall in developing recruitment criteria is assuming that peer educators should be model youth who can tell others about their own positive behaviors. By choosing such peer educators, however, you run the risk of attracting only similarly healthy young people and alienating those who need the most help.

Requiring that peer educators be model youth might also be setting expectations unrealistically high. For example, the MEMA Kwa Vijana project in Mwanza, Tanzania, wanted peer educators who were model students in school. This criterion proved impractical because, like their peers, even good students struggled from time to time.

Research has shown that the more traits peer educators share with the target group, the more effectively they can change knowledge, skills, and attitudes (Wolf 2002).

## 2-2. Use appropriate recruiting sources and materials

- Identify recruitment sources (for example, partner organizations, workshop participants, schools, religious institutions) and methods of advertising that will be most likely to reach your potential recruits (interpersonal communication, posters and flyers, television and radio announcements, Web sites, and e-mail). Develop appealing recruitment materials that give prospective peer educators a positive first impression of your program and that clearly explain the benefits and challenges of being a peer educator.
- Ask other young people in the target group or existing peer educators for their advice. If asked, young people might nominate others who they think are respected among their peers and who would make good peer educators.
- Involve relevant stakeholders—such as parents, community members, and the intended beneficiaries of your program—for input into the recruitment process. Doing so might take more time, but their involvement will help ensure local community support.

### Example

Recruitment and retention of female youth peer educators posed a challenge for the Geração Biz (Busy Generation) Program in Mozambique, a project that took place in a largely rural area. When the program began involving parents in recruitment and training efforts, parents' perception of the program improved and retention of female peer educators increased (Pathfinder International 2006).

## 2-3. Adhere to a transparent and fair selection process

- Document your recruitment process so that it can be implemented fairly and ethically. An inconsistent selection process can lead to favoritism or disagreements among those doing the recruiting.
- Communicate to candidates how the selection decisions will be made. Some common methods for selecting peer educators include application forms, nominations from stakeholders or fellow peers, interviews, or a preselection training event.
- Maintain the confidentiality of prospective peer educators' information, especially when recruiting for programs intended for **vulnerable** or **marginalized groups**.

## 2-4. Provide clear expectations to peer educator candidates

- Develop a clear set of expectations about peer educators' roles and responsibilities. Determine how much time peer educators will be expected to devote to the project.
- Carefully review expectations with all peer educator candidates so they can understand what will be required of them. Ask candidates what they hope to gain from participating in the program. Then, be honest about opportunities and incentives you have to offer to them. Do not promise more than the program can deliver.

- Be realistic about what your peer educators can accomplish. Be mindful of their skills and level of education and match their tasks accordingly.

### **Example**

The Reproductive Health Program staff in Georgia found that they could not expect peer educators of injecting drug users in prisons to perform reporting tasks. Thus, the main paperwork is done by social workers who train and supervise the peer educators.

## **Retention**

### **2-5. Establish written agreements with peer educators**

- Create written agreements, or commitment letters, based on the expectations discussed during the recruitment process. Specify what the educators' actual activities and working conditions will be and what peer educators should hope to gain from being in the program. Include a code of conduct by which both staff and peer educators agree to abide. Review the letter aloud if a candidate has difficulty reading.

(See Annex 2, page 48, for an example of a code of conduct.)

- Discuss the agreement with peer educators and adapt if needed to ensure that their most important concerns are reflected and that issues are clarified.
- Specify the length of service expected for peer educators in your program. For example, you may establish the written agreement for one year with an option to renew in the second year. Also explain that they should feel free to leave to pursue career or livelihood opportunities.
- Review expectations with peer educators periodically and refine the document as needed.

### **What the research tells us**

Evidence from Tanzania suggests that peer educators stay involved in a program for an average of one to two years (Tanzania Ministry of Health and Social Welfare 2009).

### **2-6. Promote cooperation and teamwork**

- Promote teamwork. Use group activities to help peer educators develop friendships and work as a group. Friendships motivate young people to join, to be active in, and to remain in a peer education program.

- Schedule regular meetings with peer educators so that they can share their experiences and provide and receive feedback. In programs with large numbers of peer educators, consider holding small-group meetings so that everyone will have a chance to participate.
- Ensure that staff do not practice favoritism, which creates resentment and confusion.

## **2-7. Establish systems for providing incentives and reimbursement**

- Develop a system of incentives and positive reinforcement. Incentives for peer educators could include public recognition, awards, and rewards; social and recreational opportunities; exchange (and travel) opportunities; and advancement within the program, as appropriate. When possible, link peer educators to career training and livelihood opportunities as an incentive. Consider hosting a public awards ceremony for peer educators. Recognition from peers and adults involved in the program can be motivational.
- Create an incentive system that is financially sustainable. It is hotly debated whether paying peer educators is a successful strategy, and the research evidence is inconclusive. Some program experiences suggest money as an incentive does not guarantee loyalty from peer educators and can hurt a program's financial sustainability. On the other hand, other programs have found that “professionalizing” peer education by paying a salary can help in retaining high-quality peer educators in the long term and reduce costs related to ongoing training and recruitment.
- Make sure your incentive system is fair and that everyone knows the criteria for receiving awards or opportunities. Ensure that award-based incentives are motivational by only giving awards to those who deserve them.
- Develop very clear guidelines about reimbursing peer educators for expenses. Transportation allowance and meals should be regarded as basic support rather than an incentive.

### **Example**

The Zanzibar Family Planning Program provides peer educators with bicycles and other equipment to support their work as community-based distributors. As an incentive, the peer educators are allowed to rent out the equipment when not in use as a way to improve their livelihood.

### **Example**

Y-PEER in Kenya has established annual awards to motivate and reward peer educators and partner organizations. Awards include “Power-full Peer” for the best peer educator and “Prized Partner” for the best collaborator among youth-serving groups. To honor the best Y-PEER networks across the globe, Y-PEERs nominate, vote for, and award “the best network” and peer of the year.

## **2-8. Offer peer educators the opportunity to accept more responsibility**

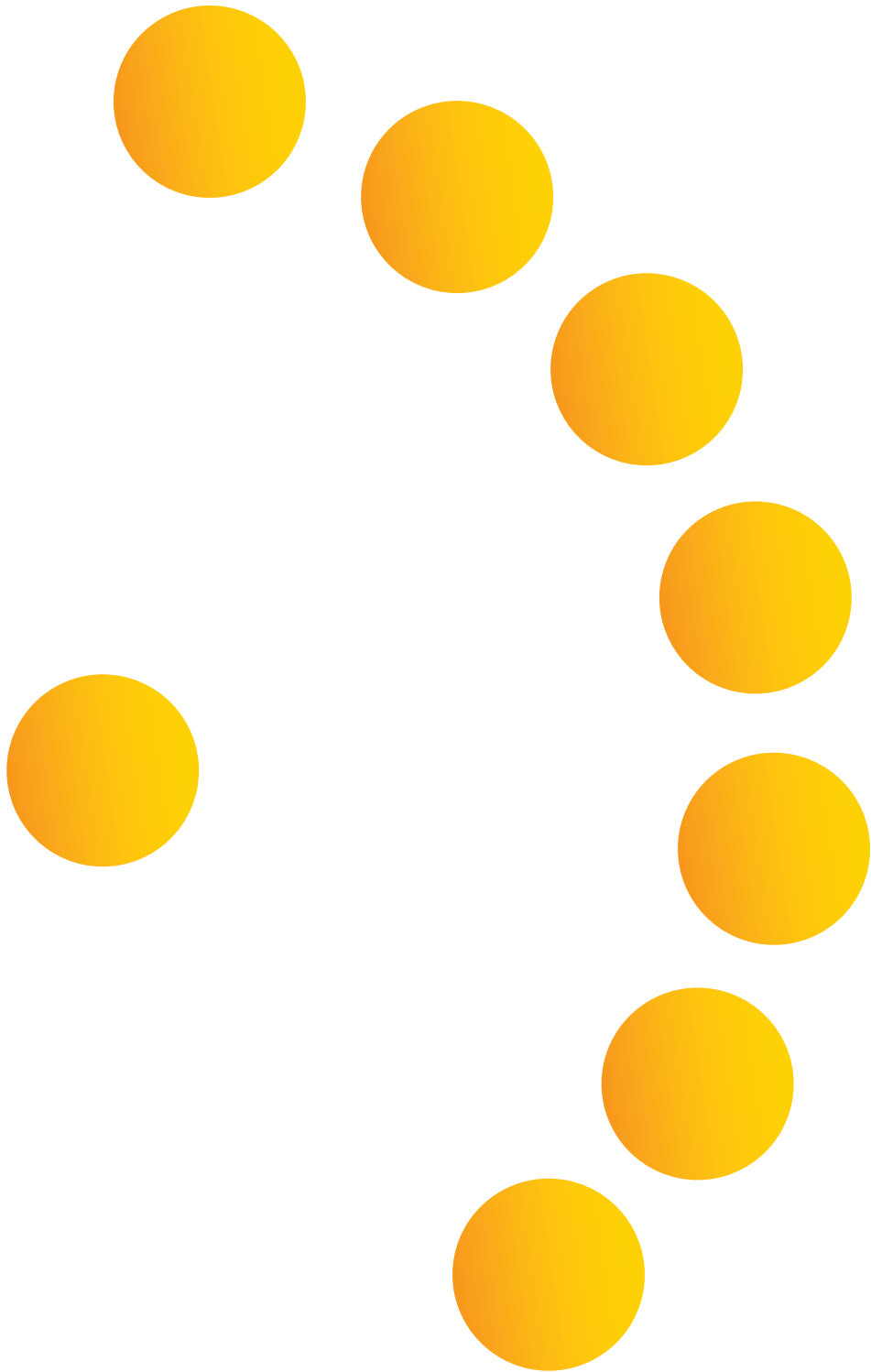
- Develop a promotion system in which peer educators are mentored to take on more responsibility and more complex tasks.
- Look for tasks that can serve as a learning opportunity for peer educators. Consider training them to assume some of the responsibility for running the program, such as recruiting and training other peer educators or performing basic office functions, if they are interested in these responsibilities. In this way, you can increase peer educators' knowledge and expand staff capacity at the same time. Some peer educators might eventually receive a staff position and become effective program managers.

## **2-9. Develop a formal procedure for departing peer educators**

- Meet with peer educators who decide to leave the program, determine why they wish to leave, and discuss why their feedback is important. If a peer educator is dissatisfied, you can use this information to improve the program or encourage the peer educator to stay.
- Ask departing peer educators if they can recommend someone to take their place in the program.
- Try to identify ways that departing peer educators can remain involved in the program (perhaps as supervisors or trainers) or suggest how they could use their new skills in other roles in their communities. Be sure to thank them for their involvement.

### **Example**

In Kenya, some peer education groups hold a graduation ceremony for peer educators who have successfully completed their assignment. This is a way to acknowledge peer educators for their commitment while encouraging them to embark on their next steps into adulthood.



*The guidelines in this section address the training that peer educators should receive to lead education sessions effectively on their own or with minimal involvement from adults. The section includes information on developing training for new peer educators and creating a sustainable training strategy as new peer educators enter the program and others leave.*

### **3-1. Develop a training strategy that builds the capacity of peer educators for the life of the program**

- Decide how many peer educators you need to train and how long the initial training will be. Keep the size of the training group small enough for everyone to participate actively. If you have more peer educators than can be accommodated in one training, hold several trainings and stagger the starting dates to allow for phasing in new peer educators throughout the program's implementation.
- Develop a training agenda that includes the learning objectives to be met and the time to be spent on each activity. Participatory activities and discussion can vary according to the size of your group and participants' knowledge and experience with the content. Avoid creating an agenda so full that it overwhelms the trainees.
- To keep peer educators' skills fresh, plan for targeted refresher trainings or other ways to build skills. Determine how often to hold refresher trainings and what to cover through feedback from peer educators' supervisors, peer educators themselves, and monitoring data. Remember that peer educators also can learn outside of formal training sessions through mentoring, supportive supervision, meetings, and exchange visits to other programs.
- Document your training strategy and include it in your work plan so that you can share it with others. Adjust your training strategy as needed.

#### **Example**

In an FHI program in Kenya, peer educators frequently identify additional training as their most pressing need. However, when asked what topics they felt they needed to learn more about, they often name only one or two. Managers have found that these topics often can be addressed in monthly supervision meetings, which are more cost-efficient—and better targeted to each educator's needs—than a large refresher training.

### **3-2. Work with qualified trainers**

- Find trainers who are well informed, have the requisite knowledge and skills, are flexible and able to improvise, are experienced in peer education, are responsive to concerns of young people, are familiar with youth development, and are sensitive to local cultural and gender issues.



- Ensure that the trainers are familiar with and skilled in participatory approaches and that they are comfortable working as co-facilitators, if needed.
- Consider hiring trainers on a contract basis if none are available within your own organization. Also, consider training appropriate staff within and outside of your organization to become trainers.

### Example

The Y-PEER Network engages trainers from a variety of backgrounds to conduct training of trainers (TOT) workshops. Besides expanding the cadre of trainers, these TOTs also provide opportunities for experienced trainers to mentor new trainers and for motivated peer educators to take on new roles as trainers. The Y-PEER Network strives for a balance of males and females, a wide range of ages, and various levels of expertise.

### 3-3. Use a high-quality training curriculum and supportive educational materials

- Select an existing training **curriculum** or adapt a training curriculum that meets the objectives of your program. For purposes of this document, a training curriculum is comprised of organized activities to guide trainers as they teach young people the knowledge, values, and skills they need to be successful peer educators. Providing handouts or other materials to peer educators is important in helping to reinforce the information and skills covered. (When handout materials are packaged as a book, they are sometimes referred to as handbooks or participant manuals.)
- Ensure that the training curriculum is current and factually correct, culturally appropriate, age appropriate, gender sensitive, participatory, and interactive. The content and exercises should (1) teach peer educators about the subject matter they will be presenting to young people, (2) provide clear messages about behaviors the program is encouraging, (3) present participatory techniques for peers to replicate, and (4) provide opportunities for peer educators to practice leading sessions.
- Give peer educators useful, factual resource materials to distribute to young people in their peer education sessions.

(See Annex 4, page 52, for information about training resources and curricula available from other agencies.)

### Example

Young people can play leading roles in designing or developing training materials. In Kyrgyzstan, young members of the NGO Alliance on Reproductive Health, a member of the Y-PEER Network, successfully developed a peer education training curriculum that is now the country's main tool for working with youth to promote sexual and reproductive health.

### What the research tells us

A review of curriculum-based peer education programs found that certain characteristics improve the quality of curricula and the impact they have on youth (Kirby 2005). These characteristics are outlined in *Standards for Curriculum-Based Reproductive Health and HIV Education Programs*. Program planners, educators, trainers, and others can use the document to assess the quality of an existing curriculum or to develop a new one. (See Annex 4, page 52, for more information.)

### 3-4. Create an environment that encourages active participation and learning

- Select a venue that is spacious and comfortable. Participants need room to move about, work in small groups, and role-play.
- With input from participants, develop ground rules that can help create a safe environment. Ground rules could include not asking personal questions, not interrupting others, respecting everyone's opinions, and maintaining each others' confidentiality. Also, use **icebreaker** exercises to help participants feel comfortable and get to know one another.
- Arrange groups by gender or other shared characteristics if it helps in creating a safe environment when discussing sensitive topics.
- Make sure that participants are given ample time to interact and practice skills during the training. Use a mix of **participatory teaching and learning** methods such as role-plays, live skits, games, small-group work, and class discussions.
- Vary the length and pace of activities. A brief presentation by the trainer might be followed by an energetic group activity and then by quieter, individual work.

### What the research tells us

Research suggests that participatory approaches are an important characteristic of effective programs that seek to improve young people's reproductive health and HIV outcomes (Kirby 2005). For trainers who are used to more traditional teaching approaches, however, participatory teaching might take adjustment. Experts in participatory teaching can help design training and adapt traditional curricula so that the activities are more interactive and engaging.

### 3-5. Discuss ethical issues

- Discuss any ethical issues (such as confidentiality, power balance, and gender equity) that are likely to arise during training and in their work as peer educators. Explain laws in your country regarding mature minors (minors who are deemed mature enough to make their own decisions regarding their health) and the age of consent and marriage, as well as other laws or policies that could affect peer educators' work with young people.
- Consider asking a team of staff and peer educators to work together to develop a code of conduct. You can use the code provided in Annex 2 of this document as a model. Post the code in a public area to remind staff and peers of their obligations, or ask each peer educator and staff member to sign the code.
- Train peer educators to respond appropriately to questions to which they do not know the answer. Emphasize that rather than guess or make up an answer, peer educators should ask a supervisor for help or refer participants to an appropriate expert or reference materials.

(See Annex 2, page 48, for an example of a code of conduct.)

### 3-6. Evaluate the training

- Develop or adapt tools with which to assess trainee knowledge and skills before and after the training. Hire an expert to help develop these tools if needed.
- Compare pre- and post-training assessments to determine whether peer educators have acquired the skills they need to successfully lead a peer education session. If they have not, you should (1) retrain as needed, and (2) redesign the training, if necessary, to make it more effective.
- Allow peer educators to evaluate the trainers and the training itself. Create an evaluation form that trainees can fill out anonymously to give honest feedback.

#### Example

In Mongolia, as part of the Y-PEER Network, peer education trainers use fun and inspiring methods to evaluate peer educators' knowledge and skills. After the training, the trainers announce an essay and poster competition for new peer educators. The peer educators who demonstrate the most comprehensive knowledge are awarded a certificate and promotional items.

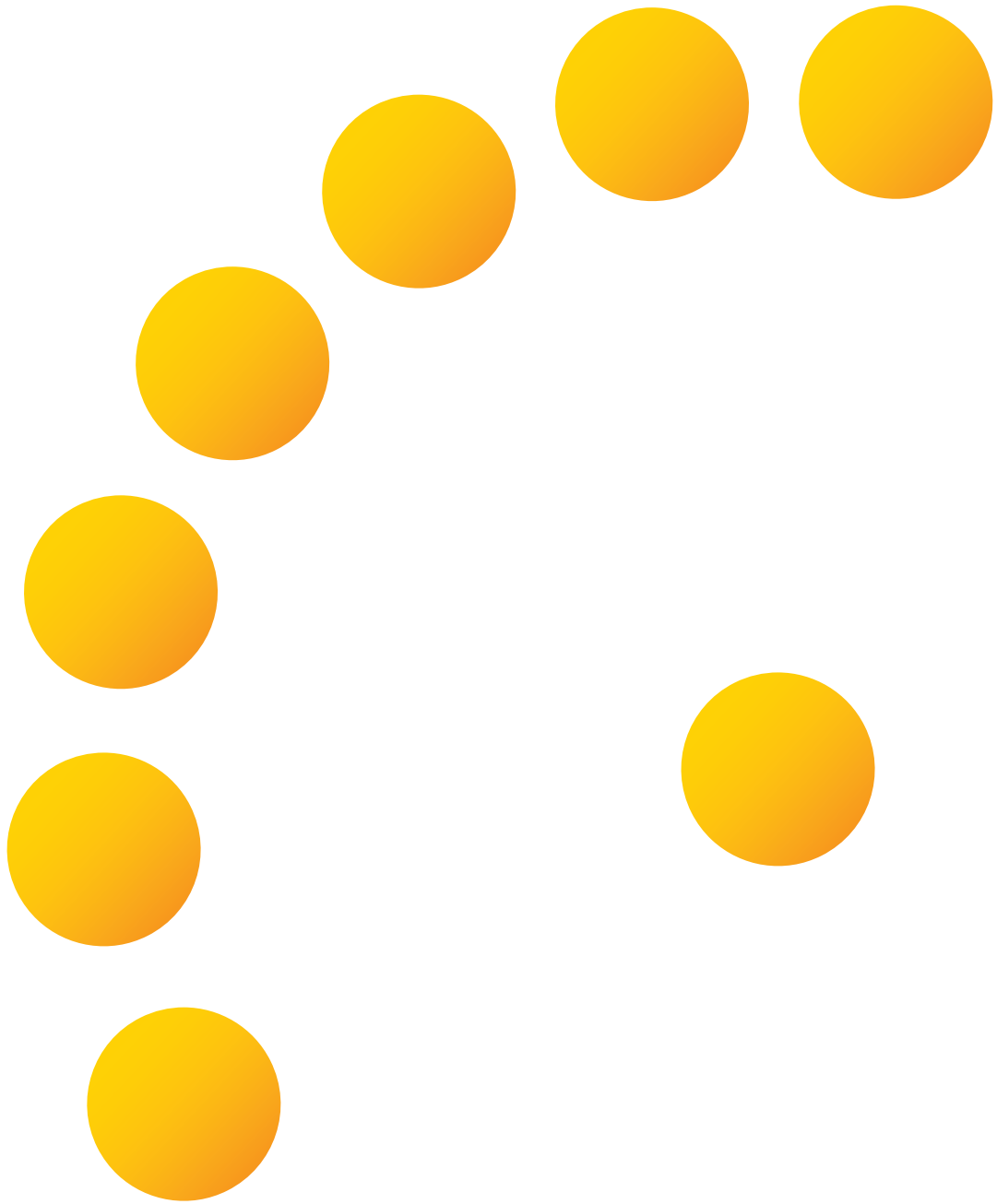
### 3-7. Involve experienced peer educators in the training or as mentors

- Encourage peer educators who have already completed the training to co-facilitate the training of new peer educators or to mentor new peer educators by encouraging them and helping them develop their skills.

- Ask experienced peer educators to help draft agendas and review training materials.
- Ensure that peer educators work in partnership with adults, whose experience and guidance play key roles.

### What the research tells us

Research in the Dominican Republic and Zambia found that youth involvement is critical for peer educator retention, motivation, and productivity (Burke 2005). **Youth participation** does not mean that peer educators control the program. Rather, they are provided with the opportunity to make substantive contributions. The FHI/Y-PEER tool *Assessing the Quality of Youth Peer Education Programs* provides a simple checklist with which to assess youth involvement and other aspects of your program. (See Annex 4, page 52, for more details about this tool.)



*Peer education sessions should relate directly to your program's goals and objectives. This section provides guidelines on how peer educators can lead effective group education sessions with their peers. Many of the practices described in Section 3. Training Youth to Be Peer Educators are also applicable.*

## **4-1. Ensure that peer educators are qualified and prepared to lead education sessions**

- Be sure that peer educators have successfully completed necessary trainings and supervision meetings before they lead peer education sessions. It is very important that peer educators know what is expected of them during sessions with their peers.
- Provide peer educators with necessary materials for leading education sessions, such as an educational curriculum (see Guideline 4-2, this page), job aids or visual aids, workbooks, and a referral directory. Ensure that peer educators have handouts or other materials to give to their peers to reinforce the sessions. Finally, provide peer educators with monitoring and evaluation tools. (See Guideline 4-4, page 31.)
- Ensure that peer educators know how to incorporate participatory methods into their sessions, including demonstrations, games, and skits. They should correct inaccurate beliefs or counteract negative attitudes (such as stigma, discrimination, and gender stereotypes) that are expressed in these activities.
- Remind peer educators that they are not professional teachers or counselors. They might be faced with issues that they are not trained to handle, such as disclosure of abuse, rape, sexual coercion, forced marriage, child labor, child trafficking, or involvement in the sex industry. However, peer educators should be prepared to make referrals in these instances or when youth need medical care.

## **4-2. Plan content and activities with the help of a high-quality educational curriculum**

- The curriculum must cover topics about which your target group needs more information and skills. The curriculum should not stray far from your program's goals and objectives (such as helping young people prevent unintended pregnancy or decrease their risk of acquiring HIV). This educational curriculum will differ somewhat from the training curriculum for peer educators (noted in Section 3. Training Youth to Be Peer Educators). The goals and audience of the two curricula are different, but many of the activities and topics covered are the same.
- Ensure that the educational curriculum provides clear messages on specific behaviors that lead to the desired health goal. (See box, page 30.) It should also address the consequences of not reaching those health goals. For example, how would participants feel if they (or their partner) became pregnant? How would discovering that they were HIV-positive affect them?
- Make sure that the curriculum addresses risk and protective factors, including attitudes about sex and abstinence, the intention and ability to use condoms, and the perception of HIV risk. Identify which of these factors apply to the young people participating in your program, and then conduct activities to amplify the protective factors and minimize the risk factors.

- Help peer educators plan sessions before they meet with peers. For example, peer educators should know how they will open and close the session and what kinds of activities they will lead. Also, peer educators should find out what their peers want and need to learn and include that information in their sessions as much as possible.
- Ensure that peer educators provide learners with the opportunity to practice skills that are critical to changing behavior. For example, participants might act out a skit in which they seek diagnosis and treatment for STIs. If these activities are not already included in the educational curricula, be sure they are integrated into the agenda of each educational session.

(See Annex 4, page 52, for examples of educational curricula and materials.)

### What the research tells us

Curriculum-based activities led by peer educators can bring about behavior changes among youth who participate in these programs. Research has shown that a clear message about behavior is one of the most important characteristics of effective sexual health programs for young people (Kirby 2005). Examples of behaviors that reduce pregnancy or HIV transmission include but are not limited to:

- Abstaining from or delaying sex
- Decreasing frequency of sex
- Decreasing number of sexual partners
- Avoiding concurrent or multiple sexual partners
- Increasing the time gap between sexual partners
- Using a condom consistently and correctly during every sex act
- Being tested and treated for HIV and STIs
- Being circumcised (males only)

### 4-3. Develop a schedule that encourages regular attendance and participation

- Peer educators should ask the young people to whom the program is targeted when and where they can attend sessions and build a schedule around their peers' availability and level of commitment to the program. Suggest that the peer educators and peers agree on a schedule. For example, a group might determine that it will meet weekly for four months and cover 16 topics during that time.
- Determine the size of peer education groups according to the groups' needs and context. For example, if peer educators are working with a school class, the group size might be predetermined. When conditions allow, peer educators should recruit groups in small sizes that allow for active and equitable participation.

- Ensure that peer educators conduct sessions regularly. Ideally, intervals between sessions should not exceed one week.
- Determine how long each session should be. Peer educators need enough time to discuss the topic but not lose participant energy and interest. Sessions might range from half an hour to two hours.
- Make learning fun! Determine what motivates young people to participate in the peer education sessions. Consider building time in the agenda to invite experts, service providers, or resource people from other organizations as guest speakers or to visit health facilities. These activities can reinforce linkages with health services and ensure that the information presented by the peer educators is up-to-date.

### What the research tells us

Evidence from health education programs emphasizes the need for repeated exposure to simple and consistent messages for participants to make long-term changes in behavior (DeJong 1998). When you are planning your program, leave time to practice skills and reinforce messages that young people are learning.

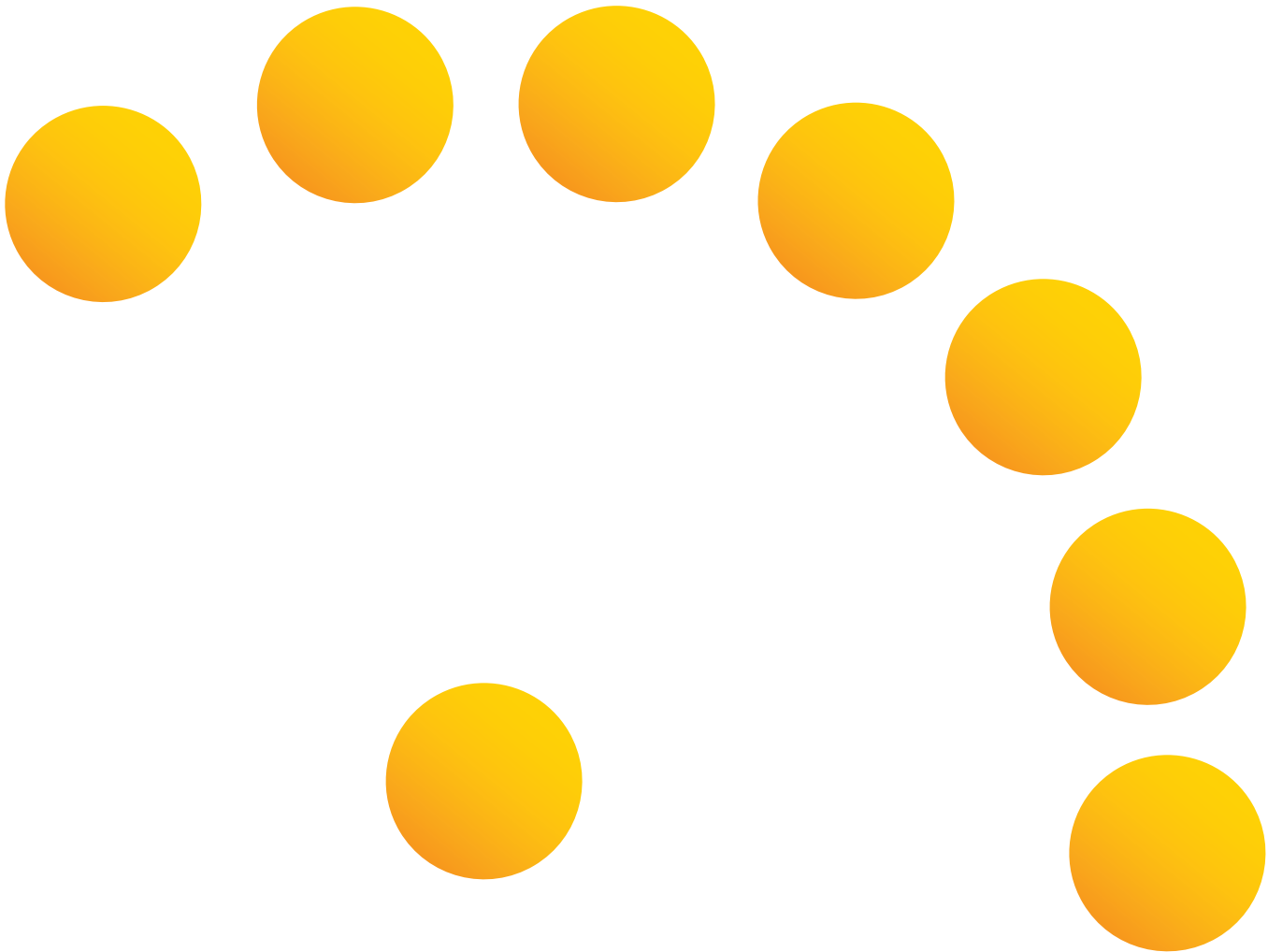
#### 4-4. Monitor and evaluate peer education sessions

- Provide peer educators with pre- and post-tests and evaluation forms and make sure they use these tools at the end of each session. If resources are limited, conduct pre- and post-tests at the first and the last session. Ask for feedback from youth participants about which topics were particularly relevant to them. Also ask whether any topics were not adequately covered.
- Ensure that peer educators fill out monitoring forms (sometimes called reporting diaries) after each session. At a minimum, these monitoring forms should capture information such as attendance, topics covered, and any challenges they encountered.
- Use the results of monitoring forms and evaluations to gauge what participants learned and how to improve the content and delivery of future sessions.

#### Example

Peer educators in Haiti, Tanzania, and Guyana—as part of the American Red Cross program, Together We Can—regularly administer pre- and post-test questionnaires to their peers. Project coordinators use software to analyze changes in knowledge, attitudes, and skills on a per-question basis, cross-tabulated by gender, age group, scholastic level, and peer educators' experience. While this information does not measure behavioral changes, it does enable country-level coordinators, field managers, and peer educators to better monitor the project's successes and shape the program's content. For example, when a project coordinator in Haiti noticed negative results in two out of the seven project sites for knowledge of HIV prevention methods, coordinators visited those sites to work with field managers and peer educators in strengthening their prevention messages.





*The guidelines in this section address supervising peer educators and managing program staff and systems.*

## Supervision of Peer Educators

### 5-1. Use trained and skilled supervisors

- Select supervisors and train them in **supportive supervision**, team building, and relevant technical areas. Supervisors need to be more knowledgeable and skilled than the peer educators they are supervising. Supervisors can be staff, volunteers, or community stakeholders. Also, skilled and empowered young people can be effective supervisors in peer education programs.
- Train supervisors to be sensitive to group dynamics, aware of their own values and attitudes, and perceptive about **psychosocial issues** faced by peer educators.
- Ask supervisors to periodically review the program's goals and objectives to make sure their own oversight complies with the program's mission.
- Remember that peer educators are often more responsive to supervisors whom they view as friendly and understanding.

### Example

In the American Red Cross program, Together We Can, each field manager (a staff member) supervises 10 volunteer peer educators. This relatively low staff-to-educator ratio affords field managers the time to support peer educators through ongoing coaching and monthly meetings. Field managers ensure that peer educators are properly equipped with stipends, uniforms, curricula, and educational materials. Senior peer educators help coach when they are paired with new peer educators. Adults in community councils—regional and local committees that help identify program participants and recruit peer educators—occasionally observe sessions and provide feedback.

### 5-2. Conduct supportive supervisory meetings

- Consider whether to hold one-on-one supervisory meetings, group meetings, or a combination of both. In conducting supervisory meetings, maintain an atmosphere of fun and teamwork, and provide constructive criticism in a positive manner. In group meetings, energizers and other activities are important team-building tools and should not be discarded for lack of time.
- Address peer educators' requests for additional information and skills. If you identify any gaps in knowledge, incorporate technical content into regular meetings and recommend refresher training or other learning opportunities. Review reporting diaries and ask peer educators to discuss how they implemented suggestions from previous supervisory meetings.
- Make sure that supervisors are readily available to peer educators to answer questions, provide feedback, and offer support.

### 5-3. Supervise and support peer educators as they are leading sessions

- Develop criteria by which supervisors should evaluate peer educators. Emphasize the need for consistency and fairness in supervision.
- If possible, begin supervising peer educators before they lead their first session to make sure that they are adequately prepared. A supervisor should observe at least one entire session within the first month or two after the peer educator starts holding sessions.
- Occasionally observe peer educators as they lead sessions. Develop a checklist to assess performance in a standardized manner. After the session, a supervisor should meet with the peer educator to provide feedback and agree on actions for improvement.

#### Example

While adult supervision is important, adults should not attend every peer education session. The presence of adults in peer education sessions can change the environment and sometimes discourages young people from speaking openly. The Family Life Action Trust in Dar es Salaam, Tanzania, uses trained and qualified youth, rather than adults, to supervise peer education sessions and encourage open exchange among the group members.

### 5-4. Continually reinforce ethical behavior and motivation

- Review the code of conduct with peer educators after they finish training and before they begin their work with other young people.
- Explicitly state which behaviors call for disciplinary action. Although some situations might be excusable, most ethical breaches are cause for termination from the program. Consider codes of conduct in the context of the program's goals and mission. If the program seeks to influence youth engaged in risky behavior, it could be counterproductive to select peer educators from such a group and then penalize those who do not always behave as a role model.
- Make sure that incentives and other means of addressing motivation, stress, and burnout among peer educators are delivered in a timely and fair way.
- Provide peer educators with guidance on personal and professional development when appropriate. Identify opportunities where peer educators could accept additional responsibilities within the program.

#### Program Management

### 5-5. Ensure competency and cohesion of the program's staff

- Orient all staff to the guidelines in this book and to other relevant standards and policy guidelines.

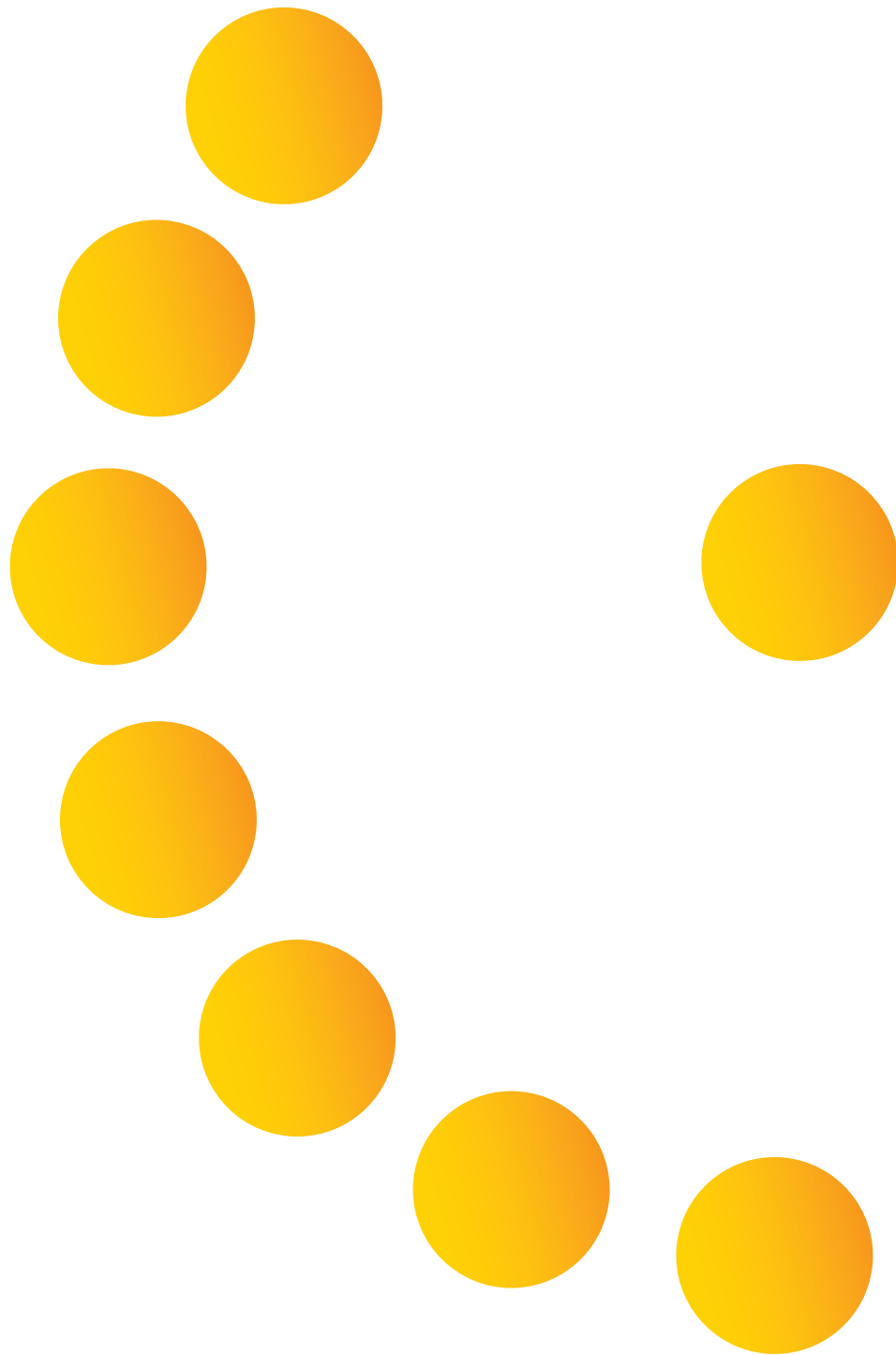
- Assess the staff's knowledge and capabilities. Recommend activities to address any gaps. These activities can include training, study visits, conference participation, time for reading journal articles, and sharing lessons learned.
- Develop a management team that capitalizes on each member's strengths. Everyone does not have to be skilled at everything, but the team as a whole should run your program effectively and efficiently.
- Build a sense of teamwork between staff who work directly with youth and those who manage administrative and financial aspects of the program. Help each group understand how the other group contributes to the program's success. Train interested peer educators to complete required paperwork, such as time sheets, budgets, and work plans. Ask office staff to be patient with peer educators, who might not have experience working in a professional office environment.

### **5-6. Establish a participatory decision-making process**

- Make sure that staff and peer educators know how decisions are made and in which circumstances they have an opportunity to provide input.
- Follow a clearly outlined chain of command to help everyone be accountable for their performance. For example, peer educators might report to program coordinators, who then report to the program director.
- Train young people and adults to work together and share the responsibility of making decisions about the program. If only a small proportion of peer educators are included in the decision-making process, they might not feel free to share their views.
- Remember that the relationship among staff, peer educators, and other stakeholders often changes over time. Early in a program's development, the stakeholders tend to be highly involved and influence many decisions. As the program matures, staff and peer educators take on more responsibility and accountability.

### **5-7. Use accurate data and information when making decisions about the program**

- Establish mechanisms to ensure the quality (accuracy, reliability, credibility, and timeliness) of any data you collect about the program. These mechanisms might include regular supervision of peer educators; spot checks of forms and other documentation; exit interviews of staff, educators, or program participants; and **focus group discussions** among participants and stakeholders. (See Section 6, page 37, for more information on monitoring and evaluation.)
- Ask supervisors to follow up with participants to determine whether peer educators are holding sessions as required and relaying accurate information. Supervisors might visit homes to talk with young people (and possibly their parents or guardians) about the quality of the peer education sessions.
- Regularly review evaluation data and address any challenges the data reveal. Do not wait until the final monitoring and evaluation report has been completed before using data to improve your program.



*This section provides basic guidelines about monitoring and evaluating your peer education program. Monitoring and evaluation (M&E) helps you understand which aspects of your program work well, which need improvement, and to what extent your program is meeting its goals and objectives.*

## Definitions

**Monitoring** means routinely tracking information about your program and its intended outcomes. You should monitor inputs and outputs through record keeping, regular reporting systems, or client surveys. The goal of continuous monitoring is to identify problems and remedy them immediately.

**Evaluation** comprises a group of activities that determine your program's effect or value, particularly on whether your program has the intended effect on specific behaviors or outcomes. **Indicators** are a measurable statement of your program's results, and they help to track your performance.

### 6-1. Establish functional, relevant indicators to measure progress

- Select key indicators that reflect what your program intends to accomplish, as described in your program's objectives and planned activities. An example of an indicator might be the percentage of youth reached by the program who have learned how HIV is transmitted, or the percentage of youth reached who have taken an HIV test and know their results.
- Choose meaningful indicators but not more than are practical to track. For example, effecting change in health behaviors is admirable, but these changes can take a long time to occur and can be difficult and expensive to measure. On the other hand, it might be more manageable to measure changes in knowledge, attitudes, ability, or intentions to perform certain behaviors.
- Pick indicators that measure results across your entire program. For example, if your program combines peer education with community mobilization, theater, and health service promotion, you will want to measure the success of each of these components. Also, select indicators that measure both **qualitative** and **quantitative** information.
- Review indicators with staff and peer educators to ensure the indicators are relevant and useful. If needed, modify the indicators to be sure that you can collect the data you need.

### Example

A peer education program in Namibia, My Future is My Choice, used the following indicators, among others: youths' comprehensive knowledge of HIV transmission and prevention, their ability to identify STI symptoms, their demonstrated ability to use a condom, and their use of counseling and testing services.

## 6-2. Set indicator targets

- Set realistic, achievable targets for each indicator. Decisions about your targets might be influenced by baseline surveys, what has worked for past projects, and prior experience. For example, an indicator with a well-selected target might be that 80 percent of young females reached by the program know how HIV is transmitted or 25 percent of youth reached have taken an HIV test and know their results.
- When possible, state indicator targets as percentages, ratios, or proportions. This provides better information about what your program has achieved than will numbers alone. For example, you might say your program will reach 150 youth, but is that out of 200 or 1,000? It would be better to state that you want to reach a certain percentage of the youth in your area.

## 6-3. Develop and apply your M&E plan

- Decide which of your program's components or activities should be monitored and evaluated. You might not be able to evaluate them all.
- Ensure that your M&E plan aligns closely with the goals and objectives of your program and answers the following questions: What program activities will you collect information about? What are your indicators and how will they be tracked? Who will collect data about your indicators? How often will data be gathered? Who will analyze the data to determine whether your program is meeting its goals? Be realistic about the scope of your plan. If your M&E plan is poorly designed, it might do more harm than good.
- Build time into your M&E plan for the routine collection and analysis of data. Then, develop a clear plan for how you will use the data. Collecting data takes time, and if the data never get reviewed or used, people might be discouraged from making the effort.
- Hire or consult with an M&E specialist when constructing the plan, if needed. Academic or research institutions might be good sources of expertise.

## 6-4. Use appropriate monitoring tools

- Develop monitoring tools, such as questionnaires, diaries, and tracking forms, that are easy to understand and fill out. Or, adapt existing tools that have already proven helpful. Ensure that tools are in the language of and written for the reading level of those who will use them.
- Pilot test the tools with those who will eventually be asked to use them. You might be able to identify ways to simplify the data collection process, secure buy-in from peer educators, increase compliance, and identify design flaws that could hamper the collection of quality data.
- When monitoring tools have been pilot tested and refined, train staff and peer educators how to use the tools.

## Example

Problems can arise if peer educators do not understand why they are collecting information. In one program, peer educators filled out the pretraining questionnaires themselves rather than giving the questionnaires to participants. Once a supervisor addressed the problem, the quality of the data collected improved and peer educators felt an increased ownership in the M&E process.

### 6-5. Gather baseline and follow-up data

- Gather baseline data on your established indicators. Baseline data should be collected before your program begins.
- Gather data on your indicators at predetermined points throughout the course of your program (and at the program's end, if it concludes). Compare these data to your baseline data to measure and better understand the influence of your program.

### What the research tell us

Few published studies have rigorously evaluated the effect of peer education programs on youth and on community health indicators and outcomes. Evaluation studies that measure a program's impact can include randomized experiments with a **control group**, quasi-experiments, and other evaluation designs. Undertaking an impact evaluation requires careful thought and planning, sufficient financial and human resources, and a high level of evaluation expertise. A thorough explanation of impact evaluation is beyond the scope of these guidelines, but more information is available in Annex 4, page 52.

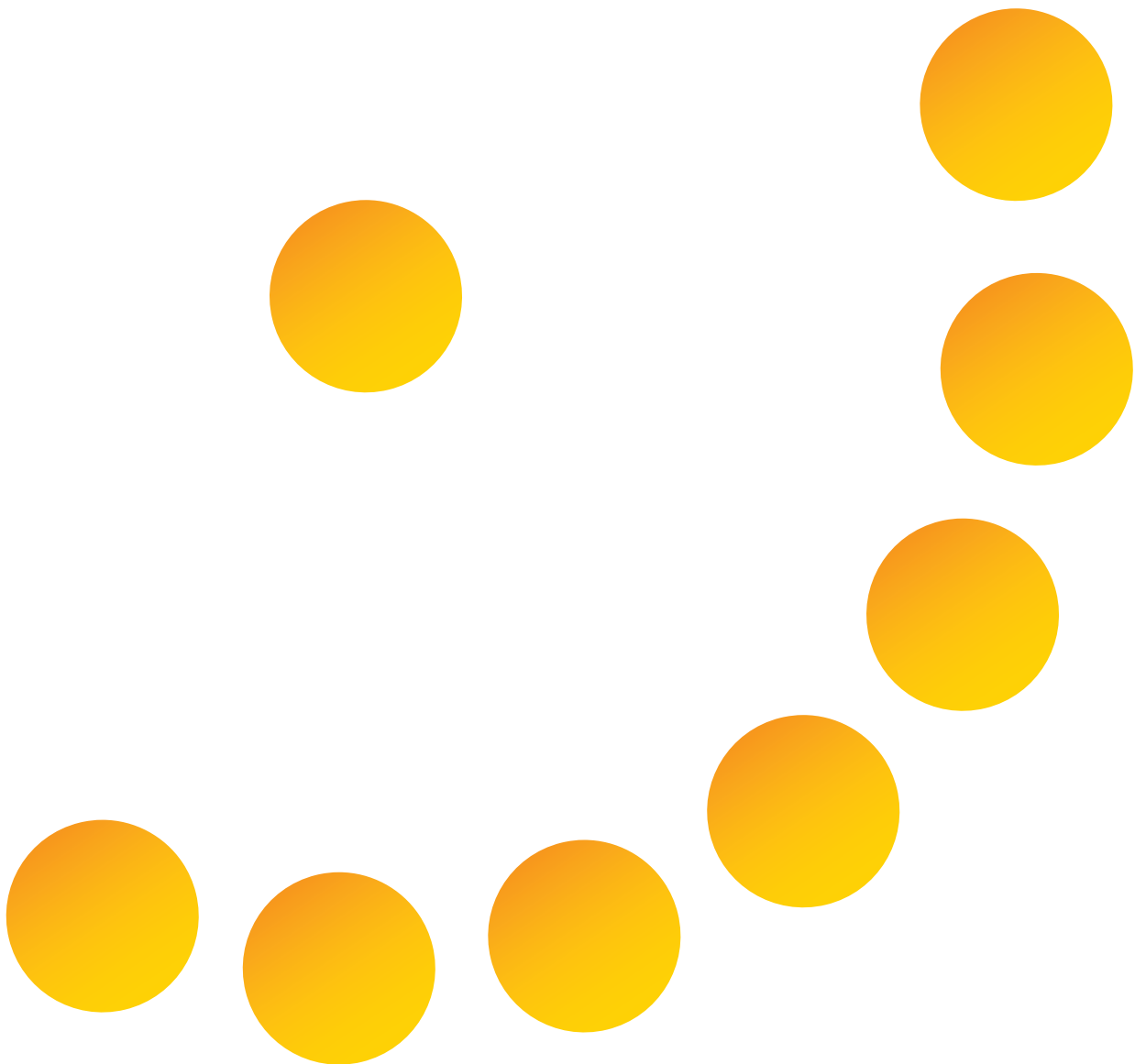
### 6-6. Document the program

- Share M&E information and document the program for stakeholders in the community and beyond. Documentation will allow you to capture program achievements, successful outcomes, and other successful developments. You might also want to capture how the program can be replicated or what is needed to share good practice.
- Consider writing up your results and submitting a paper to a peer-reviewed research journal or disseminating your results in other ways. There is much still to learn about context-specific factors that contribute to the success of peer education programs, and publishing your results could help fill this knowledge gap. Other opportunities for sharing information include success stories, case studies, presentations at conferences, reports, newsletters, and news stories.



## Example

The Interagency Youth Working Group (IYWG) produces the publication *Youth InfoNet* for those who work on youth reproductive health and HIV to share and learn about new publications and resources. *Youth InfoNet* is sent out by e-mail and contains summaries of and links to relevant journal articles and other publications. To sign up for the publication or contribute your materials, send an e-mail to: [youthwg@fhi.org](mailto:youthwg@fhi.org).



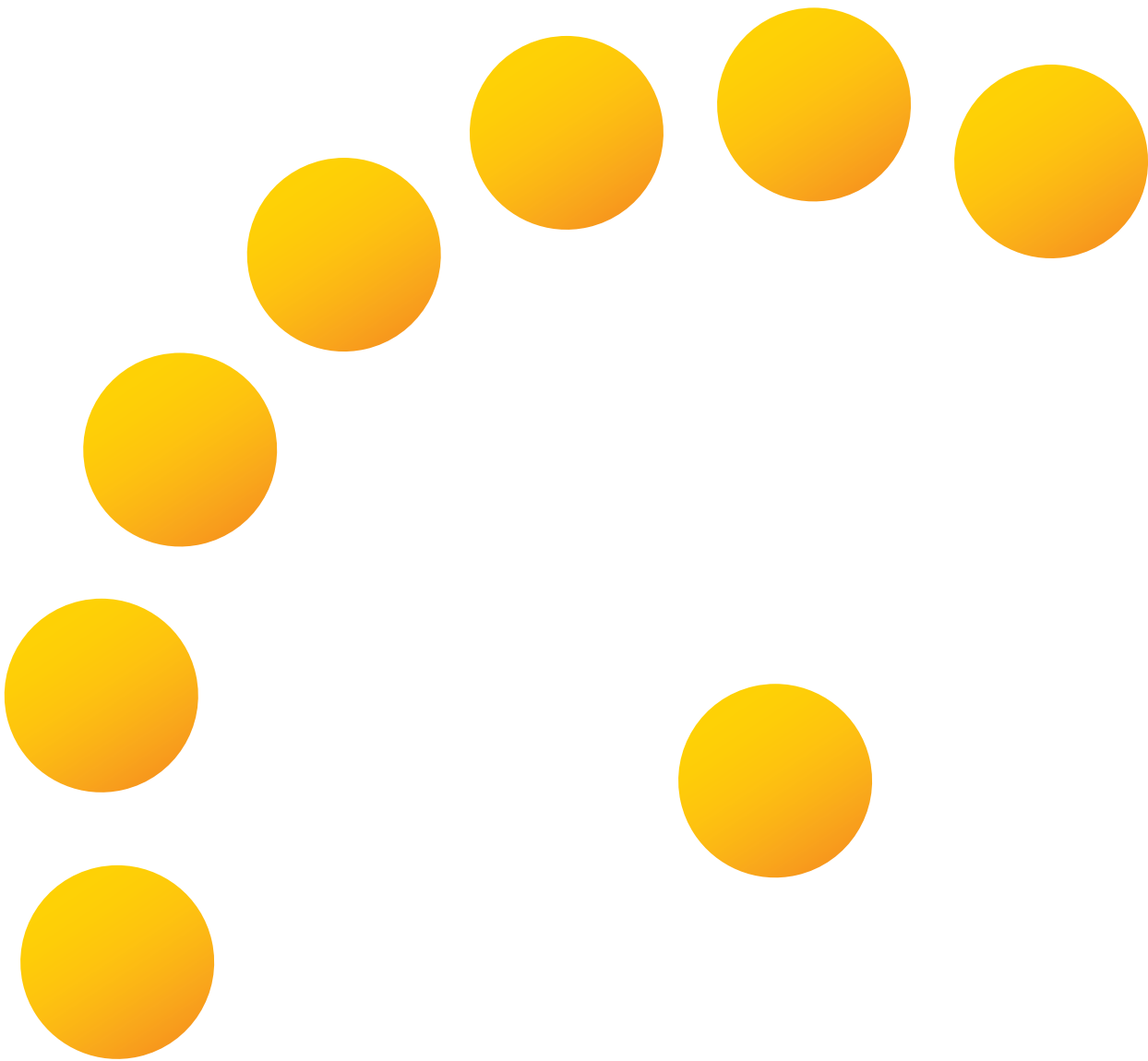
# CHECKLIST AND ACTION PLANNING TOOL

In the table below, circle a rating for each guideline, as follows: 0=Does not meet the guideline; 1=Partially meets the guideline or actions toward compliance are under way; 2=Fully meets the guideline.

Guideline	Notes from the Program	Rating	Action Steps		
			Next Steps	Point Person	Time Frame
<b>Program Planning</b>					
1-1. Determine whom your program will serve		0 1 2			
1-2. Identify the needs of those who will benefit from your program		0 1 2			
1-3. Coordinate with other programs		0 1 2			
1-4. Engage young people in program planning		0 1 2			
1-5. Develop your program's goals and objectives		0 1 2			
1-7. Develop a work plan and logic model to help you implement your program		0 1 2			
1-8. Establish a health and social services referral system		0 1 2			
1-9. Develop a monitoring and evaluation plan		0 1 2			
1-10. Create a resource development and sustainability plan		0 1 2			
1-11. Establish ways to receive feedback on the program		0 1 2			
<b>Recruitment and Retention of Peer Educators</b>					
2-1. Develop criteria for selecting peer educators		0 1 2			
2-2. Use appropriate recruiting sources and materials		0 1 2			
2-3. Adhere to a transparent and fair selection process		0 1 2			
2-4. Provide clear expectations to peer educator candidates		0 1 2			
2-5. Establish written agreements with peer educators		0 1 2			

Guideline	Notes from the Program	Rating	Action Steps		
			Next Steps	Point Person	Time Frame
2-6. Promote cooperation and teamwork		0 1 2			
2-7. Establish systems for providing incentives and reimbursement		0 1 2			
2-8. Offer peer educators the opportunity to accept more responsibility		0 1 2			
2-9. Develop a formal procedure for departing peer educators		0 1 2			
<b>Training Youth to Be Peer Educators</b>					
3-1. Develop a training strategy that builds the capacity of peer educators for the life of the program		0 1 2			
3-2. Work with qualified trainers		0 1 2			
3-3. Use a high-quality training curriculum and supportive educational materials		0 1 2			
3-4. Create an environment that encourages active participation and learning		0 1 2			
3-5. Discuss ethical issues		0 1 2			
3-6. Evaluate the training		0 1 2			
3-7. Involve experienced peer educators in the training or as mentors		0 1 2			
<b>Leading Peer Education Sessions</b>					
4-1. Ensure that peer educators are qualified and prepared to lead education sessions		0 1 2			
4-2. Plan content and activities with the help of a high-quality educational curriculum		0 1 2			

Guideline	Notes from the Program	Rating	Action Steps		
			Next Steps	Point Person	Time Frame
4-3. Develop a schedule that encourages regular attendance and participation		0 1 2			
4-4. Monitor and evaluate peer education sessions		0 1 2			
<b>Supervision and Program Management</b>					
5-1. Use trained and skilled supervisors		0 1 2			
5-2. Conduct supportive supervisory meetings		0 1 2			
5-3. Supervise and support peer educators as they are leading sessions		0 1 2			
5-4. Continually reinforce ethical behavior and motivation		0 1 2			
5-5. Ensure competency and cohesion of the program's staff		0 1 2			
5-6. Establish a participatory decision-making process		0 1 2			
5-7. Use accurate data and information when making decisions about the program		0 1 2			
<b>Monitoring and Evaluation</b>					
6-1. Establish functional, relevant indicators to measure progress		0 1 2			
6-2. Set indicator targets		0 1 2			
6-3. Develop and apply your M&E plan		0 1 2			
6-4. Use appropriate monitoring tools		0 1 2			
6-5. Gather baseline and follow-up data		0 1 2			
6-6. Document the program		0 1 2			



## Annex 1. Group Exercise: Putting Youth Peer Education Guidelines into Practice

*This exercise was developed to help you use the youth peer education guidelines to improve an existing program. It can also be adapted to plan a new program.*

### Objectives

By the end of this exercise, participants will be able to use the Checklist and Action Planning Tool (page 41) to:

- Compare features of their program to the guidelines described in this document
- Identify areas in their program that need to be improved
- Develop a realistic action plan for improving the program according to these guidelines

### Time

Approximately 45 to 60 minutes for each section of the guidelines.

### Roles

**Participants:** This exercise requires the participation of at least three people who are familiar with the program. Groups with at least six people could be divided into smaller working groups. Ideally, groups would be composed of a diverse cross-section of participants, including program managers, program officers, trainers, peer educators, and community stakeholders.

**Facilitator:** This exercise requires one or two facilitators to help participants work on the exercise, to encourage open and respectful discussions among participants, and to ensure that the group develops and documents feasible action steps. The facilitator should be familiar with the guidelines.

### Materials

- Chalkboard or flip chart
- One copy of the guidelines per participant (if supplies are limited, at least one copy per working group)
- One copy of the Checklist and Action Planning Tool for each participant

## Steps

1. Review the purpose of the guidelines and the objectives of this exercise.
2. If the group is large, divide participants into small groups of three to five people. Ensure that the groups include people who hold diverse roles within the peer education program. Ask each group to:
  - Put their chairs in a circle so that they can work together
  - Identify one person to take notes
  - Identify one person to report back to the larger group on the discussion, conclusion, and action steps
3. Orient participants to the Checklist and Action Planning Tool by explaining the purpose of the columns and where to take notes.
4. Depending on the number of groups and the amount of time available for this exercise, ask all of the groups to work on the same section at the same time or assign each group a different section. Briefly review the “Using the checklist” section, below, to ensure that all participants understand the exercise. The groups should devote about 45 minutes to each section. Tell participants that the reporter will only have three minutes to report back to the larger group.

## Using the checklist

- Each group should read through the assigned section, including the examples, research, and other boxes. For each guideline in the section, the group should briefly discuss its purpose and why the guideline is important to implement.
- Next, participants should use the “Notes from the Program” column on the checklist to answer the following questions. (Facilitators should write these questions on the chalkboard or flip chart so that participants can refer to them as they are working.)
  - What is your organization currently doing to meet the guideline?
  - Is the guideline being met completely? Or just in part?

After the group has decided how much the guideline is being met, participants should fill in the “Rating” column accordingly.

- If the guideline is not being met or is only partially being met, the group should brainstorm about the questions below. (Facilitators should write these questions on the chalkboard or flip chart so that participants can refer to them as they are working.) Ensure that any action steps from the discussion are noted in the “Action Steps” column of the checklist.
  - How important is it for the program to fully meet this guideline?
  - What can program staff do differently to meet this guideline?
  - What additional resources are needed to ensure that this guideline is followed?

- Who on staff is responsible for implementing these changes and making sure this guideline is met?
- How will you know when the program is meeting the guideline? What is the time frame for meeting the guideline?
- As the groups are working, check in regularly on their progress and help facilitate discussion within groups.
- When the groups have finished discussing one section, gather as a larger group. Reporters from each group will summarize their discussions and action steps.
- On the chalkboard or flip chart, summarize what each reporter says, paying particular care to note what priorities the groups identified and any action steps they agreed should be taken.
- Once all the reporters have finished, review all of the action steps and decide who will complete them and when.
- Repeat this exercise for each section of the document until all of the guidelines are reviewed

### **Make the Action Plan a Reality!**

Compile all of the action steps into one action plan for your organization. Make sure everyone has a copy of the action plan and knows who is responsible for each action step. Be sure to set deadlines for each action step and assign someone the responsibility of ensuring that all action steps are taken.



## Annex 2. Code of Conduct

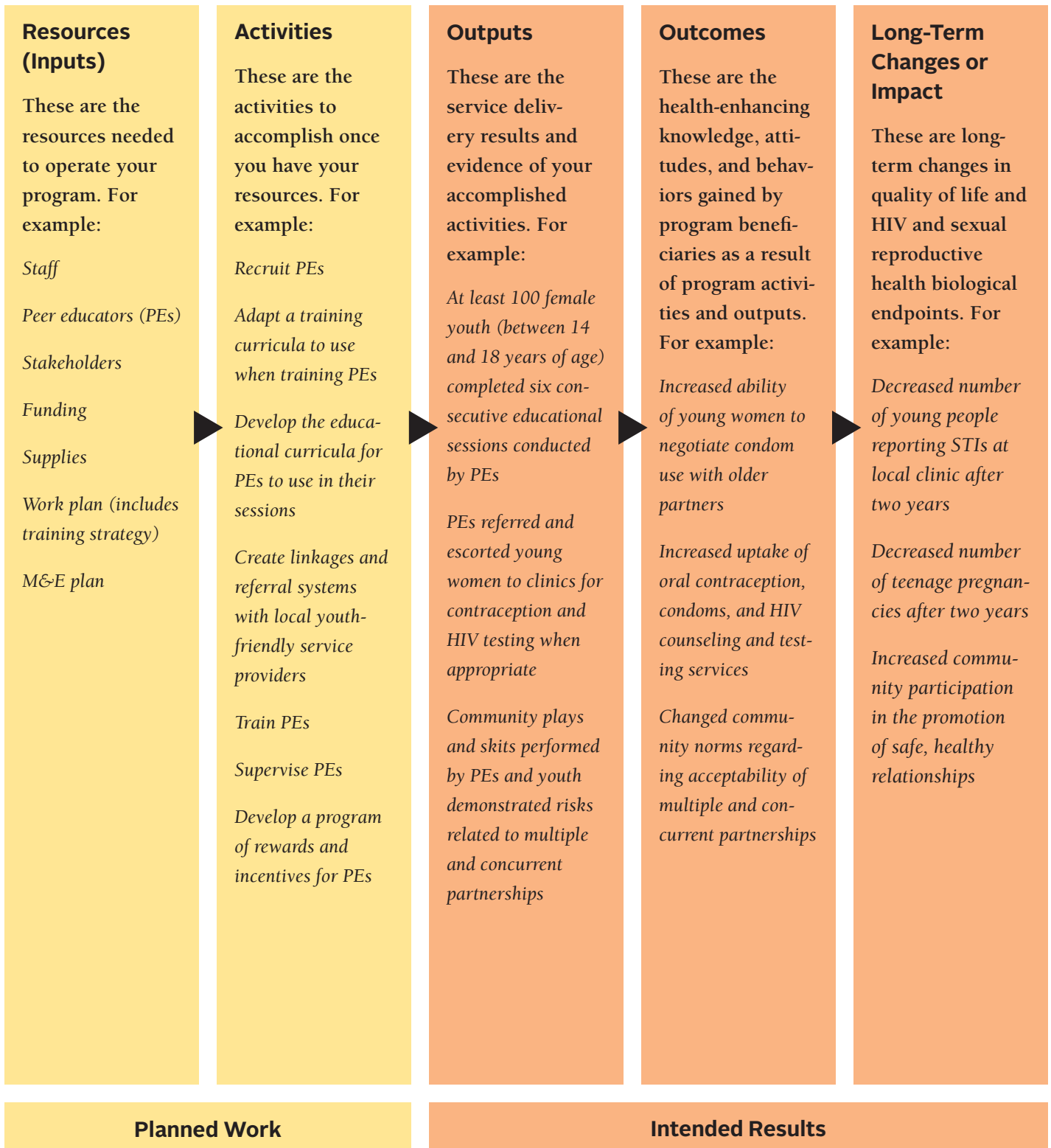
*Here is a list of items you might include in your code of conduct for peer educators.*

	<b>For Peer Educators and Staff</b>	<b>Implementation Tips</b>
<b>Assure and protect confidentiality</b>	<p>Hold information about peers and their concerns in confidence.</p> <p>Confidentiality is assured, except in cases where the young person is a danger to himself or herself or others, or is involved in illegal activity.</p>	<p>Train and supervise peer educators on how and when to protect confidentiality outside of the peer education session.</p>
<b>Respect values</b>	<p>Pledge to respect peers' values regardless of whether they differ from one's own. Peer educators should promote self-examination of values but not impose their own values on others.</p>	<p>Provide peer educators with the skills to examine their own values and to respect the values of other people.</p>
<b>Respect diversity</b>	<p>Respect the diversity of peers, regardless of sex, sexual preference, language, ethnicity, or culture.</p>	<p>Ensure that peer education activities accommodate the needs of diverse groups of young people (such as the location and accessibility of sessions or language used).</p> <p>Discuss prejudice and how it can be counteracted.</p>
<b>Provide updated, correct, and unbiased information</b>	<p>Always provide correct and factual information to peers.</p>	<p>Ensure that training curricula and other materials communicate accurate, current, and unbiased information.</p> <p>Create an environment in which continuous learning can take place.</p>
<b>Promote gender equality and equity</b>	<p>Provide the same information in a similar manner to both young men and young women.</p> <p>Be sensitive to the traditions and beliefs of the community but do not condone or contribute to unjust practices (such as female genital mutilation, forced and early marriages, and gender-based violence).</p>	<p>Ensure that male and female peer educators and supervisors are represented in the program equitably.</p> <p>Train and supervise peer educators to promote gender equity.</p>

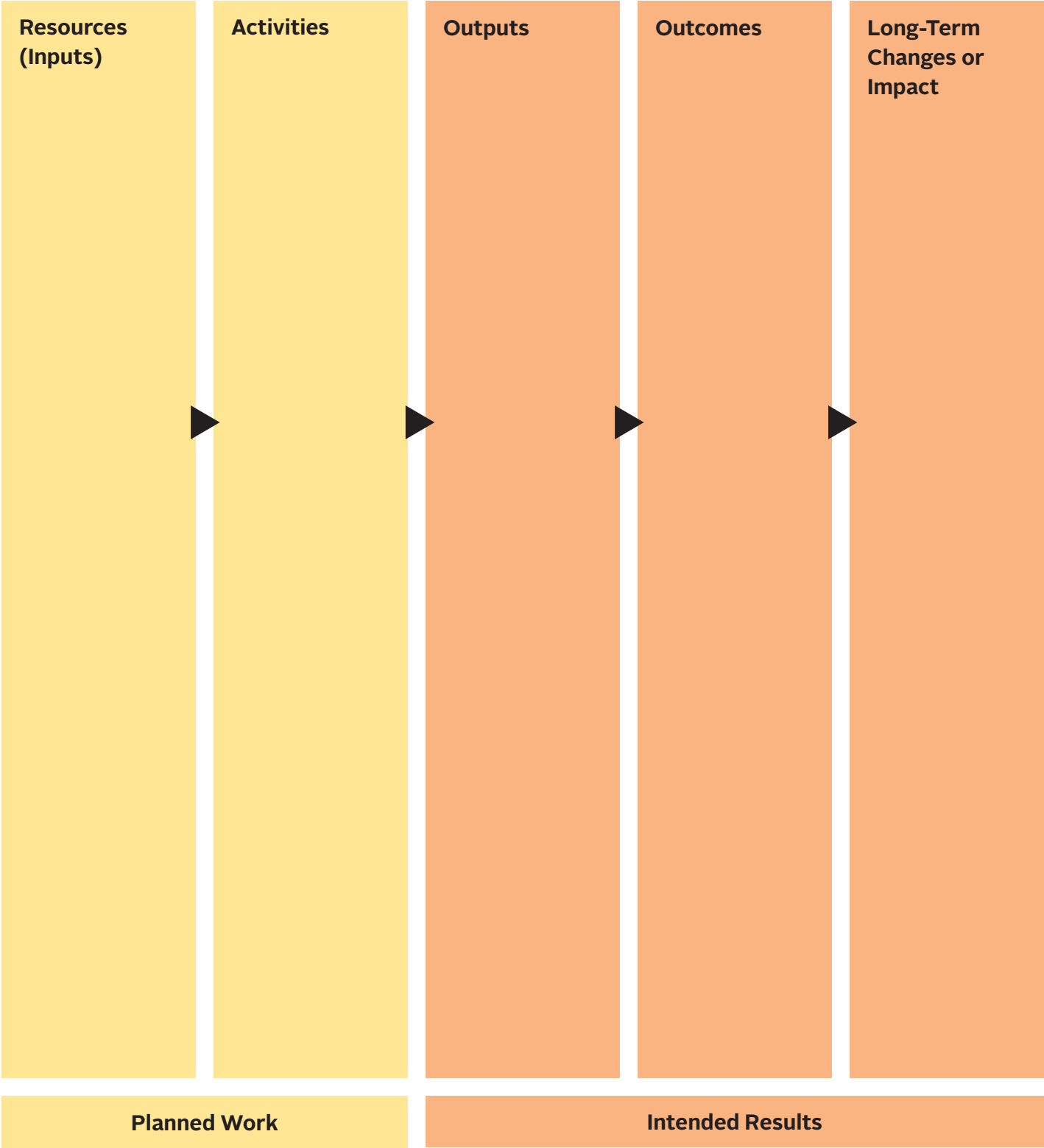
	<b>For Peer Educators and Staff</b>	<b>Implementation Tips</b>
<b>Recognize personal boundaries</b>	Be honest about your own situation and behaviors but recognize that other people are not obligated to share personal issues or experiences.	Create an atmosphere of trust where sensitive issues can be discussed freely.
<b>Be aware of individual limits and the role of referrals</b>	Acknowledge that education and training has limits. Peer education can, but will not always, increase knowledge, affect attitudes, and change behavior.  Peer educators should make referrals to specialists when needed.	Ensure that referral systems are in place.  Train peer educators to conduct referrals.
<b>Avoid abuse of power</b>	Commit to using your skills and knowledge to improve the health of young people and agree to refrain from using your position at the expense of others.	Train peer educators to use their status as a peer educator responsibly.  Be sure program staff and other volunteers are not abusing their position of authority over young people.

## Annex 3. Logic Models: Example and Blank Form

### Logic Model Example



**Logic Model Blank Form**



## Annex 4. Tools and Resources

*All resources are available free of charge unless noted. The IYWG Web site, <http://www.iywg.org>, also links to many of these resources.*

### 1. General Guidance and Planning

#### Logic Models

##### **Logic Models: Program Development and Evaluation**

*University of Wisconsin Extension*

This Web site features an online self-study module on the use of logic models, logic model examples, and other resources.

Available online at: <http://www.uwex.edu/ces/pdande/evaluation/evallogicmodel.html>

##### **Logic Model Development Guide**

*W.K. Kellogg Foundation, 2004*

This publication provides an in-depth introduction and explanation for using logic models in your program. It includes several exercises and examples.

Available online at: <http://www.wkcf.org/Pubs/Tools/Evaluation/Pub3669.pdf>

#### Other Resources

##### **Guide to Implementing TAP (Teens for AIDS Prevention)**

*Advocates for Youth, second edition, 2002*

This step-by-step guide aims to help adults and youth develop a peer education program on HIV prevention to implement in schools and communities. It includes 17 sessions with suggested activities and descriptions of ongoing projects.

Available online at: <http://www.advocatesforyouth.org/publications/tap.htm>

##### **Rutanang (Books 1–5)**

*HIV/AIDS, Department of Health, South Africa, 2002*

This is a series of five books developed in South Africa to guide the implementation of effective peer education programs. The topics are: Book 1. Towards Standards of Practice for Peer Education, Book 2. A Peer Education Implementation Guide for NGOs, Book 3. A Peer Education Implementation Guide for Schools, Book 4. A Peer Education Implementation Guide for Higher Education, and Book 5. Peer Education Lesson Plans.

Available online at: <http://www.hsph.harvard.edu/peereducation/>

##### **Peer Education and HIV/AIDS: Past Experiences, Future Directions**

*Population Council, n.d.*

Findings are presented from a project designed to identify factors that affect the quality and success of HIV/AIDS peer education programs and opportunities for further research. Coordinated by the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the Horizons Project, this project moved through three phases: a needs assessment of program managers involved in peer education, a literature

review of topics identified by the program managers, and an expert consultation held in Kingston, Jamaica, in April 1999. Available online at: [http://www.popcouncil.org/pdfs/peer\\_ed.pdf](http://www.popcouncil.org/pdfs/peer_ed.pdf)

### **Standards for Curriculum-Based Reproductive Health and HIV Education Programs**

*FHI/YouthNet, 2007*

This document describes 24 standards for use in adapting or developing such curricula in developing countries. Information is grouped in three sections: development and adaptation, content, and implementation. It includes tips on using the standards with examples and 12 pages of annotated resources. Available online at: <http://www.fhi.org/en/Youth/YouthNet/Publications/otherpubs.htm>

### **Tool to Assess the Characteristics of Effective Sex and STD/HIV Education Programs**

*Healthy Teen Network, 2007*

This tool is designed to help practitioners assess whether curriculum-based programs have incorporated the common characteristics of effective programs in their communities as described in the *Standards for Curriculum-Based Reproductive Health and HIV Education Programs*.

Available online at: [http://www.healthyteennetwork.org/index.asp?Type=B\\_PR&SEC=%7B2AE1D600-4FC6-4B4D-8822-F1D5F072ED7B%7D&DE=%7BB3E92693-FE7D-4248-965F-6AC3471B1E28%7D](http://www.healthyteennetwork.org/index.asp?Type=B_PR&SEC=%7B2AE1D600-4FC6-4B4D-8822-F1D5F072ED7B%7D&DE=%7BB3E92693-FE7D-4248-965F-6AC3471B1E28%7D)

## **2. Training Peer Educators**

### **Action with Youth, HIV/AIDS and STDs: A Training Manual for Young People**

*International Federation of Red Cross and Red Crescent Societies, second edition, 2000*

This manual is intended for youth leaders who wish to develop an HIV/AIDS health promotion program among young people. It includes basic information on HIV/AIDS and the impact of the epidemic, guidelines for program planning, and ideas for educational activities and community projects. Available in English, French, Spanish, and Arabic.

Order online at: <http://www.ifrc.org/publicat/catalog/order.asp>, by mail at: International Federation of Red Cross and Red Crescent Societies, PO Box 372, CH-1211 Geneva 19, Switzerland, or by e-mail at: [jeanine.guidera@ifrc.org](mailto:jeanine.guidera@ifrc.org)

### **Training Guide for Peer Health Education Programs in Africa**

*Guidance, Counselling and Youth Development Centre for Africa, 2007*

This publication describes the development and implementation of a school-based program to train youth peer educators who teach classmates and friends about various health issues, including HIV and other STIs. The guide covers goals and objectives, methodology, sustainability, step-by-step implementation, and detailed resources such as real-life stories, performance ideas, evaluation forms, and health knowledge surveys.

Available online at: <http://unesdoc.unesco.org/images/0016/001606/160667e.pdf>

### **Training of Trainers Manual/Youth Peer Education Toolkit**

*UNFPA/Y-Peer and FHI/YouthNet, 2005*

This curriculum is a tool to prepare master-level peer education trainers. The manual uses participatory techniques based on a variety of theoretical frameworks to ensure that future trainers are skilled and confident in their abilities to train peer educators and serve as informed resources for their peers. Some sessions are also suitable for training peer educators.

Available online at: <http://www.fhi.org/en/Youth/YouthNet/Publications/peeredtoolkit/TrainingTrainers.htm>

### **Theatre-Based Techniques for Youth Peer Education: A Training Manual/Youth Peer Education Toolkit**

*UNFPA/Y-Peer and FHI/YouthNet, 2005*

This training manual provides an overview of using theater in health education. It contains four workshops, a series of theater games and exercises that can be used in trainings, and information on developing and building a peer theater program.

Available online at: <http://www.fhi.org/en/Youth/YouthNet/Publications/peerredtoolkit/TheaterTraining.htm>

### **3. Leading Peer Education Sessions**

#### **Health Information for Peer Health Education Programs in Africa**

*Guidance, Counselling and Youth Development Centre for Africa, 2007*

Written to provide an accurate source of health-related information for peer health educators, this booklet contains detailed information and illustrations about human reproduction, STIs, HIV, AIDS, tuberculosis, addiction, and healthy relationships.

Available online at: <http://unesdoc.unesco.org/images/0016/001606/160663e.pdf>

#### **HIV & AIDS: Information and Activity Book for Mentors**

*UNICEF-OLS (Southern Sudan), 2003*

This booklet is an example of **life skills** education materials that are used in emergency situations, especially for children and young people who are vulnerable to sexual abuse and rape. While the materials are intended for an audience of youth aged 10 years and older in Southern Sudan, the core content of the material is universally applicable and adaptable.

Available online at: [http://www.unicef.org/lifeskills/files/Sudan\\_Life\\_skills\\_AIDS.pdf](http://www.unicef.org/lifeskills/files/Sudan_Life_skills_AIDS.pdf)

#### **HIV/STD Peer Education Project: Peer Educator Manual, Program Coordination Manual**

*Siskiyou County (California) Office of Education*

The peer educator manual is a curriculum designed to help peer educators (aged 12 to 18 years) in giving presentations on HIV and STIs in the classrooms or community. The program coordination manual aims to help adult advisors coordinate the program at the school or district level. Developed in the United States, sample parent permission letters, training agendas, scheduling and tracking forms, evaluations, pre- and post-tests, record-keeping forms, and teacher guidelines are also included.

The peer educator manual is available for \$50. A set of 16 Spanish presentation transparencies is \$10.

The program coordination manual is available for \$40.

Order forms are available online at: <http://www.sisnet.ssku.k12.ca.us/peereducation.html>

#### **Life Planning Skills: A Curriculum for Young People in Africa, Tanzania Version (English and Kiswahili)**

*PATH and African Youth Alliance, 2003*

This curriculum was adapted in Tanzania as part of the AYA project. It contains both a facilitators manual and participant workbook that cover more than 70 hours of life skills exercises. The curriculum is designed to help youth in Tanzania face the challenges of growing up, make decisions about their sexual health, and become prepared for work in the future. The PATH Web site also contains several versions of the Life Planning Skills curricula for other country settings (Uganda, Ghana, and Botswana).

Available online at: <http://www.path.org/publications/details.php?i=1593>

### **My Future Is My Choice**

*Government of the Republic of Namibia and UNICEF, 1997-2001*

A life skills program developed in Namibia as part of the Youth Health and Development Programme to protect young people from becoming infected with HIV and STIs. A ten-session approach includes a facilitator manual, parent's handbook, TOT manual, and manual for forming HIV Awareness Clubs. Available online at: [http://www.unicef.org/lifeskills/files/mfmc\\_facilitator\\_manual.pdf](http://www.unicef.org/lifeskills/files/mfmc_facilitator_manual.pdf); [http://www.unicef.org/lifeskills/files/mfmc\\_club\\_manual.pdf](http://www.unicef.org/lifeskills/files/mfmc_club_manual.pdf); [http://www.unicef.org/lifeskills/files/mfmc\\_parentsbooklet.pdf](http://www.unicef.org/lifeskills/files/mfmc_parentsbooklet.pdf); [http://www.unicef.org/lifeskills/files/mfmc\\_tot\\_manual.pdf](http://www.unicef.org/lifeskills/files/mfmc_tot_manual.pdf)

### **Positively Informed: Lesson Plans and Guidance for Sexuality Educators and Advocates**

*International Women's Health Coalition, 2004.*

This resource manual provides a handpicked selection of some of the best English-language sexuality education materials currently available. The lesson plans address key issues; use creative, interactive, learner-centered teaching strategies; and are adaptable to diverse cultural settings. They address gender issues, challenge discriminatory attitudes and behaviors, and present sexuality as a positive part of life.

Available online at: <http://www.iwhc.org/resources/positivelyinformed/index.cfm>

### **School Health Education (Uganda)**

*AMREF*

This comprehensive peer education program is intended for use in existing school systems. The curricula is taught by health educators and aims to change attitudes about sexual intercourse and to promote safer sexual behaviors. Evaluation among urban and rural students, aged 10 to 18 years, found that the program increased students' communication about sexual health with teachers and peers, delayed the initiation of sexual intercourse, and reduced the number of sexual partners reported, relative to youth in comparison schools.

For more information, contact: African Medical and Research Foundation (AMREF), P.O. Box 10663, Plot 17, Nakasero Road, Kampala, Uganda, or visit [www.amref.org](http://www.amref.org)

## **4. Managing Peer Education Programs**

### **Included Involved Inspired: A Framework for Youth Peer Education Programmes**

*IPPF, 2007*

Developed for IPPF Member Associates, this framework provides specific guidance on managing a peer education program as well as tools such as a logic framework, budget worksheet, and activity planning forms.

Available online at: <http://www.ippf.org/en/Resources/Guides-toolkits/Peer+Education+Framework.htm>

### **Performance Improvement: A Resource for Youth Peer Education Managers**

*UNFPA/Y-Peer and FHI/YouthNet, 2006*

This tool is for managers to use to improve the quality of their programs. It builds on quality improvement materials from other fields, providing exercises for self-assessment, group resolution, and action planning, with sample activities from the field. Also included is a section on program management basics with common examples from peer education projects.

Available online at: <http://www.fhi.org/en/Youth/YouthNet/Publications/peeredtoolkit/index.htm>



## 5. Monitoring and Evaluating for and with Young People

### **Learning to Live: Monitoring and Evaluating HIV/AIDS Programmes for Young People**

*Save the Children, 2000, £12.95*

This is a practical guide to developing, monitoring, and evaluating practice in HIV/AIDS-related programming for young people, based on experiences from projects around the world. It focuses on recent learning about peer education, school-based education, clinic-based service delivery, reaching especially vulnerable children, and working with children affected by HIV/AIDS. Condensed version in English and Portuguese available.

Available by mail at: Save the Children, 1 St. John's Lane, London EC1M 4AR, UK

### **Assessing the Quality of Youth Peer Education Programs**

*UNFPA/Y-Peer and FHI/YouthNet, 2006*

This publication presents a series of checklists to guide program managers in assessing a peer education program. Developed through YouthNet's peer education research project, these evidence-based checklists can be used to gather essential information for determining how a peer education project can best function and be compared over time and across programs.

Available online at: <http://www.fhi.org/en/Youth/YouthNet/Publications/peeredtoolkit/index.htm>

### **A Guide to Monitoring and Evaluating Adolescent Reproductive Health Programs**

*Pathfinder, Focus on Young Adults, 2000*

This 450-page publication provides a comprehensive guide to researching youth projects, with sample instruments to use. Although it was produced in 2000, it still provides a basic guide for youth research projects. The guide is broken into smaller files, for ease of downloading.

Available online at: <http://www.fhi.org/en/Youth/YouthNet/Publications/FOCUS/ToolsGuides/index.htm#MandEguide>

## 6. Cross-Cutting Issues: Advocacy, Youth Participation, Gender, and Stigma

### **Advocacy Expert Series**

*PACT Tanzania, 2005*

This series contains six manuals to be used by Tanzanian civil society organizations when conducting advocacy. The manuals cover: 1. Networks and Coalitions, 2. Media Guide, 3. Community Mobilization Manual, 4. Gender Mentoring: A Guide for Strengthening Equality in Communities, 5. Civil Society and Advocacy, and 6. Policy, Law, and Governance.

Available online at: <http://www.pacttz.org/html/publications.html>

### **Gender or Sex: Who Cares?**

*Ipas, 2001*

A skills-building resource pack on gender and reproductive health for adolescents and youth workers, this publication has a special emphasis on violence, HIV/STIs, unwanted pregnancy, and unsafe abortion. It includes a manual, curriculum cards, and overhead transparencies/handouts and provides an introduction to the topic of gender and sexual and reproductive health.

Available online at: [http://www.ipas.org/publications/en/GENDERSEX\\_E01\\_en.pdf](http://www.ipas.org/publications/en/GENDERSEX_E01_en.pdf)

### **It's All One Curriculum: Guidelines and Activities for a Unified Approach to Sexuality, Gender, HIV, and Human Rights Education**

*International Sexuality and HIV Curriculum Working Group, 2010*

This resource is meant to help readers develop sexuality and HIV education curricula with an emphasis on gender and rights. It enables educators to teach young people about topics such as gender norms; communication and decision making; sexual consent and coercion; fairness and human rights (including sexual rights); power and relationships; preventing HIV, STIs, and unintended pregnancy; puberty; and social change. The first volume, *Guidelines*, includes seven content units, 22 fact sheets, “points for reflection” to foster critical thinking, and a module on advocacy. The second volume, *Activities*, includes 54 sample activities, a chapter on effective teaching methods, and an additional resources section.

*Guidelines* are available online at : [http://www.popcouncil.org/pdfs/2010PGY\\_ItsAllOneGuidelines\\_en.pdf](http://www.popcouncil.org/pdfs/2010PGY_ItsAllOneGuidelines_en.pdf)

*Activities* are available online at: [http://www.popcouncil.org/pdfs/2010PGY\\_ItsAllOneActivities\\_en.pdf](http://www.popcouncil.org/pdfs/2010PGY_ItsAllOneActivities_en.pdf)

### **Understanding and Challenging HIV Stigma: Toolkit for Action (English and Kiswahili)**

*CHANGE Project and ICRW, 2003*

The toolkit is a collection of participatory educational exercises for raising awareness and promoting action to challenge HIV stigma. It encourages the creation of a safe space where AIDS professionals and community members can talk about fears and concerns, look at the roots of stigma and its effect, and develop strategies and skills to confront stigma and discrimination.

Available online at: <http://www.changeproject.org/technical/hivaids/stigma.html> (English)

For the Kiswahili version, contact PACT Tanzania: [pact@pacttz.org](mailto:pact@pacttz.org)

### **Working with Street Children: A Training Package on Substance Use and Sexual and Reproductive Health, Including HIV/AIDS and STDs**

*World Health Organization, 2000, order no. WHO/MDS/MDP/00.14*

This comprehensive training package was developed for educators and others involved in programs for street children. It contains two parts: (1) ten training modules on problems street children might face and essential skills and knowledge educators need to function in this environment, and (2) trainer tips that provide ideas on how subjects can be taught, include information on selected topics, and give options to help the educator in adapting local needs and resources.

Available online at: <http://www.who.int/substanceabuse/activities/streetchildren/en/> or by e-mail at: [publications@who.org](mailto:publications@who.org)

### **Youth Participation Guide: Assessment, Planning, and Implementation**

*FHI/YouthNet, 2005*

This guide seeks to increase the level of meaningful youth participation in reproductive health and HIV/AIDS programming at an institutional and programmatic level. The guide encourages individual and institutional commitment to involving youth in meaningful ways. It contains a conceptual overview, an institutional assessment tool, a training curriculum, and other resources.

Available online at: <http://www.fhi.org/en/Youth/YouthNet/rhtrainmat/ypguide.htm>

## Annex 5. References

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## Annex 6. Glossary

**AIDS**—Acquired immunodeficiency syndrome. AIDS develops as a result of infection with HIV (human immunodeficiency virus). It is a condition in which the body’s immune system deteriorates and is unable to fight infections and other illnesses that take advantage of a weakened immune system. A person with HIV might not develop AIDS for several years.

**Community**—A group of people with common interests or in geographic proximity.

**Control group**—A group of people, communities, or institutions similar to those who have received an intervention but have not been exposed to the intervention. This is also referred to as the comparison group.

**Counseling**—The process of providing professional guidance or advice to an individual or group of individuals, often by using techniques such as personal interview and two-way communication between a counselor and a client.

**Curriculum**—An organized, written set of activities or exercises designed to teach the target audience specific knowledge and skills.

**Focus group discussion**—A data collection method used in social science research to identify issues, terms, and interpretations from a group of individuals with similar characteristics. These discussions are often planned in advance, usually with 6 to 10 participants invited for a discussion.

**Gender**—Economic, social, political, and cultural attributes, constraints, and opportunities associated with being male and female. What it means to be male or female varies among cultures and changes over time.

**Gender equity**—The process of being fair to women and men, including compensation for historical and social disadvantages that prevent equality between men and women.

**HIV**—Human immunodeficiency virus. HIV destroys the body’s immune system, which fights off disease and infection. HIV might develop into AIDS.

**Icebreaker**—An activity conducted in a meeting, training, or other gathering to create a positive group atmosphere, break down social barriers, and help people get to know each other.

**Indicator**—A measurable statement of a program’s objectives and activities that helps track the program’s performance. An indicator might be expressed in numeric or non-numeric terms and might express quantitative or qualitative factors.

**Life skills**—Skills that provide someone with the ability to deal effectively with the demands of everyday life by responding to challenges with problem solving, self-awareness, appropriate interpersonal interactions, and positive behavior. In the context of youth, some examples of life skills include building self-esteem, learning to be assertive, developing critical thinking, and building support networks.

**Logic model**—A visual representation of a program that illustrates the inputs required (human and financial resources), activities to conduct, and short- and long-term outcomes that will result. A logic model can help program planners understand how their actions will bring about various outcomes.

**Marginalized**—A person or group who is relegated to an unimportant or powerless position in a larger group or society.

**Monitoring and evaluation**—Monitoring means routinely tracking information about a program and its intended outcomes. The goal of continuous monitoring is to identify problems and remedy them immediately. Evaluation is a group of activities designed to determine a program’s effect or value. Evaluation activities determine if a program has the intended effect on specific behaviors or outcomes.

**Needs assessment**—A systematic process of gathering information, analyzing it, and making a judgment on the basis of the information about the needs of a group of people. A needs assessment is frequently completed as a preliminary step in program planning.

**Participatory teaching and learning**—An educational method that replicates the natural processes by which people learn behavior by providing the opportunity for learners to observe skills and then use the skills themselves. The method frequently includes observation, modeling, and social interaction.

**Peer**—Someone who belongs to the same social group as another person, sharing some of these characteristics: age, sex, sexual orientation, occupation, socioeconomic or health status, educational level, risk behavior, or marital status.

**Peer education**—An educational method in which well-trained and motivated individuals from the same peer group lead educational and skills-building activities to improve or support their peer's health or well-being. Peer education activities are participatory and generally take place over an extended period, as opposed to a one-time event.

**Program (vs. project)**—A program is often composed of many different projects. Each of these projects has a specific goal or goals, while the program has a broader set of objectives.

**Program manager**—Also called a director, coordinator, associate, or officer. In this document, someone is considered a program manager if he or she directs, coordinates, manages, or controls many aspects of a peer education program.

**Psychosocial issues**—Problems or concerns arising from an individual's experiences with finances, family, peers, school, religion, work, sexuality or other factors. These issues could be anxiety, fear, low self-esteem, poor body-image, guilt, or an inability to cope, among others.

**Qualitative**—Non-numeric data or indicators that are expressed in words. Qualitative data might be grouped in categories. Gender and place of residence are examples of qualitative data.

**Quantitative**—Something measured by or concerned with amount or quantity and expressed in numbers or quantities.

**Reproductive health**—The health and well-being of women and men in terms of pregnancy, birth, and related conditions, diseases, and illnesses.

**Risk**—Exposure to the chance of loss or injury. In this context, it might be risk of pregnancy or STIs, including HIV.

**Sexuality**—An aspect of each individual. One's sexuality is defined by his or her sexual thoughts, desires, and experiences.

**Supportive supervision**—Active, involved supervision of peer educators. It might include regular meetings, provision of refresher training, periodic performance evaluations, and assistance in addressing problems and concerns.

**Stakeholder**—An influential person or organization in a community. Stakeholders have an interest, investment, or involvement in the program.

**Vulnerable**—A person or group that is easily injured or needs extra support to become or stay healthy.

**Youth-adult partnership**—A relationship between youth and adults where both have an equal ability to learn from one another, make decisions, use their skills, and create change.

**Youth participation**—A process that truly and significantly engages young people as full partners in the design, implementation, and evaluation of strategies and programs.

