Evaluation Report
Gwyn Jolley, Stacey Masters

South Australian Community Health Research Unit
February 2004

Talking Realities is a joint initiative between the Commonwealth Department of Family & Community Services, Parenting SA and Adelaide Central Community Health Service
Acknowledgements

This report on the Talking Realities ... young parenting project has been prepared by Gwyn Jolley and Stacey Masters, South Australian Community Health Unit. Megan Kyriacou, South Australian Community Health Unit, assisted in the analysis of the student and teacher data and summarised the information from the student and teacher focus groups.

We acknowledge Nicoline Kovatseff, Project Manager, for her contribution to the description of the project activities, and the peer educators for their role in collecting and entering the data from the student and teacher feedback sheets.

We thank all the respondents to the evaluation.

Thanks also to Vicki Barrett, SACHRU for her skill and patience in desk-top publishing this report.

About the SA Community Health Research Unit

SACHRU provides advice on research and evaluation to a range of groups including community health services, community organisations and primary health care projects. In addition the Unit conducts research and evaluation projects that are either funded from its core budget from the Department of Human Services, or from external sources. SACHRU runs training seminars on topics such as Needs Assessment, Program Planning, Questionnaire Design, Report Writing and Evaluation. Other activities include writing peer reviewed articles, and disseminating information to the community through publication.

Address: SACHRU
The Flats, C/- Flinders Medical Centre
BEDFORD PARK SA 5042

Phone: (08) 8204 5988
Fax: (08) 8374 0230

Email: sachru@fmc.sa.gov.au
Website: www.sachru.sa.gov.au
## Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAMHS</td>
<td>Child and Adolescent Mental Health Service</td>
</tr>
<tr>
<td>CHS</td>
<td>Community Health Service</td>
</tr>
<tr>
<td>COPE</td>
<td>Centre of Personal Education</td>
</tr>
<tr>
<td>CYH</td>
<td>Child and Youth Health</td>
</tr>
<tr>
<td>DECS</td>
<td>Department of Education and Children's Services</td>
</tr>
<tr>
<td>DETE</td>
<td>Department of Education, Training and Employment</td>
</tr>
<tr>
<td>DHS</td>
<td>Department of Human Services</td>
</tr>
<tr>
<td>DMIT</td>
<td>Douglas Mawson Institute of Technology</td>
</tr>
<tr>
<td>FaCS</td>
<td>Family and Community Services</td>
</tr>
<tr>
<td>FAYS</td>
<td>Family and Youth Services</td>
</tr>
<tr>
<td>SACHRU</td>
<td>South Australian Community Health Research Unit</td>
</tr>
<tr>
<td>SHine SA</td>
<td>Sexual Health Information, Networking and Education SA</td>
</tr>
<tr>
<td>STI</td>
<td>Sexually Transmitted Infection</td>
</tr>
<tr>
<td>TAFE</td>
<td>Technical and Further Education</td>
</tr>
</tbody>
</table>
# Table of Contents

**EXECUTIVE SUMMARY** .................................................................................................. 1

**1. INTRODUCTION** ............................................................................................................. 5

**2. PROGRAM RATIONALE** .............................................................................................. 7

  2.1 YOUNG PARENTS AND THEIR CHILDREN ................................................................. 7
  2.2 PEER PRESENTATIONS TO YOUNG PEOPLE ............................................................ 9

**3. PROGRAM ACTIVITIES** ............................................................................................. 11

  3.1 PEER EDUCATOR TRAINING PROGRAM ................................................................. 11
  3.2 PEER LEADER TRAINING PROGRAM & FRIDAY FUN GROUP ................................ 12
  3.3 PRESENTATIONS ........................................................................................................... 14
  3.4 NETWORKS ................................................................................................................... 14
  3.5 DISSEMINATION AND UPTAKE ...................................................................................... 15

**4. EVALUATION** ............................................................................................................... 17

  4.1 SCOPE OF THE EVALUATION ......................................................................................... 17
  4.2 DATA COLLECTION ...................................................................................................... 18
  4.3 DATA ANALYSIS .......................................................................................................... 19

**5. FINDINGS** ....................................................................................................................... 21

  5.1 STUDENTS .................................................................................................................... 21
  5.2 TEACHERS .................................................................................................................... 48
  5.3 STAKEHOLDERS ........................................................................................................... 66
  5.4 PEER EDUCATORS......................................................................................................... 78
  5.5 PROGRAM STAFF .......................................................................................................... 89

**6. DISCUSSION** .................................................................................................................. 95

  6.1 SCHOOL PRESENTATIONS ............................................................................................. 95
  6.2 STUDENT LEARNING AND OUTCOMES ......................................................................... 97
  6.3 OUTCOMES FOR PEER EDUCATORS AND THEIR CHILDREN ....................................... 97
  6.4 ISSUES FOR FUTURE EXPLORATION ........................................................................... 98

**7. CONCLUSION** ............................................................................................................. 101

**REFERENCES** .................................................................................................................. 103

**APPENDICES** ................................................................................................................... 105

  APPENDIX A: PATHWAYS FLOW CHART ........................................................................... 106
  APPENDIX B: STUDENT FEEDBACK SURVEY ................................................................... 107
  APPENDIX C: TEACHER SURVEY ...................................................................................... 109
  APPENDIX D: STUDENTS FOCUS GROUP QUESTION GUIDE: ......................................... 111
  APPENDIX E: TEACHERS FOCUS GROUP QUESTION GUIDE ........................................... 112
  APPENDIX F: PEER EDUCATOR FOCUS GROUPS ............................................................... 113
  APPENDIX G: TEACHER INTERVIEWS ............................................................................... 115
  APPENDIX H: PEER EDUCATOR SURVEY ......................................................................... 116
  APPENDIX I: STAKEHOLDER INTERVIEWS: QUESTION GUIDE ....................................... 118
  APPENDIX J: PROJECT STAFF INTERVIEW QUESTION GUIDE ......................................... 119

Archived at Flinders University: dspace.flinders.edu.au
Executive Summary

The Talking Realities project employs young parent peer educators to present a program to students and other young people with the aim of increasing their capacity to make informed choices regarding parenting and health. The program's content is designed to create a realistic awareness of the potential short and long-term consequences of pregnancy and parenthood for male and female adolescents. It challenges young people's attitudes and beliefs about pregnancy and parenthood and the consequences that occur for young parents. The presentation focuses on all aspects of the responsibilities of young parenting (i.e. change in lifestyles, financial and educational implications, children's developmental needs, housing issues and sexual health). The content highlights the emotional and social consequences of young parenting as well as children's needs and responsibilities in children's development.

Since 2001, the Talking Realities program has been presented 176 times at 115 sites. The sites include metropolitan, rural & remote schools, TAFE, education training centres & FAYS client groups, other young parent programs, human service providers and conferences. The presentations have been seen by around 5,600 students, other young people and service providers.

Students and young people

Findings show that over 97% of surveyed students learnt 'heaps' or 'some' about the responsibilities of being a young parent. Qualitative responses focused on caring for and loving the child, putting the child's needs first and careful budgeting. About two-thirds of students reported learning 'heaps' or 'some' about services and places to go for information about parenting. Older students in particular demonstrated most understanding of the impact on the young parents in terms of loss of educational opportunities, social life and time and money to spend on oneself.

Sixty-four teachers (74%) indicated strong support for the program in terms of the perceived benefits for students, with all remaining teachers agreeing that the program is beneficial for students. Teachers perceive that the 'lifestyles' and 'cost of living' topics have the greatest impact on students, in terms of challenging some of the misconceptions and conveying the realities of parenting at a young age. Almost all surveyed teachers (89%) indicated they would recommend the program return the following year. The remaining nine teachers commented that they would recommend that the program return every second year. All interviewed teachers agreed that Talking Realities fulfils a need in school and youth services. It reinforces and extends other curriculum topics in a realistic way that teachers are not able to do.

Peer educators

Another major aspect of the Talking Realities program is to provide opportunities for young parents to develop skills and knowledge in parenting, child development, community resources, sexual health and life skills and to increase self-esteem and positive decision-making. The program logic suggests that enhancing the capacity of
young mothers to participate more fully in education, employment and civil life will have positive benefits for the young parents and for their children.

Most stakeholders discussed the huge impact on the peer educators in terms of their increased confidence and personal development. Many of the peer educators had moved from being vulnerable and ‘at risk’ to confident and assertive young women who were able to take control of their lives and contribute to society. The positive impact on the peer educators was believed to flow on their children.

Stakeholders were very positive about the quality of the training and the accreditation process. They commented that many of the peer educators had gone on to further education or employment.

Most stakeholders discussed the opportunities to broaden the program to other population groups (for example, young men, Aboriginal communities, care providers) or geographic areas (for example, the wider metropolitan area, regional South Australia, state-wide, interstate).

The peer educators themselves identified similar benefits in increased self-esteem and confidence. They believed the support they received from the program and their peers had enabled them to construct new lives, sometimes escaping from an environment of violence or drug abuse. The peer educators also valued the opportunities to further their education and gain formal credit for the work they were doing on the Talking Realities program. Most of the peer educators have been successful in gaining access to further education, employment or other activities.

The peer educators assert that their children have benefited from the increased parenting skills and social inclusion of their young parents and by the developmental opportunities provided by access to good quality child care.

Significant achievements nominated by program staff included: increased well-being of peer educators, development of the pathway model, networking and production of resources that are replicable in the development of new programs.

Program staff stressed the years of development that have now gone into producing the very positive outcomes from Talking Realities and that there is no other similar service for young parents. The program breaks the stereotype of young parents and provides training and support in a non-judgemental way. For many young parents this program offers a sense of hope for the future. It provides an appropriate way back into education and participation in community life.

**Conclusion**

While it is not realistic to expect the Talking Realities program to have a measurable impact on the number of teenage pregnancies, the project aims to increase young peoples’ knowledge and awareness of the issues facing young parents and the
responsibilities that go with having a child. The peer educators demonstrate the real issues facing young parents and help to dispel the notion that having a baby is all fun.

The program has successfully increased young peoples' understanding about the responsibility of parenting. The peer educators have made significant gains in social, psychological, educational and vocational domains. Moreover, they are quick to identify the gains for their children from their enhanced parenting skills and the increased sense of social connectedness and the greater optimism with which they now view the future.

Peer education is increasingly being used as a health promotion strategy as the evidence base for this approach is strengthened. This unique approach to recruit, support and then train teenage parents to present to their peers in their own language, on all aspects of being a teenage parent, is highly valued by students and their teachers and has continued to develop and flourish in a less than ideal funding environment.

Health promotion programs such as Talking Realities face huge barriers. Funding is insecure and subject to the priorities of funders rather than the community. Even when resources have been dedicated to evaluation, as in this case, the results are seldom given much weight in decision making processes. Long term planning and commitment to the community is difficult under these circumstances.

The evaluation of the Talking Realities project has adopted a collaborative action research approach that embodies a continual process of planning, action and reflection. By necessity, the evaluation has focussed on process and short term outcomes for students and peer educators. Some of the learning that has occurred during the project includes the recognition that the life course outcomes for the peer educators and their children should be researched and documented. Anecdotal evidence suggests that the program has a life-changing impact on the young parents who undertake the peer education training and that this has cumulative benefits for their children. To this end, funding is needed to undertake research that has a specific focus on the medium and longer-term outcomes for young parents who participate in the Talking Realities program, and their children.
1. Introduction

The Talking Realities ... young parenting project (Talking Realities) is based at Adelaide Central Community Health Service and has been ongoing since February 2000. A previous evaluation report (Jolley 2001) covered the period February 2000 to February 2001. This current document is based on the period of funding from July 2001 to December 2003. Two sources of funding were obtained for this period: $300,000 from the Commonwealth Department of Family & Community Services, and $180,000 from Parenting SA, with a focus on the young parents/peer educators and their children, and the student recipients of the Talking Realities presentations. An interim report covering activity and evaluation data collected up to May 2003 was produced in August 2003. This report builds on and extends the interim report.
2. Program rationale

The *Talking Realities* ... young parenting project has both an early intervention and prevention focus. The project aims to influence the health and well-being of young parents and their children by providing training and support to young parents; increasing their life skills, knowledge and capacity to parent effectively. The young parents are engaged as peer educators to present to students and other young people about the potential short and long-term outcomes of early parenting. In this way, the project aims to increase the capacity of young people to make informed choices about parenting and health.

2.1 Young parents and their children

Very young mothers and their children face increased risks of premature birth or low birth weight, perinatal death and, associated with these risks, is poor antenatal care (Zang & Chan 1991). Teenage mothers commonly come from low socio-economic backgrounds, and lack information, support and resources (Zang & Chan 1991). The younger the mother, the more likely she will not be married at the time of her child's birth (ABS 2001). This suggests that teenage mothers have less support in parenting.

Young parents often experience social, economic and educational disadvantage. Social networks and psychological traits such as motivation and resilience can mediate this disadvantage. Children’s access to environments that support healthy development, however, are largely governed by the socio-economic circumstances of their parents (Hertzman 2002; Spurrier, Sawyer et al 2003). Differences in child readiness for
school, for example, follow a predictable, systematic pattern across the socio-economic spectrum. This social gradient in child development is important because, once established, it tracks across the life course (Hertzman 2002). Similarly, Vimpani, Patton and Hayes (2002) argue for the importance of an 'early years agenda' in which understanding experiences and environments in the early years is critical for health outcomes across the lifespan.

The Laidlaw Foundation (2002) describes social inclusion as both a process and a goal. The goal is to ensure that all children and adults are able to participate as valued, respected and contributing members of society. As a process, social inclusion draws upon human development and population health approaches to social wellbeing. It is a proactive approach, requiring investments and action to bring about the conditions for inclusion, rather than the past focus on addressing risk factors and removing barriers to inclusion.

The consequences of social exclusion include:

- a lack of recognition and acceptance
- powerlessness; lack of a voice
- economic vulnerability
- diminished life experiences
- limited life prospects (Laidlaw Foundation 2002).

In providing support to young people who are already parents, increasing their life skills, access to services, knowledge and capacity to parent effectively, and training them to become peer educators, the Talking Realities program aims to improve the social health outcomes for these young parents and their children. The program provides supported opportunities for young parents to complete their education and increase skill levels in a variety of employment and social inclusion areas. This leads to increased self-esteem and confidence, and economic and social benefits for the young parents. Addressing some of the socio-economic disadvantage of young parents is expected to flow on to enhanced 'early years' experiences for their children.

Peer education and support for young parents can be looked on as an investment in action to strengthen families. Talking Realities goes beyond the identification of young parents and children at risk. It is an approach that views young parents as much more than passive recipients of support services. The peer education program fosters agency and encourages the various aspirations of young parents - educational, social and vocational. It seeks to facilitate pathways to further education and employment. Increasing young parents' skills and confidence, social, education and vocational outcomes benefits children in a myriad of ways. Promoting young parents' mental health and social inclusion, in turn, fosters children's opportunities for social participation and skill development.

A major aspect of the Talking Realities program is to provide opportunities for young parents to develop skills and knowledge in parenting and child development, community
resources, sexual health and life skills and to increase self-esteem and positive decision-making. The program logic suggests that enhancing the capacity of young mothers to participate more fully in education, employment and civil life will have positive benefits for the young parents and for their children.

2.2 Peer presentations to young people

Peer education has become increasingly popular as a tool in health promotion, particularly in drug and sexual health issues for young people. While both the processes and its effectiveness in health promotion require further research and evaluation (Harden et al. 1999; Bament 2001), there is some evidence that peer education can be used to empower young people in decision making and increase their confidence and self-esteem (Bament 2001; Phelps et al. 1994). This evidence is likely to increase as more peer education programs are evaluated.

Witte (1997) reports a focus group study of US teen mothers. The young mothers reported that, prior to their pregnancy, they had looked primarily to peer groups for information and advice about sex. They suggested that the most effective pregnancy prevention campaign would use young parent peer educators like themselves and focus on realistic education about the consequences of sexual activity and about contraception.

The Talking Realities project employs young parent peer educators to present a program to students and other young people with the aim of increasing their capacity to make informed choices regarding parenting and health. The program's content is designed to create a realistic awareness of the potential short and long-term consequences of pregnancy and parenthood for male and female adolescents. It challenges young people's attitudes and beliefs about pregnancy and parenthood and the consequences that occur for young parents. The presentation focuses on all aspects of the responsibilities of young parenting (i.e. change in lifestyles, financial and educational implications, children's developmental needs, housing issues and sexual health). The content highlights the emotional and social consequences of young parenting as well as children's needs and responsibilities in children's development.

While it is not realistic to expect the Talking Realities program to have a measurable impact on the number of teenage pregnancies, the project aims to increase young peoples' knowledge and awareness of the issues facing young parents and the responsibilities that go with having a child. The peer educators demonstrate the real issues facing young parents and help to dispel the notion that having a baby is all fun.

This unique approach to recruit, support and then train teenage parents to present to their peers in their own language/terminology, on all aspects of being a teenage parent, is highly valued by students and their teachers and has continued to develop and flourish in a less than ideal funding environment.
3. Program activities

3.1 Peer Educator Training Program
The community-based learning program provides young parents with training to acquire the necessary skills to take on a peer educator role in the project. The peer education-training program comprises 26 half-day sessions. It is based on an adult learning approach that acknowledges past and present experiences of participants, is flexible, and recognises the importance of tailoring information to individual learning styles. This is achieved by providing information and opportunities to learn in a large group format, small learning groups and individual explanation. Written material is provided throughout the sessions to build on the session content. The content has been developed to provide a balance of theory and opportunities to reflect on how personal experience enhances formal learning. The program recognises the importance of the cycle of action and reflection in learning and aims to provide participants with opportunities to examine and reflect on how new learning can be incorporated into their daily lives and their work as peer educators. Each session closes with a round where participants discuss what they have learnt from the session. This encourages immediate feedback re student learning and highlights future training needs.

The Talking Realities peer education training provides young parents with accreditation towards the following modules in Certificate 3 in Community Services:

1. Communicate appropriately with clients and colleagues
2. Participate in the work environment
3. Process and provide information
4. Support group activities
5. Participate in networks
6. Follow the organisation's occupational health & safety policies

Each of the peer educators who completes the training program achieves recognition of current competencies towards Certificate 3 in Community Services.

During 2001 - 2003, twenty-seven young people enrolled in peer education training, 20 of these completed the training and became eligible for accreditation and 14 have gone on to enrol in Certificate 3 level studies at TAFE. Four peer educators have completed Certificate 3; of these three have gone on to further TAFE studies and one has a traineeship. Other are still completing.

In the Riverland group during 2002, sixteen young women enrolled, 14 became eligible for accreditation and four have gone on to further study. In Whyalla in 2003, twelve peer educators enrolled and eight will have completed in March 2004 and be eligible for accreditation.

The Douglas Mawson Institute of Technology auspices the accreditation process and has reduced the accreditation costs. The Wyatt Benevolent Institute pays the accreditation costs and assists with fees for those young parents who wish to complete the certificate.

Secondary Schools Assessment Board of South Australia (SSABSA) staff have recently liaised with Talking Realities staff and identified two options for young parents to connect with SA Certificate of Education (SACE) educational outcomes:

1. Embedding within SSABSA Subjects:
   SSABSA have identified pathways towards SACE Stage 1 and 2 subjects for young parents who participate in Friday Fun Group (described in 3.2), undertake peer education training, conduct presentations in schools or participate in leadership training.

2. Special Provisions in Curriculum and Assessment:
   SSABSA's Special Provisions Policy supports students who have interrupted schooling. Mapping student learning during pregnancy could provide some status towards the SACE.

3.2 Peer Leader Training Program & Friday Fun Group

In 2001, the project was granted funds by FaCS Stronger Families 'Potential Leaders in the Community' to employ a peer educator at 0.5FTE to support project workers to extend Talking Realities to include a Peer Leader Program. Currently a training program is being developed to provide accredited training towards three modules at TAFE Certificate 4 in Community Services:

1. Maintain effective networks
2. Advocate for clients
3. Plan and conduct group activities

The aim of the training program is to provide advanced training for peer educators to increase their knowledge and skills, and to assist project workers to more effectively recruit and retain young parents in the project. Peer Leaders co-facilitate the 'Friday Fun Group' as an entry point for teenage parents to socialise and participate in art and craft activities. This group also provides participants the opportunity to acquire information and the skills required to participate in group and teamwork. This was identified as a pre-requisite for the peer education training program.

The Friday Fun Group was initially implemented as a six-week program in 2002. Its success in providing young parents with a 'stepping stone' into the accredited training program was quickly recognised and funding was secured from Family & Community Services (FaCS) to enable the program to operate over a 12-month period, commencing January 2003.

The implementation of the Friday Fun Group has provided the project with a greater scope to engage and support vulnerable and at risk young parents. Project workers provide young parents with support and information around issues of domestic violence, transience and homelessness, drugs and alcohol, sexual health, child development and parenting, housing, educational and training pathways. The group also runs a parenting and child development session each month. In previous years, project workers were not in a position to support young parents to the same extent, which meant that vulnerable young parents with high needs were unable to be accepted into the training program.

The Friday Fun Group provides young parents with an opportunity to learn from peer leaders what 'peer education' is, and the commitment required, before deciding to undertake the accredited training program. As a result, young parents enter the peer education training with greater knowledge and understanding of the role and the focus required to gain accreditation. Participation in Friday Fun Group activities assists young parents to develop social networks, learn about parenting and child development and access community services. All of this facilitates achievement of learning outcomes within the peer education training program.

The Friday Fun Group has worked in partnership with the Department of Human Services' North West Families Project and three of its clients, all young parents.

In consultation with the young parents, peer leaders from Talking Realities facilitated six sessions that focused on strengthening community connections for the young parents and their children. In a subsequent presentation to a forum of DHS managers, the young parents spoke about the positive impact of connecting with the peer leaders through shared experiences as young mothers. From a very small and safe group, specifically tailored to their needs, the young parents felt confident and motivated to make the transition to the Friday Fun Group. Each of the three young parents has since completed the accredited peer education training. One young parent has
completed the remaining modules of Certificate 3 in Community Studies and Certificate 4 in Youth Work. The other two have enrolled to complete the remaining modules in Semester 1, 2004. All three are enrolled to undertake the Peer Leader training program.

Appendix A is a flow chart for Talking Realities that illustrates the various entry and exit points for young parents. The flow chart also highlights the range of parenting and life issues young parents present with, and that the program seeks to address through appropriate referrals.

### 3.3 Presentations

Since 2001, the Talking Realities program has been presented 176 times at over 100 sites. The presentations have been seen by around 5,600 students, other young people and service providers.

<table>
<thead>
<tr>
<th>Host agency</th>
<th>Sites</th>
<th>Presentations</th>
<th>Recipients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Metropolitan schools</td>
<td>42</td>
<td>79</td>
<td>3,267</td>
</tr>
<tr>
<td>Rural &amp; remote schools</td>
<td>21</td>
<td>25</td>
<td>1,371</td>
</tr>
<tr>
<td>TAFE</td>
<td>2</td>
<td>6</td>
<td>95</td>
</tr>
<tr>
<td>Education training centres &amp; FAYS client groups</td>
<td>2</td>
<td>18</td>
<td>179</td>
</tr>
<tr>
<td>Other young parent programs</td>
<td>7</td>
<td>7</td>
<td>74¹</td>
</tr>
<tr>
<td>Human service providers</td>
<td>37²</td>
<td>37</td>
<td>454</td>
</tr>
<tr>
<td>Conferences</td>
<td>4</td>
<td>4</td>
<td>162</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>115</strong></td>
<td><strong>176</strong></td>
<td><strong>5602</strong></td>
</tr>
</tbody>
</table>

### 3.4 Networks

The project has formed networks and collaborative alliances with many community based services as listed below:

**Training facilitators**

- Centre of Personal Encounter (COPE)
- Dale Street Women’s Health Service
- Enfield Community Health Service
- Job Placement and Education Training
- Para West Adult Campus
- Parenting Network
- Parenting SA
- Parks Community Health Service
- Sexual Health Information Network Education (Shine)

¹ includes 21 young Aboriginal parents
² includes 4 Aboriginal services
Assistance with writing training manual
- Centre of Personal Encounter (COPE)
- Dale Street Women's Health Centre
- Douglas Mawson Institute of Technology
- Intellectual Disability Services Council
- Parks Community Health Service
- Robyn Miller (Training Consultant)

Funding and resource support
- City of Port Adelaide Enfield
- Douglas Mawson Institute of Technology
- Parks Community Centre
- Parks Crèche
- The Wyatt Benevolent Institute

Presentation hosts
- Public, independent and catholic secondary schools
- Youth and education training centres

Referral agencies
- Enfield Community Health Service
- Louise Place
- Lutheran Community Care
- North West Families Project
- Parenting Network
- Port Adelaide Community Health Service
- Second Story Division of Child Youth & Health

Outreach programs
- A partnership in 2001 with the Riverland Regional Health Services Inc and Riverland Community Health Service has achieved the implementation of an outreach of the Talking Realities project in this region.
- A second outreach program was established in 2003 in partnership with Whyalla Community Health Service who allocated a 0.5 FTE position to provide peer education training for 8 young parents to present Talking Realities in the Northern & Far Western Region Health Service.

3.5 Dissemination and uptake
The project has provided information and support to agencies outside the target area who have expressed interest in accessing the program's resources in order to set up similar projects.
- South Australian Regional Health Services have obtained funding from government and local business to cover costs for the Adelaide based peer
educators to provide learning outcomes for adolescents in their districts. Nine separate presentations have been delivered in six of South Australia’s seven regional health services

- Whyalla Hospital and Health Service Inc. allocated a 0.5 FTE position in 2003 - 2004 to provide peer education training for 8 young parents to present Talking Realities in the Northern & Far Western Region health region.
- Inquiries have been received from services in Victoria, Western Australia, New South Wales, Canberra & Queensland wishing to access the project resources
- The King Edward Memorial Hospital and Trinity Learning Centre, Western Australia, are currently organising a workshop/forum for project staff and peer educators to present to services interested in supporting and sustaining a project in WA
- A young parent from the Talking Realities program recently moved to the Gold Coast and has liaised with Gold Coast Youth, a youth organisation who have expressed interest in the project. The organisation is currently collaborating with networks to assess viability
- The Primary Care Partnerships Kingston Bayside and The Core of Life Program Victoria are currently discussing in partnership with the Talking Realities project the possibilities of undertaking a pilot project to assess the benefits of providing both programs to extend and consolidate learning for adolescents about the pregnancy, giving birth, early parenting, and well being of the child.
- A number of inquiries have been received from Aboriginal Health Services with a keen interest shown by these services to adapt the material to address parenting issues of particular concern in their communities
- A poster entitled ‘Partnership in Evaluation: Talking Realities was presented by a member of the evaluation team at the 2003 General Practice and Primary Health Care Research Conference, Canberra, 18th - 20th June.
4. Evaluation

The South Australian Community Health Research Unit (SACHRU) has acted as an independent evaluator since the program’s inception in February 2000. This long-standing relationship has assisted an action research approach to the evaluation, including skill development for some the peer educators in data collection and data entry. This collaboration is in accord with the primary health care approach embedded in the program.

4.1 Scope of the evaluation

The Talking Realities program has two distinct goals:

1. To improve the social health outcomes for young parents, male and female, (peer educators) in the Adelaide Central Community Health Region.
2. To contribute to increasing the capacity of young people in metropolitan Adelaide area to make informed choices regarding parenting and health

The following objectives have been articulated for the peer educators and the young people to whom they present.
For the peer educators, the objectives are:

a) To increase the ability of young parents to take on the role of peer educators.
b) To increase peer educators knowledge and use of community services and their resources.
c) Increasing peer educator’s access to formal and informal education.
d) Increasing peer educator’s access to education on nurturing, child development and behaviour and health needs of children.

For the students, the objectives are:

a) To increase young peoples’ realistic awareness of potential short and long term consequences of early parenting.
b) To increase young peoples’ knowledge of current health issues.
c) To increase young peoples’ knowledge of sexual health issues.
d) To increase young peoples’ knowledge of local youth and health services.

The project goals and objectives have provided the framework for the evaluation plan, methods and data collection tools.

4.2 Data Collection

Students

Student feedback sheets (Appendix B) were left with all participating schools and 1,716 responses were collected from students from February 2002 to September 2003. Four focus groups were conducted with a total of 41 students from three schools between December 2002 and March 2003. Students were asked to talk about what they remembered and found most interesting, what they learnt from the presentation, and any changes they would recommend to how the program was delivered (see Appendix C for Question Guide).

Teachers

Teacher feedback sheets (n=86) (Appendix D) were collected from participating schools. Two focus groups in two schools were conducted in December 2002 and March 2003 respectively. Teachers were asked to talk about what they thought the students gained from the presentation and about any changes they would recommend for the program (see Appendix E for Question Guide). Telephone interviews were conducted during September and October 2003 with 15 teachers who had booked and seen the presentation during 2003. Teachers were asked to comment on the outcomes for their students, for the peer educators and about the place of the program in the school curriculum and suggestions for changes (see Appendix F).

Peer educators

One focus group was run in March 2002 with a group of four peer educators who had commenced their training in July 2001 and had just started to present in schools. A second group was run in March 2003 with a group of eight peer educators (Appendix
G). About half had been with the program for over a year while the remainder had just completed their training and started to present in schools. In November 2003, a self-completion survey (Appendix H) was sent to all the peer educators (n=20) who had been involved in the program during 2002-03. Questions related to perceived outcomes for the peer educators and their children, their satisfaction with the training and support received, and their views on the program overall.

**Other stakeholders**

Telephone interviews were conducted in October 2003 with eleven stakeholders identified by the project manager as having an interest in the program. Stakeholders were asked to comment on the outcomes for peer educators and about their perceptions of the strengths and weaknesses of the program, how it could be further developed and how sustainability could be increased (see Appendix I). A group interview was held with the project staff and manager in December 2003 (Appendix J).

**4.3 Data Analysis**

Feedback sheet data were entered into an Excel database set up by one of the evaluators. The quantitative data were transferred to SPSS for statistical analysis and short answer responses were collated and themed in Word. For the phone interviews, hand written notes were taken during the interview and immediately typed into Word. Responses were collated by question and summarised into tables or themes as appropriate. Focus groups were facilitated by a researcher and a research assistant took comprehensive notes by hand. The notes were typed into a Word document and both research staff added their own reflection. Responses from each group were summarised by themes. For the group interview, hand-written notes were taken, typed into Word and analysed by theme.
5. Findings
The findings from each respondent group: students, teachers, peer educators and other stakeholders are presented here. Each respondent group starts with a short summary and then outlines responses in more detail.

5.1 Students
More than two-thirds of students (68.8%) indicated that the information was very well presented with a further 30% of students indicating that they were satisfied with the quality of the presentation. Only 9 of the 1716 students expressed dissatisfaction with the quality of the presentation. Ninety-four percent of students indicated that the presentation was useful or very useful. Similarly, 95% agreed that it was useful to discuss the topics with the peer educators. It is recognised that the opportunities for discussion varied according to the school setting and number of students in the audience. Ninety-six percent of students indicated that the banner on which the visual aids were displayed was useful or very useful.

Students' qualitative responses highlighted that they valued the honesty and openness of the presenters, some expressing surprise at the confidence and courage of the peer educators. Students also valued the relaxed atmosphere that the presenters were able to create and their sense of humour.

Focus group students responded similarly that they liked having young presenters, with real experience, as this made parenting and sexual health issues more realistic.
for them. Teachers were not seen to have the same credibility in this area. Some boys thought that it would be good to have the fathers there. Others didn’t think it was important to hear the fathers’ views as ‘only the female has the baby’. Writing down questions at the end was thought to be a good idea as it avoided having to ask in front of everyone else. The most common topic that students wanted to hear more about was peer educators’ personal stories about their pregnancy and how it affected their lives.

Topics in which students reported the greatest learning included the 'cost of living' and 'comparing the lifestyles' of adolescent students and young parents as regards their social lives, responsibilities and friendships (see table below). Similar topics were mentioned in the focus groups where money, responsibility and time spent differently as a young parent were all nominated as interesting parts of the presentation.

The most frequently mentioned learning from the 'cost of living' topic was about the costs and expense of having a child and caring for it: this included costs of food, clothing, equipment, living costs, rent and so on. Some students said that they didn’t realise babies needed so much and how expensive everything was. Next frequently mentioned was the need to budget, plan carefully and spend wisely, saving money for bills and emergencies.

The most important thing learnt from 'comparing the lifestyles' topic, centred on the sacrifices and the level of responsibility and commitment that parenting involves, in contrast to the relative freedom of adolescence.

Two further survey questions asked about student learning re the responsibilities of being a young parent and available services. Ninety-seven percent of students stated they learnt ‘heaps’ or ‘some’ about parenting responsibilities and 92% learnt ‘heaps’ or ‘some’ about services and where to go for help.

In the focus groups, older students had most understanding of the impact on the young parents in terms of loss of educational opportunities, social life and time and money to spend on oneself. The focus was on caring for the baby and the amount of time this took up.

Contraception was the main sexual health issue remembered in the focus groups. Some of the girls stated that the presentation has encouraged them to be careful when having sex and to recognise that contraceptive methods need to be used properly. The older students wanted information on STIs to be included. The younger girls had a number of questions about abortion although this is not a topic covered in the presentation. The students remembered a list of agencies on the display and were able to recall places to go for information and help.
5.1.1 Student feedback

Student profile

Survey responses were collected from 1,716 students from February 2002 to September 2003. The sample comprised 1,244 female and 469 male students. Gender responses were missing for 3 students.

<table>
<thead>
<tr>
<th>Gender</th>
<th>Female</th>
<th>Male</th>
<th>Missing</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1,244</td>
<td>469</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>72.6%</td>
<td>27.4%</td>
<td></td>
</tr>
</tbody>
</table>

Almost half of the students who attended the presentation were in Year 10 (49.1%). A further 25% of students saw the presentation in Year 11. Responses were missing for 100 students.

<table>
<thead>
<tr>
<th>Year level</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
<th>Missing</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>108</td>
<td>179</td>
<td>793</td>
<td>401</td>
<td>135</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>6.7%</td>
<td>11.1%</td>
<td>49.1%</td>
<td>24.8%</td>
<td>8.4%</td>
<td></td>
</tr>
</tbody>
</table>

A cross tabulation of year level by gender highlights that girls are the primary recipients of the Talking Realities program from year 10 onwards.

### Year level * Gender Crosstabulation

<table>
<thead>
<tr>
<th>Year level</th>
<th>Count</th>
<th>Gender</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>female</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>58</td>
<td>49</td>
<td>107</td>
</tr>
<tr>
<td></td>
<td>54.2%</td>
<td>45.8%</td>
<td>100.0%</td>
</tr>
<tr>
<td>9</td>
<td>98</td>
<td>81</td>
<td>179</td>
</tr>
<tr>
<td></td>
<td>54.7%</td>
<td>45.3%</td>
<td>100.0%</td>
</tr>
<tr>
<td>10</td>
<td>587</td>
<td>205</td>
<td>792</td>
</tr>
<tr>
<td></td>
<td>74.1%</td>
<td>25.9%</td>
<td>100.0%</td>
</tr>
<tr>
<td>11</td>
<td>330</td>
<td>70</td>
<td>400</td>
</tr>
<tr>
<td></td>
<td>82.5%</td>
<td>17.5%</td>
<td>100.0%</td>
</tr>
<tr>
<td>12</td>
<td>115</td>
<td>20</td>
<td>135</td>
</tr>
<tr>
<td></td>
<td>85.2%</td>
<td>14.8%</td>
<td>100.0%</td>
</tr>
<tr>
<td>Total</td>
<td>1188</td>
<td>425</td>
<td>1613</td>
</tr>
<tr>
<td></td>
<td>73.7%</td>
<td>26.3%</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

Students represented 50 schools. Twenty-four were metropolitan schools, ten were outer metropolitan and 16 were rural or regional schools, including schools at Ceduna, Coomandook, Kadina, Karcultaby, Miltaburra, Minlaton, Peterborough, Streaky Bay and Wudinna, as well as schools in the Riverland region. The minimum number of students who saw the presentation at any one school was seven; the maximum was 110 (mean 34 students).
Quality of the presentation

<table>
<thead>
<tr>
<th>How well was the information presented?</th>
<th>Very well</th>
<th>OK</th>
<th>Poorly</th>
<th>Missing</th>
</tr>
</thead>
<tbody>
<tr>
<td>1180</td>
<td>527</td>
<td>9</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>68.8%</td>
<td>30.7%</td>
<td>0.5%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How useful was the information presented?</th>
<th>Very useful</th>
<th>Useful</th>
<th>Not at all useful</th>
<th>Missing</th>
</tr>
</thead>
<tbody>
<tr>
<td>779</td>
<td>838</td>
<td>92</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>45.6%</td>
<td>49.0%</td>
<td>5.4%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How useful was the banner?</th>
<th>828</th>
<th>814</th>
<th>60</th>
<th>14</th>
</tr>
</thead>
<tbody>
<tr>
<td>48.6%</td>
<td>47.8%</td>
<td>3.5%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How useful was it to discuss the topics with the peer educators?</th>
<th>701</th>
<th>818</th>
<th>82</th>
<th>115</th>
</tr>
</thead>
<tbody>
<tr>
<td>43.8%</td>
<td>51.1%</td>
<td>5.1%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Summaries of the written comments are given below.

How well was the information presented? (559 responses)

Common themes to arise were:

<table>
<thead>
<tr>
<th>Theme</th>
<th>Positive responses</th>
<th>Negative responses</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good/ great presentation</td>
<td>184</td>
<td>17</td>
<td>201</td>
</tr>
<tr>
<td>Visuals</td>
<td>109</td>
<td>5</td>
<td>114</td>
</tr>
<tr>
<td>Real stories</td>
<td>67</td>
<td>7</td>
<td>74</td>
</tr>
<tr>
<td>Entertaining/ creative</td>
<td>57</td>
<td>10</td>
<td>67</td>
</tr>
<tr>
<td>Informative/ relevant</td>
<td>61</td>
<td>6</td>
<td>67</td>
</tr>
<tr>
<td>Preparation/ Organisation/ Structure</td>
<td>27</td>
<td>9</td>
<td>36</td>
</tr>
<tr>
<td>Time</td>
<td></td>
<td>15</td>
<td>15</td>
</tr>
</tbody>
</table>

Most commented that the peer educators had done a good or great job or that the information was well presented. Positive points described included:

- Clear, strong voices/Easy to listen to
- Good eye contact
- Professional/Well spoken
- Easy to understand/Information explained/Good detail
- Friendly/Funny/Relaxed
- Confident/Brave/Not embarrassed

I liked the way they shared the talking. Everyone held the momentum for each other and it came across very strong.
We did not have to ask questions because it was already explained. We understood it straight away.

It was good how different sections were presented in different ways.

A few students said they found it difficult to hear or see the presenters. In some cases it was felt that the presenters could have projected their voices more, or slowed their speech so that students could better hear and comprehend the material being presented. Invariably, audience numbers and venues added to, or detracted from, the effectiveness of both voice and visual effects.

I thought it was really great that young mums our age were speaking to us, but some of the time they didn’t talk very clearly and were hard to understand.

Needed to be in a quieter environment. Some people were hard to understand.

Many students made positive comments about the visual aids.

It was good they used props to explain what they were talking about.

The banner thing was very cool...much more interesting than just people talking.

Five students made suggestions for improvement. One student felt that the display boards were too crowded.

Good visuals, could have given handouts so we have something to refer back to.

Some students commented on the impact of personal stories related by young mothers and the honesty, openness and spontaneity of the peer educators. Comments were focussed on:

- Open/ Honest/ Upfront/ Not afraid to answer questions
- Share personal experiences/ described lives
- Spontaneous/ Enthusiastic
- Relate to age group

Because the girls were talking about personal experience. Also, it wasn’t rehearsed. They just said what they had experienced.

I was surprised in how openly they shared their stories, but this made it more interesting.

I was surprised how young the women were.
Seven students made suggestions for improvement, including that babies and fathers attend the presentation. Others thought that the presenters were nervous and lacked confidence or enthusiasm.

- Real babies/ Fathers
- Not confident/ nervous
- Lack of emotion

*It would have been better if they had brought in their children so we could have seen the close relationships.*

*Could have had a male point of view*

*The women told us good information but didn’t present it very confidently.*

Some students commented that the presentation was entertaining.

- Enjoyable/Entertaining/ Fun/ Humorous/ Interesting/ Creative
- Grabbed attention/ easy to pay attention to
- Simple/ laid-back
- Audience involvement/ discussions

*Friendly, funny women! Good, casual background so we could relax and open up and talk comfortably. Down to earth.*

*Excellent! I usually get bored through a presentation but this time I wasn’t.*

*The dismantling the pram thing was funny. I liked that the audience were able to participate.*

Ten students responded that they thought the presentation was a little too informal or that the level of student involvement could be greater.

*Very casual approach. Bit informal. Use of language could have been more appropriate.*

*Needs to be a little more interactive. Student involvement could’ve been higher.*

There were 61 positive comments about the relevance to student’s learning.

- Told what we need to know
- Informative/ educational/ useful
- Range of topics
- Answered all questions
- Good points/ detail

*They talked to us properly and helped us understand.*
Talking Realities Evaluation Report

Explained in a way that suited our age group.

Six students considered that their learning could have been enhanced by further detail or explanation.

Some words weren’t explained. Could have been more simple.

Time was an issue, but they could have gone into a bit more detail.

Twenty-seven positive comments were made regarding the preparation, organisation and structure of the presentation.

- Good preparation/ organisation
- Knew what they were doing
- Logical format/ layout of the program was good

Fifteen students felt that time was an issue. Whilst some responses suggested that there was insufficient time, others remarked that the presentation dragged on for too long or that they wanted a break.

How useful was the information presented? (635 responses)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good, excellent etc</td>
<td>115</td>
</tr>
<tr>
<td>Information/ informative</td>
<td>89</td>
</tr>
<tr>
<td>Reality-based</td>
<td>82</td>
</tr>
<tr>
<td>Learnt lots</td>
<td>81</td>
</tr>
<tr>
<td>Interesting</td>
<td>66</td>
</tr>
<tr>
<td>Helpful/ useful/ relevant</td>
<td>56</td>
</tr>
<tr>
<td>Well presented</td>
<td>54</td>
</tr>
</tbody>
</table>

Almost all responses were positive; 115 students simply stating that the session was 'good' 'excellent' or similar. About 90 described the session as informative or as containing good information.

Informative - I liked how the presenters had actually experienced what they were talking about.

Eighty-two students appreciated the way the peer educators honestly presented the reality of parenting and a similar number stated that they learnt lots of new things about, for example, children’s needs and the costs involved in parenting.

I found it really good how the people presenting were really open about their experiences.

It was an eye opener, and was good to hear real life stories from people who have experienced it.
Some things we talked about I couldn’t ask my mum about so it was good to learn it.

Other positive comments were that the session was interesting (66) useful (56) and well presented (54).

There was a lot of useful information given and the talk was very interesting.

Really useful, we learnt first hand what it would be like being a teen mum.

It was presented in a visual way, while they talked to help picture things.

Some students stated that they would think more carefully about delaying parenting, the risks of sexual activity and the possible consequences.

I have realised I don’t want a child yet as I have been thinking about it.

I’ll definitely remember it and think hard if I’m in that situation.

Very useful because it’s telling me if I have sex at 15 and it’s not safe, there’s consequences especially if you don’t want an abortion.

It gave us a good view of how we may end up if we are not responsible with sex.

You taught me the responsibilities and commitments I would need to make if I have a baby.

A small number of less positive responses were about the lack of relevance for boys and that the information was already known.

As a male I don’t really need to know about this but it’s good to know what a female goes through.

More information for the male situation.

How useful was the banner? (546 responses)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good visuals</td>
<td>151</td>
</tr>
<tr>
<td>Easy to understand</td>
<td>130</td>
</tr>
<tr>
<td>Good idea</td>
<td>99</td>
</tr>
<tr>
<td>Comparisons useful</td>
<td>49</td>
</tr>
<tr>
<td>Easy to listen and take notes</td>
<td>47</td>
</tr>
<tr>
<td>Not useful</td>
<td>43</td>
</tr>
<tr>
<td>Informative</td>
<td>40</td>
</tr>
</tbody>
</table>
Nearly all the students who commented on the banner made positive statements. The most common theme raised was how well the banner "looked". It was described as colourful, bright, and creative. Students thought it was designed well, they liked the pictures, and the visual effects caught their attention and made it easy to see and read.

*It was good to visually see the responsibilities etc. it really allowed me to take in and focus on the information.*

The students considered that the banner was easy to understand and follow. It was explained and presented well and this made it easier to take in the information. Many of the students commented that the banner was a good or great idea.

*I thought the banner was a good way of explaining everything.*

The students liked the way the banner showed comparisons between the average teenager and a teenage mother.

*The banner clearly showed us the differences between being a teenager and being a teenage mum, which was useful.*

Some felt that the banner allowed them to listen more to the presentation. It was useful to be able to keep track of what was being said and if you missed anything or forgot what had been said, you could refer back to the banner.

*Because it was something we could look at and remember because it was always up there and you could reflect back to it.*

Some students felt the banner was not useful and commented that it was too hard to read, was too small or took too much time to set up and take down.

*It was hard to read from the back.*

*Some of it was pretty crowded and sometimes became unclear.*

What else would you like the peer educators to talk about? (435 responses)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Experiences</td>
<td>105</td>
</tr>
<tr>
<td>Nothing</td>
<td>69</td>
</tr>
<tr>
<td>Sexual health</td>
<td>56</td>
</tr>
<tr>
<td>Feelings, coping, responsibility</td>
<td>52</td>
</tr>
<tr>
<td>Fathers</td>
<td>43</td>
</tr>
<tr>
<td>All about babies</td>
<td>41</td>
</tr>
<tr>
<td>Pregnancy</td>
<td>32</td>
</tr>
<tr>
<td>Influences (legal and illegal)</td>
<td>26</td>
</tr>
<tr>
<td>Help, services</td>
<td>15</td>
</tr>
</tbody>
</table>
A number of students felt that the presentation did not need anything else added to it since the young mothers talked about everything they needed to know. The most common theme that students would like the presenters to talk more about in addition to the current presentation is based on the young mothers’ personal experiences. They want to get to know the mothers better by hearing more of their personal stories including the birth, how they got pregnant, how being pregnant has changed their lives, how friends/parents/schools/public reacted to their pregnancy, why they chose to have the baby, how they told friends/parents they were pregnant, and what life is like with a baby. The students would also want to hear more about the young mothers’ feelings, how they coped and the responsibility of being a parent.

*More personal experiences, it makes everything feel so much more realistic than facts.*

*How you felt when you first found out you were pregnant. Also how the baby makes you feel when you spend time with it.*

Sexual health issues were also a common theme that the students would like to hear more about, including contraception, prevention, abstinence, STIs, homosexuality, consequences of sex and sex education.

They thought that it would be good to have a father there so that they could get their perspective on teenage parenting.

*Emphasise what dads go through. Everyone talks about the mums but not the young dads, maybe you can get the dads to talk about their experiences.*

The students wanted to know about the babies and what is involved in looking after a baby. They felt that it would help to bring the baby in to the presentation.

*More information on how to care for a new baby what to do and what not to do.*

Another issue that the students wanted to hear about is general pregnancy information including abortions, miscarriage and the chances of getting pregnant. They also wanted to know about the influences of drugs, alcohol, peer pressure, rape and the legal aspects of having sex at a young age.

*More about abortions (how much they cost, how do they do it, do your parents have to find out).*

*Pressure from others around you and social expectations about sex etc.*

A few students wanted the presenters to talk more about how to get help and the services that are available for teenage mothers/mothers-to-be.
Student Learning

Topics in which students reported the greatest learning included the 'cost of living' and 'comparing the lifestyles' of adolescent students and young parents as regards their social lives, responsibilities and friendships (see table below). The sexual health topic and the topic dealing with relationships and feelings around being a young parent, were identified as topics in which the least learning occurred.

<table>
<thead>
<tr>
<th>How much did you learn?</th>
<th>Heaps</th>
<th>Some</th>
<th>Nothing</th>
</tr>
</thead>
<tbody>
<tr>
<td>The cost of living</td>
<td>1009 (59.3%)</td>
<td>648</td>
<td>44</td>
</tr>
<tr>
<td>Comparing the lifestyles</td>
<td>864 (50.8%)</td>
<td>778</td>
<td>60</td>
</tr>
<tr>
<td>Children's needs</td>
<td>727 (43.2%)</td>
<td>867</td>
<td>88</td>
</tr>
<tr>
<td>What's in a day</td>
<td>679 (40.2%)</td>
<td>919</td>
<td>92</td>
</tr>
<tr>
<td>Where will we live</td>
<td>672 (40.9%)</td>
<td>865</td>
<td>106</td>
</tr>
<tr>
<td>Consequences of having a baby</td>
<td>653 (40.6%)</td>
<td>824</td>
<td>131</td>
</tr>
<tr>
<td>Relationships and feelings</td>
<td>504 (30.5%)</td>
<td>1017</td>
<td>129</td>
</tr>
<tr>
<td>Sexual health</td>
<td>421 (25.7%)</td>
<td>1007</td>
<td>207</td>
</tr>
</tbody>
</table>

Cost of living (1,436 responses)

The most important themes learnt about under 'cost of living' are shown below.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost/expense of parenting</td>
<td>580</td>
</tr>
<tr>
<td>Need to budget</td>
<td>315</td>
</tr>
<tr>
<td>Hard life</td>
<td>179</td>
</tr>
<tr>
<td>No money for self</td>
<td>165</td>
</tr>
<tr>
<td>How life would change</td>
<td>47</td>
</tr>
<tr>
<td>Government assistance</td>
<td>41</td>
</tr>
</tbody>
</table>

The most frequently mentioned learning was about the costs and expense of having a child and caring for it: this included costs of food, clothing, equipment, living costs, rent and so on. Some students said that they didn’t realise babies needed so much and how expensive everything was.

*I didn’t realise just how much everything cost and how to live on such a little amount of money.*

Next frequently mentioned was the need to budget, plan carefully and spend wisely, saving money for bills and emergencies.

*that you need to think about things first and make sure you can afford them.*

Some students indicated they had learnt that it is hard financially and that young parents get less money than previously thought.
money doesn't go very far when you have a child to look after as well as yourself.

I didn't realise how little money they get from the government.

The students often noted the difference in their own lives and spending patterns with that of the young parents.

You can’t spend your money on clothes and parties.

You can’t spend all your money on yourself when you are a teenage parent.

Some also noted that they 'had it easy' and would find it hard to manage.

I spend heaps of money on things I don’t need.

There is no way I could be in their position, I'm not that responsible and I can't budget.

Some students learnt about government assistance, most stating that it was not very much, although two said it was too much.

Comparing the lifestyles (1,434 responses)

Common themes to arise were:

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Free time/ sacrifices</td>
<td>436</td>
</tr>
<tr>
<td>Difficulty/ support</td>
<td>216</td>
</tr>
<tr>
<td>Enjoy youth/ freedom</td>
<td>146</td>
</tr>
<tr>
<td>Financial issues</td>
<td>116</td>
</tr>
<tr>
<td>Different lives</td>
<td>116</td>
</tr>
<tr>
<td>Responsibility and maturity</td>
<td>115</td>
</tr>
<tr>
<td>When to have children</td>
<td>115</td>
</tr>
<tr>
<td>Sexual activity</td>
<td>105</td>
</tr>
<tr>
<td>Baby needs</td>
<td>31</td>
</tr>
<tr>
<td>Already knew content</td>
<td>15</td>
</tr>
<tr>
<td>Resilience/ defensiveness</td>
<td>9</td>
</tr>
</tbody>
</table>

The students recognise that having a baby is very time consuming and as a result you need to make many sacrifices.

A baby takes up most of your free time. You get no time for yourself.

You have to sacrifice many things - social life, having fun, going to parties, seeing friends, education, career, sport, dreams.
The students recognise that having a baby is quite difficult, regardless of whether you are a teenage mother or an adult mother. They also recognise that you need a lot of support and that if you are a teenage mother you may not receive this help.

*Babies are harder to look after than they look.*

*Teenage mothers can struggle with relationships and friendships.*

*The father won’t necessarily stay to help you bring up the child.*

*Friends and family won’t necessarily be there to help and support you.*

*It can be more difficult to get housing and babysitters if you are a teenage mother.*

A number of students recognise that if you have a baby at such a young age, that your life will change. The presentation has showed them that possibly it is not as glamorous as it looks and as a result they feel lucky not to be a teenage mother and will enjoy their life before they have children.

*A baby can stuff up your life.*

*Enjoy life as a teenager before we have kids/ live life to the max.*

*How lucky we are not to be a teen mum. Would rather have my lifestyle than theirs.*

A significant number of the students felt that they had learnt about how much it costs to raise a child, and subsequently how they could no longer spend their money on themselves.

*Income of the young mothers. Money is hard to come by for young mothers.*

*$5 a week maintenance costs from father.*

*Having to save money and budget for the baby*

*Young mothers can no longer buy things for themselves - e.g. clothing.*

Students recognise that there are significant differences between the lives of an 'average teenager' and a teenage mother. Many did not realise how different the two lives are.

*The two lives are very different. What you would miss out on.*

*A teenage mother’s life is more different than I thought.*

*What parents actually do. What parenting is like.*
Students recognised that having a baby brings new responsibilities and requires maturity.

Young mothers are responsible for not only themselves, but also the baby.

You need to make responsible choices.

The baby is dependent on the mother. Children come first.

You need to be 100% committed.

You need to become more mature when you have a baby.

Students responded that it was important to plan for the responsibilities of parenting.

Be aware of the consequences of having a baby as a teenager.

Wait until you have established yourself with a secure job, partner and have an education.

It is best to plan ahead for a baby. Don’t rush into it - you have your whole life ahead of you.

Students reported being more aware of the importance of safe sex, in the broader context of caring for oneself and assertiveness, as well as contraception and protection against sexually transmitted infections. Some students believed in waiting until they were older, or married, before having sex.

Think before you act/ be careful. Always use protection/contraception.

Learn to say no to peer pressure.

Don’t have sex before marriage/ when you are young.

Some of the students learnt how important it is to look after the baby, and just how many special needs the baby has. They also learnt what is involved in caring for a baby.

Babies have a lot of needs. How to care for a baby.

A small number of students (n = 15) responded that they were already familiar with the ways in which the lifestyles of young mums differed from their peers. Some of the explanations included they already cared for babies/children, their mother is a midwife and taught them about being a mother, and their mother was a young mother themselves and taught their child what teenage parenting was like.

A small number of responses (n = 9) suggested that having a baby as a teenager was not the end of the world or conveyed a defensive posture re young parenting.
Talking Realities Evaluation Report

Having a baby isn't the end of the world.
You can still survive despite all the problems.
It's my choice.
Teen mothers still go out.

Children's needs (1,216 responses)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Love and care</td>
<td>393</td>
</tr>
<tr>
<td>Needs</td>
<td>292</td>
</tr>
<tr>
<td>Time</td>
<td>131</td>
</tr>
<tr>
<td>Material items</td>
<td>110</td>
</tr>
<tr>
<td>Putting child’s needs first</td>
<td>87</td>
</tr>
<tr>
<td>Hard work</td>
<td>78</td>
</tr>
<tr>
<td>Cost</td>
<td>64</td>
</tr>
<tr>
<td>Dependent on parent</td>
<td>55</td>
</tr>
</tbody>
</table>

The most common thing the students learnt about children’s needs, was that a baby needs a lot of care. This included love, attention, nurturing, feeding, playing and general looking after.

A baby needs more than food and toys, they need love and care.

They need a lot of love and support as well as all the everyday stuff. You can't just feed it and change it, it has emotional needs too.

Many of the students said they didn't realise just how many needs a baby/child actually has. They commented that a baby has more needs than an adult and that a baby needs just about everything done for them. They realised how much a baby relies on the mother to be there for them and look after them.

I really learnt and took into account all the babies needs. I thought it would be good to have a baby but I didn't consider their needs.

Babies are very helpless and they need you to do everything for them.

The students learnt that a baby takes up a lot of time. As a parent you no longer have as much time for yourself and spend most of the day and night looking after the baby; as it is a 24 hour, 7 day a week job.

I learnt that babies need lots of your time devoted to them. It's not as easy as it looks.

That children take a lot of time to look after and you don’t get much time to yourself.
The students also learnt how many items you need to buy to look after a baby including equipment/baby furniture and material possessions such as clothing and toys. Many of the students didn’t realise how many things are needed for a baby and especially how many things are needed when going out with the baby.

A number of students learnt that with a baby you need to take their needs into account before your own and therefore life changes because the baby becomes the main focus. The students realised from the presentation that having a baby is a lot of hard work and not as easy as they thought. It can be very demanding and requires a lot of energy and effort.

That you now have something that is more important to you than yourself.

Having a baby is a huge responsibility.

Consequences of having a baby (981 responses)

Most responses (354) focused on the challenges and problems in young parenting. These included how hard it seemed, the costs, the loss of freedom, social life and time for oneself.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hard life</td>
<td>84</td>
</tr>
<tr>
<td>Unspecified negatives</td>
<td>62</td>
</tr>
<tr>
<td>Cost</td>
<td>45</td>
</tr>
<tr>
<td>Lose freedom</td>
<td>42</td>
</tr>
<tr>
<td>No time for self</td>
<td>42</td>
</tr>
<tr>
<td>Lose social life</td>
<td>35</td>
</tr>
</tbody>
</table>

Comments included

It’s hard to raise a kid when you are young.

You don’t get to do what you want.

Your life changes if you have a baby too young because you can’t go out with your friends.

Some students (109) described a balance between positive and negative impacts of young parenting

In some ways you do regret getting pregnant but some way or another the best thing has come out of it.

It can be fun having a baby but a lot of hard work too.

That as much as its great having a baby who loves you and hugs you, it’s not a good idea when young, it effects your life completely.
Seventy five responses indicated that there were more challenges than positive impacts.

There are more challenges than positives in having a baby as a teenager.

A few responses (17) described more positives than negatives, or only positives.

That children can be a joy to have around.

Many of the responses (104) noted that there are lots of consequences or life changes without clearly indicating whether these were positive or negative.

Your life is changed forever once you have a baby.

People probably don’t realise at first how much peoples lives are changed after having a baby. It let us know and we got to think about it and ask questions.

The increased responsibility and notion of the ongoing nature of caring for a child was identified by 101 student responses. They also noted that the baby’s needs have to come before the parents and that they need a lot of care.

That your life changes and you have greater responsibilities.

When you have a baby, a lot of things that you want to do is impossible because babies needs came first.

Another large group of responses (98) was around not getting pregnant when young or at least thinking and planning carefully before having a child.

Don’t take risks. Make sure you’re ready.

To use contraception.

Babies are great but not at this age, because you are still growing up and experiencing new things of your own.

A few students talked about making choices that are right for the individual, that people make different decisions and these should be respected. A couple noted that 'all the mothers, despite all the consequences, are still willing to have and look after their children'.
Where will we live (1,197 responses)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hard to find a home</td>
<td>332</td>
</tr>
<tr>
<td>Expensive</td>
<td>142</td>
</tr>
<tr>
<td>Accommodation and information services</td>
<td>170</td>
</tr>
<tr>
<td>Babies need a safe home</td>
<td>118</td>
</tr>
<tr>
<td>Homelessness</td>
<td>70</td>
</tr>
<tr>
<td>Help needed</td>
<td>72</td>
</tr>
<tr>
<td>Plan</td>
<td>55</td>
</tr>
<tr>
<td>Help from parents</td>
<td>45</td>
</tr>
<tr>
<td>SAHT and government assistance</td>
<td>31</td>
</tr>
<tr>
<td>Parents not supportive</td>
<td>27</td>
</tr>
<tr>
<td>Long wait for housing</td>
<td>24</td>
</tr>
</tbody>
</table>

The most important thing most students said they learnt from 'Where will we live' was around the difficulty of finding accommodation. Being a young person and having a baby made it hard to get housing.

*How hard it is for young adults with children to find housing.*

*I didn’t know that people don’t like giving houses to you if you’ve got a kid.*

Many students noted that housing was hard because of the costs involved in paying rent and household bills, particularly if living alone with a baby.

*How much it costs to live by yourself without a partner to help with the rent and other bills and baby.*

*Money goes quickly when you need to pay for everything.*

On a positive note, students learned about the SA Housing Trust and the different support services and places to go if help was needed to find accommodation or emergency shelter.

*I learnt about places you can go for support and temporary living arrangements.*

*There are shelters available which I didn’t know about.*

A few students remarked that there were less services available in country regions.

*In the country there isn’t anywhere you can go.*

Students noted that the accommodation needed to be safe and appropriate for a child to live in.

*Having a house to live in is important for the safety of your child.*
Talking Realities Evaluation Report

It is important for you and your baby to have a stable environment to live in.

The potential for homelessness was remembered by some students. They expressed surprise at the definition of homelessness and that it could happen to a young parent.

That a homeless person isn’t just someone who has dirty clothes and no shoes.

A lot of single mums are homeless and find it hard to get stable housing.

Many students recalled the help that was available and how important it was to draw on family and friends for support. For some, a lack of parental support was not something they had considered.

Its hard if you don’t have support from family and friends.

I didn’t realise about buying a house or renting, I just thought that you would live with your parents.

Finally, a few students noted that young people should think carefully and plan ahead before becoming a parent.

It’s best to have a stable home before you have a child.

What’s in a day (1,337 responses)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time for self, free time</td>
<td>460</td>
</tr>
<tr>
<td>Lack of sleep</td>
<td>193</td>
</tr>
<tr>
<td>Time taken in caring for child</td>
<td>178</td>
</tr>
<tr>
<td>Always on call, responsibilities</td>
<td>94</td>
</tr>
<tr>
<td>Busy lifestyle</td>
<td>84</td>
</tr>
<tr>
<td>What babies need, how to care for them</td>
<td>83</td>
</tr>
<tr>
<td>Household chores</td>
<td>81</td>
</tr>
</tbody>
</table>

Nearly all the comments to this question focussed on the time aspect of parenting. The lack of free time for oneself was mentioned by 460 students.

How little time mothers have for themselves.

It made me appreciate how much spare time I get.

The lack of sleep was noted by 193 students with some expressing that they would not be able to cope with this.

That you can be up at all hours of the night.

That you get sleep only when the baby is sleeping which is not often.
Students were surprised at how much time is taken up with caring for a baby or small child.

*How much attention a baby/child needs.*

*How often you have to feed the baby and get up early.*

Some students noted that babies need constant care and parents are on call 24 hours a day

*That you have to be ready to attend your child whenever it needs you.*

*They have responsibilities 24 hours a day.*

Students compared their own life with that of a young parent

*A teenage mum's day is a lot more hectic than a normal teenager.*

*Ordinary teenagers have heaps more freedom than teen parents.*

Many comments reflected the hard work, busy life style and responsibility that comes with parenting

*A baby is both physically and emotionally demanding.*

*How much you have to do for your child and how much the child comes first.*

For some, there were clear lessons from the presentation.

*We take our time for granted. We complain that we never have enough time to do the things we want.*

*I knew a mother revolves her life around her baby, I just didn’t know how much.*

**Relationships and feelings (1,067 responses)**

Key themes to arise included:

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changing relationships</td>
<td>516</td>
</tr>
<tr>
<td>Relationship with baby</td>
<td>279</td>
</tr>
<tr>
<td>Relationship with father/partner</td>
<td>205</td>
</tr>
<tr>
<td>Relationship with friends</td>
<td>164</td>
</tr>
<tr>
<td>Relationship with family/parents</td>
<td>116</td>
</tr>
<tr>
<td>Relationship with others</td>
<td>47</td>
</tr>
<tr>
<td>Feelings</td>
<td>195</td>
</tr>
<tr>
<td>Support</td>
<td>137</td>
</tr>
</tbody>
</table>
The major theme in students' responses was the understanding that relationships change, and are possibly strained or lost as a result of pregnancy and parenting. The importance of relationships with the child, family and friends, and the effort required to maintain relationships, was also noted.

Responses were sorted by relationship (where specified) - baby, friends, partner, parents/family and others. This process helped to elucidate the common associations of 'friendships' and loss, 'partners' and commitment, 'others' and stigma.

The relationship with the child focussed on responsibility for the baby's safety and wellbeing, particularly with reference to the stress of parenting alone and how important it was for the child's development that the mother tried to remain positive even when times were tough. The importance of self control and coping strategies and the risk of child neglect or harm were also mentioned.

Student responses focused on the possible negative consequences of pregnancy and parenting on the relationship with the father of the child - that fathers' don't stick around, can't be relied upon to provide financial, practical or emotional support and might not feel the same way about the baby. There were, however, responses that highlighted the importance of communication, respecting each other's feelings, shared decision-making and responsibility.

The importance of making good choices was another theme in this set of responses. Both the need for assertiveness and individual's responsibilities for their choices, were highlighted. Some responses were value/ moral statements, including:

- Only to do it if you really love the person.
- Don't marry just 'cos of a baby.
- It's wrong to have a baby just to keep your partner.

Friendships were lost because of different interests, priorities, lack of understanding or rejection. 'Real friends' were seen to be those who remained in contact, and were supportive, of the young mother. Being alone and unsupported was understood to be a possible outcome of the decision to have a child. Feeling alone and unsupported was seen to be a further aspect of young parenting.

Students identified that parents could be supportive and that this was both beneficial to the young mother and enhanced the child's social and emotional development. There was also a group of responses that acknowledged that parents have their own thoughts and feelings about the situation that may be different from the young person's.

Other people's reactions were seen to be unpredictable, including the reactions of significant others such as family and friends. The stereotyping and stigma often associated with young parenting was acknowledged.
Some responses identified changes to feelings. Mood swings in pregnancy and postnatal depression were the focus of most student responses in this category.

**Sexual health (1,029 responses)**

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe sex</td>
<td>283</td>
</tr>
<tr>
<td>Contraception</td>
<td>172</td>
</tr>
<tr>
<td>STIs/HIV/AIDS</td>
<td>125</td>
</tr>
<tr>
<td>Contraception new methods</td>
<td>125</td>
</tr>
<tr>
<td>Little or nothing new</td>
<td>116</td>
</tr>
<tr>
<td>Contraception options</td>
<td>112</td>
</tr>
<tr>
<td>Risks</td>
<td>73</td>
</tr>
<tr>
<td>Abstain/wait</td>
<td>72</td>
</tr>
<tr>
<td>Myths</td>
<td>59</td>
</tr>
<tr>
<td>OK to say no</td>
<td>55</td>
</tr>
</tbody>
</table>

Most responses (283) focussed on safe sexual practices: being careful, taking precautions etc.

*Safe sex is important.*

*Use protection and be careful.*

The next most frequently response (186) was the fact that contraceptives are not completely effective. Another 50 students mentioned the need to use contraceptives correctly.

*Contraception doesn’t always work and condoms get ruined if you don’t look after them properly.*

*No matter what contraception is used none of them is foolproof.*

*That if you vomit, the pill won’t work for up to 7 days.*

Approximately 170 responses said that the most important thing learnt was about contraception and the importance of contraception. About half specifically mentioned condoms. Another 125 responses centred on STIs/HIV/AIDS and their prevention. A similar number described learning about new methods of contraception, in particular the hormonal implant and ECP.

*What types of diseases you can get and to use protection.*

*About the new contraceptive, the Implanon.*

About 116 students indicated they learnt little or nothing new as the topic had been covered elsewhere in the curriculum. However, many of these students stated that it
was still valuable. A small number reported the topic was not covered in sufficient detail.

*We learnt stuff like this in health but this puts it in a different way.*

*I already knew about this but some people didn’t so its good to learn.*

*Could have spent more time in this section, could have added more info.*

Some students said they had learnt about different contraception options and methods.

*There are more forms of contraception then I thought there was.*

Some noted the risks associated with sexual activity and how easy it was for pregnancy to occur. Others stated that abstinence or waiting until ready were the best options.

*Just don’t have sex before marriage and you won’t get pregnant.*

*Don’t have sex till your really ready.*

The myths associated with contraception were mentioned by some students.

Some students stated that no-one should feel pressured into sexual activity by others and that it is ‘OK to say no’.

*Say NO when you don’t feel comfortable.*

*To be sexually healthy also means to be ready and happy with what you’re doing.*

**Responsibilities of being a young parent**

A separate question asked about student learning re the responsibilities of being a young parent. One thousand and sixty-three students, or 64% of those who responded to the question, reported having learnt ‘heaps’ about the responsibilities of being a young parent. ‘The responsibilities of being a young parent’ would seem to encompass the broad implications of parenting at a young age including, but not limited to, lifestyle changes and being thrust into the adult world of financial, social and parenting responsibilities.

<table>
<thead>
<tr>
<th>How much did you learn about:</th>
<th>Heaps</th>
<th>Some</th>
<th>Nothing</th>
</tr>
</thead>
<tbody>
<tr>
<td>The responsibilities of being a young parent</td>
<td>1063</td>
<td>554</td>
<td>52</td>
</tr>
<tr>
<td></td>
<td>63.7%</td>
<td>33.2%</td>
<td>3.1%</td>
</tr>
</tbody>
</table>
What do you consider is the most important responsibility for a young parent? (1,337 responses)

<table>
<thead>
<tr>
<th>Role Description</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caring for/ looking after baby</td>
<td>354</td>
</tr>
<tr>
<td>Putting baby first/ changing lifestyle</td>
<td>145</td>
</tr>
<tr>
<td>Money and budgeting</td>
<td>107</td>
</tr>
<tr>
<td>Give baby love</td>
<td>106</td>
</tr>
<tr>
<td>Baby’s health</td>
<td>87</td>
</tr>
<tr>
<td>Being there all the time</td>
<td>83</td>
</tr>
<tr>
<td>Keep baby safe</td>
<td>83</td>
</tr>
<tr>
<td>Be responsible/ mature/ prepared</td>
<td>72</td>
</tr>
<tr>
<td>Baby’s needs</td>
<td>71</td>
</tr>
<tr>
<td>Caring for oneself and the baby</td>
<td>45</td>
</tr>
<tr>
<td>Baby’s physical needs: food, clothing, cleanliness, housing</td>
<td>41</td>
</tr>
<tr>
<td>Get help from family, partner, friends, other young parents</td>
<td>39</td>
</tr>
<tr>
<td>Baby’s emotional needs</td>
<td>35</td>
</tr>
<tr>
<td>Attention from parent, time</td>
<td>27</td>
</tr>
</tbody>
</table>

The largest number of responses focussed on the responsibility to care for and look after the baby.

To care for and protect your child. Be a good parent.

Next students mentioned putting the baby first before one’s own needs, managing money and budgeting, and giving the child love.

The need and wants of the child are met before anything else.

There is a lot of responsibilities being a young parent and a lot of things that you have to do.

Being mature - not wanting to party all the time and recognising responsibility.

Be capable of managing money and do what is in the best interest of the child.

Babies need love and care and time if you want them to grow up well.

More specifically, some responses centred on looking after the baby’s health, the need to be vigilant and responsible for the child all the time and providing a safe environment.

You have to be there for your baby and don’t just leave it unattended.

Always being there for the child when they need you.
Never harm your kids by smoking or doing drugs.

Don't shake a baby, go out the room and cool down.

Providing for the child's needs (physical and emotional) was also mentioned

Looking after the baby, finding a place to live and paying for everything.

Available services

Another question asked about students learning re services. Ninety-two percent of students reported having learnt 'some' or 'heaps' about parenting services and where to go for parenting information.

<table>
<thead>
<tr>
<th>How much did you learn about:</th>
<th>Heaps</th>
<th>Some</th>
<th>Nothing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services and places to go for information about parenting</td>
<td>543</td>
<td>969</td>
<td>123</td>
</tr>
<tr>
<td></td>
<td>33.2%</td>
<td>59.3%</td>
<td>7.5%</td>
</tr>
</tbody>
</table>

Students were asked to name a new service they had learnt about. There were 1,072 responses.

<table>
<thead>
<tr>
<th>Service</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health services</td>
<td>231</td>
</tr>
<tr>
<td>Parenting support</td>
<td>203</td>
</tr>
<tr>
<td>Help lines</td>
<td>171</td>
</tr>
<tr>
<td>Youth services</td>
<td>140</td>
</tr>
<tr>
<td>Housing</td>
<td>38</td>
</tr>
<tr>
<td>Rural services</td>
<td>38</td>
</tr>
<tr>
<td>Centrelink</td>
<td>12</td>
</tr>
<tr>
<td>Community Service Organisations</td>
<td>6</td>
</tr>
</tbody>
</table>

Health services were most frequently listed; these included Helen Mayo House (83) and Shine (73). Others mentioned were women's health services and general practitioners. Parenting support services recalled by 203 students included Parenting SA (84), Torrens House (39) and Child and Youth Health (29). Telephone help lines were mentioned by 171 students, 114 of these naming the Parenting Help line.

5.1.2 Student focus groups

What do you remember most about the presentation?

Students in all the groups mentioned the differences between the life of a young parent and a non-parenting teenager. This included how money was spent, not being able to have a social life and the problems of day-to-day living.

They said the day of a mother's life. What they do compared with a person their age who didn’t have a baby.
What the Year 8 boys mostly remembered suggests they thought the session was about mothers/girls rather than parents/fathers/boys.

*It was mainly for girls. They are the only ones that can get pregnant.*

The importance of contraception and contraception myths were also remembered. Older students remembered the descriptions of the peer educators personal experiences.

**What parts did you find most interesting?**

Money, responsibility and time spent differently as a young parent were all nominated as interesting parts of the presentation. Information about having to go without things to make ends meet and having little time for oneself was interesting. One group mentioned that all the fathers except one left on hearing about the pregnancy. Another was surprised that some of the peer educators were not supported by their own parents.

**What parts did you find least interesting?**

As might be expected the students did not remember anything that they had not found interesting. One group responded in terms of the style of the presentation. Problems were that the presentation was too long, all four young mothers had quiet voices and they were trying to compete with 120 noisy students. They thought that it would be better in smaller groups such as one or two classes at a time.

**Did seeing the program change how you feel about being a young parent?**

The younger students did not seem ready to accept the possibility of parenthood. For at least one boy the question was irrelevant because ‘I’m not a girl!’ Two boys didn’t think it would happen to them.

*I’m not that dumb! I wouldn’t have a baby now.*

For two girls, the notion of fault was important - if the pregnancy was an ‘accident’ that would make a difference.

*The girl in the presentation, the condom broke, that wasn’t her fault.*

Older students had more understanding of the impact on the young parents in terms of loss of educational opportunities, social life and time and money to spend on oneself.

*Some girls had to stop going to school, they couldn’t finish their education.*

Some of the girls stated that they will think twice about the risk of getting pregnant. The presentation has encouraged them to be careful when having sex and to recognise that contraceptive methods need to be used properly and are not foolproof. They are also now aware that having a baby is not all fun. There are a lot responsibilities and
parents have to divide up their money between themselves and the baby. As one girl stated

*If you want to have a baby you have to make sure it is with the right person and that they also want to have a baby so that they won’t leave you alone to look after the baby.*

**Do you think you know more about the responsibility of being a young parent?**

Younger students interpreted this question in terms of responsibility for avoiding pregnancy rather than responsibilities for young parents. Two boys were ready to accept that the male partners had a responsibility for avoiding pregnancy, while another believed it was the responsibility of the female partner. One girl was clear that both partners contribute and should share responsibility.

*The program is important for both males and females. The male contributes to having the baby. The male should use protection.*

For the older students the focus was on caring for the baby and the amount of time this took up.

*There is a lot of responsibility, especially if they are by themselves.*

*The baby took up their whole time and there was no time for yourself.*

**Do you know more about health issues and services for young people?**

This topic tends to be cut short because of time constraints. Contraception was the main issue remembered. The older students wanted information on STIs to be included. The Year 8 girls had a number of questions about abortion although this is not a topic covered in the presentation.

The students remembered a list of agencies on the display and were able to recall places to go for information and help.

**What did you like about the way the peer educators presented?**

The students thought that it was good that there was no generation gap. If the mothers had been older, the students would not have paid so much attention. Students liked having young presenters, with real experience, as this made it more realistic for them. Teachers were not seen to have the same credibility in this area.

*It was easy to understand what they were saying - the language was on the same level.*

**What should happen to the program in the future? Should it change?**

There were mixed views on whether young fathers should take part in the presentation. Some boys thought that it would be good to have the fathers there.
Others didn’t think it was important to hear the fathers’ views as ‘only the female has the baby’. A couple of the students would have liked to have babies at the session.

*Should have the babies there to show how hard it is to talk and care for the baby at the same time, to see the needs of the baby. They should bring along the babies.*

Writing down questions at the end was thought to be a good idea as it avoided having to ask in front of everyone else.

*It was a good way to ask questions by writing it down, especially if you were nervous to talk in front of everyone.*

### 5.2 Teachers

On the feedback sheets, 64 teachers (74%) indicated strong support of the program in terms of the perceived benefits for students, with all remaining teachers agreeing that the program is beneficial for students. Fifty-eight teachers (67%) indicated strong agreement that the presentation met their expectations and 56 (65%) strongly agreed that it was relevant to the year level of the students. Teacher’s qualitative responses provide a strong endorsement of the peer education approach and highlight the impact of the young parents’ experiences on student learning. The focus group and interviewed teachers agreed that it was good to have young people presenting and that it seemed more real because they are going through the experience. They stated that the peer educators spoke honestly and without reserve.

Nearly all interviewed teachers reported that the peer educators were confident and skilled in their presentations. Specific positive comments were that they shared their experiences and personal stories, they were open and honest about their lives and choices, and they related well to the students. The main benefits of using peer educators were that the peer educators can talk about their personal experiences, that students listen more to young people closer to own their age, and the novelty of a new face.

Seven teachers were unable to think of any drawbacks to using peer educators. Three discussed the potential for mixed or inappropriate messages, for example, around drugs and abortion. None of these teachers believed this was a major problem however.

Mostly teachers believed that the presentation was appropriate for different cultural groups, although it was acknowledged that it would be good to have indigenous and other ethnic groups represented as peer educators.

‘Comparing lifestyles’, ‘the cost of living’ and ‘some consequences of having a baby’ were identified as the three topics teachers considered to be most useful to their students. Teachers’ perceive that the ‘lifestyles’ and ‘cost of living’ topics have the greatest impact on students, in terms of challenging some of the misconceptions and
conveying the realities of parenting at a young age. The focus group teachers also believed that students enjoyed the topic 'Comparing the lifestyles'. They thought that the financial information was very important, this brought a sense of reality into the presentation for the students who would not know how much it costs to have a baby. Some teachers were concerned that the young parents did not express the financial and other difficulties clearly enough. However, many more teachers were enthusiastic about the realism conveyed by the peer educators, than expressed concern.

All the teachers interviewed stated that students had an increased understanding of the issues for young parents, following the presentation. Most interviewed teachers stated that students have an increased understanding of the responsibilities of being a parent. The others believed the students had more information and knowledge but were not sure if this had been internalised and would lead to behaviour change.

One focus group suggested that not having the babies present made it seem that it was easy to get help with looking after them and reduced the impact of actually having a baby and seeing its demands.

Most teachers suggested that there should be more opportunity for interaction and questions. Another suggestion raised in the focus groups and interviews was the need for fathers to participate in the presentation even if they weren't playing an active part in the child's life.

Almost all surveyed respondents (89%) indicated they would recommend the program return the following year. Each of the nine teachers who responded "no" commented that they would recommend that the program return every second year. All interviewed teachers agreed that Talking Realities fulfils a need in school and youth services. It reinforces and extends other curriculum topics in a realistic way that teachers are not able to do. Overall, teachers were very positive about the program.

5.2.1 Teacher feedback sheets

Survey responses were collected from 86 teachers, representing 44 schools, from February 2002 to September 2003.

Quality of the presentation

Sixty-four teachers (74%) indicated strong support of the program in terms of the perceived benefits for students, with all remaining teachers agreeing that the program is beneficial for students. More than 65% of teachers indicated strong agreement that the program was relevant to the year level of the students and that it met their expectations.
<table>
<thead>
<tr>
<th></th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Unsure</th>
<th>Disagree</th>
<th>Strongly disagree</th>
<th>Missing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beneficial for students</td>
<td>64 74.4%</td>
<td>17 19.8%</td>
<td></td>
<td></td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>Met expectations</td>
<td>58 67.4%</td>
<td>22 25.6%</td>
<td>3</td>
<td></td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Relevant to year level</td>
<td>56 65.1%</td>
<td>25 29.1%</td>
<td>1</td>
<td></td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Students understood the issues</td>
<td>50 58.1%</td>
<td>30 34.9%</td>
<td>1</td>
<td></td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>Sufficient opportunities for questions</td>
<td>47 54.7%</td>
<td>26 30.2%</td>
<td>4 5</td>
<td></td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Students got involved</td>
<td>22 25.6%</td>
<td>50 58.1%</td>
<td>4 4 1</td>
<td></td>
<td></td>
<td>5</td>
</tr>
</tbody>
</table>

Teacher's qualitative responses provide a strong endorsement of the peer education approach and highlight the impact of the young parents' experiences on student learning.

The students were very attentive during the presentation, indicating that they found the information being presented as being relevant to them. This also indicated that they found the format of the presentation engaging.

In listening to the kids' comments, most got a great deal out of the presentation.

I really like the agenda and the way the girls spoke. They made an impact on my students.

A very practical and courageous presentation that had the students captivated from the very beginning...obviously the result of well planned research and organisation.

This was a wonderful session and gave us so much awareness of all that is involved in parenting. We loved hearing from the young mothers themselves. They should all become professional educators; they really know how to communicate so well.

Peer educators and program staff recognise that opportunities for student involvement could be strengthened. The trend in teachers' responses in the table above (from strongly agree to agree) supports this view. Several teachers suggested that it would be good to actively engage the students early in the presentation, in small group work and brainstorming activities, for example. It was felt that this would help 'open up' the presentation for discussions later on.
Student learning

Teachers' responses highlighted the value they placed on engaging students in their own learning through practical activities, experiences and follow-up discussions.

The pram folding thing was a great thing to see and do.

The students were made fully aware [of the realities of being a young parent] and this ‘hit home’ even more so because they are about to take the simulator dolls for 48 hours.

Great to have the girls discuss their concerns/problems and ways of overcoming adversity. The overall presentation certainly promoted some discussion.

Most useful topics

‘Comparing lifestyles’, ‘the cost of living’ and ‘some consequences of having a baby’ were identified as the three topics teachers considered to be most useful to their students. Only five teachers ranked the topic that addresses housing and accommodation issues (ie ‘where will we live’) as one of their top three ‘most useful’ subjects.

There were 73 respondents to this question. Thirteen teachers omitted to rank the topics and several others commented that they found the ranking process difficult.

I’m hesitant to rank them as all were exactly relevant to our topic.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Ranked in the top 3 (number of teachers)</th>
<th>% of respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comparing the lifestyles</td>
<td>50</td>
<td>68.5%</td>
</tr>
<tr>
<td>The cost of living</td>
<td>47</td>
<td>64.4%</td>
</tr>
<tr>
<td>Some consequences of having a baby</td>
<td>44</td>
<td>62.0%</td>
</tr>
<tr>
<td>What’s in a day</td>
<td>35</td>
<td>47.9%</td>
</tr>
<tr>
<td>Sexual health</td>
<td>21</td>
<td>29.2%</td>
</tr>
<tr>
<td>Relationships &amp; feelings</td>
<td>19</td>
<td>26.8%</td>
</tr>
<tr>
<td>Children’s needs</td>
<td>18</td>
<td>24.7%</td>
</tr>
<tr>
<td>Where will we live</td>
<td>5</td>
<td>7.1%</td>
</tr>
</tbody>
</table>

Teachers’ perceive that the ‘lifestyles’ and ‘cost of living’ topics have the greatest impact on students, in terms of challenging some of the misconceptions and conveying the realities of parenting at a young age.

Our students have the misconception that being a young parent is an easy choice (better than school). This needs to change. ‘Comparing the lifestyles’ and ‘cost of living’ brings home to them that this is not so glamorous.
They were all interesting, informative and relevant but mostly, I think, the students recognised how their treasured personal time and lifestyle would be impacted upon.

Most students liked, and learnt a lot from, the ‘cost of living’. They all thought that most mothers got pregnant or had a baby for the money.

‘Comparing lifestyles’ made a very clear message. Students probably don’t think too much about what a baby’s needs are, or housing, at this age.

Teachers expressed divergent views concerning the importance of the sexual health component of the Talking Realities presentation. Whilst some teachers reported some overlap with other parts of the curriculum, others felt that the peer educators added a unique and valued perspective to the topic.

Relationships and feelings and sexual health they have had a fair bit of already.

Sexual health was an eye opener to many, especially to hear first-hand examples of when contraception has failed. Also, first hand struggles as a single mum.

Really hard to differentiate [rank] because all were so relevant and really need to be viewed in conjunction, but never omit sexual health and relationships, they engaged a lot of the questions.

Other topics to be included

Teachers were asked if there were any other topics they would like to see included in the presentation. There were 46 respondents to this question, twenty suggesting that the current program was already comprehensive and that additional content would require extra time.

Nine teachers suggested that a male perspective would be a valuable adjunct. As well as being important for mixed sex classes, female students were reported to ask many questions about the fathers in subsequent classroom discussions. One teacher suggested using images of fathers/fathering. Another teacher wanted further emphasis on the available options (adoption, termination) and the father’s perspective.

If a male perspective could have been given, it would have strengthened the impact.

A male presenter would be good – perhaps even visuals including males with babies etc.
Talking Realities Evaluation Report

Values

Two teachers supported a stronger emphasis on prevention (abstinence) and personal responsibility with a third teacher expressing a preference for a Christian presenter.

More emphasis on the normality of not having sex at an early age.

We would probably like a Christian presenter also, but that is asking a lot.

Suggestions for strengthening existing content included more on contraception and sexual health and the importance of seeking help early in the pregnancy. It is unclear if the teacher was recommending early medical supervision of the pregnancy, timely discussion of pregnancy options, including termination, or early psychosocial support.

Cover the importance of seeking help early - ie once the pregnancy has been discovered.

If the time was increased, then more on contraception, sexual health and the services available would be great.

Suggestions for additional content included domestic violence, the role of Centre of Personal Encounter (COPE), experiences of pregnancy and birth, feeding and settling babies and managing child behaviour. One suggestion was that teachers provide further input re the topics presented. Another suggestion highlighted that the teacher valued the input of the young parents and would like to see the peer educators involved in further teaching within the child studies curriculum.

Not in this presentation, but can the girls do specific separate topics eg feeding babies, managing behaviour?

Domestic violence - support for victims; strategies on how not to be a victim.

Changes to the presentation

Teachers were asked to record their preferred option for changing the presentation to enable increased interaction between students and peer presenters. Sixty-two teachers responded to this question.

Teachers' responses do not provide a clear direction for change. Twenty respondents supported the idea of two presentations rather than the once-off format of the existing program. A further 17 respondents supported the suggestion that teachers address one or more topics before the Talking Realities presentation.
Options for change | Preference
---|---
Two 90-minute presentations (would incur extra cost for schools) | 20
| 23.3%
Arrange for teachers to address one or more topics before the presentation | 17
| 19.8%
Leave some topics to be covered by the teacher after the presentation | 13
| 15.1%
Leave out one or more current topics | 12
| 14.0%

Program development

Teachers were asked how the program could be improved. Sixty-four teachers responded, with 12 noting that the program's current format was good or excellent. Key themes to emerge from the remaining responses included needing to allow more time for the presentation, slowing the pace, increasing student question time and providing more opportunities for student interaction and participation.

Teachers' responses suggest a tension between content, student attentiveness, actively engaging students in their own learning and the school timetable. One teacher suggested that schools be provided with a range of options from which to choose. In this way the teacher could assist in achieving a balance between content and student participation by electing to cover one or more topic areas outside of the Talking Realities presentation, for example. Another school might elect to have the presentation divided into two sessions.

*Give teachers some different options in the presenting of the program (as in question 7).*

Teachers reported that the Talking Realities presentation was integrated with the curriculum in two key ways. Either it was embedded in 'Child Studies' as a SACE subject or an elective subject in Year 10, or it was part of a generic subject such as Personal Development & Health in Years 8-10. One respondent recommended allowing some time for teachers to do some preliminary work with the class prior to the presentation. Although this responsibility would seem to lie with the school, it is important that schools are informed of the program's expectations in this regard.

*Longer time for questions at the end and, also, some time beforehand for the teacher to do some pre-work.*

More group activities, such as brainstorming lifestyle changes associated with having a baby before the banner presentation, and student handouts were encouraged. Several teachers reported having seen the presentation in previous years and welcomed the 'getting on the bus' activity that was introduced in 2003.
Talking Realities Evaluation Report

It was already very good and the extra class participation and group activity "getting on the bus and what we need when going out" certainly added to the presentation.

...small group activities so it’s not all listening...

Perhaps a little less 'front of room' directed - but it's hard to be critical because it was very good.

Three teachers suggested having a break in the 90-minute presentation to relieve student restlessness. Several teachers commented on the value of question time towards the end of the presentation. The size of the audience, however, was identified as a barrier to the most effective utilisation of this time for student learning. One teacher suggested that several smaller group discussions, each facilitated by a peer educator, would be better.

Unfortunately my group had to leave early. Several students commented that they felt they missed what was the best bit.

If we had organised a smaller group then one presenter to 10 - 15 students would be better for questions.

Four teachers remarked that it would be good to have a father’s perspective. In a similar vein, another teacher commented on the impact of the peer educators’ personal stories and suggested that having three or four presenters was really valuable in highlighting the breadth of experiences.

It provided more different "stories" last semester with 4 presenters...the students like to hear personal stories, so more presenters is better. They were fascinated with the little bit about [name of peer educator]

Teacher endorsement

Teachers were asked if they would recommend that peer educators from the Talking Realities program present to students in their school the following year. Seventy-nine teachers responded to this question. Eighty-eight percent of respondents indicated they would recommend the program return the following year.

<table>
<thead>
<tr>
<th>Recommend presentation next year?</th>
<th>Yes</th>
<th>No</th>
<th>Missing</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>70</td>
<td>9</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>88.6%</td>
<td>11.4%</td>
<td></td>
</tr>
</tbody>
</table>

Each of the nine teachers who responded "no" commented that they would recommend that the program return every second year. For teachers in rural and remote areas, the travel expenses in bringing peer educators from Adelaide meant that it wasn't feasible on an annual basis. In some schools the presentation was attended by
students from more than one year level, thus biennial presentations would cover most students.

It would involve the same students but we would love you to come again! Maybe in a couple of years time? I'd certainly do this again.

Asked to comment on why they would or would not recommend that the Talking Realities program return the following year, many teachers highlighted the way the peer educators were able to engage the audience (15 responses), their credibility in terms of sharing real life stories (18 responses), and the discussion that was generated. Several teachers also commented on the way that the presentation integrates with the Child Studies curriculum (4 responses).

As the name indicates - reality. Children are exposed to live situations and they have a much better impact relating to people who have had the experiences.

Very engaging presentation. Students respond well to hearing it from 'someone who's been there, done that'.

It's the reality. It's honest, mature, detailed information, up to date experiences, appealing presentation technique, excellently spoken, professional art work/graphics...

One teacher indicated support for an annual Talking Realities presentation to remind students of the realities of unplanned pregnancy and parenting responsibilities. Others commented that an annual presentation was useful as students mature and become sexually active at different times. A further response suggested that young parenting was an issue that needed to remain on the school's agenda.

At this age, I believe they need constant reminding about what can happen to young women, given they are always experimenting.

Revisiting the topic annually would target students who are becoming sexually active and local confidential services revisited.

Students' needs and maturity change - may be more relevant to some students next year.

Representing reality

One teacher expressed concern that the peer educators were too positive about their experiences of parenting at a young age.

The presenters gave the impression that it was ok to have children at such a young age, a light hearted approach, a stronger emphasis is required about the difficulties, stress and loneliness of being a single young mum.
A teacher from another school made a similar observation about the apparent lack of congruence between the self-confidence and optimism of the peer educators and the perceived realities of young parenting and chose to engage students in a follow-up discussion about this.

*Not be quite so positive about everything, be sure the down sides come across as well. But it is great to see such positive self-esteem - we talked about this in class afterwards and you all get 10 out of 10 because the students reckoned there would have been down times for all of you.*

Overall, many more teachers were enthusiastic about the realism conveyed by the peer educators, than expressed concern.

*A very valuable insight for the students. I like the fact that the young mothers don’t glorify the mothering role, but put issues into perspective for the students.*

### 5.2.2 Teacher focus groups

Two focus groups were conducted. One comprised three Year 8 teachers and the second, at another school, was made up of three teachers across Years 10-12.

*What parts do you think the students found most interesting?*

The teachers were asked what parts of the presentation they thought the students found most interesting. The teachers believed that students enjoyed the topic comparing a teenager's weekend with a young parent's weekend. The students also liked the interaction of calling out what they do at the weekend.

The teachers thought that the visual display using the Velcro icons was very good. They like the idea of presenting different scenarios in this way.

They thought that the financial information was very important, such as the cost of prams etc - this brought a sense of reality into the presentation for the students who would not know how much it costs to have a baby.

*What parts do you think the students found least interesting?*

The teachers thought that some parts of the presentation, while important, could be cut down in time. Some teachers were concerned that the young parents did not express the financial and other difficulties clearly enough. For example, the comparison of how the young mothers spent their money, as compared to the students, made it sound like they still had a lot of money left over.

*Do you think the students know more about the responsibility of being a young parent?*

One group of teachers was positive, stating that the presentation was a 'reality check' for the students. The other group questioned where the babies were. Not having the
babies present made it seem that it was easy to get help with looking after them and reduced the impact of actually having a baby and seeing its demands. The students had to imagine what it would be like with a baby as they couldn’t see this first hand.

Not having the babies there made it seem like they were not tied down with them. It made it seem like it was easy to continue living once you have a baby, if you can just drop them off at their grandparents etc.

Do you think the students know more about the social, emotional and economic issues for young parents?

One group of teachers thought that their students gained an appreciation of the restricted social life and loss of friendships that often resulted from young parenthood. Other teachers emphasised the need for fathers to participate in the presentation even if they weren’t playing an active part in the child’s life. They thought that to benefit the male students, the fathers should be there to demonstrate how they needed to pay for the child for many years, even if they don’t have any contact with the baby. Another reason to have the fathers there was that otherwise it made it seem like having a baby was only ‘girl’s business’ when the students needed to realise that it is both parents’ responsibility.

Do you think the students know more about health issues and where to go for help?

The teachers noted that this topic was somewhat rushed due to time pressures. They acknowledged that the young mothers put across the idea that there was help out there if needed and suggested a resource sheet listing five or six key agencies with addresses, phone numbers and what services they offered.

What did you and the students like about the way the peer educators presented?

The teachers agreed with the students that it was good to have young people presenting and that it seemed more real because they are going through the experience. The peer educators spoke honestly and without reserve. Teachers also liked the use of the icons as large and bright learning aids.

Can you describe any long-term benefits for students?

The teacher who had seen the program over many years believed that subtle changes had occurred in the students. He reported that he knew of students who still recall the program four or five years later so he believes it has had an impact but was unable to say if it resulted in changes to behaviour. One teacher pointed out that the peer educators are role models that show what can be achieved.
What should happen to the program in the future? Should it change?

Overall they thought it was a very good program/resource and that the presenters made great use of the visual aids. The teachers stressed the need for some sort of follow-up for the teachers and students.

5.2.3 Teacher telephone interviews

Telephone interviews were conducted with fifteen teachers whose students had seen the Talking Realities program during 2003. Data about the schools' use of the program and the student classes are shown below.

School and student data for teacher respondents (n=15)

<table>
<thead>
<tr>
<th>Years using program</th>
<th>1 year</th>
<th>2-3 years</th>
<th>more than 3 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student year level</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>mixed</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>yr 10</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>yr 11</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sex</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>girls</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>boys</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>mixed</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Size of group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>less than 20</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20-30</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>more than 30</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Curriculum topic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>child studies/parenting</td>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>personal development</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>other</td>
<td>4</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Student outcomes

Understanding of issues for young parents

All the teachers interviewed stated that students had an increased understanding of the issues for young parents, following the presentation. The evidence for this was that students talked amongst themselves about the presentation afterwards (7 teachers), from the information on the feedback sheets (4 teachers) and from follow up sessions with students (5 teachers). Three teachers reported that students asked questions after the presentation.

Yes, because they kept talking about it for rest of course, the realisation of the implications of caring for a child, lot of hard work and how it would effect them.

Yes, judging by the response on feedback sheets. I also asked them what they thought and other teachers reported that it was useful and students had learnt.
The topics and issues that teachers recalled being discussed by students were: how much parents give up and can no longer do what they want, the hard work involved, the financial effects and cost of having a child, housing issues, looking after a child is not all fun and games, and the need to think about the options and choices for their lives.

*Talked about options and choices and how much the parents had to give up.*

One teacher described the realisation by the students that 'love may not last for ever', and that students were amazed and surprised at the peer educators’ experiences, including lack of support from the child's father and domestic violence situations. Another was concerned about an individual student and hoped the program would have an influence.

*The 15-16 year old students (girls) are still quite idealistic about relationships. They’re madly in love and they think that it will last forever.*

*Having looked at the student feedback sheets, I think that the Talking Realities presentation increased the level of awareness that this isn’t always the way it works out.*

*I got the program in quickly because one young person was expressing desire to have a child as ‘something of her own’. Now thinking differently.*

**Understanding of responsibilities of young parents**

Most teachers (n=11) stated that students have an increased understanding of the responsibilities of being a parent. The others believed the students had more information and knowledge but were not sure if this had been internalised and would lead to behaviour change.

*Students impressed by what mothers do for their babies and how dedicated the peer educators were to their babies.*

*Yes, they do at one level but ability to transfer to selves is another matter, not sure if they internalise.*

*You can talk about the responsibilities of being a young parent all you like, but in the heat of the moment I’m not sure that what they know comes into it!*

Specifically, some teachers reported that students now understood that looking after a baby is a full time job and the students were impressed by what mothers do for their babies, with little support from the fathers. Some teachers re-enforced this idea with the use of baby dolls.

*More aware of the needs of a baby.*

*Yes, when I talk to them afterwards they know it's not just happy smiley babies.*
Knowledge of health issues

All the teachers said that knowledge about health issues had been increased to some extent. Three teachers said that time constraints meant this was not a big part of the presentation. Seven reported that this topic was already covered by the school curriculum. However, it was still important to include this part of the presentation because it reinforces and demonstrates practical health issues.

*Less so, less input on this and most students are aware anyway as health ed is taught over the year. This provided more practical aspects eg getting up in the night to a baby.*

Four teachers described an increased knowledge about the mental and emotional health and stress of being a young parent.

*There's also a useful discussion about the importance of support networks and relationships with family as a buffer in times of stress.*

There was a similar picture with regard to sexual health. Nine teachers believed there had been an increase in knowledge and one said it was not part of the presentation. Eight teachers reported that sex education is covered in the curriculum but again it was important to keep it in the Talking Realities program because it reinforces what has gone before and has more meaning in the context of the presentation.

*Sexual health was covered really well in the presentation. This is covered as part of the curriculum in Years 8 and 9, although it's surprising how much they seem to have forgotten by Year 11, or didn't understand.*

*I know most schools teach comprehensive sex ed as we do but still important in Talking Realities because it correlated with the Talking Realities program and has more meaning.*

Two teachers recalled the presentation having a message about responsibility around sexual health and thinking about making positive choices. One teacher said it focussed more on parenting issues and one teacher pointed out that is hard to assess behaviour change.

*Yes, learnt about life style and lack of personal care affected the peer educators, think about using contraception and making positive choices.*

Knowledge of youth and health services

All but one of the teachers stated that students had learnt about youth and health services. One did not recall this as part of the presentation. Seven teachers said they had copied the resource list for students. Other comments were that more locally based resources would be useful and that mostly the girls in the class knew about local services and passed this information on to each other.
Yes, the girls didn’t have much awareness of the services that exist for young women who are pregnant and young mothers.

Probably information is there, not sure if students know how to access it. I don’t recall being left with a list of agencies.

Other outcomes for students

Other outcomes for students included: the opportunity to think seriously about emotional issues, about whether their parents would support them if they became pregnant and about the consequent day-to-day issues and changes in their lives.

Emotional issues, makes them think seriously, by looking at the different peer educators, about their lives, it raises issues they had not thought about before.

I think the program would be particularly valuable for students with additional needs or those engaging in 'at risk' behaviours ... girls who are emotionally needy and have unrealistic perceptions about parenting. The Talking Realities program is useful because it talks about the baby’s emotional needs and the responsibilities and demands on the parent.

It makes the whole experience more real and students identified what it would be like. They could predict for themselves more clearly, see the need to enjoy life and freedom now and put off parenting to later.

The presentation was thought to provide more relevant information than teachers alone could.

They have better understanding of emotional issues, how to treat others in this situation and how they would expect to be treated.

The presentation was said to result in self-reflection for young fathers in the justice system. These young men often have not bonded with their children as girlfriends do not usually bring them to visit. One boy suggested his girlfriend might join the peer education program.

One teacher noted that it was hard to measure the impact of the program.

Hard to measure prevention. I have read evidence re. resilience suggesting kids with strong relationships with adults don’t get into trouble.

Peer educators skills and confidence

Nearly all teachers (n=12) reported that the peer educators were confident and skilled in their presentations. Specific positive comments were that they shared their experiences and personal stories (6), they were open and honest about their lives and choices (3), they related well to the students (2), demonstrated that were not
ashamed of the past but had now moved on (2), interacted with and responded well to students questions (3) and made good use of the visual display (2).

Sometimes one of the presenters will be obviously nervous and timid (although the group network is very supportive). The next time you see them present, the increased confidence is amazing...and they're great at responding to personal questions and talking about post-natal depression and the difficulties they've faced.

Excellent knowledge because they are living it. Confidence excellent, I admire them for baring their souls to strangers, talking about some very private things but they don't seem ashamed, they are moving on, rather than 'poor me' attitude.

Range of confidence levels, for some it is first time. Overall very well handled, less experienced did less and others took major role, stepping in if required. Worked very well as a team. They talked without embarrassment or shame, had taken responsibility and were willing to share experiences.

Five teachers commented positively on the fact that there were four peer educators at the presentation. The benefits of this were said to be that they help and complement each other, demonstrate team work and bring diversity.

Of the four peer educators, some are more experienced, they led the questions if students were reticent.

Having four presenters brings diversity in looks and style, allows all students to find someone they can relate to.

Two teachers thought that the interaction with students could be enhanced by increasing skills in this area and two suggested some of the peer educators may be losing some freshness in delivery as they get older and more experienced.

Question and answer skills could be better, students were slow to respond and needed other ways to get responses eg small group.

Last session not quite so good, peer educators were a bit blasé, although the leader was good and kids enjoyed it. Perhaps some of the peer educators have been doing it too often and too long.

Place of program in school

All teachers agreed that Talking Realities fulfils a need in school and youth services. It reinforces and extends other curriculum topics in a realistic way that teachers are not able to do. All but one teacher had used the presentation in some way, either building on previous work or setting up issues for discussing later. For the remaining teacher, timing was an issue and this should change in future. Teachers reported they used Talking Realities as background for general discussion and questions (6), sexual
health and contraception (4), pregnancy and parenting (4). Two classes completed assignments on the presentation, including one that used this to produce a shared resource.

Fitted into course [Child Development] nicely. shown in week 2/3 so builds on previous work and sets up questions for later in the course.

I use the Talking Realities presentation as part of a 4-week block that focuses on social and personal issues associated with pregnancy, childbirth and parenting.

Two teachers noted that the young fathers’ perspective was not included and this was a drawback for male students.

It should be more focussed on role of boys, the male perspective is not covered. Some boys said it was not relevant to them.

It worries me that some boys think ‘why are they telling me this?’ It’s about a level of maturity, the end of yr 10 may be better timing.

All those teachers using the program as part of the child studies or health and personal development curriculum reported that it fitted in well. Two said they would like to extend the presentation to a whole year level.

Benefits and drawbacks of using peer educators

The main benefits of using peer educators were that the peer educators can talk about their personal experiences (10), that students listen more to young people closer to own their age (8), and the novelty of a new face (3).

The benefit is personal experience, relevant and students tend to listen more.

Students are more likely to listen to other young people who have a story to tell about parenting. They don’t readily connect with the experience of a 50 year old teacher.

Closer to girls’ age, only few years older so relate. Students can see it really does happen and could apply to them. It’s great that the peer educators are prepared to share their experiences.

Seven teachers were unable to think of any drawbacks to using peer educators. Three discussed the potential for mixed or inappropriate messages, for example, around drugs and abortion. None of these teachers believed this was a major problem however.
The peer educators are young people who are dealing with the situation they are in. However, they’re not ‘positive role models’ in the usual sense of the term.

The Religious Education teacher noted that the program needs to take account of school ethos, eg abortion presented as an option may conflict with school ethos and what parents expect.

One teacher suggested that peer educators, by their nature, may lack maturity and communication skills.

Drawback to some extent is lack of maturity and could be more articulate.

Another noted that some students had difficulty identifying with the peer educators and acknowledging that they could find themselves in a similar situation.

Some kids didn’t see that they had anything in common with the peer educators.

Appropriateness for culturally diverse students

Mostly teachers believed that the presentation was appropriate for different cultural groups, although it was acknowledged that it would be good to have indigenous and other ethnic groups represented as peer educators.

Could be more so, with range of mothers from indigenous and other cultures, eg Vietnamese. This would suggest to students that there are support groups for other cultures.

Some responses to questions demonstrate different cultural views, eg how the girl would be treated by the boy’s family, some cultures would accept her, others would not.

One teacher believed the program was addressing a sexual rather than cultural issue and also pointed out the students of Asian background rarely chose child studies as a school subject option.

Muslim or Asian peer educator could be a plus but these students don’t tend to do child studies. This is another reason for having the whole year level see the program.

Suggestions for improvements

Teachers were very positive about the program.

Thought it was excellent, displays fantastic, visual communication, kids could see the impact of parenting.
Very well presented, can see they have used previous feedback, good balance between interaction and information provision.

There were some suggestion for change.

Could have more group work and time for questions, was a bit rushed.

Have some male peer educators, students asked about fathers and what happened to them.

Young fathers would be good, particularly for boys.

Only have one session per day so peer educators are fresh.

There should not be any distractions eg taking things off the board when someone is talking.

Other comments

All teachers stated that they intend to have presentations again and most were very enthusiastic about the program. It was described as well-organised, worthwhile, informative and a fantastic learning experience for students.

Yes would have again, very well received by students and staff, excellent program.

Worthwhile program, should be funded, would use for all of school but there are time constraints.

I would hate to lose the program, its one of the better programs available because its so authentic. I've used videos before, but they don't have the same impact. The presentation generates so much useful discussion.

5.3 Stakeholders

Respondents reported a large increase in peer educators’ confidence as a result of the program.

Most respondents had not experienced the young parents interacting with their children so it was hard for them to assess parenting skills. However, they were able to comment on the knowledge demonstrated in the presentations and in discussion with the peer educators. They believed that the program helped the peer educators to become more aware of the ongoing responsibilities of parenting and how to interact with their children.

Respondents believed that increased communication skills were demonstrated in public speaking, group participation, peer facilitation and leadership. The young women are able to communicate effectively with students, teachers, health and other professionals and the media. Another example was the way that the peer educators
worked together during the presentations, helping the less experienced to extend their communication skills.

Increases in sexual health knowledge were acknowledged but generally respondents believed this was extending and consolidating what the peer educators already knew.

Respondents agreed that the peer educator training resulted in increased knowledge about community services available. Peer educators were able to pass this information on or refer young people if appropriate.

Respondents were very positive about the quality of the training and the accreditation process. They commented that many of the peer educators had gone on to further education or employment.

Most respondents discussed the opportunities to broaden the program to other population groups (for example, young men, Aboriginal communities, care providers) or geographic areas (for example, the wider metropolitan area, regional South Australia, state-wide, interstate).

Areas for improvement were suggested including more promotion and marketing to service providers to assist with recruitment and referral, more autonomy for peer educators, more support for peer educators during training, getting young fathers involved and building stronger links. The fathers’ perspective was believed to be important but mostly missing.

The main barrier identified was around funding issues, particularly the lack of ongoing funding. This makes planning and development difficult and leads to a constant deflection of resources towards writing funding applications and building support for the program. It also risks a re-focus of the program on to the needs of funders rather than local communities.

The major strengths of the program were identified as the increased confidence, personal development and empowerment of the young parents, benefits to students who saw the presentations and the use of a peer teaching model. Student recipients benefited by being exposed to accurate and well presented information about the realities of parenting and about sexual health issues.

Most respondents discussed the huge impact on the peer educators in terms of their increased confidence and personal development. Many of the peer educators had moved from being vulnerable and ‘at risk’ to confident and assertive young women who were able to take control of their lives and contribute to society. The positive impact on the peer educators was believed to flow on their children.

5.3.1 Telephone interviews

Eleven people were interviewed by telephone. These stakeholders represented the funding bodies, training providers, agencies referring young parents or linked to the program in some other way, and coordinators of the Riverland outreach program.
Questions asked about outcomes for peer educators, opportunities and barriers in program implementation and stakeholders’ views on the value of the program.

Reference group

Four of the stakeholders interviewed were members of the program’s reference group. Only one respondent appeared to have been a long term member. There were not many formal meetings as people found it hard to find time to attend. However, the group was reported to function well in terms of keeping people updated, maintaining links and developing the program.

Outcomes for peer educators

Two respondents were unable to comment on outcomes for peer educators as their role did not involve direct contact. These findings are based on the remaining nine respondents.

Confidence

All respondents reported a large increase in peer educators’ confidence as a result of the program. This was demonstrated by more assertive management of their lives and personal relationships, the ability to take on responsibilities and to engage in civic life. For many respondents, this increase in confidence was all the more exciting because of the progress made from often difficult beginnings:

Become more independent and self-determining, great to see their progress, for some it’s the first time they have been valued.

I’ve seen them move forward in leaps and bounds...and to hear where they’ve come from and then to see their confidence, skills and determination.

Shows in personal life, better able to manage personal relationships and recognise they are an important person in own right.

Knowledge and skills in parenting

One respondent commented on the enormous progress many of the peer educators had made in their parenting.

Many got pregnant through ignorance or pressure from a boyfriend to have sex, ostracised at school and often family, have risen above this and developed parenting and financial management skills.

Most respondents had not experienced the young parents interacting with their children so it was hard for them to assess parenting skills. However, they were able to comment on the knowledge demonstrated in the presentations and in discussion with the peer educators.
Talking Realities Evaluation Report

Impressive, within the presentation. They make it clear that they love their children but it has made a huge difference to their lives.

Lots, I've heard the peer educators talk about developmental issues around parenting...for example, how to deal with kids in ways that are conducive to their mental health.

The program helped the peer educators to become more aware of the ongoing responsibilities of parenting and how to interact with their children.

Yes and awareness of the ongoing nature of responsibility, thought for future.

One peer educator attended a behavioural program with CAMHS, she recognised the need to change her [parenting] behaviour.

Some respondents noted that the responsibilities of being a peer educator and the positive impact this has on the young women also had an impact on their parenting.

The acknowledgement of being a young mother, they feel proud and positive which impacts on their parenting skills.

For some, the program puts them in the public eye as peer educators, demonstrating parenting, it's linked to peer educator responsibilities.

Communication skills

Respondents believed that increased communication skills were demonstrated in public speaking, group participation, peer facilitation and leadership. The young women are able to communicate effectively with students, teachers, health and other professionals and the media.

Very high communication skills, really struck me, in my work in youth projects I have not often seen to this level, even with very intensive training.

Assertive, PR skills, able to talk with government ministers, police officers, senior bureaucrats at own level.

Another example was the way that the peer educators worked together during the presentations, helping the less experienced to extend their communication skills.

Yes, protective and encouraging of new peer educators, they are given a little section to do and others add in if necessary, teaching as they are presenting.

They use a team approach in presentations, coordinate. New peer educators supported by others.
A respondent commented on how one group of peer educators in training had progressed in conflict resolution and in encouraging different points of view within the group to be heard and accepted.

**Leadership skills**

Respondents stated that some peer educators are 'natural leaders' and the program has built on their innate skills. For others the program has provided opportunities to develop and practice leadership skills as they have moved through the program.

*Definitely, the young women initiate things. For example, they want to become senior peer educators in the Friday Fun Group.*

*Those who have been in program longer show leadership in a group setting, eg taking the lead in developing resources.*

One respondent described how the peer educators demonstrate skills in sharing leadership by the way that they refer questions and defer to other peer educators during the presentations.

**Knowledge of sexual health**

Increases in sexual health knowledge were acknowledged but generally respondents believed this was extending and consolidating what the peer educators already knew.

*Absolutely, I've seen Certificate 4 students - most of whom are adults - asking the peer educators questions about sexual health that the young women have answered really well.*

*For a couple it's more about facilitation skills and applying knowledge to their own lives.*

Knowledge of sexual health issues was gained and extended through the training program and through presenting information to young people and others. One respondent commented that the peer educators had talked about what they didn't know and how they might have acted differently if they had this knowledge. Now they wanted to share the information with other young people to help them make better choices.

**Knowledge and use of community resources**

Respondents agreed that the peer educator training resulted in increased knowledge about community services available. Peer educators were able to pass this information on or refer young people if appropriate. It was also suggested that peer educators are more aware of their rights to services and that it is all right to seek help.

*Increased knowledge, peer educators used services during training and refer others.*
Pretty good, they know about parenting services and are assertive in getting help and recognise that its OK to ask for help.

One person was not sure if there were enough links between the program and other services.

Definitely increased knowledge, access is another story. The project gives information but it needs more links with other youth services. Need links between peer educators and services and between Talking Realities and services.

Access to education opportunities

Respondents were very positive about the accreditation of the training program and that so many of the peer educators had gone on to further education or employment.

The young parents were able to take up the opportunity to return to study because of their increased confidence and belief in their abilities.

It’s good that the peer educator training leads to a qualification.

It’s fantastic that 6 out of 10 of the 2002 group have continued their education through further TAFE studies and even Uni. Obviously the program has worked closely with DMIT to create pathways to further education. Completion of Certificate 4 is accredited towards Social Science/Social Work at the University of SA - it attracts status for a whole semester of the degree.

Some have gone on to further education, they have gained confidence that they can do it.

One respondent suggested that the training should be expanded to include some skill development in writing and basic computing.

Quality of training

The interactive and flexible style of training was praised. It was noted that the training allows time for the group to build rapport and draws on the experiences of the young parents.

Very good, peer educators interact well and teach as they deliver.

It’s good that the peer educators are involved from the beginning eg in design and improvement. Time is taken to build group cohesion before starting on formal training. Hands on practice, they can talk about own experiences and how it fits with the program.
The training manual was rated highly by respondents who had used it to deliver training. It was thought to be comprehensive but flexible enough to adapt to different circumstances.

*Manual is fantastic, shows commitment and knowledge.*

*High, we used the manual, needed to adapt it for the rural situation but this was easy to do.*

One respondent commented that the training quality:

*Must be significant to get to that point where peer educators can go into schools to present.*

**The program**

**Strengths**

The major strengths of the program identified were the increased confidence, personal development and empowerment of the young parents, benefits to students who saw the presentations and the use of a peer teaching model.

Most respondents discussed the huge impact on the peer educators in terms of their increased confidence and personal development. Many of the peer educators had moved from being vulnerable and ‘at risk’ to confident and assertive young women who were able to take control of their lives and contribute to society.

*For peer educators, the opportunity to move away from being put down by society. Now support other young mums, take on responsibility and refer if needed.*

*The young women [peer educators]...the program is outstanding in terms of their personal development.*

*Peer educators can see value of what they contribute after being put down as a young parent.*

The positive impact on the peer educators was believed to flow on their children.

*Self-confidence, they have choices in their lives and this has a positive impact on their children. Children have a greater chance of better health outcomes.*

*Outcomes are not immediate, children benefit in future years by breaking the cycle of negative experience with education.*

Peer educators' increased confidence in themselves encouraged many to explore employment or study opportunities. The accreditation of the training through TAFE
was a strength of the program as was the educational and employment pathways offered.

Pathways to education and employment. Training accredited, peer educators are paid, helps make them work ready, opens up opportunities for paid work. They are seen as experts which increases confidence.

Preparing young women with the confidence to interact in a learning environment. We see young mums at an early stage when they are very timid about any authority and school and it’s great to get them to move on from there.

Student recipients benefited by being exposed to accurate and well presented information about the realities of parenting and about sexual health issues.

Works well in school setting, reaches a large number of students.

Present factual information re reality of parenthood, not all cuddly babies and a way to get out of school and get more money.

One respondent acknowledged that it is hard to measure the impact on the students when they become parents perhaps ten years later.

The information giving is enhanced by the peer education model and sharing of real experience.

Peer educator model, about young parents talking about their own experiences with other young people.

Teens talking to teens, use the same language and trained for this role.

Weaknesses

The main weakness identified was around funding issues, particularly the lack of ongoing funding. This makes planning and development difficult and leads to a constant deflection of resources towards writing funding applications and building support for the program. It also risks a re-focus of the program on to the needs of funders rather than local communities.

The short-term funding. It’s a shame that program development and delivery are constantly interrupted by the need to apply for funding…and the need to take the program in new directions to meet funding requirements.

When funded as a project it is difficult to plan because it becomes a survival question, this drives the project more than it should. Development of the existing program falls because the emphasis is on new and innovative work…It’s a project approach rather than community development approach.
There’s a huge demand on peer educators to provide a service to schools which is driven by the need for funder stats.

A second area of weakness identified was the lack of involvement of young fathers in the program. The fathers’ perspective was believed to be important but mostly missing.

The focus on women, it would be helpful to have fathers’ input. It’s about ‘young parenting’ so should include fathers’ perspective some how.

Some other issues identified by individual respondents included:

- high cost to schools, particularly in country regions
- presentations could be too prescriptive, but recognising the need for this with a large group
- some of the peer educators have been in the program too long
- one-off nature of the presentations
- need for more networking with the three programs now running in South Australia
- retention and the need for more support for trainees in the learning environment and all aspects of their lives

Opportunities for development

Most respondents discussed the opportunities to broaden the program to other population groups (for example, young men, Aboriginal communities, care providers) or geographic areas (for example, the wider metropolitan area, regional South Australia, state-wide, interstate).

Involve young men, challenge traditional roles in parenting, encourage boy students to think about role as parents.

Go into Aboriginal communities, deliver to care workers eg maternity nurses.

Opportunity to train people from wider areas eg Salisbury, or set up an outreach.

Branching out to rural areas, responding to rural and interstate interest.

Respondents noted that development required secure funding. Some suggestions were to seek funds from the Department of Education, business sponsorships or community-based groups such as Rotary.

Needs a credible funding base, so the pressure’s not on for where the next funding is coming from.

Need secure funding, education department could contribute.
Sponsorship eg business, Rotary, but need to market and need resources to do this.

Building links with educational and other agencies or setting up more outreach programs was suggested.

Strengthen ties with TAFE.

Build into school curriculum as a module.

Link into school retention program for pregnant girls.

Sustainable development eg Riverland outreach, but need more at local level to ensure agency support to women.

One respondent believed Talking Realities should be developed to give the peer educators more autonomy in running the program

Give peer educators more autonomy, girls are doing administration, booking schools etc. It works because they believe in it so much ... we help and support but basically they do it themselves.

Barriers to development and how to overcome

Almost all respondents nominated a lack of ongoing funding as a barrier to development. The uncertainty of funding meant that a large proportion of effort had to be put into writing grants, promoting the project and trying to obtain resources.

Lot of work and expertise to get funding. Project funding is difficult eg raises expectations and then folds.

Demands of funding, economic and political environment. Long term outcomes being asked in a short time frame.

Continuity of funding. The program needs to be recognised as an investment in young women and their children.

Need secure funding, how can it be developed if not funded? It changes to meet the needs of funders rather than project participants.

Another barrier was the difficulty of recruiting young men and making the program relevant for fathers.

Men tend not to go to parenthood classes, need a specific male class. To recruit men needs a male worker in the program structure.

Language around parenting - focussed on mother/child role eg 'dads can do this too' as an afterthought.
How should the program be improved?

Some areas for improvement were suggested including more promotion and marketing, more autonomy for peer educators, more support for peer educators, getting young fathers involved and building stronger links.

Some respondents thought the program should be promoted more to service providers, to educate them and also to increase referrals to the training.

More promotion, it’s undersold, promote to community workers and agencies.

More marketing, recruitment relies on referral, present to service providers.

Increasing autonomy for peer educators would include ways to get them more involved in decision making processes and giving them more ‘ownership’ of the program.

More formal structures for getting feedback from peer educators and their decision making in the project.

More in the manual about giving ownership of the program to peer educators.

There is some competitiveness among peer educators for school work, it needs more input formally from them.

Respondents also believed there could be more support for peer educators by providing additional training opportunities and skills updates and a ‘mentor’ who was outside of the program.

If more money was available, offer updates to peer educators - like professional development.

They need an independent person they can approach to raise issues.

As mentioned before, another way to improve the program was to involve young fathers and increase the presentation’s relevance for boys.

Encourage young men to be involved, have more on the consequences for boys, eg feelings about not having much relationship with their child and having to provide financial support.

Some respondents wanted more emphasis on the parenting aspect of the program both in the training and in the presentations.

Include parenting aspect more in program literature eg training manual.

Increase the parenting aspect, not just looking at the lot of the peer educators, it’s more about getting students to think about parenting for themselves.
How can sustainability be enhanced?

One way to enhance sustainability was stated to be by increasing links and networks with other organisations. This increases the support base and allows sharing of resources.

*Getting other organisations interested, building networks.*

*Partnerships with others working in similar areas. Extend training to different places.*

*Short term funding prevents growth, could be linked to another program or agency eg SHINE, DECS. Needs certainty of funding. Lobbying, anecdotally lots of people are saying good things.*

More resources and more security of funding were mentioned by most respondents. It was pointed out that schools would have to pay a lot more for the program if there was inadequate funding support.

*Schools have to pay more if they want to make it sustainable without funding. Sustainability is about funding, promotion to the Minister and Premier for ongoing funding through Cabinet.*

Mainstreaming the program into the school curriculum was suggested.

*It complements sex, health and relationship education. Refer pregnant girls to program.*

*Needs to be part of mainstream curriculum in school.*

*Dovetail into sex education in schools i.e. get education and health support.*

**Other comments**

Finally, respondents were asked if they had any other comments about the Talking Realities program. All the comments were positive with most people taking the opportunity to express their belief in the quality and value of the program.

*Excellent program and needs to be ongoing.*

*They have achieved over and beyond, very pleased with what they have done.*

*Upbeat, youth-friendly and a fabulous resource for me.*

The benefits for the peer educators and their children were highlighted.

*I have been involved in youth programs for over 20 years eg blue light and training programs, this one is outstanding in terms of outcomes for individuals.*
Great program, young women who don’t feel good about their lives finding themselves valued.

Extremely successful initiative with wonderful results for peer educators and their kids.

It’s good for kids too, if mum is happy.

5.4 Peer educators

In the focus groups, the peer educators stated that they came to the program through informal referral from youth or community-based services or their birthing hospital. The main reasons for becoming involved were to access educational opportunities, to help other young people to understand what it is really like to be a young parent, to meet other young parents and stop ‘going crazy at home all day’.

Peer educators valued the credit received from the training for future TAFE courses.

The intensive help and support from the program staff was believed to be a key factor in educational achievements. All but one of the surveyed peer educators stated they are engaged in or have completed TAFE certificate courses such as Community Services, Small Business Management, Hospitality.

Peer educators reported that they now know where to go for services they need and can also pass on information to help others.

The program staff can refer young parents to courses or services to help them with parenting. The peer educators are also able to support each other in parenting.

The peer educators identified that presenting at schools restored their self confidence and built self-esteem. Survey respondents were asked to rate their change in a number of areas as a result of participation in Talking Realities. The peer educators rated the changes in their knowledge of community resources, confidence and communication skills as most significant. For most there was a large increase in knowledge of community resources. Others were aware of these but valued the opportunity to pass this knowledge on to others. Peer educators described how increased communication skills helped them to be assertive and effective in relationships. Most peer educators said they could now talk to a large group with confidence. A couple of respondents reported their increased confidence has led to participation in education and better access to services.

Next highly rated were parenting skills and knowledge. Peer educators gave examples of their increased knowledge and new skills in this area.

Most survey respondents stated that the program had helped them to gain confidence, become stronger, and to have more control over the direction of their lives.
Peer educators saw benefits flowing on to their children. They recognised that their own development and happiness had an important bearing on the development of their children.

Survey respondents also identified benefits for their children, mainly in terms of opportunities to interact with other children and develop social skills.

A couple of respondents believed that the positive outcomes for them also had an impact on their children.

In the focus groups, two main topics were discussed under the potential for program change. The peer educators believed that a topic on domestic violence was needed. Their own learning about controlling behaviours and other forms of non-physical violence had clearly made an impact and they thought it important to pass this on to the students. The peer educators recognised the risk of children growing up to believe violence was normal and acceptable.

The peer educators stated that although some young fathers were still with their partners and babies, they were not interested in becoming involved in the program. They did agree that the presentations would be better for male students if young fathers participated.

For the surveyed peer educators, the main program strengths were the delivery of factual information to young people and the knowledge and support the peer educators obtained from the program and from each other. In terms of improvements, peer educators wanted more funding, more communication and activities, more input into review of how the program is running, expansion to include young parents throughout Adelaide as peer educators and involvement of young fathers. Secure funding was nominated by nine respondents as important for the future development of the program.

Overall, respondents were very enthusiastic about the program in terms of its value to themselves and the students they present to.

5.4.1 Focus groups

Two focus groups with peer educators were conducted. One group was held in March 2002 with a group of four peer educators who had commenced their training in July 2001 and had just started to present in schools. A second group was run in March 2003 with a group of eight peer educators. About half had been with the program for over a year while the remainder had just completed their training and started to present in schools.

How did you get involved and what did you hope to get out of the program?

The peer educators came to the program through informal referral from youth or community-based services or their birthing hospital. The Friday Fun Club is a new
young parents group that will assist in appropriate recruitment and feed potential peer educators into the training.

The main reasons for becoming involved were to access educational opportunities, to help other young people to understand what it is really like to be a young parent, to meet other young parents and stop ‘going crazy at home all day’.

I thought it would be good to go around to other schools and educate other kids. I have wanted to get into social work for some time now, so when I found out I could get into it through doing this, I thought it was pretty exciting.

The training program

Training presenters who used an interactive style were preferred over those that used a lecture style. It was thought to be a good idea to use the ‘senior’ peer educators to do some training since they were the people who really knew what it was like in the school sessions. It was sometimes hard for these ‘senior’ peer educators to step outside the role of friend to that of trainer.

The training program has become more formalised now that it articulates with TAFE Certification. This means that peer educators can gain formal qualifications that recognise the training and presenting they do as part of the Talking Realities program. For some peer educators this presents a challenge as they need to undertake ‘bookwork’ that does not have the same appeal as interactive workshop type sessions.

School presentations and benefits for students

The students were believed to benefit from first hand information and this leads to increased knowledge about what it means to have a child. The close age of the presenters and the students brought home to students the idea that ‘this could happen to me’.

Students were reported to be most interested in learning about contraceptive methods, about how little time young parents have to themselves, and in hearing about the personal experiences of the young parents. Students liked being able to ask questions and were usually attentive. This was thought to be because the presenters were a similar age to the students and were able to pass on first-hand information.

From the last school, some of the girls, ‘We are going to take more precautions so we don’t end up pregnant’. They didn’t say that in so many words, but I knew that’s what they were thinking and yeah, just the way they ask questions and everything. They really did want to know how they can prevent themselves from a situation they don’t want to be in at this stage in their lives.
Benefits for peer educators

The peer educators identified that presenting at the school sessions restored their self confidence and built self-esteem.

I got my confidence back. I used to do speaking at school and I finished school and stopped doing that, I lost my confidence to get out there and do it again, so I got that back. That was really helpful.

They also valued the credit received from the training for future TAFE courses.

Yes, I wouldn’t be doing it if I didn’t do this program, the main reason I am doing it is because I have already got part of it from the course, so I might as well do the other half and see where it leads me ...I would like to do community services. Yeah it’s good to do. I definitely wouldn’t be doing it if I didn’t do this group.

I have always wanted to be a psychologist ... because of my life experience and working my way though my own problems I felt that I wanted to be able to help other people through their problems. And once I started this group I realised I wanted to get my certificate 3 in community service and even go for certificate 4 as well, so that’s what made me go to TAFE. I should have my certificate 4 by the end of this year and hopefully off to uni next year.

The intensive help and support from the program staff was believed to be a key factor in educational achievements.

I started doing my certificate and I just could not be bothered and then when I come here now I have got it and I am going over to the TAFE. I probably would never have done that but I kept coming back here because I enjoyed it.

I quit half way through year 12 when I found out I was pregnant. I tried to go back and finish it off but it did not happen. I tried to do it through Open Access and it just did not happen and then I started coming here and I am half way through my certificate in Youth Work and through doing my certificate 4 at TAFE and through this program I did my student placement here at the Parks and shortly after finishing my student placement I got employment here. It has all stemmed from this program.

Peer educators reported that they now know where to go for services they need and can also pass on information to help others.

Yeah, I mean I knew of only a handful of places, I could count them on one hand, and I didn’t even really know what they did, now I know quite a lot more.
And I can tell people, I have helped actually a lot of people I know ... to services, not from me having to use them myself but it has been really good to tell other people and not just in the schools.

Peer educators reported that they are often linked into community-based parenting programs. The program staff can refer young parents to courses or services to help them with parenting. The peer educators are also able to support each other in parenting.

They [the young parents] have helped each other as well, like some people have got older kids, like my son is only 13 months, but then a lot of the girls have four year olds.

Peer educators saw benefits flowing on to their children.

I just want to get somewhere so he has a good education and a good life, that he will have what he wants and needs. All these people who say that there are mums doing nothing, it is also showing them that we are doing something with our lives.

A lot of the benefits for the children were linked to them spending time in child care.

They get to interact with other kids and socialise, develop social skills and stuff.

For some, leaving their baby in child care at first was traumatic but they recognised that both themselves and the child benefited. The peer educators recognised that their own development and happiness had an important bearing on the development of their children.

And it has helped me to learn, when I go to pick my son up from childcare so then it makes you feel better and you want to keep coming because you know that they are OK.

The way that we have all developed over being involved in the program, we all learn a lot and that will rub off on our kids as well. I personally would say it is really good for my kids simply because if I was not involved with this program that I would more than likely be sitting at home doing exactly the same things that I was doing just after I had my second son and so they would be going nowhere. We would do nothing, I would still be really depressed like I was, I mean I am getting over the depression and making things in my life happen which I had never even thought would ever happen and so because of that my kids are benefiting from that.

Stress will rub off on your kids and the happiness rubs off on your kids as well.
Suggested changes to the program

Two main topics were discussed under the potential for program change. Both related to changes to the school presentations: introducing a topic on violence and including young fathers.

The peer educators believed that a topic on domestic violence was needed. Their own learning about controlling behaviours and other forms of non-physical violence had clearly made an impact and they thought it important to pass this on to the students. The peer educators recognised the risk of children growing up to believe violence was normal and acceptable. At the same time they recognised that the presentation was already too long but there was strong support for at least a brief mention of domestic violence in the 'relationships' topic.

I think maybe if we even just do a short session, and just say basically 'we can't stay with people if they are beating us, keeping us from doing what we want to do, and those things'. And then say reasons why like 'because if our children see us, they are going to grow up and our daughters will think it is going to be OK to be treated like this, and our sons are going to grow up thinking it is OK to do this'.

The peer educators stated that although some young fathers were still with their partners and babies, they were not interested in becoming involved in the program. They did agree that the presentations would be better for male students if young fathers participated.

The group discussed the potential for young fathers to be involved in the program. It was acknowledged that it was difficult to find young fathers willing to take on the role of peer educator. Even if young fathers could be found who were willing to do the training, it was thought that this should occur separately.

5.4.2 Survey

A self-completion survey with a pre-paid addressed envelope to the evaluation consultants was handed out to 16 peer educators by the project staff in early December 2003. Thirteen responses were received.

Benefits for peer educators

The peer educators were asked to indicate the amount of change for them in a number of areas as a result of their involvement in the Talking Realities program. Scores are summarised in the table below and examples of comments are given. Where a low change score was given, this was usually qualified by a statement that this was because the knowledge or skill was already high.
<table>
<thead>
<tr>
<th>Increase in:</th>
<th>Lots</th>
<th>Some</th>
<th>Little</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confidence</td>
<td>10</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parenting knowledge</td>
<td>7</td>
<td>4</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Parenting skills</td>
<td>7</td>
<td>5</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Communication skills</td>
<td>8</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leadership Skills</td>
<td>6</td>
<td>4</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Knowledge of community resources</td>
<td>11</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Use of community resources</td>
<td>5</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual health knowledge</td>
<td>6</td>
<td>6</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

Confidence

Most peer educators said they could now talk to a large group with confidence.

\begin{itemize}
  \item \textit{Lots} - before Talking Realities it would never have even crossed my mind to get up in front of an audience and talk about my life! I would not have done it!
  \item \textit{Some} - still getting confidence to stand in front of a lot of people and talk.
\end{itemize}

A couple of respondents linked their increased confidence to participation in education and access to services.

\begin{itemize}
  \item \textit{Lots} - I have enrolled into TAFE; I feel more confident around people; it also has given me confidence to ring services.
\end{itemize}

Parenting knowledge and skills

Peer educators gave examples of their increased knowledge and new skills in parenting. One noted that program staff were also able to refer if necessary.

\begin{itemize}
  \item \textit{Lots} - how a child's brain develops in the early years.
  \item \textit{Lots} - When I was working with Talking Realities my daughter was at the age where I needed to learn how to manage her behaviour.
  \item \textit{Some} - I pretty much know about behaviour and how to manage it. This was a review for me.
  \item The program provides helpful advice about parenting, not just for parents-to-be or students, but also to us that are parents already, and if they can't help, they help get you to see someone that can help.
\end{itemize}

Communication skills

Peer educators described how increased communication skills helped them to be assertive and effective in relationships. One noted the importance of communication with her baby.
Lots - I don't get angry when I don't agree with what other people are saying. I have learnt to accept other people's opinions.

I have come a long way with communication since I started, I now know constructive ways of communication which I didn't know before.

I can now get my point across more effectively; also with the added confidence this is so much easier.

Leadership Skills
The extent of increased leadership skills seemed to be linked to peer educators' perceptions of their natural ability in this area. Leadership skills learned included appropriate ways to lead and participate in a group.

How to take charge and represent others as a group.

Lots - I have never been in the position of being a leader, so it was a real confidence boost.

I have always been a bit of a leader but the program taught me a better way to be a leader without everyone getting annoyed with me for being too bossy.

Little - I am more a follower than a leader.

Knowledge and use of community resources
For most there was a large increase in knowledge of community resources. Others were aware of these but valued the opportunity to pass this knowledge on to others.

I had no idea of any resources or services until the training, now I know so much I have even helped others connect with services.

I knew a lot of resources before I joined, but for someone who doesn't have any knowledge the program is great for that because you are always reminded of community resources that are out there.

Use of community resources scored lower than other benefits but for some peer educators had proved very valuable.

Where to go to get help with domestic violence and housing issues.

I have been faced with the hardest time of my life. The workers at Talking Realities found me more support.

Sexual health knowledge
About half the peer educators believed they had learnt a lot. Even if sexual health knowledge was believed to be high to start with, peer educators recognised the benefits of increased knowledge in this area.
Lots - about heaps of different contraception and STDs.

I knew most of the sexual health already, it just refreshed my knowledge.

I can now feel confident in relaying information knowing the facts - not what I think is correct.

Educational outcomes for peer educators

All but one of the peer educators stated they are engaged in or have completed TAFE certificate courses such as Community Services, Small Business Management, Hospitality. One is enrolled at university for 2004.

Agency

Peer educators were asked if the Talking Realities program had helped them to feel more in control of their life. Most respondents stated that the program had helped them to gain confidence, become stronger, and to have more control over the direction of their lives.

Yes, Talking Realities has made me more confident and makes me feel like I have the power to do anything.

Not really but it was good fun.

Yes, HEAPS! I was still overcoming a bad relationship when I joined and it has helped me stay strong and stand on my own two feet.

Not so much control of my life but control of the direction and how to achieve it.

Yes, because before I was doing nothing with my life now I am going to TAFE and feel like I have somewhere to aim for.

Benefits for peer educators' children

Peer educators identified benefits for their children. Mainly the benefit was in terms of opportunities to interact with other children and develop social skills.

My son has gained interaction skills with the other children at the crèche, also some independence away from myself.

A couple of respondents believed that the positive outcomes for them also had an impact on their children. For example, one respondent noted the importance of interacting and playing with her child.

What I have learned being with Talking Realities I can reflect back onto my daughter.
I am a better person within myself now which helps me be a better parent and get along well with my children.

I have learnt that babies need a lot of attention i.e. playing - so now I play with him a lot more.

Training and support from the program
Respondents identified a variety of aspects of the training that was most useful: communication skills, gaining confidence, sexual health information, meeting new people, children's needs and conflict resolution. Only one of the peer educators identified anything that was not useful: this was a session that addressed pregnancy options.

Learning to speak to large groups of people and the sexual health part is really informative.

Getting to know that everyone is different and no-one looks at things the same as the next person. This has helped me in a lot of ways.

I understand we need to know that information but I disagree.

All but one respondent believed they got good support during the training.

Yes - whenever I had a question or needed help they were always there.

Yes, all the facilitators are really caring, helpful and listen to you honestly, not just pretend to listen.

Yes and no, as I am a very slow learner and I find it very hard to ask for help.

Similarly, once the peer educators started presenting in schools they felt adequately supported. One noted that support fell when new parents joined the program.

Absolutely, if it wasn't for the trainers and facilitator I wouldn't be doing it still and the support of the other peer educators was fantastic.

Slightly less - as new girls joined it dropped dramatically.

Strengths and weaknesses of the program
Two main strengths were identified: the delivery of factual information to young people and the knowledge and support the peer educators obtained from the program and from each other.

I think our actual knowledge of what we are talking about, we've experienced what we are saying, therefore aren't guessing what we think the kids want or need to hear.
It is the truth and an insight of how it is. Talks about sex, health, feelings and housing, not just baby.

The major strength for me is it has helped me find new friends ... Whenever I have had a problem they have helped me get through it and helped me to work out why it happened and how to prevent it from happening again.

Four respondents could not identify any weaknesses. Other responses were varied. One re-iterated her belief that established peer educators got less support when new recruits started and one stated that some peer educators lacked enthusiasm. Another thought that peer educators should not present at schools if they were obviously pregnant. Uncertainty of funding and the need for the young father’s perspective was mentioned by another. One peer educator touched on the tension between presenting the positive and negative aspects of young parenting.

I think that sometimes we make things sound too good about being a parent. But the way I see it there are good things and bad things but we need to represent these things equally and not accentuate the good things too much, without making it sound horrible.

The future

In terms of improvements, peer educators wanted more funding, more communication and input into review of how the program is running, expansion to include young parents throughout Adelaide as peer educators and involvement of young fathers.

I think communication in general. I think at the end of every month we all need to sit down and go over the schools we’ve done and their comments so we can see what to improve the next month.

Secure funding was nominated by nine respondents as important for the future development of the program. More young parents to present in schools was also mentioned with a suggestion to link into hospitals to recruit more potential peer educators.

More funding, maybe it becoming a part of schools’ subjects (compulsory), more promotion and advertising.

Funding is the biggest issue but after that would be girls being available when schools are booked. Childcare is very hard to get.

We would need more peer educators and ways to link into hospitals to get them.

Overall, respondents were very enthusiastic about the program in terms of its value to themselves and the students they present to.
They have been fantastic in the last three years. I don't think I could have got through some rough patches without them. There was always someone there when you needed them.

It would be really sad to see the program end due to lack of funding because I believe it has done great things for me and other young parents as well as the students we have presented to and can continue to do those great things in the future.

I think this programme has given a wealth of knowledge to myself and has helped me to be a better parent and person - for this I am so thankful since it was only by chance I discovered this programme.

5.5 Program staff

Achievements and opportunities

Significant achievements nominated by program staff included:

- increased well-being of peer educators
- development of the pathways model
- networking
- production of resources that are replicable in the development of new programs
- increased demand for presentations in secondary schools in both metropolitan and regional areas
- successful training of peer educators in the outreach program who are now delivering the program for young people in their own regions.

The well-being of peer educators was enhanced particularly by decreased isolation, education training pathways, increased confidence and development of parenting skills. This has included the opportunity to increase knowledge about and access to resources, link into other support agencies and build formal and informal networks.

One of many examples described to demonstrate increased well-being is that of a young mother who joined the program in 2001. She and her children were extremely isolated as a result of a decision to change her lifestyle and friendship group in order to assist her in giving up drugs. The young woman recognised that to do this she needed extra support, and opportunities to pursue more positive lifestyle choices. In the two and a half years that she has been in the program, this young woman has challenged her own values and attitudes, particularly around the benefits of education and employment. She has now completed a TAFE Certificate 3 in Community Services and for 2004 has secured a 12 month traineeship. Program staff are able to point to many similar examples, where young parents have explored and challenged their values and attitudes around issues such as parenting, relationships, education and welfare.

Project staff believe the main strength of Talking Realities is that it goes beyond the provision of a young parents' group to deliver a holistic program that has a number of
entry and exit points and a breadth of service provision. The vision was to create a program based on the principles of

- primary health care
- community involvement and participation
- developing personal skills
- intersectoral collaboration
- creating supportive environments
- reorientating health services
- adult learning models

Project staff reported that they are often asked to explain what they think are the key elements that provide such successful outcomes for young parents who have participated in the project. Project workers believe that the approach to provide young parents with pathways beyond the attendance of a young parent group is the essential key to the successful and wide ranging outcomes. The pathways model has been developed to allow several entry points (self-referral, referral by agencies, Friday Fun Group) and exit points (TAFE accreditation, employment, peer leader program). The model has been demonstrated as replicable in other regions of South Australia and there has been interest from interstate agencies.

Attendance at the Talking Realities Friday Fun Group (which provides activities very similar to other young parent programs, such as recreation/art craft/child development/ self esteem building) enables young parents to achieve outcomes such as addressing isolation, increasing informal networks, knowledge about other services, information and knowledge about parenting issues, satisfaction in producing art work and improved confidence and self esteem. However, these outcomes are broadened significantly when a young parent enters into the peer education training program. The training program has been developed to provide young parents with a range of skills and a role in facilitating a community education program to a wide range of audiences ie: schools, youth services, health and community service workers, funding bodies, conference delegates and the media. Through this process peer educators acquire skills in team work, public speaking, time management and commitment, and their whole readiness for training and paid work is increased.

The opportunity to interact with their peers and with workers from a range of professions and different cultural groups, as well as the chance to visit and learn about different geographical areas, provides the young parents with a breadth of knowledge and experiences which would not be available without this opportunity. Program staff report that many peer educators talk about how different and positive they feel because their status in the community has shifted from ‘just a young parent’ to a position of respect and value. They also talk about the immense benefits, and opportunities to challenge their values, in having contact with positive adult role models who share experiences and outcomes from their own participation in the community and workforce, their stories of undertaking study as mature students, the
Talking Realities Evaluation Report

dilemmas they have experienced and overcome in working and raising children and so on.

Project workers also see a difference in the young women's capacity to absorb information and learn skills in child development because:

- when they feel more in control of their own lives and can see some hope and direction for the future, this enables them to settle their own anxieties and to provide the space to think more about their children's needs
- information about child development is provided in the context that it is needed by the young women to pass on to their peers. This creates a non-threatening environment enabling a range of information from child development to child abuse to be discussed. In this way, the peer educators can often relate back the information to their own lives and talk with workers about what is happening within their own and their children's lives. This has afforded workers the opportunity to address a number of issues and to refer on to other services.

High quality resources have been developed including the 26-week accredited training manual, guide to presenting, banner, icons, posters and promotional booklets. The establishment of a training room and home base has allowed these resources to be kept and displayed effectively.

Enablers and barriers

Three main enablers were identified: the peer educators themselves, program support and the community development approach.

The peer educators were said to be energetic and committed, keen to share their knowledge and stories and act as role models. The program was supported by the professionalism and drive of staff and the support from the auspice agency and other service providers. The capacity of the program to provide peer education training, support opportunities and to deliver school presentations has been enhanced by the provision of transport to and from events and child care subsidies. The program was able to pursue a community development approach, dealing with real issues and making use of practice wisdom and experience as it developed. This was supported by the flexibility of the Department of Family and Community Services and Parenting SA as the funders. A further strength of the program was the willingness to devote resources to evaluation and to act on feedback received.

Barriers centred on the inability to get ongoing secured funding. This has meant a great deal of time and energy has gone into writing grant applications and the constant need to be ‘innovative’, rather than developing a more inclusive youth participatory model and having the time and resources that is required to support this. There was despair voiced at the lack of funding for established, successful programs, even those like Talking Realities that tackled the stated government priorities of school retention, early intervention and social inclusion. The breadth of Talking Realities was believed to be one its strengths, yet the ‘silo’ approach to
government funding programs disadvantaged such cross-sector, social health programs.

The Friday Fun Club has not been operating long enough to act as an introduction to the more formal peer educator training program. While interest in the program has remained high, there was a higher drop out rate in the most recent group. This was linked to the deliberate strategy of targeting younger, more 'at risk' parents. This has meant high support needs in the group (eg homelessness and health issues) and has had an impact on the capacity of young parents to complete the program.

**Future directions and dilemmas**

The tension raised by some teaches and stakeholders around asking peer educators to talk publicly about their life experiences, good and bad, was recognised. It was pointed out by project staff that there are two different audiences: for schools the message is about the reality of parenting, whereas for service providers and other young parents it is about the positive impact of the program on the young parents. Peer educators step into a role and become more confident, sometimes forgetting what life was like for them before. The question was raised 'are you still a peer after doing the training?'. Project staff pointed out that without training the peer educators would not be confident and skilled to talk about their experiences. Tackling this issue requires good program facilitation and discussion with peer educators on a continuing basis.

Expansion of the program within the west of Adelaide and into other metropolitan regions was suggested as there is no similar service outside the Adelaide Central CHS catchment area. The establishment of outreach programs in Whyalla and the Riverland indicate that the program is transferable. Bringing more peer educators on board would also help to spread the load in terms of school presentations.

The program is developing a stronger working relationship with DECS in order to encourage a more strategic approach within schools. The aim is to ensure school students who attend the program do so in a well-planned learning context and that the program maximises its potential to support students who might be at risk of leaving school early.

Negotiating more support from community agencies was suggested as a way to gain additional resources. For example, TAFE student support staff could work with peer educators on their grant applications.

One change to the training program was suggested. The program has increased to 26 weeks with the more formal requirements linked to accreditation and this is challenging for some young parents in terms of time commitment and learning. The training could be split into modules so that peer educators can go out to schools earlier and then return for further modules of work.
Talking Realities Evaluation Report

What will be lost if ongoing funding is not secured

Program staff stressed the years of development that have now gone into producing the very positive outcomes from Talking Realities and that there is no other similar service for young parents. The program breaks the stereotype of young parents and validates the mothering role as an informed choice. For many young parents this program offers a sense of hope for the future. It provides an appropriate way back into education and participation in community life.

The program has built up trust with young parents who, even after they leave the program, stay in touch to let project workers know how they are going or continue to drop into the Friday Fun Group and often attend special events.

Schools will lose a resource they clearly value, which fills a gap in the curriculum and provides young people the opportunity to hear first-hand experiences of young parenting.
6. Discussion

6.1 School presentations

Quality

The program arrangements for the presentations were very well-organised. It seems that some presentations were conducted in a less than ideal situation, however, with whole year levels of some 120 students sitting on the floor. Most focus group respondents thought that breaking the presentation into two sessions would aid student concentration and allow more time for topics of particular interest or student questions. However, only 23% of teacher survey responses supported this idea. This may be because it would increase costs to the school.

Generally, each year level believed that theirs was the most appropriate time to see the presentation. Some older students suggested that Year 8 or 9 would be better as this is the age when students are beginning to express interest in sex and the potential for becoming a young parent starts. The presentations are, to some extent, adapted to the year level and audience. This is something that may need to be developed further so that the presentations become more flexible in terms of adapting the content and timing for different audiences.
All focus groups agreed that using peer educators made the sessions more realistic and relevant for students. The information was seen to be more credible coming from young people who are experiencing life as a parent. Survey results confirm this view, with teachers reporting that students understood the information presented and students reporting that it was well-presented and useful.

The lack of a male perspective was considered a large gap by many respondents from each category. Older boys and teachers were keen to hear about young fathers' experiences, while particularly for younger boys, the all female presentation reinforced or encouraged the notion that parenting was 'girls' business'. There was some support for separate girls' and boys' group presentations followed by a joint session where ideas and questions could be shared. Peer educators and other stakeholders also believed more male input was needed but, if young fathers could be recruited, their training should take place separately.

Another issue discussed in two of the focus groups was that no babies were at the presentation. For the teachers, this diluted the message about the stress and difficulty of being a young parent as it suggested that child care was easily available on demand. It also prevented students experiencing at first hand how disruptive and demanding babies can be. The Project Manager has confirmed that babies and toddlers have, in the past, attended presentations but this has been extremely distracting for the students and the peer educators.

Content

The topics nominated by teachers and students as most of interest were the comparison of a teenager's life with that of a young parent, and financial issues such as the cost of providing for a baby's needs. Students also wanted to hear more personal stories. The interactive component of the presentation where students describe what they do and how they spend their money was enjoyed and remembered. Students in the focus groups liked the idea of writing down questions and there were suggestions about making this a larger component. For example, questions could be handed in before the start so that the main topics of interest could be addressed during the presentation.

The teachers' ranked responses suggest that there are some topics that are, or could be, covered in other curriculum areas, sexual health for example. This would reduce the 'content' of the presentation and allow for further student interaction and questions. On the other hand, hearing about sexual health issues directly from a young person was thought to be valuable.

In the student focus groups, there was considerable discussion about the health information content of the presentation. Most of the information appeared to be related to the child rather than the parent's health. Some students wanted more information on abortion, STIs, contraception or health generally. The Year 8 girls had a lot of questions about abortion. This may just be out of curiosity or it may indicate that they see this as a 'way out' of a pregnancy rather than trying to prevent it. This
suggests a need for more sexual health education including safe sex to prevent STIs as well as pregnancy and how to 'say no' if they aren't ready. This is probably outside the scope of the Talking Realities program but does point to a need for more information to be available for this age group. Survey responses, which are mainly from students in Year 10-11 and their teachers, indicated that sexual health ranked comparatively low in interest and learning. It may be that, by Year 10, students have received a substantial amount of sexual health education, but for Year 8 and 9 students this is an area where more information is wanted. Peer educators believed it would be useful to add a component on violence and abuse as many students seemed unsure about this issue. Given the current length of the presentation, it is not realistic to add anything unless something else is cut down.

6.2 Student learning and outcomes
Students and teachers similarly identify the 'cost of living' and 'comparing lifestyles' as topics in which the most learning occurred/ students derived the most benefit. Students expressed surprise at the costs involved in parenting and recognised the many differences in their lives and that of a young parent.

A key objective of the Talking Realities program is to provide students with information about the responsibilities of being a young parent, on which they can choose to act. The finding that over 60% of students learnt 'heaps' about the responsibilities of being a young parent, and another 33% learnt something, would seem to provide a clear mandate for the program in schools.

Teachers from public, catholic and independent schools also provide strong endorsement for the Talking Realities program. Almost all teachers reported that they would recommend the program return the following year, or suggested that every two years would ensure adequate student coverage and allow all but transient students to experience the Talking Realities program. Many teachers took the opportunity to comment further on the program, most expressing their enthusiasm and support for peer education as an effective tool for conveying the realities of the complex social experience of teenage parenting.

The evaluation suggests that a large number of students experience positive learning outcomes about the realities on young parenting. The peer educators are ideally placed to contribute to this student learning by their similar age, their real life experiences and their willingness to talk about these.

6.3 Outcomes for peer educators and their children
In the teacher survey, many teachers commented on the courage, positive self-esteem and confidence of the peer educators. The peer educators identified similar benefits in increased self-esteem and confidence. They also valued the opportunities to further their education and gain formal credit for the work they were doing on the Talking Realities program. Most of the peer educators have been successful in gaining access to further education, employment or other activities.
The peer educators report that they are better able to access services and pass this information onto others. They have also formed supportive networks amongst themselves and with community based agencies.

The children have benefited from the increased parenting skills and social inclusion of their young parents and by the developmental opportunities provided by access to good quality child care.

The documented progress of the peer educators is testimony to the success of the program. Many of the peer educators have moved from troubled lives to become confident young women with increased parenting skills and participation in civic life.

6.4 Issues for future exploration

The focus groups and interviews, and to a lesser extent the short qualitative responses to the feedback sheets, encouraged open-ended discussion about the Talking Realities program. The main issues identified are discussed below.

Using peer education

One group of teachers suggested that the experience of parenting as described by the peer educators made it sound too attractive a lifestyle. They believed that the financial pressures and housing costs were underplayed. There seemed to be quite a bit of money left in the budget each week after necessities had been paid for. It also appeared that subsidised housing and financial support from the government was easy to access. The presenters gave the impression that child care was readily available, and not having any of the children present confirmed this view. The questionnaire survey of 57 teachers, however, reveals that these perceptions were not widely shared. For example, 31 teachers (66%) ranked the 'cost of living' topic as one of the most useful for their students.

This perception that the difficulties and problems of being a young parent were not fully described, reflects the dilemma in using peer educators. The young women - still working at becoming assertive and confident - are being asked, in effect, to deny publicly the choices and actions they took when they became parents. Some teachers were of the view that being a young parent was undesirable, whereas the presentation is designed to give a realistic description of the experiences - both good and bad. The peer educators, as a result of the support and training they receive, are able to put on a 'professional' presentation describing the realities of young parenting. The confidence and skill with which they tell their stories was praised by respondents to the evaluation. However, this very professionalism can be interpreted as an endorsement of the action that led to the pregnancy and subsequent life choices. Clearly a tension exists in using peers to 'tell it like it is' and the need for the young women to be supported to move on from their experiences. Perhaps, in telling their 'stories', peer educators need to talk more about their involvement in Talking Realities and how they have been supported to leave domestic violence situations or have been challenged to reconsider their values around welfare etc., because of the
opportunities to interact with a broad range of people including professionals and bureaucrats etc.

Using trained teachers or peers who believe in the program they are delivering has been identified as one of the key characteristics of education programs that are effective in reducing the occurrence of unprotected sex in adolescents (Kirby 2002).

A report from the SA DHS notes that feelings of invulnerability and impulsiveness play a role in unplanned pregnancy in young women and that peer education is seen as a way to challenge these attitudes.

Young women stressed the need for more peer education, and more information about the consequences of unprotected sex and the realities of motherhood ... (Allwood et al. 2001 p 40).

Education needs of young adolescents

Several of the younger female students suggested that their attitudes to pregnancy were based on the notion of fault. That is, if the partners were acting responsibly in using contraception but this failed and a pregnancy resulted, then this was seen as 'not their fault' and was more acceptable than if contraception was not used. It also coloured whether the students felt they would be able to tell their parents. This finding could be useful in designing sexual health education messages for young adolescents.

Young female students also had many questions about pregnancy termination. It would appear that there is a gap in the current sexual health curriculum that other programs could investigate further.

Male perspective

The most emphasised issue was the need to present the father's perspective. Otherwise, the program runs the risk of confirming a belief by some of the boys that parenting is 'girls' business' since only the female partner can get pregnant. The girls, boys and teachers all wanted to hear about the young fathers' experiences, if and how they were involved in caring for the child, and whether they were still with the mother. The boys seemed confused about the role of fathers as parents and it would probably help them if at least one father participated in the presentation. This would also make it more interesting and relevant for the boys.

Other stakeholders and peer educators agreed that the young fathers' perspective would be a valuable addition to the program. However, they pointed out the difficulty in recruiting young men. It was also emphasised that any training program would need to be separate as mixed sex training would change the dynamics and mutual support within the peer educator group.

The reluctance of young males to participate as peer educators has been noted in other studies (Phelps et al. 1994; Strange et al. 2002)
Funding

Most respondents to the evaluation were aware of the funding difficulties faced by Talking Realities. The contribution paid by schools covers only a very small proportion of the total costs and gaining ongoing, secure funding has been a continual concern. As well as consuming much time and energy, preparing funding applications means that the program has to constantly re-invent itself to meet new criteria. It also makes planning difficult; for example, schools need to know if the program will be available to them in 2004 and beyond.

This evaluation has confirmed previous barriers faced by health promotion programs acting within a social health framework. Difficulties include the need to be ‘innovative’, the lack of ongoing funding beyond the one-off project and competitive, silo funding policies.

Commonwealth/State government and philanthropic organisations regularly offer funding to projects that can demonstrate innovation in design or fill a newly identified gap. This constant pressure to be innovative means that there is little opportunity for funding for programs that have shown their value and need ongoing funding. It is frustrating that funders require evaluation as a requirement of project funding but are reluctant to act on the findings.

Health promotion, in particularly, suffers from a one-off project funding approach. It is unrealistic to expect health promotion programs, working on long term, population-based issues to become self-sustainable within one or two years as seems to be the expectation from funders.

Funding programs tend to be linked to a specific government portfolio, disease group or selective population. This means that programs funded under the health portfolio, for example, usually address risk factors and clinical outcomes and it is very difficult to obtain funds for programs working at the broader social determinants of health level. This practice of silo funding means that a program like Talking Realities falls between health, education, employment and community welfare with no department ready to take responsibility.
7. Conclusion

There is some evidence that a substantial proportion of teenage pregnancies are planned and studies on never pregnant adolescent females show a high prevalence of idealised attitudes to pregnancy. This in turn may have an influence on decisions to be sexually active or to use contraception (Condon et al. 2001a). Witte (1997) recommends the use of peer educators in teen pregnancy prevention interventions and the need to focus on realistic consequences of unprotected sex.

The Talking Realities program presents a unique approach to recruit, support and then train teenage parents to present to their peers in their own language/terminology, on all aspects of being a teenage parent. It is highly valued by students and their teachers and has continued to develop and flourish in a less than ideal funding environment. Demand for the program from schools is high and a number of intra and interstate agencies are considering the development of programs based on the Talking Realities model. The program, using a primary health care approach, reflects the guiding principles for school-based pregnancy prevention programs as suggested by Condon et al. (2001b).

Talking Realities:

- focuses on prevention of pregnancy and STIs rather than prevention of sexual activity
- provides information on contraception and ‘refusal’ skills
- creates a realistic awareness of potential short and long term consequences of pregnancy and parenthood
• uses peers with whom the adolescents can identify to diminish idealisation
• targets male and female adolescents
• targets early adolescent or pre-adolescent students

Evaluation of the Talking Realities program during the current funding period, July 2001 to December 2003, has found strong support for the program from all respondents. Many report that the learning that is achieved from hearing and talking with young women who have experienced parenting at an early age is without parallel in the school curriculum. While it is not realistic to expect the Talking Realities program to have a measurable impact on the number of teenage pregnancies, the project aims to increase young peoples' knowledge and awareness of the issues facing young parents and the responsibilities that go with having a child. The peer educators demonstrate the real issues facing young parents and help to dispel the notion that having a baby is all fun.

The peer educators have made significant gains in social, psychological, educational and vocational domains. Moreover, they are quick to identify the gains for their children from their enhanced parenting skills and the increased sense of social connectedness and the greater optimism with which they now view the future.

Health promotion programs such as Talking Realities face huge barriers. Funding is insecure and subject to the priorities of funders rather than the community. Even when resources have been dedicated to evaluation, as in this case, the results are seldom given much weight in decision making processes. Long term planning and commitment to the community is difficult under these circumstances.

The evaluation of the Talking Realities project has adopted a collaborative action research approach that embodies a continual process of planning, action and reflection. By necessity, the evaluation has focussed on process and short term outcomes for students and peer educators. Some of the learning that has occurred during the project includes the recognition that the life course outcomes for the peer educators and their children should be researched and documented. Anecdotal evidence suggests that the program has a life-changing impact on the young parents who undertake the peer education training and that this has cumulative benefits for their children. To this end, funding is needed to undertake research that has a specific focus on the medium and longer-term outcomes for young parents who participate in the Talking Realities program, and their children.
References


Appendices
A. Pathways flow chart
B. Student feedback sheets
C. Teacher feedback sheets
D. Student focus groups
E. Teacher focus groups
F. Peer educator focus groups
G. Telephone interviews with teachers
H. Peer education survey
I. Telephone interviews with stakeholders
J. Interviews with project staff and manager
Talking Realities....young parenting

1. Friday Fun Group
   Social/Recreation/Arts & Craft
   Group & team building skills
   Parent education

2. Peer Education Training
   TAFE Accredited/6 Modules Certificate 3 in Community Work
   Parenting & life skills development

3. Talking Realities... young parenting presentations
   Metropolitan and Rural Secondary Schools
   Youth & Community Services
   Consolidating expanding combining knowledge

4. Leadership Training
   Accredited modules towards TAFE Certificate 4 & Parenting skills development

5. Peer Leaders
   Recruiting/supporting young parents – Friday Fun Group
   Co facilitate training/activities
   Leadership role in the community
   Consolidating expanding combining knowledge

Supporting & referring young parents to appropriate services
Parenting, Child Development, Mental Health, Housing, Domestic Violence, Literacy/Numeracy, Educational/ Employment Pathways

Exit Points/Moving Forward
Social & Community Connectedness, Effective Networks, Education & Training, Employment, Volunteering, Informed Parenting
Reaching potential
Appendix B: Student feedback survey

Dear Student

Thank you for participating in the Talking Realities...young parenting program. We want to make our time with young people worthwhile so we would really appreciate knowing what you learnt from our presentation. Your feedback will help us to improve the presentation.

Name of your school ____________________________________________
Subject you saw this program in ________________________________
Your year level (tick one) □ 8□ 9 □ 10 □ 11 □ 12
Are you (tick one) □ Female □ Male

1. How useful was the information presented? (circle one)
   not at all useful useful very useful
   Any comments? ______________________________________________

2. How well was the information presented? (circle one)
   poorly OK very well
   Any comments? ______________________________________________

3. How useful was the banner? (circle one)
   not at all useful useful very useful
   Any comments? ______________________________________________

Now some questions about the topics

4a. How much did you learn about 'Comparing the lifestyles' topic?
   nothing some heaps
4b. What is the most important thing you learnt in this topic?
5a. How much did you learn about 'The cost of living' topic?
   nothing some heaps
5b. What is the most important thing you learnt in this topic?
6a. How much did you learn about 'What's in a day' topic? (24 hour clock)
   nothing some heaps
6b. What is the most important thing you learnt in this topic?
7a. How much did you learn about 'Children's needs' topic? (baby banner)
   nothing some heaps
7b. What is the most important thing you learnt in this topic?
8a. How much did you learn about 'Relationships and feelings' topic?
   nothing some heaps
8b. What is the most important thing you learnt in this topic?
9a. How much did you learn about 'Where will we live' topic? (housing)
   nothing some heaps
9b. What is the most important thing you learnt in this topic?
10a. How much did you learn about 'Consequences of having a baby' topic? (the positives/green card & challenges/red card)
    nothing some heaps
10b. What is the most important thing you learnt in this topic?
11a. How much did you learn about 'Sexual health' topic?
   nothing some heaps
11b. What is the most important thing you learnt in this topic?
12a. Overall, how much did you learn about the responsibilities of being a young parent?
   nothing some heaps
12b. What do you consider is the most important responsibility for a young parent?
13a. How much did you learn about services and places to go for information on parenting?
   nothing some heaps
13b. Can you name one new service you learnt about?
14a. How useful was it to discuss the topics with the peer educators?
   not at all useful useful very useful
14b. What else would you like the peer educators to talk about?

Thanks for your feedback, it will help us to improve our program.

Peer Educators – Talking Realities…young parenting

Dale Street Women’s Health Centre (08) 8444 0700
A joint venture between Adelaide Central Community Health Service, Parenting SA and the Department of Health and Aged Care
Appendix C: Teacher Survey

Dear Teacher

Thank you for accessing the Talking Realities...young parenting presentation for students in your school. We want to make the presentation relevant to secondary school students and school curriculum so we would really appreciate feedback from you. Neither your school nor yourself will be identified in any reports from this feedback. Will you please return your questionnaire and students' questionnaires in the envelope provided within 14 days.

Date_________________  Name of School ________________________________

Your name _____________________________________________________

Curriculum subject program presented in ______________________________

Year Level of students (tick one or more)  8  9  10  11  12

1. Please circle your response to each of the statements below.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Unsure</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The presentation met my expectations</td>
<td>SA</td>
<td>A</td>
<td>U</td>
<td>D</td>
</tr>
<tr>
<td>It was beneficial for the students</td>
<td>SA</td>
<td>A</td>
<td>U</td>
<td>D</td>
</tr>
<tr>
<td>Students understood the issues</td>
<td>SA</td>
<td>A</td>
<td>U</td>
<td>D</td>
</tr>
<tr>
<td>The material was relevant for students at this level</td>
<td>SA</td>
<td>A</td>
<td>U</td>
<td>D</td>
</tr>
<tr>
<td>There were sufficient opportunities for questions</td>
<td>SA</td>
<td>A</td>
<td>U</td>
<td>D</td>
</tr>
<tr>
<td>Students got involved in the presentation</td>
<td>SA</td>
<td>A</td>
<td>U</td>
<td>D</td>
</tr>
</tbody>
</table>

2. What topics do you think were most useful to your students?

Please rank 1 - 8 (1 being the most useful)

- Comparing the lifestyles
- The Cost of Living
- What's in a day
- Children's Needs
- Relationships & feelings
- Where will we live
- Some Consequences of having a baby
- Sexual health

Please Comment

3. How could the program be improved?

4. Are there any other topics you would like to see included in the presentation?

5. What curriculum areas and SACE studies in your school would this program support?

6. What DETE learning outcomes would this program support?
7. Previous evaluation has highlighted the need to increase the time available for interactive discussion between students and peer educator presenters. What would be the best way to change the presentation to enable this interaction to be increased? (tick one only)

☐ arrange the presentation over two 90 minutes time slots (this would incur extra cost for schools)
☐ leave out one or more current topics.
Which one(s)? _________________________________
☐ arrange for teachers to address one or more topics before the presentation
Which one(s)? _________________________________
☐ leave some topics to be covered by teacher after the presentation
Which one(s)? _________________________________

8. Would you recommend that we presented to students at your school again next year?

☐ Yes  ☐ No

Why? _________________________________________

Thank you for participating in our evaluation.

Nicolene Kovatseff, Project Officer  Talking Realities...young parenting..
Dale Street Women's Health Centre (08) 8444 0700

A joint venture between Adelaide Central Community Health Service, Parenting SA and the Department of Health and Aged Care
Appendix D: Students Focus Group Question Guide:

Introduction

My name is Gwyn and this is Megan. We are from SACHRU and we are here today to ask your opinion of the Talking Realities program. We want to know what you thought about the presentation and any ways that it could be improved.

Ask students to introduce themselves by giving their first name

Thank you. I’ll be asking some questions and Megan will take notes so that have a good record of what is said. There are no right or wrong answers and we won’t use your names in our report so no-one will know who said what. It’s important that everyone gets a chance to speak so please try not to talk over someone else.

Questions

So, I'd like you to think about when you saw the Reality Parenting presentation

1. what do you remember most about the presentation?
2. what parts did you find most interesting?
3. what parts did you find least interesting?
4. did seeing the program change how you might feel about being a young parent?
5. do you think you know more about the responsibility of being a young parent?
6. do you know more about health issues for young people?
7. do you know more about youth and health services and where to go for help if you need it?
8. what did you like about the way the peer educators presented?
9. could your teachers have done the same thing just as well? why or why not?
10. did you have any follow up with your teacher at school after the presentation?
11. what should happen to the program in the future? who should get to see the presentations?
12. should it change?
13. is there anything else you would like to say?

Wrap up

Thank you very much for taking part today. We have a certificate to thank you for being involved.
Appendix E: Teachers Focus Group Question Guide

Introduction

My name is Gwyn and this is Megan. We are from SACHRU and we have been contracted by Adelaide CHS to evaluate the Reality Parenting program. We would value your opinion on the program, the presentation and any ways that it could be improved. You will not be identified in any reports.

Ask teachers to introduce themselves and say when and how many times they have used Talking Realities with students.

So, I'd like you to think about the Talking Realities session at school.

Questions

1. how did you first hear about the program?
2. did the planning and organisation of the presentation go smoothly?
3. what parts do you think the students found most interesting?
4. what parts do you think the students found least interesting?
5. do you think the students know more about the responsibility of being a young parent?
6. do you think the students know more about the social, emotional and economic issues for young parents?
7. do you think the students know more about health issues?
8. do you think the students know more about youth and health services and where to go for help if needed?
9. what did you and the students like about the way the peer educators presented?
10. could you have done the same thing just as well? why or why not?
11. did you have any follow up with your students after the program?
12. has there been more interaction between the school and other organisations?
13. can you describe any long term benefits for students?
14. what should happen to the program in the future? who should get to see the program?
15. should it change?
16. anything else you would like to say?

Thank you very much for your time.
Appendix F: Peer educator focus groups  
Tues 18\textsuperscript{th} March 2003, 1.00 - 2.30 pm, Parks CHS, Gwyn Jolley

Introduction

My name is Gwyn Jolley, I am from SACHRU. SACHRU is helping to evaluate the Talking Realities program and here today to talk with you about the program. I will use the information you give me to help write an evaluation of the program. I will not use your names or identify you as individuals in any way and you do not have to take part or answer any questions that you feel uncomfortable with. I would like to tape record our discussion if everyone agrees. That makes it easier for me to make sure I have recorded your views accurately. (check all agree). Please let us know if you would like the tape turned off at any time. I will take some notes too, just in case the technology fails!

We need to make sure everyone gets a chance to speak and there are no right or wrong answers, everyone’s views are important, so please try not to speak over someone else.

We have about 1\frac{1}{2} hours and plan to be finished by 2.30 pm.

1.00 pm

Introduction

- What did you hope to get out of the program? Has that happened?

1.15 pm

Training sessions

- Did the training set you up with enough skills, knowledge and confidence to run the peer education sessions in schools?

1.25 pm

School presentations

Tell me about a school presentation that went really well

- Why did it go well?
- How did you know it went well?
- What was good for you about the presentation?
- What was good for the students? What did they get out of it?
- What do you think teachers got out of the presentations?

Now tell me about a presentation that didn’t go so well

- How do you know
- Why didn’t it go well
- What could you have done differently?
Would you suggest any changes to how the presentations are organised and run?

- single or mixed sex student groups
- large or small groups, best size for groups
- what are the barriers to presenting in school?
- how do you feel when you have to talk to students about negative times in your life? (some suggestion that the banner presentation makes it sound too easy)

1.50 pm

Outcomes for you

- Has the program increased your access to health and community services and their resources? Any examples?
- Do you think you have more confidence and knowledge about health and parenting skills
- Has the program has any impact on your child or children?
- Has your involvement in the project led to opportunities for you to take up education or training, employment or other activities?
- Do you think you have more confidence to take on leadership roles in other programs or in the community? Any examples?
- Has your involvement in the project helped you to feel you have more choices and control of your life?

2.15 pm

Anything else

- Is there any thing else you would like to add?

Wrap up and thank
Appendix G: Teacher interviews

1. How many years have you been using Talking Realities at your school?
2. What year level?
3. Single sex or mixed?
4. Usual size of student group?
5. As part of a specific curriculum subject?

About the students or other recipients of the program:

6. As a result of the presentation do the students have an increased understanding of social, emotional and economic issues faced by young parents?
7. As a result of the presentation do the students have an increased understanding of the responsibilities on being a parent?
8. As a result of the presentation do the students have an increased knowledge about health issues? (parent or baby)
9. As a result of the presentation do the students have an increased understanding sexual health issues?
10. As a result of the presentation do the students have an increased knowledge about youth and health services available.
11. Any other outcomes for these students?

About the peer educators:

12. Over the time you have been using the program have you seen any evidence of increases in skills, knowledge and confidence in the peer educators? Can you give any examples?
13. Are you aware of any other outcomes for the peer educators?

About the program:

14. Does this program meet a need in schools/youth services?
15. Do you build on or follow up on the presentation during the school year?
16. How well does the program articulate with the school curriculum, SACE and or TAFE requirements?
17. What are the benefits and drawbacks of using peer educators to raise issues about parenthood for young people?
18. Is the presentation appropriate for diverse cultural groups?
19. How could the program be improved?
20. Is there anything else you would like to add?

Thank you for your time
Appendix H: Peer educator survey

Dear Peer Educator

As you know, Stacey Masters and I are writing the evaluation report for Talking Realities. The evaluation will tell others what you have achieved, help to improve the program and be useful for funding applications.

As part of the evaluation, we are asking you to complete this survey about your involvement in Talking Realities. It should take no more than 30 minutes. You do not need to put your name on the survey and you will not be named or identified in the report. You do not have to take part if you don’t want to and no-one from the program or SACHRU will know who has returned a survey.

The survey is an opportunity for you to tell us in confidence about the program. The information you give us will be very useful in telling others about the program and helping to make it better.

When you have completed the survey, please return it to SACHRU in the reply paid envelope provided by 5th December 2003. If you have any questions, please phone me (Gwyn Jolley) on 8204 5978.

Thanks once again for your time,

Gwyn Jolley

As a result of your involvement in Talking Realities, how much have you increased your skills and knowledge in the following areas?

(Please circle one choice and comment or give an example if you can)

1. confidence
   - lots
   - some
   - little
   - none

2. parenting knowledge (for example, about children’s needs)
   - lots
   - some
   - little
   - none

3. parenting skills (for example, managing your child’s behaviour)
   - lots
   - some
   - little
   - none

4. communication skills
   - lots
   - some
   - little
   - none

5. leadership skills
   - lots
   - some
   - little
   - none

6. knowledge of community resources
   - lots
   - some
   - little
   - none

7. use of community resources
   - lots
   - some
   - little
   - none

8. sexual health knowledge
   - lots
   - some
   - little
   - none

9. Have you done any other education or training eg TAFE Certificate, enrolled in B.Ed at university? Please give details.

10. Has the Talking Realities program helped you to feel more in control of your life?

11. Have there been any benefits for your child(ren)?
Peer educator training and support
12. What was the most useful part of the training and why?
13. What was the least useful part of the training and why?
14. Do you feel you got enough support from the Talking Realities program during the training?
15. Do you feel you got enough support from the Talking Realities program once you were presenting in schools?

Talking Realities program
16. What are the strengths or positive things about the program?
17. What are the weaknesses or negative things about the program?
18. How should the program be improved?
19. What needs to happen for Talking Realities be able to continue in the future?
20. Is there anything else you would like to say about Talking Realities?

Thank you for your time in completing this survey.

Please put the survey in the envelope provided and post it to SACHRU by 5th December 2003.

No stamp is needed.
Appendix I: Stakeholder Interviews: Question Guide

1. Are you a member of the reference group?
   yes no
   if yes, comment on the role and function of reference group

2. Outcomes for peer educators. Increases in:
   a) confidence,
      lots some little none
   b) knowledge of sexual health,
      lots some little none
   c) knowledge of parenting
      lots some little none
   d) skill in parenting,
      lots some little none
   e) skill in communication,
      lots some little none
   f) skill in leadership
      lots some little none
   g) knowledge and use of community resources
      lots some little none
   h) access to formal education
      lots some little none
   i) access to informal education
      lots some little none

3. Quality of training (content, delivery, assessment)
4. Strengths of the program
5. Weaknesses of the program
6. Opportunities for development
7. Barriers to development and how to overcome
8. How should the program be improved?
9. How can sustainability be enhanced?
Appendix J: Project Staff Interview Question Guide

1. What have been the most significant achievements?
2. What opportunities have been missed?
3. What has enabled the program to achieve?
4. What have been the barriers?
5. Has the program turned out how you expected or differently? If so, why?
6. With the benefit of hindsight, is there anything you would have done differently?
7. Some respondents have suggested the peer educators make it seem too easy eg no babies suggests child care is easy, don’t seem to have any housing problems. Is there a tension between expecting the peer educators to run down their own life style and choices while at the same time the program is working to build confidence and self esteem?
8. How would you like to see the program develop?
9. What will be lost if the program is not funded?
10. Anything else you would like to say?