Enablers and barriers in the implementation of evidence based RSE resources in an Irish youth work setting: A case study of the REAL U programme

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Context

- RSE essential to ensure young people can cultivate positive relationships with peers and prospective partners & protect themselves from unplanned pregnancy, STI’s, abuse and exploitation.

- While 86% of 18-25 yr olds have received RSE, school based RSE tends to leave unanswered questions in relation to emotions, sexuality and relationships (CPP, 2012)

- Youth dev. progs have a role to play in providing RSE – recognising influence of education and socio-economic factors (Fullerton, 2006)
Evidence based practice in social care

- Evidence based practice...acknowledges the need for resources to ‘help practitioners actually use and apply responsibly and reliably in practice the products of research’ (Proctor & Rosen, 2008, p. 287)

- But often met with resistance from practitioners

- Not common in youth work distinguished by its informal nature – learning occurs through ‘the twists and turns of conversation’ (Coburn, 2011)
Context: Foróige

- Ireland’s largest youth organisation
- Core philosophy – to enable young people to involve themselves consciously and actively in their own development and in the development of society
- Over 56,000 young people engaged annually
- Wide range of youth clubs, programmes and projects

Best Practice Unit (BPU) established to develop evidence informed resources to support staff and volunteers in meeting the needs of young people
REAL U Programme

- Evidence based relationships & sexuality programme for delivery in youth work settings
- Funded by CPA
- 217 people trained in delivery (110 Foróige)
Mixed methods study (Brady et al, 2014) found:

- REAL U is a detailed, engaging and effective resource which is ideally suited to delivery in non-formal education settings

- Programme is seen as effective in engaging young people, responding to their needs and impacting on their knowledge and attitudes in this area

- What factors facilitated or constrained implementation of this evidence based resource in youth work settings?
What supports and constrains implementation of the programme?

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1. Robust process of development

Included:

- Literature review
- Programme logic model, learning outcomes and curriculum
- Pilot testing of draft resource
- Programme adjustment based on feedback
- Implementation (training & support)
- Evaluation
2. Excellent design

Easy to use, adaptable

‘I love the programme. I think it’s so important. I think it’s one of the best programmes. Visually, it’s easy to use. It’s practical, the theory is so relevant to young people, the scenarios are so relevant.’

(Focus Group 2)
3. Responsive to the needs of young people

- Young people found the programme to be relevant, fun and insightful
- Participants said that it made them better informed and more aware of the consequences of their actions

‘Word of mouth’ created a strong demand in many areas
It's nearly 6 months since you did REAL U, has it made a difference to you?

Yes, we're more aware of the different things you can get and we're more aware of like the contraception you can get and we know like not to have a baby because it's just so much stress. We know how to act if something, a situation happens...... like for example, if your friends were fighting and you were in the middle of it, how to sort it out.

(Focus group 3, girl, 14)
4. Strong staff buy-in

- Relieved staff of the burden of finding & assembling relevant research & practice

- Provides a framework, rationale and credibility for the work undertaken

(Plath, 2014)
e.g. Gives them confidence to address difficult topics, such as pornography, STIs, contraception and domestic violence

‘The REAL U programme is an excellent addition to my work, it is clear, concise and user friendly. It covers all the areas I need in my work. It has given me the skills to tackle subjects such as pornography which I never thought I would be able to facilitate a group on’ (Survey respondent, external agency).
5. Organisational context

- Delivery much higher among Foróige staff (73% vs 33% other agencies)

- Strongest concentration of delivery in Blanchardstown, North West and East regions of Foróige

- Training in programme does not guarantee implementation
6. Resource cutbacks

- 62% of staff delivered with fidelity, 38% adapted it.

- Service cutbacks impact on delivery – made programme fidelity more challenging.

- Too much adaptation may diminish ‘quality’ and coherence.
Conclusion

- Implementation of evidence based health promotion resources in youth work settings can be very successful.

- Critical factors in ensuring success include a robust process of development, good design, relevance to young people and staff buy-in.

- However, an excellent product may be limited in terms of its ‘reach’ and ‘impact’ due to organisational context & resource issues.
References


