JAMAICA’S BEST PRACTICES IN ADOLESCENT HIV/AIDS PEER EDUCATION
It is a well-known phenomenon that sexual activity for the vast majority of people begins during adolescence—and Jamaican adolescents are no exception. The average age of sexual initiation for adolescents in Jamaica is 13 for boys and 15 for girls. Studies have shown that adolescents who start having sex in early adolescence are more likely to have multiple, high-risk sexual encounters and are less likely to use condoms. Delaying the age at which young people first have sex can significantly protect them and society at large from sexually transmitted infections, including HIV.

Globally, young people are already taking the lead in reversing the trends. Serving as peer educators is an effective way for young people to participate in HIV prevention and care efforts. For many young people, their peers serve as a major source of information on sexual issues. Properly trained, peer educators can dispel misconceptions, shatter myths and present information on preventing HIV in a way that other young people will find relevant. Peer educators can be trained to provide information, build skills, counsel, or distribute condoms. They can do their work on street corners and in clubs, churches, schools and universities—wherever young people gather and feel comfortable.

This guide provides a compilation of efforts from adolescent peer education programs and highlights the lessons learned and shares best practices. The document is a testament to the hard work of so many organizations to empower and inform our adolescents, with adolescents.

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Howard Hamilton, Q.C., Chair, National AIDS Committee
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What is this guide about?

Peer Pressure Can Be a Good Thing: Jamaica’s Best Practices in Adolescent HIV/AIDS Peer Education
Whether for good or bad, no one teaches a young person about life like another young person.

There are academic theories to bolster this statement, but experience and observation may be the best indicators of the truth of this assertion. Peer pressure – positive or negative – is a big part of adolescent life.

In the drive to prevent and manage the spread of HIV/AIDS among young people, many groups have identified the potential influence of peers and have adopted what are known as “peer education” programmes, to educate and foster behaviour formation or behaviour change among young people.

In Jamaica, as in other parts of the world, peer educators have become a standard part of HIV/AIDS prevention efforts. There has however been little co-ordination of these efforts. As a result of this, each group has struggled to determine how to recruit young people as peer educators, how to train them, what expectations to have of them and how to keep them motivated, often “reinventing the wheel” each time a new peer education programme is to be developed.

This guide is a tool to help strengthen the capacity of existing peer education programmes and to assist organisations that want to establish peer education programmes by drawing on the experiences of local HIV/AIDS peer education interventions. It is not an exhaustive study of the topic, but a synthesis of information gathered from some of the more established peer education programmes involved in the fight against HIV/AIDS. It consolidates the lessons learnt from Jamaican adolescent peer education programmes, based on the findings of a survey (see instrument in Appendix D) and a 3-day residential workshop held with relevant organisations and agencies. We have tried to highlight what appear to be common themes and best practices.
Although this report focuses on adolescent peer educators, some information has been gathered from programmes that target other types of peer groups, as it was felt that their inclusion provided valuable insight into any HIV/AIDS peer education initiative.

In the appendix there is a list of agencies and organisations which have developed and/or implemented peer education programmes. While we have tried to include all the programmes which we became aware of in gathering data for this publication, there may be some which we have missed.

The inclusion of any programme, group or agency in this list is not an endorsement, but is simply done to provide a point of contact for those involved in peer education, to network with each other and to continue the dialogue which research for this report has engendered.
What is Peer Education?

The concept of peer education is fairly straightforward. Peer education involves people of the same general age and circumstances teaching each other. Fostering positive behaviour development or change is the main reason most organisations initiate a peer education programme.

While experience and common observation show that people, especially adolescents, respond positively to the influence or instruction of peers, there is also academic research that proves it. It may therefore be useful to look at some theories of behaviour change and social change that relate to the process of peer education.

Peer education: people of the same general age and circumstances teaching one another.

Here is a brief summary of three main theories:

The Diffusion of Innovation Theory (Rogers 1983)
This theory holds that certain opinion leaders from a given group or population act as agents of change by disseminating information and influencing group norms in their community;

The Theory of Reasoned Action (Fishbein & Ajzen 1975)
This theory states that an important element of behaviour change is a person’s perception of social norms or beliefs about what people important to that individual do or think about a particular behaviour;

Social Learning Theory (Bandura 1977)
This theory states that people can serve as models of human behaviour. Some people are capable of effecting behaviour changes in others based on their values and interpretation system.

Using young people to educate and positively influence other young people regarding HIV, AIDS, sexual choices, sexuality and reproductive health is therefore a good idea – based on observation, common sense, gut feelings and also on established social science theories.

DIFFERENT LEVELS OF PEER TO PEER PROGRAMMES

In some organizations, peer education programmes have evolved to the point where there is a need to differentiate between beginning peer educators, more experienced and skilled peer educators, and those who have moved into specific skill areas, such as facilitation, counselling and other related activities.

Because of this evolution, a variety of titles may be applied to peer programme participants. In most cases, however, “peer educator” is the generic term used by most programmes to indicate the relatively informal sharing of information, opinions and life choices that are all embodied in the programmes we refer to as peer education.

One group calls its peer educators “outreach officers;” another calls those in the early stages of peer work “peer links.” When the peer links have more training and experience, they graduate to the level of “peer educators.”

If there is a differentiation, it usually follows these general lines:
WHAT PEER EDUCATORS DO
Provided that peer educators receive adequate training, many organisations have found that they can help shape the knowledge, attitudes and behaviours of their peers in many ways. Methods of peer education include:

- Face-to-face talks with peers (one-on-one or small groups)
- Telephone information sharing and education
- Community walk and talks
- Training other peer educators

From this list, the most widely utilised activities are face-to-face talks with peers, community walk and talks, presentations to school, church, civic and community groups and the use of drama and other art forms.

LEVELS OF PEER-TO-PEER PROGRAMMES

PEER EDUCATOR
- recruited for his/her leadership potential or potential to help others;
- receives basic training and is expected to provide information and referral services;
- trained to help others learn through demonstrations, listening, role-play, encouraging, serving as role models, providing feedback and supporting healthy decisions and behaviours.

PEER SUPPORTER
- has been a peer educator but has moved “up the ranks” due to time spent successfully educating others;
- expected to help others develop life skills, including decision-making.

PEER COUNSELLOR
- has spent considerable time (probably 18 months or more) either working as a peer educator or peer supporter and has received extensive training, including some training in counselling skills;
- expected to assist in problem solving and to become involved in advocacy activities, as well as to educate.
In most cases groups do not require parental consent for participation, even when peer educators are below 18 years. Sometimes, if the programme involves a camp-type setting or if the recruits must travel some distance or stay overnight to receive training, parental consent is obtained for these activities. Some groups have found it helpful to be “proactive” in letting parents know that their young people will be dealing with sexual and reproductive health issues. Parents usually do not object, but they do not want to be surprised.

The St. Catherine Parish AIDS Committee’s youth group hosted a special workshop with their parents not only to sensitize them about HIV/AIDS, but also to get parental support for their children’s involvement in the group. The workshop, entitled “Today is yours, tomorrow is ours; meet us halfway, start communicating today”, involved interactive presentations using drama, poems and dance, as well as personal testimonies from persons living with HIV/AIDS.

The workshop proved successful. Regular and consistent attendance of members increased tremendously, while the recruits reported that their parents/guardians expressed pride in their activities. Subsequently, several parents actively participated in some of the youth-led activities, donating items and baking and shopping for the group’s fundraiser. Most importantly, the workshop enhanced parent-child communication about social issues, including sex and sexuality, in a comfortable, safe environment.

Parental consent can translate into parental involvement and support.
Recruitment

Recruiting peer educators usually seems daunting when an organisation begins implementing a peer education programme. There are a number of ways to carry out recruitment. Some groups work with schools to find potential recruits; some recruit from the general population or from within targeted communities (such as out-of-school youth, sports groups or clubs, faith-based organisations or inner-city communities); some work with other organisations to find people who might be interested in doing peer education. Some organisations recruit through activities, such as summer camps or workshops. A few organisations said there was no need for them to seek out recruits as persons come in and volunteer to participate in their peer education programmes based on the work they have done.

In all cases, the best recruiters are the peer educators themselves. The young people serve as a form of advertising, attracting new people to the work they do through their activities. If this is not happening, the group needs to review what the young people are doing, how visible their work is, and why other young people are not attracted to their activities. This type of review will also help in developing strategies to retain peer educators.

WHO MAKES A GOOD PEER EDUCATOR?

Most groups have not developed strict criteria for admitting a young person into the ranks of their peer educators. In fact, the most common criterion noted was “their expressed interest.”

School grades were not seen as especially important in deciding who would become a peer educator, but leadership ability (potential or otherwise) was. Several programmes noted, however, that this leadership need not be expressed in the traditional sense used in the schools, but might include those who lead in negative ways, as well as positive ways. Thus, school prefects and school gang leaders might be equally valuable peer educators. If they have a few friends who follow them, if they are interested in helping others, if they are independent enough to speak out on serious issues, they will probably be good candidates.

Other basic criteria that organisations use to identify peer educators include willingness to learn and willingness to follow the schedule of activities. Good communication skills also were noted as important. This was not necessarily public speaking, which is often taught to peer educators, but the willingness and ability to discuss sexual matters and other life choice topics with friends, family and strangers.

While peer educators need to be the same relative age as the people they hope to educate, specific age requirements were not seen as important. One group noted that its peer educators are aged 6 to 28. Others were not specific on the age of its members, but noted that some are members of the target group they are hoping to reach.
If young people have a few friends who they can influence, if they are interested in helping others and if they are independent enough to speak out on serious issues, they will probably be good candidates for peer education training.

If the young people are not from the target group, they must be empathetic with them and respected by them. Peer education will not work if one group feels superior and the other inferior. They must truly see themselves as peers.

**EXPECTATIONS**

Not only are criteria for being a peer educator fairly loose, expectations are often non-existent or at least not openly stated. This can cause problems from the peer educator’s standpoint – not knowing what he or she must do to remain in good standing – and also from the organisation’s standpoint – not knowing if real progress is being made.

There are exceptions, of course. One group, for example, asks its peer educators to conduct at least three sessions with peers. These sessions are seen as relatively structured presentations, in which games and workbooks are used. Materials for 10 people are provided for each session, which indicates that sessions are on the order of small classes, rather than informal discussions.

Another group requires a minimum of two hours of peer education work every week. Exactly what qualifies as such work is very flexible. Another agency works with individual peer educators to establish a commitment for action.

One group, which had not set expectations for its peer educators, found it necessary to institute such a practice. It explained that peer educators had begun losing interest, feeling that little was being accomplished. It is now in the process of developing expectations for all its peer education members.
Training

In some cases, the training is more formal than in others. Some peer educators receive on-the-job training from more experienced peer educators; some receive a few hours of classroom-type training; while others receive ongoing training on a monthly basis. Sometimes the time at which a new peer educator joins the group determines the type of training he/she will receive. If several new members join at one time, it is likely they will receive more formal training, but if one person joins now and another two months later, they are likely to receive a less formal type of training.

Even with formal training, the time spent on delivery of training varies greatly. One group reported giving a two-week camp for peer educators; another said 10-15 hours were needed to train recruits; another does a one to two day training; another gives six hours of training initially, plus two hours each month and provides a monthly support group for peer educators. One group said its peer educators receive 16 hours of training, while another provides 27 hours.

It is difficult to identify a “best practice” from these varied approaches to training. Some of the differences in length and intensity of training are directly related to the approaches the group will use in peer education. If a group uses drama, music, and other forms of cultural expression, there will need to be time during training for developing these techniques. If, on the other hand, the peer education will primarily be one-to-one discussions, less time may need to be devoted to training.

TRAINING PRACTICES
Some training-related practices do appear to be vital:
1. Training should be adolescent friendly. If it is too technical or too academic, recruits may not absorb the information presented and are not likely to feel they can use it with their peers.
2. The presentation styles must be varied. Adolescents are not all the same. They come from different backgrounds and have different belief systems and different learning styles, so training methods must be varied to accommodate them.
3. Adolescents usually respond positively if they are fully engaged in their training sessions. Interactive, participatory approaches, such as drama, art, music and games usually work best.
4. Along with specific information on HIV/AIDS, reproductive health and other technical topics, adolescents need to be given the skills to engage and communicate with their peers.

It appears that the most effective training occurs when the peer educators are taken out of their everyday surroundings for the sessions. A “retreat”-type setting appears to be the ideal. This arrangement helps adolescents focus completely on the training by eliminating many of the daily distractions and making them attach a sense of importance to the activities which have been specially arranged for them.

Exactly what is included in all these hours of training? The content, like the length of training, varies but not by such wide margins.

The most common topics in training new peer educators are:
• What the acronyms HIV and AIDS mean (and understanding the difference between HIV and AIDS)
• The modes of HIV transmission (How one does and does not acquire HIV)
• Stigma and discrimination
• Abstinence
• Condom use
• Other safer sex practices
• Living with HIV (sometimes this involves a personal testimony from a Person Living With HIV/AIDS)
• Symptoms of AIDS
• Myths associated with HIV/AIDS
• Communication skills, such as public speaking
This appears to be the basic curriculum for all successful HIV-related peer education training programmes.

There are many other topics that may be covered in training. The inclusion of these topics obviously provides the peer educators with more thorough preparation for their duties. They have not however been found to be essential to the recruit’s initial training.

Some of these topics are:
- Global/regional/national/local statistics on HIV/AIDS
- Gender and HIV/AIDS
- Socio-economic factors and HIV/AIDS
- Culture and HIV/AIDS
- Puberty (Physical development)
- Sexuality
- Values/morals/attitudes
- Condom negotiation
- Other STIs
- The relationship between STI risk and HIV risk
- Common names for sex and for sex-related body parts
- Dealing with difficult people
- Homosexuality
- Sexual abuse
- Impact of alcohol or drugs on safer sex practices
- HIV testing
- Pre- and post-test counselling
- Home-based care
- Life skills (self-esteem, decision-making, etc.)
- Group facilitation
- Participatory techniques

In addition to AIDS-related topics, some groups also include training in creative forms of expression such as:
- drama (production and performance)
- dance/choreography
- music

Sometimes, these skills are taught formally, by professionals, and sometimes they are developed as skills the young people already have but have not put to use before in this way. Often, the training is really encouragement by an adult leader to peer educators to share their talents and interests.

Drama and music are frequently used by peer educators to convey messages related to HIV/AIDS, other sexually transmitted infections, healthy life choices, self esteem, and other issues. In these cases, the adult co-ordinator, lead peer educator, or other trainer needs to be able to act as a facilitator who can help the peer educators see their own skills and talents and apply them to these topics.

It is often helpful to have a professional actor or entertainer meet with the youth at some time during their training. It adds “legitimacy” to their training and their work, often provides motivation and adds some excitement to the training – all good elements in training programmes.
FOLLOW-UP TRAINING
Initial training is vital for peer educators, but most groups also identified periodic follow-up skill and knowledge building sessions as essential. The frequency of these follow-up sessions varies greatly. Some do monthly updates, others every other month, others quarterly, some biannually, and some annually. The frequency does not appear to be as important as the fact of doing it. Some groups reported that their members tended to lose interest and felt unprepared to speak to others when the only training they had was their initial instruction. They needed to have the information refreshed and re-validated.

Most follow-up training is handled internally, by local individuals, but it can also come in other forms. Camps are a favourite method for updating skills and information. These may be initiated by the parent organisation or by another organisation. The Ministry of Health, local health departments and various NGOs offer camp experiences for peer educators, although they may not be marketed in that way. They are usually healthy living camps, fun summer camps with an HIV focus, or drama camps. Children First and the Portland AIDS Committee are two NGOs mentioned specifically by others as offering camp experiences which can serve as follow-up training opportunities.

Sometimes, camps or workshops focusing on other topics can provide new skills to, and enhance the creativity of, peer educators. Workshops on such topics as child rights, careers, environmental protection and awareness were cited by peer education groups as avenues providing new tools and new perspectives to peer educators, which can be used in their HIV/AIDS prevention efforts. Church or faith-based camps can also be a good source of ideas, knowledge or skills for peer educators.

TRAINING RESOURCES
While many groups develop resource material for training their new peer educators, in most cases, this is combined with materials developed by others.

Some resource material used by peer education programmes has been developed by the Jamaica Red Cross, The National HIV/AIDS/STI Programme (Ministry of Health), Children First, Youth.now, the Peer Counsellors Association of Jamaica, Advocates for Youth, Addiction Alert and the Portland AIDS Committee. Contact information for all of these organisations is listed at the end of this guide.

Information on local HIV/AIDS statistics, experiences of persons living with HIV/AIDS, and commonly held myths or misinformation on HIV/AIDS is generally researched or developed by each group so that training is tailored to the specific area in which the peer educators will be working.

RELATIONSHIP WITH SPONSORING GROUP
The connection between the parent organisation and the peer educator is almost always considered close, with peer educators being identified as “members” of the organisation. However, the relationship differs in some instances. In one case, some peer educators are paid staff, while others are considered “friends” of the organisation, but are not members. This is especially true of a group, like Jamaica AIDS Support, which is not a member-based organisation.

Some groups, like Jamaica Red Cross, Jamaica AIDS Support and Youth.now, have varied relationships with the different groups of peer educators they have trained. The Red Cross, for example, is a major
provider of peer education training and considers those groups for whom it provides this service as simply “friends” of the organisation. It has however its own core group of peer educators who are Red Cross members.

**LEVEL OF ADOLESCENT PARTICIPATION**

In some organisations, the youth themselves are involved in planning and designing the programmes. Another group noted that the youth “keep us current with language and trends,” and thus contribute to the programmes, but do not develop or design them.

One organisation said the youth develop their own ideas for projects, do most of the legwork associated with projects and carry out recruitment, while another emphasised that “Every single activity is planned, organised, implemented, controlled and evaluated by youth members.”

In terms of empowering youth, the best practice was expressed by one agency which stated that peer educators were “an integral part of each of our projects.” If this integration goes in both directions (with adults as an integral part of the peer education projects and peer educators as an integral part of the adult projects), this “best practice” of integration becomes the “very best” practice.
Useful Tips

MONITORING & EVALUATION

All programmes have found it easier to monitor and evaluate individuals, rather than the overall programmes. Most have not even attempted to evaluate the programme’s effectiveness, assuming that peer to peer communication will automatically bring about good results.

Monitoring and evaluation can be divided into two segments:

1. Monitoring and evaluating the peer educators, themselves, and their skills and knowledge; and

2. Monitoring and evaluating the overall effectiveness or impact of the peer education programme.

Even when monitoring and evaluating individuals, most groups tend to use informal methods, usually with one peer listening to another and learning and correcting as they give information. Sometimes the adult co-ordinators do this type of informal monitoring of the skill and knowledge of their peer educators.

Some programmes do have monitoring forms or procedures for their peer educators. One group has tried looking at related figures or indicators such as the number of referrals to guidance counsellors or to health centres. Another group has formal performance appraisals and a system of supervisors for its peer educators, but it also uses feedback from others to evaluate the effectiveness of its peer educators.

In some programmes, members keep written records of their activities and use these to highlight what worked well and what didn’t. This is an effective method for evaluation, as it helps to establish objective criteria and to provide structured feedback to the young people, as well as providing valuable information to the adult group. With this type of system, it is also easier to see where training, planning, and other needs lie.

Keep written or audio visual records of activities as an effective evaluation tool.

INCENTIVES

Peer educators are usually volunteers, so payment is not generally an incentive for young people to become peer educators or to remain in the programme. Many programmes have found it helpful, however, to provide some sort of reward or recognition to keep young people interested in the programme and to help cover the volunteers’ expenses.

A popular incentive is the periodic hosting of parties or fun events for the peer educators. These are not extravagant affairs, but are enough to show that their work is appreciated.

In some programmes, the organisation takes care of travel and food expenses during peer education volunteer time. A few groups may give a stipend to some peer educators (up to J$1,500, depending on the event), and provide accommodations, if the event requires an overnight stay.

One group is obtaining group T-shirts and will use these as an incentive for peer education services. The same group is also looking at small gifts – HIV/AIDS pins, pens or flashlights – to reward its peer educators. Criteria for receiving such gifts are being developed.

The adult group that sponsors this peer education programme has also initiated a competition in which peer educators are grouped into teams and work for a year towards points. The youth themselves have suggested the criteria for winning points, which include activities such as participation in walk and talks, bringing new members to the meetings and helping train newer members. The peer educators have responded enthusiastically to this incentive programme and the team which earns the most points will be awarded a trophy at the organisation’s annual general meeting.
Sometimes simply being part of an active peer education organisation can have its rewards. While they are not usually intended as incentives, some peer educators see the opportunities offered by the parent group as a form of payment for service. Youth are often taken to hotels inside or outside of their own parish, have meals in nice restaurants, meet interesting people, appear on radio or television, and attend events they would not otherwise participate in. The youth appreciate these benefits and often are motivated to work hard to be given more opportunities of this nature.

Traditional and creative incentives can help peer educator retention:
- money for time spent, travel expenses
- food
- parties, trips, treats
- T-shirts, pins, pens, books
- certificates, trophies
- participation in workshops
- meeting celebrities
- travel

KEEPING YOUNG PEOPLE INVOLVED

There is wide variation in peer educator retention. Some established programmes have 10-year veterans, while others say peer educators move on after only a few months. Some people never return after training, while others stay committed for years. Many groups have found that commitment of peer educators depends largely on the individual and his or her interest in or affiliation with the cause, as well as the demands of time, work, school and family life.

In most cases, it is the work itself that keeps people committed. The association with other, like-minded young people is also a strong attraction for keeping peer educators committed.

Some programmes/organisations have received media exposure for their peer educators and this is one reason some young people remain involved. This is especially effective when it is television exposure. There are also opportunities for peer educators to receive internships with various organisations, attend special workshops, learn career skills, travel to places they would not otherwise know, and gain respect in their community and beyond. Some young people find these very compelling reasons to continue working in peer education.

The main beneficiary of peer education programmes may be the peer educator
Some people who have been working with peer education programmes for many years believe that contrary to what is expected in peer-to-peer programmes, the number-one beneficiary of peer education programmes is the peer educator. The young people usually learn a great deal about reproductive health and are exposed to training which contributes to their personal and social development. Because of this, organisations need not feel disappointed if some peer educators leave the programme soon after training. Their efforts were not wasted as they have contributed to the body of informed young people who may continue educating others, whether affiliated with a formal programme or not, and who may make better life choices as a result of their exposure to the HIV/AIDS peer education training.

**NETWORKING**

Networking is an essential element in most peer education programmes. Whether it is for training, to share human or physical resources, or to compare lessons learnt and best practices, the groups find it helpful to work with other peer educators and other HIV/AIDS-related agencies, such as the Jamaica Network of Sero-positives (JN+) and the Centre for HIV/AIDS Research, Education and Services (CHARES). (See the directory at the end of this report for a more extensive listing.)

**SUCCESS FACTORS**

Many lessons can be learned by looking at the factors some of the longest-running peer education programmes in the country have cited as contributing to their success:

- The peer educators are dedicated individuals
- Meetings are interesting and fun
- Peer educator groups are close knit
- Peer educators are motivated by parental/adult interest, support and commitment
- The interactive nature of the training and presentations – through games and open fora for self expression – energises participants and helps them “buy into” the key messages
- Adults’ willingness to work with youth on their terms and within their schedules makes youth feel important and a part of the solution

Other factors contributing to success:

- Availability of funding
- Perseverance (consistency and commitment)
- Provision of additional training, refresher courses and updates to recruits
- Provision of incentives to recruits
- Involvement in, or opportunities for meaningful participation in, the wider programmes of the parent organisation or sponsoring agency

**OBSTACLES TO SUCCESS**

The groups surveyed cited these specific obstacles in implementing peer education programmes:

- Lack of a good peer education model (which is the very purpose of this report!!)
- Failure to clearly define the roles of peer educators and the programme’s expectations of them
- Lack of follow-up training
- Unwillingness or inability of adults (especially adults in the parent NGO) to work with youth and make them feel important and part of the solution
- High ‘turn-over’ rate of volunteers
- Insufficient peer educators to meet needs/demands
- Lack of time on the part of some volunteers
- Lack of funds
- Lack of adult support
- Financial constraints make it difficult for some peer educators to travel, even to areas within their own parish
- Inadequate condom supply, especially female condoms and lubricants
- Lack of publicity on peer education opportunities
- Non-institutionalisation of peer education in schools
Like many initiatives targeting and working with young people, adolescent peer education has few hard and fast rules.

**FEEDBACK**
Exchanging information is an ideal method for improving programmes. If you have a peer education programme that has had some successes (or even failures) or experiences that you feel can help others learn about or improve their peer programmes, please let us know so we can share them with others. If you have comments on this guide, let us know those, as well. Contact us at:

**National AIDS Committee,**
2-4 King Street,
Kingston
Tel: 967-1100
Fax: 967-1280
Email: info@nacjamaica.com
Website: www.nacjamaica.com

Nevertheless, it is helpful to share ideas, concerns and practices, and to focus on what works well, so that others can duplicate them in their efforts to have a positive impact on the lives of our younger generation.

By providing some best practices and suggestions for developing successful peer education programmes, the National AIDS Committee (NAC) and UNICEF hope to help organisations establish workable common approaches to peer education in Jamaica. This can only strengthen the programmes now in existence and improve the chances of success for those that might be developed in the future. This common approach can give structure and stability to the peer education strategy in the country. Ultimately, the ones who will benefit will be our young people.
APPENDIX A

BASIC STEPS TO PLANNING/INTRODUCING A PEER EDUCATION PROGRAMME

**Start**
- Consult young people
- Decide on the programme’s objective:
  - who will the programme reach and how?
  - what type of peer educator should be trained?

**Plan**
- Talk to others who have a peer education programme
- Review resources (like this guide!)

**Recruit**
- Decide on:
  - selection criteria and process
  - partnerships & networks – with whom?

**Train**
- Decide on:
  - learning objectives & outcomes
  - who will do the training
  - what will be the duration & content of the training
  - resource materials
  - incentives
  > Prepare (venue & resource persons)
  > Conduct training
  > Evaluate skills and knowledge gained
  > Convene graduation

**Supervise**
- Supervise peer educators’ activities
- Provide follow-up training & support

**Monitor & Evaluate**
- Evaluate impact and overall effectiveness of the programme
- Provide opportunities for feedback:
  - Are objectives being met?
  - If not, what can be done differently?

**Sustain**
- Continue to recruit and train
- Keep the young people involved!
APPENDIX B
SAMPLE WORKSHOP SCHEDULE
FOR PEER EDUCATION

A workshop setting often works well for either training peer educators or for youth to share information with their peers. This sample schedule may be useful in organising your own workshop.

Session: Community Attitudes to HIV

Objective: To help peer educators explore community attitudes to HIV and determine whether they are supportive to persons living with HIV/AIDS (PLWHA)

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<tr>
<th>Time</th>
<th>Activity</th>
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<tr>
<td>15 min</td>
<td>Introduction of participants</td>
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<tr>
<td>5 min</td>
<td>Set ground rules</td>
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<tr>
<td>30 min</td>
<td>Skit or drama to illustrate ‘actual’ community attitudes to HIV (prepare &amp; act)</td>
</tr>
<tr>
<td>30 min</td>
<td>Discussion on the skits</td>
</tr>
<tr>
<td>BREAK</td>
<td></td>
</tr>
<tr>
<td>30 min</td>
<td>Involve participants in drama presentations illustrating alternative ‘ideal’ attitudes</td>
</tr>
<tr>
<td>45 min</td>
<td>Myth and fact exercises around beliefs or attitudes to PLWHA</td>
</tr>
<tr>
<td>10 min</td>
<td>Evaluation</td>
</tr>
<tr>
<td>10 min</td>
<td>Closure</td>
</tr>
</tbody>
</table>

SAMPLE TRAINING EXERCISES FOR PEER EDUCATION
The following may also provide you with useful ideas on the kinds of activities that you can do when training your peer educators.

EXERCISE: SAFER SEX
Objectives: To help peer educators
• understand behaviours that put people at risk for contraction of a sexually transmitted infection (STI)
• identify ways of avoiding risks – e.g. abstinence, condom use
• develop sexual decision-making and assertiveness skills
• learn the proper application of condoms
• understand how drugs and alcohol can put persons at risk

Minimum Direct Contact Time: 60 minutes

Teaching Strategies:
This session may be presented using strategies such as presentation, group work, demonstrations, role-play, drama and questions & answers

Materials:
101 Ways to Say No; 101 Ways to Make Love without having Sex; male and female condoms; penis models; flip chart; markers.

Activities
• Ask participants to explain what they know or understand people get out of sex; list these points
• Ask them if they can think of anything else that can produce these same outcomes; list these as well
• Discuss the reasons why someone may need to choose the alternatives
• Ask participants to list as many sexual activities as they can and write them on a sheet of newsprint
• On another sheet write HIGH RISK, SOME RISK, NO RISK in 3 columns
• Ask the group to identify which activities can expose them to HIV infection and which are safe; list them under the appropriate ‘risk’ columns
• Help them to correctly place them by pointing out basic facts about HIV transmission
• Demonstrate practical methods to reduce risk in the activities in the ‘high risk’ or ‘some risk’ columns
• Facilitate gender-sensitive role plays on ‘boys’ and ‘girls’ delaying sex
• Conduct condom use demonstrations
### APPENDIX C

**PEER EDUCATION CONTACTS**

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Address/Location</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Addiction Alert</strong></td>
<td>57 East Street, Kingston</td>
<td>Tel: 967-3777-8, Fax: 967-3779</td>
</tr>
<tr>
<td><strong>AIDS Prevention and Education Committee (APEC)</strong></td>
<td>12 King Street, Spanish Town, St. Catherine</td>
<td>Tel: 981-8148</td>
</tr>
<tr>
<td><strong>ASHE Performing Arts Group</strong></td>
<td>16 Waterloo Road, Kingston 10</td>
<td>Tel: 960 2985, Fax: 928-4064, Email: <a href="mailto:asheperforms@cwjamaica.com">asheperforms@cwjamaica.com</a></td>
</tr>
<tr>
<td><strong>Campus Crusade for Christ/Youth at the Crossroads</strong></td>
<td>11 Earls Court, Kingston 8</td>
<td>Tel: 931-4269, Fax: 931 4624, Email: <a href="mailto:ccj@cwjamaica.com">ccj@cwjamaica.com</a></td>
</tr>
<tr>
<td><strong>Centre for HIV/AIDS Research, Education and Services (CHARES)</strong></td>
<td>University Hospital of the West Indies, Mona, Kingston 7</td>
<td>Tel/fax: 977-6920</td>
</tr>
<tr>
<td><strong>Children and Community for Change (3C)</strong></td>
<td>1a Mandela Terrace, Kingston</td>
<td>Tel: 758-5970, Fax: 978-7876</td>
</tr>
<tr>
<td><strong>Children First</strong></td>
<td>9 Monk Street, Spanish Town, St. Catherine</td>
<td>Tel: 984-0367, 984-2839, Fax: 984-2839, Email: <a href="mailto:kidz@cwjamaica.com">kidz@cwjamaica.com</a></td>
</tr>
<tr>
<td><strong>FamPlan (PPFC/CIDA Reproductive Health Project)</strong></td>
<td>14 King Street, P.O. Box 92, St. Ann’s Bay, Kingston</td>
<td>Tel: 972-2515, Fax: 972-2224, Email: <a href="mailto:famplan@cwjamaica.com">famplan@cwjamaica.com</a></td>
</tr>
<tr>
<td><strong>Girl Guides Association of Jamaica</strong></td>
<td>2 Waterloo Road, Kingston 10</td>
<td>Tel: 926-6277/6507, <a href="mailto:girlguides@cwjamaica.com">girlguides@cwjamaica.com</a></td>
</tr>
<tr>
<td><strong>Hope for Children Development Co.</strong></td>
<td>74 Spanish Town Road, Kingston</td>
<td>Tel: 757-3909-10, 923-3594, Fax: 757-5910, Email: <a href="mailto:hcdc@cwjamaica.com">hcdc@cwjamaica.com</a></td>
</tr>
<tr>
<td><strong>Hope Worldwide Jamaica</strong></td>
<td>7 Oxford Park Avenue, Kingston 5</td>
<td>Tel: 754-4446, Fax: 754-4012, Email: <a href="mailto:hopeja@cwjamaica.com">hopeja@cwjamaica.com</a></td>
</tr>
<tr>
<td><strong>Ionie Whorms Inner City Counselling Centre</strong></td>
<td>Fletchers Land Community Centre, 155 Church Street, Kingston</td>
<td>Tel: 948-2948, Email: <a href="mailto:iwicc@yahoo.com">iwicc@yahoo.com</a></td>
</tr>
<tr>
<td><strong>Jamaica Association for the Deaf</strong></td>
<td>Hope Estates, Papine, Kingston</td>
<td>Tel: 927-1098, Email: <a href="mailto:jdeaf@cwjamaica.com">jdeaf@cwjamaica.com</a></td>
</tr>
</tbody>
</table>
Western Society for the Upliftment of Children
Shop #19
Filandy Centre
26 Miriam Way
Montego Bay PO 2
Tel: 952-3377
Fax: 979-9879
Email: westkidz@cwjamaica.com

Women’s Centre of Jamaica Foundation
42 Trafalgar Road
Kingston 10
Tel: 906-1606
Fax: 960 7551
Email: womenscentre@mail.infochan.com

Youth Opportunities Unlimited
4-1/2 Camp Road
Kingston
Tel: 759-2080
Fax: 759-2081
Email: You@cwjamaica.com

*Contact information for other Parish AIDS Committees can be located on the National AIDS Committee’s website: www.nacjamaica.com
APPENDIX D
SURVEY INSTRUMENT USED TO COLLECT DATA FROM PEER-TO-PEER PROGRAMMES
(2004)

Organisation:
Person completing survey
(name and title):
Contact information:

1. In what ways do you use peer educators in your organisation?
   - Face-to-face talks with peers (one-on-one, small groups, etc.)
   - Telephone counselling/education
   - Drama and other art forms
   - Community walk and talks
   - Presentations to schools, churches, civic groups, etc.
   - Training other peer educators
   - Other – please describe

2. Who are the peers of your peer educators?
   - Adolescents, in general
   - Specific groups of adolescents - please name them
   - Commercial sex workers
   - Prisoners / juveniles in custody
   - Sexual minorities - please name them
   - Other – please name them

3. Do you call your peer educators by another name?
   - Yes
   - No
   If yes, please specify:

4. If your peer educators are also peer counsellors, peer supporters, or any other type of peer something, please specify and describe the differences in roles.

5. If your peer educators are adolescents (ages 10 – 18) do you require parental consent to facilitate their participation?
   - Yes
   - No

6. How are your peer educators initially trained in HIV issues?
   - We train them using materials we have developed.
   - We train them using materials developed by other organisations. Please tell us what materials you use and whose materials they are here:
   - Our organisation trains them using a mix of our own materials and materials developed by other organisations. Please tell us what materials you use and whose materials they are here:
   - They are sent to training done by another organisation. Please tell us who here:

7. About how many hours of initial training do your peer educators receive?

8. What topics are included in your initial training?
   - What the letters stand for
   - Routes of HIV transmission
   - World/regional/national/ local statistics (underline which ones)
   - Psycho-social effects of HIV/AIDS
   - Stigma/discrimination
   - Gender factors
   - Socio-economic factors
   - Cultural factors
   - Physical development
9. Are your peer educators trained in other types of skills, such as drama or dance? Please describe what type of training, who conducts it, and where the materials originate.

10. How do you handle follow-up support, training and updating?
- We use regular group meetings to do updates (please specify how often).
- We periodically send peer educators to other people's training (please specify whose and how often).
- We periodically hold in-house training (please specify how often).
- Other – please describe

11. What is the relationship between your organisation and the peer educators?
- They are members of our organisation.
- They are considered “friends” or associated with the organisation, but are not necessarily considered members.
- They are trained by us and return to other organisations, so there is no on-going relationship.
- Other – please describe

12. How do you recruit new peer educators?
- Work with schools to find potential recruits.
- Work with other organisations to find potential recruits – please name the organisations.
- They come to us and request to be peer educators.
- Recruit from the general population.
- Other – please describe

13. What criteria do you use to include them in your peer education programme?
- School grades
- Leadership ability – please give some specifics
- Their expressed interest
- Their willingness to learn and follow our schedule of activities
- Their communication skills
- Other – please describe

14. Do you have specific expectations or requirements of peer education, such as number of hours, number of presentations, etc?
- Yes
- No
15. Do you monitor and/or evaluate what your peer educators are accomplishing?
- Yes
- No
If yes, please give specifics.

16. Do your peer educators receive any type of incentives or assistance from your organisation?
- Stipend – please specify average amount
- Travel expenses
- Food expenses
- Periodic parties or fun events
- Discounts at retailers
- Health benefits – please specify
- Other – please specify

17. If yes, briefly describe why you give your peer educators incentives or assistance.

19. Do you have specific activities to encourage them to remain active? Please explain (including how effective they have been).

20. Do you network with other groups of peer educators? With other HIV-oriented organisations? If so, please name them and briefly tell us how you interact or partner with them.

21. What are the factors contributing to the success of your peer education programme?

22. What are the obstacles to the success of your peer education programme?

23. Do your peer educators participate in any of the following in your organisation? Please check with an ‘X’ and explain how in the comments column.
- Programmes for “adults”
- Programmes for “adolescents or youth”
- Planning/design
- Implementation
- Monitoring
- Evaluation
- Financial support (fundraising, proposal writing, etc.)

Comments:

24. What else should we know about your peer education programme?
This book was developed and published with financial and technical assistance from UNICEF, with financial support from CIDA.