MASSEY UNIVERSITY
TE KUNENGA KI PŪREHUROA
UNIVERSITY OF NEW ZEALAND

FOLLOW UP REPORT OF THE BODYSAFE PROGRAMME

2016

Collaboration between SHORE and Whariki Research Centre, Massey University and Rape Prevention Education - Whakatu Mauri

ACKNOWLEDGMENTS

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Our deepest gratitude goes to SHORE and Whariki Research Centre (Massey University), in particular to Dr. Pauline Dickinson, for the continued patience, support and on-going oversight provided during the entire process.

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Debbi Tohill
EXECUTIVE DIRECTOR

RAPE PREVENTION EDUCATION

Rape Prevention Education (RPE) has delivered the Body*Safe* programme to Auckland secondary school students since 2005. The programme's goal is to reduce the incidence of sexual violence victimisation and perpetration within adolescent populations. We work with young people to promote respectful sexual relationships and prevent sexual violence – and ultimately to reduce the future incidence of sexual violence in New Zealand.

KEY EVALUATION FINDINGS

- The BodySafe programme continues to be implemented to a high standard.
- Students understand the content.
- Students relate to the BodySafe educators.
- Students feel comfortable discussing content.
- Teachers are supportive of the programme.
- The programme complements the existing Health curriculum.
- The programme now consists of four sessions instead of three and this enables a more student-directed and less rushed programme.
- Over 74% of students are able to talk about sexual consent.
- Over 85% can identify when people can't give sexual consent.
- Over 86% can recognise what sexual harmful behaviour looks, feels and sounds like.
- 63% of students felt comfortable talking about safe sex.
- 90% of students knew what respectful communication looks like.
- 80% of students were able to recognise what disrespectful relationships look, feel and sounds like.
- 88% of students understood the impact of child sexual abuse.
- 88% of students understood why people may not tell others they had experienced sexual abuse.
- 68% of students identified their friends as their source of support.
- 53% of students identified their school counsellor as their source of support.
- Between 11% and 26% of students identified other sources of supports, for example, dean, subject teacher, school nurse, doctor.
- 60% of students identified Youthline as a source of support.
- Suggestions for improvement by students included consistent educators, more sessions, more real life scenarios and videos.

1.0 INTRODUCTION

This report provides a snapshot of the quality (process evaluation) and success (outcome evaluation) of the BodySafe programme. The report focuses on data collected from four Auckland secondary schools. RPE was supported by The SHORE and Whariki Research Centre (Massey University) to undertake the evaluation between October and December 2016.

1.0 BACKGROUND AND PROJECT DESCRIPTION

The Body*Safe* programme aims to reduce the incidence of sexual violence victimisation and perpetration within youth populations. The goal is to work with young people to promote respectful sexual relationships and prevent sexual violence and ultimately to reduce the future incidence of sexual violence in New Zealand.

RPE has delivered the programme to Auckland secondary school students since 2005. Body*Safe* is funded by a contract Ministry of Health and support from a range of trusts and charities.

Sexual violence is a serious issue for young people in New Zealand. It was been repeatedly estimated that at least one in five females and one in ten in males will experience some form of sexual violence directly in their lifetime, with a large number experiencing it before the age of 16 (Clark, Moselen, & Dixon, 2015) Unlike other forms of violence, sexual violence permeates all levels of human societies equally, regardless of socio economic status (Fergusson, 1999).

The programme is mostly delivered over four separate 45-60 minute (time determined by school period lengths) modules/workshops to secondary school students (13-16 year olds in Years 9, 10 and 11). The content of the programme is delivered in the following structure:

Module 1 includes:

- Introduction to the programme
- Student safety message and school support services.
- Talking about sex (warm up game)
- Definitions and legal aspects of sexual violence
- Understanding consent
- Boundary cards activity: Identifying sexual violence, consent and respect in sexual situations/relationships. These situations and discussions about prevention surround:
    - Dating relationships
    - Party situations
    - Cyber/technology
    - Alcohol & drug use

- Sexual coercion
- Sexual communication
- Sexual diversity
- Age gaps in relationships
- Teacher/student relationships
- Harmful gender stereotypes & norms
- Sexual bullying

Module 2 includes:

- Student safety message and school support services reiterated
- Group activities/discussions surrounding:
  - Sexual consent and communication in sexual relationships
  - Respect and disrepect
  - Negotiating skills: Getting and giving consent for sexual activity
  - Different types of communication
  - Video that explores 4 steps to consent

Module 3 includes:

Student safety message and school support services reiterated

- Understanding sexual abuse in childhood
- Exploring grooming
- How to talk about sexual violence
- Educator role-play: Friends responding to disclosures of sexual violence
- Helping others who have experienced sexual violence
- Times to tell
- Class brainstorms:
  - Healing from sexual violence
- How sexual offenders can get the help they require
- BodySafe cards get discussed with an explanation of some of the local services and the work that they do.

Module 4 includes:

Student safety message and school support services reiterated

- Understanding the impact of alcohol on consent
- Active by-standing
- Steps to active by-standing
- Video on active bystanding
- Rights and responsibilities
- Barriers and enablers to bystanding

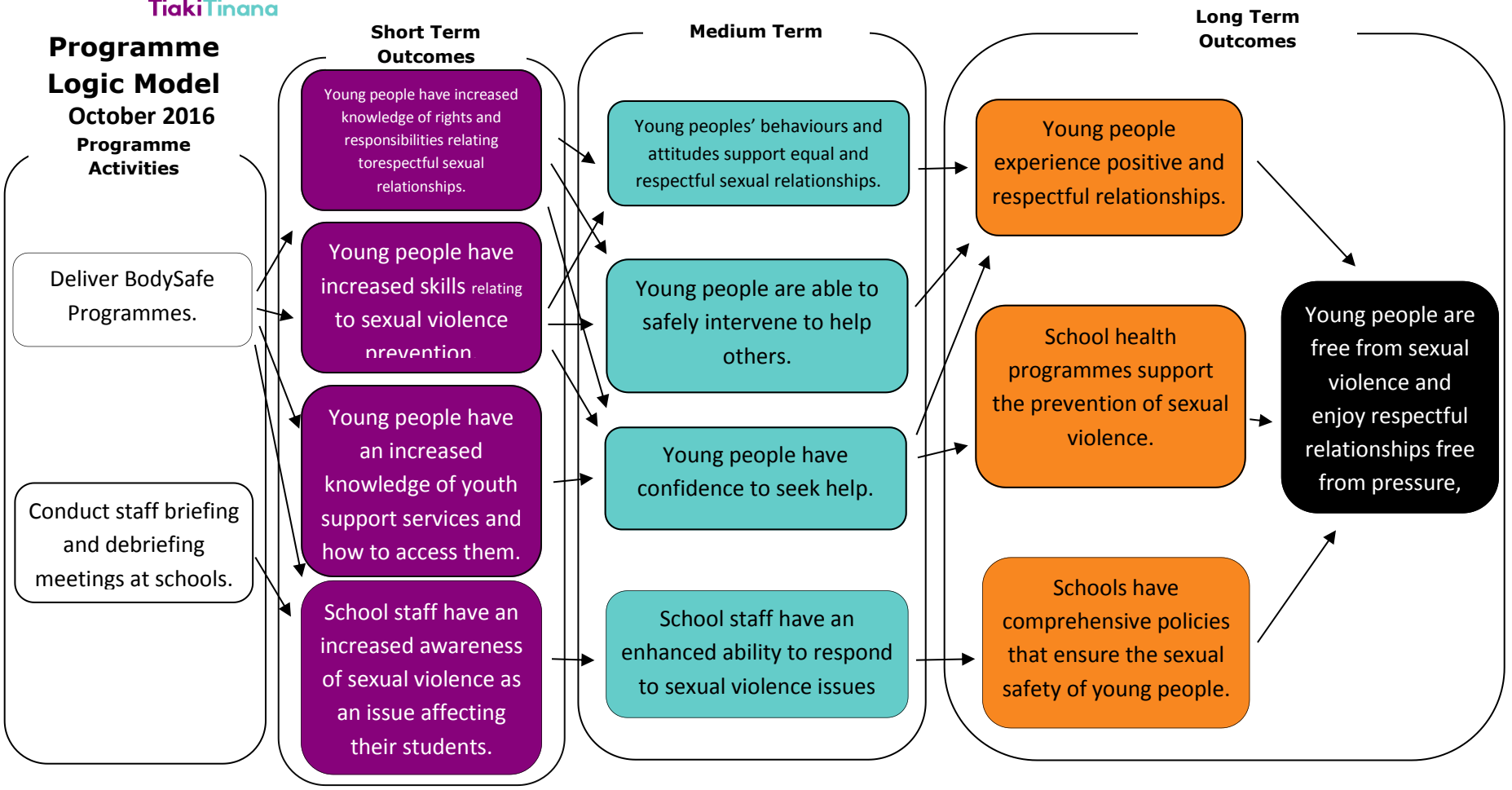
Schools determine how the four modules of the current programme are delivered (i.e., mixed or single gender groups and the age groups the schools want to target).

1.1 PROGRAMME LOGIC

The programme theory, that is the explanation of the way in which the programme is expected to achieve the desired outcomes, is depicted in the logic model for the Body*Safe* Programme. The logic model (Figure 1) is read from left to right and shows the programme activities and intended outcomes, short, medium and long-term. The short term outcomes are directly related to the content of the programme, which include an activity relating to alcohol use and the impact that drinking can have on sexual decision making and sexual safety. Due to this being a small component of a four session programme it would be difficult to claim that there was a strong link to reducing alcohol use among young people. Therefore, a reduction on alcohol use is not included on the logic model.

Given that the Body*Safe* programme is generic for all young people the logic model does not make specific reference to Maori, Pacific, Asian or other ethnic groups. However, the evaluation will include low decile schools, which do have a high percentage of Maori and Pacific young people and has addressed the effectiveness of the programme in achieving the short term outcomes for different ethnic and cultural groups.

Figure 1: *Diagram showing programme logic model*



EVALUATION AIMS AND OBJECTIVES

1.1.1. AIMS

The broad aim of the evaluation is to assess the impact of the Body*Safe* programme to the present time and use this information to inform the monitoring of the programme's effectiveness in preventing and reducing sexual violence experienced by young people in the Auckland region.

1.3 OBJECTIVES

The evaluation objectives are:

Process:

- To assess the quality of the implementation of the Body*Safe* programme

Outcome:

- To assess the extent to which Body*Safe* has had a positive effect on its stakeholders, namely school staff and students/young people who have engaged with the programme.

1.4 EVALUATION DESIGN AND APPROACH

The evaluation is a case study design which draws on participatory methods to measure aspects of the Body*Safe* programme. This includes a detailed, in-depth description and analysis of the project drawing on multiple sources of evidence (DePoy & Gitlin, 1994). The evaluation approach is programme theory driven, participatory and utilisation focused.

1.5 EVALUATION METHODS

The evaluation used a mix of qualitative and quantitative methods which enabled the project to be viewed through different lenses. These methods provided more comprehensive findings and more detailed descriptions of the implementation and quality of the project, as well as any short-term outcomes that were achieved. The quantitative and qualitative findings have been integrated to answer the evaluation questions (Green, Benjamin, & Goodyear, 2001).

1.5.1 PROCESS EVALUATION

The process evaluation describes and documents the quality of the content, design and implementation of the Body*Safe* Programme.
Process evaluation activities included:

- Student questionnaire
- Student focus group discussions.

1.5.2 OUTCOME EVALUATION

The outcome evaluation describes and documents the impact of the Body*Safe* Programme on programme stakeholders. The logic model (Figure 1) shows the intended outcomes (short, intermediate and long-term).

Outcome evaluation activities included:

- Student questionnaire
- Student focus group discussions.

1.5.3 EVALUATION QUESTIONS

Broad evaluation questions

- What is the quality of the content design and delivery of the BodySafe programme.
- How well have the short term outcomes been achieved.
- How could the BodySafe programme be improved?

1.5.4 DATA COLLECTION

Student survey - All students (n=529) in the four schools who participated in the programme.

Focus groups with students — four focus groups were conducted with students in four schools (N=35) six months after receiving the programme.

1.5.5 DATA ANALYSIS

Thematic analyses of the key informant qualitative data were conducted (Braun & Clarke, 2006). Quantitative data were analysed using Excel.

EVALUATION RESULTS

Evaluation participants

Follow up evaluation forms were collected from 529 students across four schools in Auckland who had completed the BodySafe programme from January to June 2016. Participating schools were Epsom Girls Grammar School, Mount Albert Grammar School, Sancta Maria College and Southern Cross College.

Participants reported their ages ranging from 14 to 16 years old. Forty-five percent of participants reported their age as 14, 52% of students reported their age as 15, 1% of students reported their age as 16 and 2% of students chose not to respond to this question.

Seventy-one percent of participants reported identifying as female, 27% reported identifying as male, 0.2% reported identifying as a gender not specified and 0.2% of participants chose not to respond to this question. (Note: three of the schools were co-ed and one school was single gendered female).

Six percent of participants reported identifying as Māori, 15% reported identifying as Pacifica, 29% reported identifying as Asian, 33% reported identifying as Pākeha/New Zealand European, 3% reported identifying as European and 11% of participants reported identifying as an ethnicity not specified. Four percent of participants chose not to respond to this question.

1.0 WHAT IS THE QUALITY OF THE CONTENT DESIGN AND DELIVERY OF THE BODYSAFE PROGRAMME?

**Results from the questionnaires and focus groups have been integrated to reflect the findings below:*

CONTENT:

Students found the ground rules and zone out pages in the booklet useful. They reported they could use it in their lives and felt the programme was delivered at an age appropriate time. The programme was considered by students to be easy to understand and students reported they felt comfortable during the lessons. Students stated the content on alcohol complemented their earlier learnings delivered in their health education classes. Young people reported they 'were sure they knew everything' and were 'glad you guys came' which indicated that the content of the BodySafe programme filled in the gaps in their knowledge. Comments included:

> *'It was fun and learned a few things :)'*
>
> *'It was very educational and I learnt lots of new things that are useful in life'*
>
> *'Interesting, learnt a lot, and I now ready/prepared for anything in the future'*

Ice breakers were used to warm students to the content and one of the first activities is the 'sex word' game. The outcome of this game is to introduce students to different types of penetrative and non-penetrative sex and is used as a lead-in to the definition of sexual violence.

Two of the four sessions of the BodySafe programme focus on consent and this was reinforced through catch phrases four steps to consent and recap activities. It was clear from the focus groups that students had a good understanding of consent and how to negotiate consent. Catch phrases such as 'an enthusiastic yes' were used to help them understand that consent can be expressed in verbal and non-verbal ways. Recap activities that specifically focused on consent were provided at the beginning of each session. Students had to come up with definitions of sexual violence and consent and talk about times when people cannot give their consent and discuss the four steps to consent. The second session on consent has a video component and students found this to be 'very relatable'. Comments included:

> *'I've participated in safe and consensual sexual interaction after your visit. And I had better understanding of what's right and wrong'*
>
> *'I really enjoyed it. Taught me about consent and made me more comfortable talking about sex.'*
>
> *'Good job, learnt a lot about sexuality and consent. Very useful info for the future'.*

The third session focuses on child sexual abuse and help-seeking. Students who participated in the follow up questionnaire were asked to respond to one statement and one question relating to the content of the third session. Participants were asked to

select whether they agreed, disagreed or didn't know about the following statement: "grooming is a process where someone builds trust in order to cause harm"

Forty-one percent of participants agreed with this statement; which is the message delivered throughout the third session. Six percent of participants reported that they disagreed with the statement and 52% of participants reported that they did not know.

Students were also asked to select the times where they would have to tell a trusted adults their friend's secret. They were able to choose from four options which are as follows: "harm to others", "harm to self", "if abuse was still happening" and "all of the above".

Eighty-six percent of students selected "all of the above"; the message delivered throughout the third session. Three percent selected harm to others, 3% selected harm to self and 6% selected if the abuse was still happening.

The fourth session on bystanding has a BodySafe video component and students found this video easy to understand.

A BodySafe booklet is handed out to all students at the beginning of the first session. The content reflects all the learning objectives of the programme and has a local directory of services that students can access for a range of supports that they may need. Most of the students still had their books and some had referred to their booklets in the past six months. A few said that if they needed information they would refer to their books. In addition to the booklet, they were given a help-card with sexual violence specific related services in Auckland. They were able to recall core services mentioned in the help-cards. While they knew where their cards were most did not have it with them.

There were comments about the value of having learning points repeated at the beginning of each session as this helped reinforce student learning.

As well as identifying with the content during the sessions, students reported they were able to discuss this with their parents, families and peers. A few said that if their friends needed help they were confident about sharing information.

DESIGN:

While the four sessions covered key learning objectives, some students stated they would have preferred at least six sessions. A few students considered that while the programme was delivered at an age appropriate time, having sessions on consent could be delivered towards the end of Year 9. They also reported that more in-depth sessions could be delivered in Year 11. Comments included:

> '*It should be done with all classes'*
>
> *'It was good and helpful next timedo it for longer'*

DELIVERY:

The BodySafe programme is always delivered by two educators and ideally there is a gender balance which students appreciated. Most students were able to relate to the

BodySafe educators and remembered their names. They also enjoyed the fact that educators were not from within the school which allowed them to have more open conversations than they could have with their subject teachers. Over the four sessions they reported feeling an increased level of comfort and trust towards the facilitators and the content delivered. The style of delivery was seen to be upbeat and fun and students reported that the educators appeared to know what they were talking about. Comments included:

'It was super duper cool beans! I really enjoyed'

'It was funny and relaxed. A chilled out environment'.

'It was really fun and enjoyable. I felt safe and could learn easily'

2.0 HOW WELL HAVE THE SHORT TERM OUTCOMES BEEN ACHIEVED?

Increased knowledge and skills relating to respectful relationships.

Consent and Sexual Violence

The students were asked to rate their level of agreement with the statements:
"*I am able to talk about sexual consent", "I know when people can't consent" and "I am able to recognise what harmful sexual behaviour looks, sounds or feels like"*

Figure 1 shows that 74% of participants agreed or strongly agreed that they were able to talk about sexual consent as a result of participating in the BodySafe programme.

Figure 1: Participants' level of agreement with the statement "I am able to talk about sexual consent" (N=529)

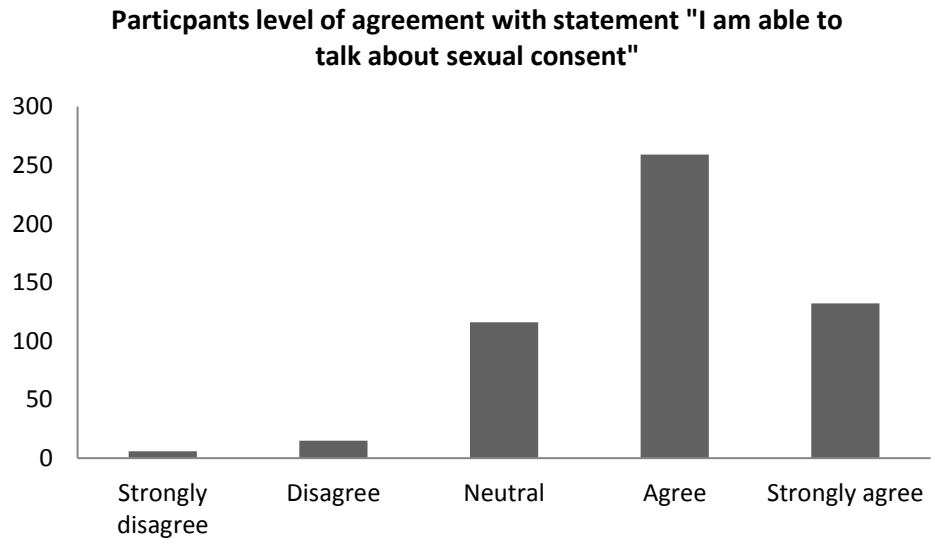


Figure 2 shows that over 85% of participants agreed or strongly agreed that they were able to identify when people can't give sexual consent as a result of attending the BodySafe programme.

Figure 2: Participants level of agreement with the statement "I know when people can't consent"(N=529)

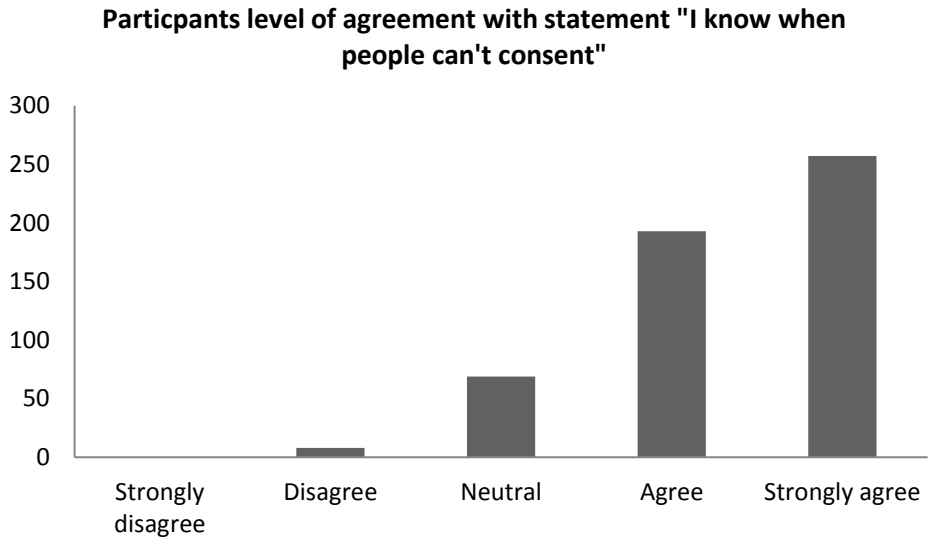
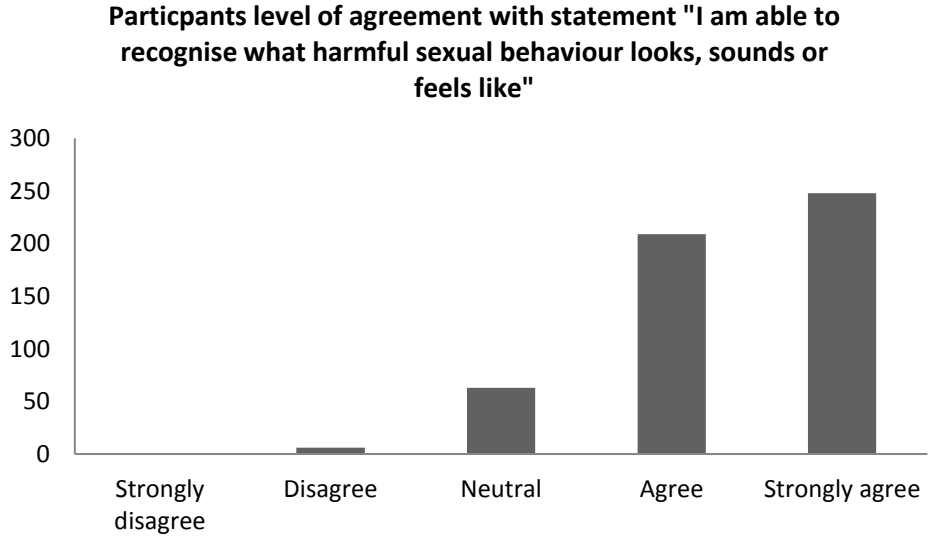


Figure 3 shows that over 86% of participants agreed or strongly agreed that they were able to recognise what harmful sexual behaviour looks, sounds or feels like.

Figure 3: Participants level of agreement with the statement "I am able to recognise what harmful sexual behaviour looks, sounds or feels like" (N=529)



Rights and responsibilities in relating to respectful relationships.

More healthy respectful sexual behaviour

To gauge whether the students felt they had learnt knowledge and skills to conduct respectful sexual relationships, they were asked to rate their agreement with the following statements: “I feel comfortable talking about sex”, “I know what respectful communication looks like” and “I am able to recognise what disrespectful relationships look, sounds or feel like”

Figure 4 shows that 63% of participants agreed or strongly agreed with the statement “I feel comfortable talking about sex”.

Figure 4: Participants level of agreement with the statement “I feel comfortable talking about sex” (N=529)

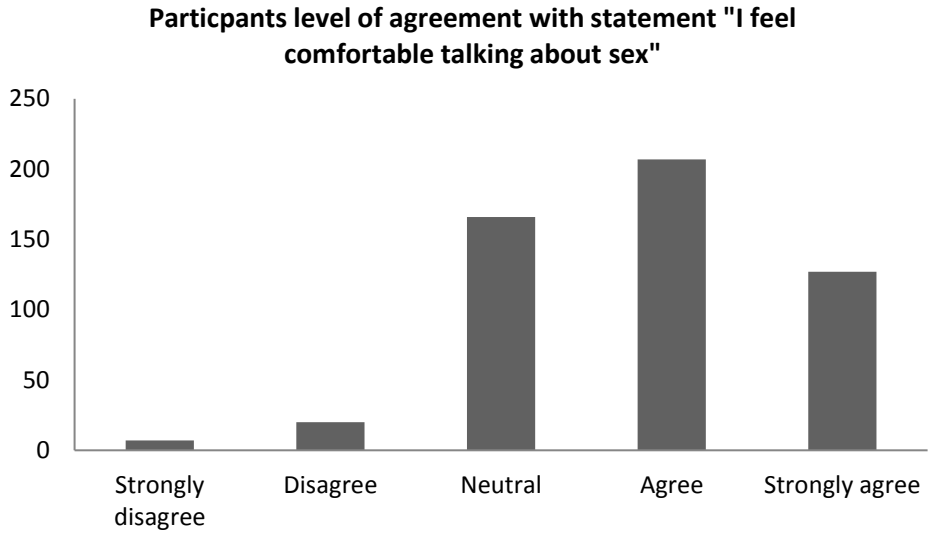


Figure 5 shows that 90% of participants agreed or strongly agreed with that statement “I know what respectful communication looks like”.

Figure 5: Participants level of agreement with the statement “I know what respectful communication looks like” (N=529)

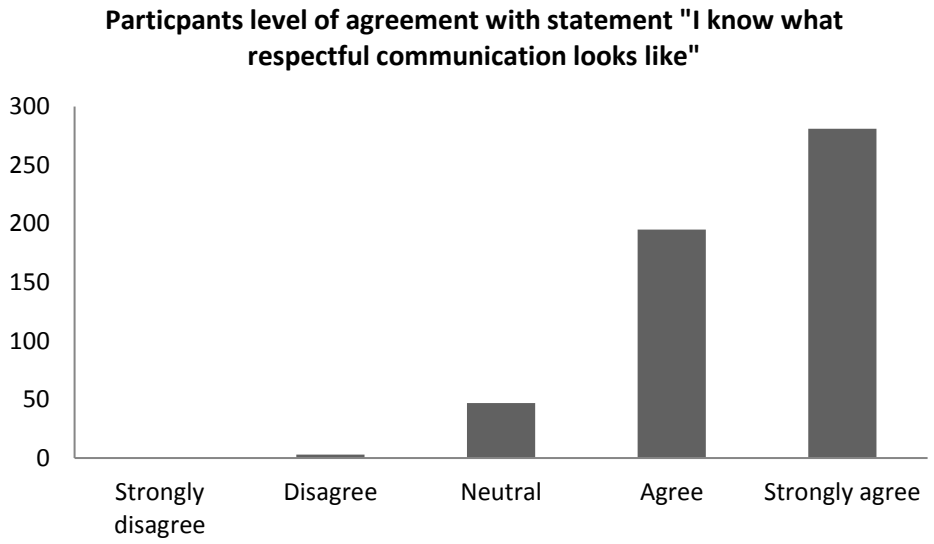
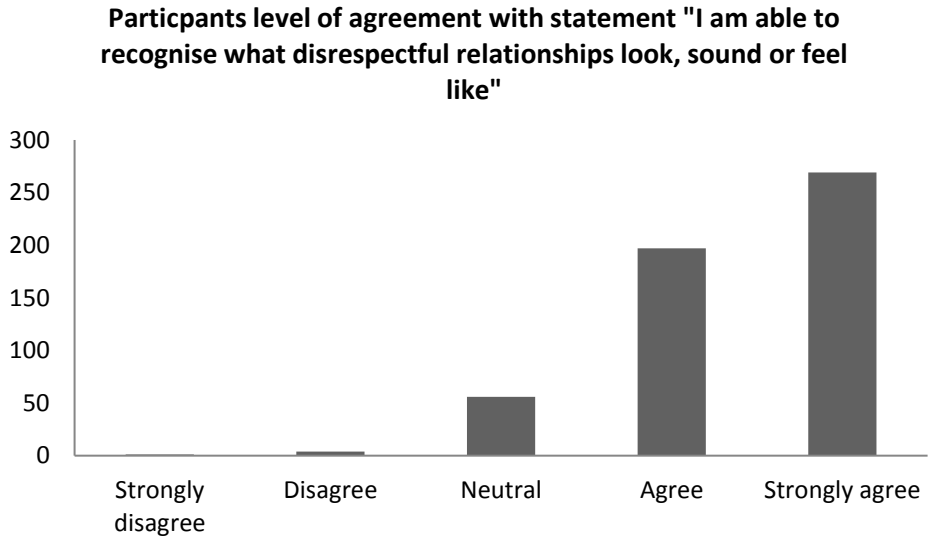


Figure 6 shows that over 88% of participants agreed or strongly agreed with the statement “I am able to recognise what disrespectful relationships look, sound or feel like”.

Figure 6: Participants’ level of agreement with the statement “I am able to recognise what disrespectful relationships look, sound or feel like” (N=529)



Knowledge of youth support services and how to access them

Effects of sexual violence and support and help seeking

Students were asked to rate their level of agreement with the statements “I understand the impact of child sexual abuse” and “I know why people may not tell other that they have experience child sexual abuse”

Figure 7 shows that 88% of participants agreed or strongly agreed with the statement “I understand the impact of child sexual abuse”.

Figure 7: participants’ level of agreement with the statement “I understand the impact of child sexual abuse” (N=529)

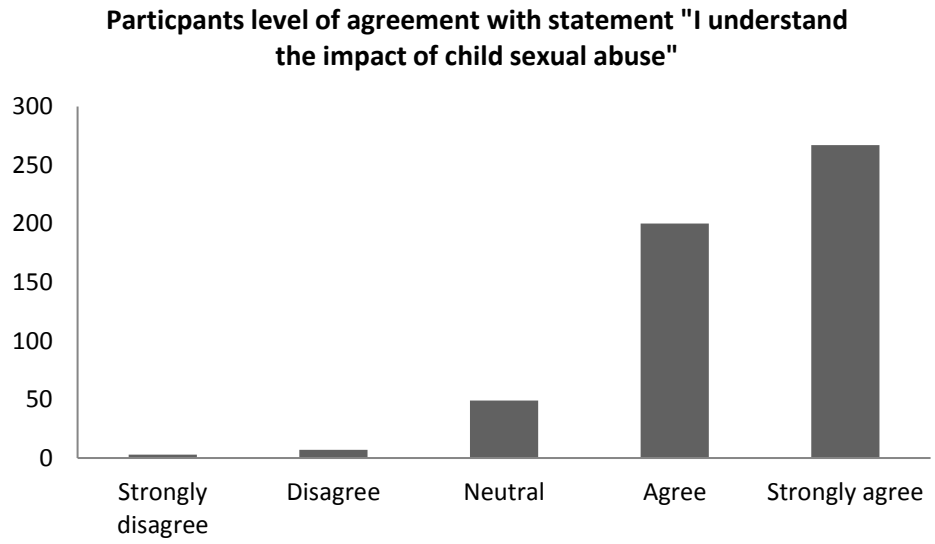
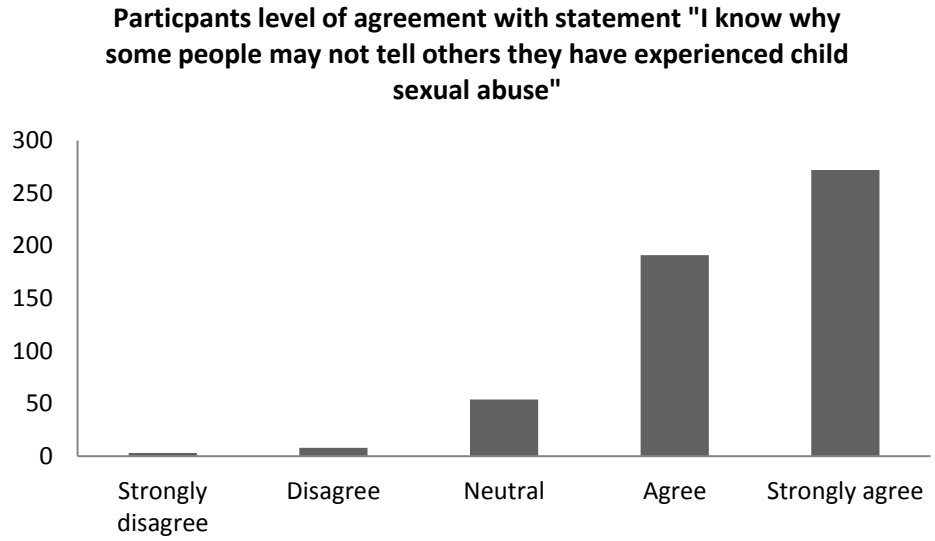


Figure 8 shows that 88% of participants agreed or strongly agreed with the statement “I know why some people may not tell others they have experienced child sexual abuse”.

Figure 8: participants level of agreement with the statement “I know why some people may not tell others they have experienced child sexual abuse” (N=529)



Participants were also asked to select support services inside of outside of their school that they would feel comfortable seeking support from.

Figure 9 shows that 68% of participants identified their friends as a support service that they would access within their school. 53% of participants identified their school counsellor, 26% of students identified their dean, 21% of students identified their Peer Sexuality Support People, 19% of participants identified their form teacher as well as other support services not specified,17% identified their subject teacher, 14% identified their school nurse, 12% identified their school social worker and 11% identified their school doctor.

Figure 9: Participants level of comfort accessing specific services within their school (N=529)

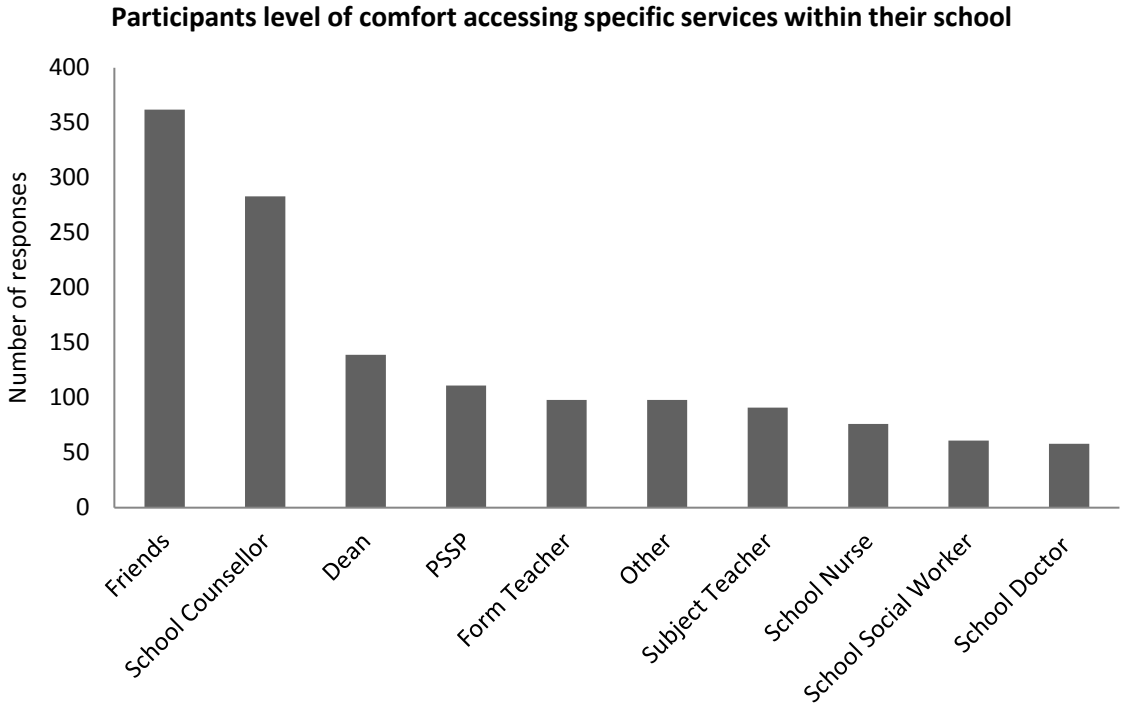
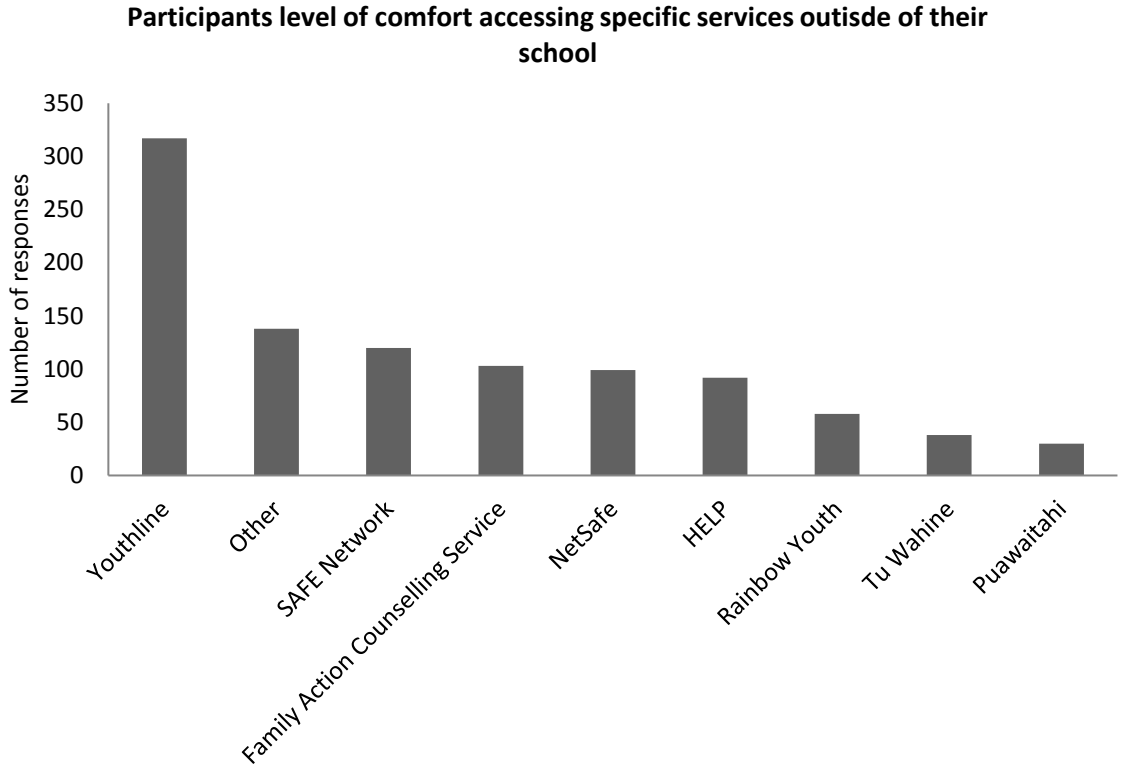


Figure 10 shows that 60% of participants identified Youthline as a service outside of their school that they would feel comfortable accessing. 26% of participants identified a service other than those listed. 23% identified the SAFE Network, 19% identified Family Action Counselling Services and NetSafe. 17% of participants identified Auckland Sexual Abuse Help, 11% of participants identified Rainbow Youth, 7% identified Tu Wahine and 6% identified Puawaitahi as a service outside of their school that they would feel comfortable accessing.

Figure 10: Participants level of comfort accessing specific services outside of their school (N=529)



These overall findings indicate the BodySafe programme is having a positive effect in relation to students knowledge and understanding of what sexual violence is and how they can get help. Help-seeking sources are consistent with current literature where young people feel that they would find it easier to disclose to their close friends, before accessing support from community agencies and professionals (Woodley, Davis, & Nadine, 2013).

3.0 HOW COULD THE BODYSAFE PROGRAMME BE IMPROVED?

RPE continually review and update the programme to ensure the content, design and delivery is appropriate for young people. Input from young people is valued and taken into consideration. Young people completed a questionnaire six months after completing the programme. There were 529 responses across the four schools. Young people were asked to provide additional comments. Of the 294 comments only nine made suggestions for improvement which included have more games; watch more videos and dealing with cyber bullying. Only two comments were negative and these referred to the programme as 'boring'.

Focus group participants offered a range of suggestions for improvements, including more on rights and responsibilities; more activities and scenarios; more sessions; same educators for all the sessions; do the scenarios in groups before being done in front of the class; more discussion time; module 4 to be done as module 1; look at ways of using the book more in class; practical ideas around how to use helplines and what to expect would be useful and they also wanted to know the impact of sexual violence on people.

Resources

All students received a booklet and card, reiterating the key messages from the programme and including help seeking numbers.

Participants were asked to select "yes" or "no" to the following four questions. "Do you still have your BodySafe booklet?", "have you used your BodySafe booklet?", "do you still have your BodySafe card?" and "have you used your BodySafe card?".

Forty-nine percent of participants reported that they had kept their BodySafe booklet and 36% reported that they had kept their BodySafe card. Forty-nine percent of students reported that they had not kept their BodySafe booklet and 63% reported that they had not kept their BodySafe card"

Twenty-two percent of participants reported that they had used their BodySafe booklets, 76% reported that they had not used their BodySafe booklets. Only 5% of participants reported that they had used their BodySafe cards and 92% reported that they had not used their BodySafe cards.

Forty-five percent of students who had kept their BodySafe booklets had reported using them, whereas only 15% of participants who had kept their BodySafe card reported using it.

Disclosures

The above figures reflect a similar trend to the percentage of students disclosing unwanted sexual experiences. Of the one in five girls who experienced sexual assault, forty seven percent have told someone and of the one in ten boys who have experienced sexual assault, twenty-nine percent have told someone. (Clark, Moselen, & Dixon, 2015)

4.0 CONCLUDING COMMENTS

Consistent with previous evaluation findings (Dickinson, Carroll, Kaiwai, & Gregory, 2010) this evaluation snapshot indicates the BodySafe programme continues to achieve high quality content, design and delivery. There is also similar evidence to the achievement of the short term outcomes shown on the logic model. Improvements to the programme such as the inclusion of an additional session has resulted in the programme being more student-directed and less rushed. This was a recommendation from the 2010 evaluation.

The BodySafe programme is implemented in the same schools each year which allows for coverage for all students over time.

As per previous literature review findings (Allen, 2005; Carmody & Willis, 2006) and the results of this evaluation there is indication that there is a need for sexual violence prevention programmes in Aotearoa/New Zealand. Consistent with the literature, the Body*Safe* programme is implemented by external providers (Foshee, et al., 2000; SASA House, 2010). The current evaluation findings indicate there are advantages to this which include the providers having expert knowledge, students takethem more seriously and some students are more comfortable talking about ensitive issues with the BodySafe educators rather than their health teachers.

Nearly all students reported the content of the Body*Safe* programme to be easy to understand and reported feeling comfortable during the lessons. They also reported the BodySafe programme learnings to be complementary to their other Health lessons. It was clearly demonstrated that the students had grasped the concept of consent and they were confident in being able to talk about it in their groups. Students also enjoyed being able to interact with each other and the material through the use of resources such as scenarios and videos.

The programme is well implemented. Most students connected with the educators, engaged with the Body*Safe* material and felt safe while participating in the programme. Students also wanted additional sessions in earlier and subsequent years to reinforce what they had learnt.

There is evidence that the short-term outcomes described in this evaluation have been achieved. Survey and focus group findings show the key messages of the Body*Safe* programme relating to consent, sexual violence, risky sexual situations and help-seeking were well understood by students, which is consistent with the literature (Robertson & Oulton, 2008). Current evaluation findings are also consistent with other sexual violence prevention education programmes (Foshee, et al., 2000; SASA House, 2010) showing that knowledge gained stays with students up to six months after receiving the programme. Teachers and Body*Safe* facilitators all considered the programme has an important place within the health education curriculum and needs to be implemented in the context of a whole school approach.

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