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Evaluating peer-based youth programs: barriers and enablers

Peer-based programs are increasingly used by community organisations to support vulnerable youth who are at risk of developing mental health problems. Such programs are as diverse as the populations they support and include drop-in services, peer education, camps and online discussion forums for hard-to-reach populations that may not access more conventional forms of support owing to issues of stigma or accessibility (for example, same-sex-attracted youth and teenage parents). There has been limited evaluation of peer-based community programs. Therefore, the lack of evidence of program effectiveness makes it difficult for service providers to secure continuous funding and threatens program sustainability. This article reports on a study designed to investigate barriers and enablers associated with evaluating peer-based youth programs. The resulting implications for policy, practice and research are discussed.

This article was written towards completion of a PhD in Public Health by the principal author, Roanna Lobo, at Curtin University, Perth.

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Background

Peer-based programs provide an important early intervention strategy for young people who may be at greater risk of developing mental health problems, including depression, anxiety, self-harm and suicidal ideation, than other young people of the same age. This includes groups such as teenage parents, same-sex-attracted youth, socially isolated youth, homeless and young people who do not access support in school or primary care settings, for fears over data confidentiality or perceived stigma, or

those who do not have supportive family or peer relationships (Brown et al. 2007). A great diversity of peer-based programs exist, including drop-in spaces, peer education activities, camps and online discussion forums. The appeal of such programs for vulnerable youth includes: a safe space where young people do not experience harassment or judgement; opportunities to learn and practise skills by observing positive peer and adult role models; and access to peer support from others experiencing similar issues (Shiner 1999; Stanton-Salazar & Spina 2005; Turner 1999).

Youth workers can provide numerous anecdotes describing the positive changes seen in young people's confidence, attitudes, sense of belonging, knowledge and skills during the course of a peer-based program. However, few evaluation studies have been conducted to collect evidence of the benefits of these programs for young people or the features of programs that contribute to their effectiveness (Olsson et al. 2005; Sachmann 2007; Truman et al. 2007). The potentially negative impacts of peer-based programs for program participants also require further investigation. For example, social capital may have both positive and negative consequences and, as Maycock and Howat (2007) concluded, is not always health enhancing and can promote undesirable behaviours. It is possible that the social capital that develops as a result of participating in peer-based programs (e.g. peer support, sense of belonging and social validation) could also be potentially harmful if not monitored; for example, creating unrealistic expectations or dependency issues, and for young people involved in program delivery, issues associated with managing personal and professional boundaries. Therefore, more evaluation studies are needed to ensure programs are doing no harm, facilitate continuous service improvements, and enable service providers to compete successfully for available funding.

This article presents the results of a study conducted by the Western Australian Centre for Health Promotion Research at Curtin University in consultation with 11 community youth service providers, to identify barriers and enablers associated with evaluating peer-based youth programs. The implications for policy, practice and research are then discussed.

Limited evidence base associated with the effectiveness of peer-based youth programs

A literature review was conducted to consolidate the available evidence for effectiveness of peer-based youth programs. First *The Medline, ProQuest, Science Direct* and *Web of Knowledge* databases were searched using a combinations of keywords, such as 'program', 'youth', 'peer', 'evaluation', 'challenges', 'barriers', 'evidence', 'effectiveness', 'impact' and 'outcomes'. The review concluded that there was a limited evidence base for effectiveness of peer-based programs and highlighted four main reasons for this, outlined in the following section: inconsistent theory and definitions, lack of consensus on relevant indicators, the level of evaluation rigour required, and lack of evaluation resources.

Inconsistent theory and definitions

There appears to be a limited theoretical understanding of how peer-based programs work. Programs are continually evolving but theoretical assumptions are not always articulated. Service providers may not have the expertise, time or resources to develop a rigorous program model fully and program objectives may be unclear (McDonald 2004). The diversity of program elements (that is, inputs, activities, aims, target groups and program settings) creates difficulties for developing a universal theoretical model for evaluating peer-based programs, and the inconsistent use of terminology and definitions does not allow for comparisons and generalisations across programs (Turner & Shepherd 1999).

Lack of consensus on relevant indicators

Social and emotional development indicators generally focus on reduction of deficits, for example delinquency, substance abuse or mental health problems, rather than on increasing positive youth development attributes that promote competence and success in coping with life challenges (Dukakis et al. 2009). Indicators that are currently available to assess the performance and outcomes of community-based youth programs tend to place a strong emphasis on improving and measuring academic achievement, and/or decreasing risk-taking behaviour, such as reducing the numbers of teen pregnancies, high school dropouts, and rates of drug abuse. Furthermore, researchers and evaluators are increasingly moving towards a positive youth development approach (Catalano et al. 2004; Surko et al. 2006), but at present, no standardised categories exist to measure socio-emotional variables associated with peer-based programs, such as mental wellbeing and social connectedness.

Levels of evaluation rigour required

Evaluating peer-based programs can be problematic owing to small numbers of participants, high program attrition, low literacy levels in the target groups, difficulties engaging at-risk youth, and limited program resources (Chaskin 2009; Parkin & McKeganey 2000). The inability to apply probability sampling techniques and having to rely on small sample sizes limit the statistical power and generalisability of research findings. Concerns with disclosing personal information that could compromise anonymity is also a consideration when using survey techniques. Yet evaluation rigour must be achieved without compromising the very nature of programs for hard-to-reach populations (Crosby et aI. 2005). Informal and flexible program

structures (such as drop-in services) are often effective in engaging with at-risk populations but present a challenge to assessing and retaining participants for evaluation purposes. Providing incentives to increase participation and retention is generally not feasible due to limited program resources (Parkin & McKeganey 2000).

Lack of evaluation resources

Practitioners are frequently unable to locate valid and reliable scales or indices that can be used in small-scale community programs. Moreover, existing measurement tools are often too lengthy and/or too costly to administer on a regular basis (Dukakis et aI. 2009).

Study overview

The aims of the study were to:

- understand barriers to evaluating peer-based youth programs

- identify enablers that could help improve evaluation of peer-based services

- identify consistencies and inconsistencies in the data collected from program facilitators and the findings of the literature review

- develop recommendations for policy, practice and further research and evaluation to increase the evidence base for peer-based youth programs.

Semi-structured interviews and group discussions lasting between 45 minutes and one-and-a-half hours were conducted with 40 staff and volunteers from 16 peer-based youth programs in Western Australia and one program based in New South Wales. The peer-based programs were implemented by government and non-government organisations, charitable organisations, and a Technical and Further Education institute. The programs supported a range of at-risk youth including: teenage mothers; youth at risk of depression, self-harm or suicide; socially isolated youth; and youth of diverse sexuality and gender (see Table 1).

The questions asked included:

- What key performance indicators or targets do you have for your program?

- Who is interested in this data?

- What other data do you collect about your program?

- What do you use this data for?

- What other data would you find useful?

- What stops you collecting this data?

- What do you understand by program evaluation?

- What challenges do you face when evaluating your program?

- How could these barriers to program evaluation be addressed?

The data from the interviews and discussions were analysed thematically to identify common categories (themes) relating to barriers and enablers associated with program evaluation. The categories were modified during this process using a constant comparison approach consistent with qualitative data analysis techniques (Miles & Huberman 1994) and only considered stable when they emerged as clear recurrent themes across the data set. Four peer-based programs were also observed in situ. This provided an opportunity to discuss informally with staff and participants the factors influencing program evaluation.

Barriers to program evaluation

The study identified 11 barriers to evaluation of peer-based programs. These were:

- limited evaluation capacity

- working with at-risk youth

- working with transient populations

- inadequate funding

- reliance on volunteers

- impact of program evaluation on participants

- current reporting requirements

- beliefs associated with evaluation

- heterogeneity of target groups

- managing unforeseen events

- reliability of data.

Limited evaluation capacity

A lack of suitable evaluation tools and approaches, limited knowledge of evaluation, a lack of evaluation skills, and uncertainty about how to use evaluation data presented significant barriers to effective evaluation. Service providers did not have extensive experience of evaluation and few providers collected evaluation data on a regular basis unless required to do so by their funding body or parent organisation.

Working with at-risk youth

The target populations accessing the programs were generally characterised by low literacy levels. Therefore, questionnaires and other evaluation approaches involving written text could be challenging or time-consuming to implement. Service providers also experienced difficulties keeping at-risk youth engaged in formal or 'classroom' style activities. Data confidentiality could also be of particular concern to at risk groups, that is, knowing who will have access to information and for what purposes. Teenage mothers, for example, feared their children would be removed by child protection services if they admitted needing help. This fear may deter young parents from seeking the help they need.

TABLE 1: CHARACTERISTICS OF RESEARCH GROUPS AND PARTICIPANTS

Service provider and program or service	Program type	Target group
Challenger Institute of Technology: Young Parenting and Very Excited program	Access and participation engagement program	Pregnant or parenting girls aged 14–24
City of Mandurah Billy Dower Youth Centre: Young Women's Program Young Men's Program	After-school programs	Youth aged 12–17, especially socially isolated youth
City of Rockingham Youth Services: Gone Fishing program	After-school program	Youth aged 12–17, especially socially isolated youth
City of Swan Youth Services: Young men's group Young women's groups	Peer leadership program After-school programs	Aboriginal boys aged 14–17 Females aged 16–17
Dungeon Youth Centre	After-school peer education program	Youth aged 14–17
Inspire Foundation: ReachOut.com	Web-based mental health information and support	Youth aged 14–25
Metropolitan Migrant Resource Centre	After-school peer education program	Youth aged 15–20
Mission Australia: Youth Accommodation Support Service	Life skills program	Youth aged 15–18
Uniting Care West: Talking Realities program True Colours program	Peer education program Drop-in peer support	Pregnant and parenting teens aged 15–19 Same-sex-attracted youth aged under 25 in regional areas of Western Australia
Western Australian AIDS Council: Freedom Centre Freedom Centre Forum	Drop-in peer support Online discussion forum	Same-sex-attracted, sex and gender diverse young people aged under 26
Youth Focus: Peer Support Program	Group sessions and weekend camp	Youth aged 14–18 at risk of self-harm, depression or suicide

Working with transient populations

High levels of participant attrition also presented barriers to using traditional methods of evaluation, such as measurements, before and after the program activities. A young person could attend a program once or come consistently for a period, then cease coming, giving no reasons. Following up previous participants was time-consuming and not considered a valuable use of resources. Therefore, program activities were targeted to the needs of the current participants.

Inadequate funding

Service providers commented on finding it difficult to allocate limited and already stretched resources away from service delivery and towards evaluation. In one case, owing to staff shortages, the program facilitator was also required to become acting

manager of the service. Remaining objective and using already scarce resources for evaluation was difficult under these circumstances.

Reliance on volunteers

Program facilitators were generally not paid to run peer-based programs that were implemented out of office hours. For such volunteers, service delivery (rather than evaluation of service delivery) was the primary focus. Other peer-based programs relied on one or two paid staff members and the involvement of a core group of volunteers (often peers of the target group) to deliver services. The volunteer pool could change frequently. Concerns were expressed that asking volunteers to implement or facilitate evaluation activities may accelerate volunteer 'burn out'. A high level of volunteer turnover also created challenges for measuring changes over time. For example, if data had not been recorded, it was difficult to obtain this data from volunteers who had left the organisation.

Impact of program evaluation on participants

Evaluation processes could be distracting for program staff. The need to develop trusting relationships with young people was not always consistent with evaluation activities. Furthermore, young people could be reluctant to divulge sensitive or personal information. Those young people who saw the program as a form of respite and an opportunity to escape daily stressors, resented having to engage in structured evaluation activities or expressed frustration at having to complete forms that repeatedly asked them to specify information such as their age, ethnicity or education level. Recalling difficulties or negative aspects of their lives, sometimes several times to different people without debriefing, could also be distressing and counterproductive.

Current reporting requirements

Service providers associated evaluation with developing lengthy, time-consuming reports. Keeping records on how many young people attended the program, levels of attrition, and hours of service delivered was a requirement of the funding bodies. These providers, who already spent a significant number of hours preparing reports on these key performance indicators, did not have additional capacity to conduct more rigorous evaluation activities. Frustration was expressed that the information reported neither reflected the complexity of their programs fully nor the efforts involved.

Beliefs associated with evaluation

There was a common belief that evaluation was only carried out at the end of a program to assess program impacts and outcomes, and that specialist skills and resources were required to conduct an evaluation appropriately. As a result, evaluation activities were generally only undertaken to meet reporting requirements and were not perceived to be a useful or essential component of day-to-day activities. Consequently, service providers reported knowing instinctively what was working and what was not, and changed programs accordingly.

In addition, the topic of program evaluation aroused significant tension amongst service providers and there were frequent doubts about the value of evaluation, for example:

> *'Evaluation just confirms what we already know.'* (Service provider)

> *'What's the point? Young people just give silly answers or fill in questionnaires incorrectly.'* (Service provider)

> *'I'm not sure how useful this data is. The skills and knowledge demonstrated within a "safe" peer program setting may not be realistic in relation to how a young person would behave in the "real world" which is generally less tolerant or safe for the groups we are dealing with.'* (Service provider)

A concern was also raised that evaluation may be unable to show that the program was effective owing to small numbers of participants, small incremental changes and being unable to generalise results. This was related to fears that a failure to demonstrate effectiveness may lead to the program being discontinued and young people who rely on the program suffering as a result.

Heterogeneity of target groups

The diversity of young people attending a particular program required a high degree of flexibility in program delivery, which could be problematic for evaluation. For example, in one program the differences between a 15-year-old teenage mother and a 17-year-old teenage mother were dramatic in terms of their confidence levels, and knowledge and ability to cope with their situation. Both young women experienced the same program in quite different ways and program success could also be interpreted very differently for each user. This heterogeneity within the target groups contributed to increased difficulty in applying consistent indicators for program effectiveness.

Managing unforeseen events

Programs needed to be responsive and address individual issues and concerns as they arose. There was an associated drain on time and resources as a result. Within the drop-in services, for example, it was not uncommon for a participant to come into the program facing a serious dilemma, needing immediate support or having had an experience they needed to discuss urgently. Seeking advice about emergency contraception or seeking help in relation to an abusive partner, for example, were not problems that could 'wait until next time' and there was no-one else to refer the young person to

within the program. Thus, program facilitators were often required to 'wear several hats'. Unless these events were acknowledged by the facilitator and/or resolved at some level, program delivery could not continue as planned. If time was running short owing to such unforeseen incidents, it appeared to be more acceptable to leave out evaluation activities than program content.

Service providers and young people reported that the flexibility and capacity of programs to deal non-judgementally with critical incidents in young people's lives and access to a safe space were important features of peer-based programs that helped to reduce program attrition. The nature of the work, that is, being a positive role model, offering information and advice, and supporting young people through difficult and emotional issues, was noticeably draining for some staff. Conducting evaluation activities at the end of a program session was not always possible because of flagging energy levels or tasks that required immediate follow-up. For example, staff often had to engage in a one-to-one discussion with a troubled young person, provide transport home or investigate a suitable referral service.

Reliability of data

Participants' reliance on programs for support and the commitment of young people involved in program delivery was evident and could present a barrier to effective evaluation if 'socially desirable' responses were collected, that is, information that young people think will be required to help programs continue, rather than a true reflection of how a program is working. However, youth ownership of programs could also be seen as an enabler to conducting evaluations of programs, since there is genuine interest in collecting data that will help ensure program sustainability.

Enablers to improve evaluations of programs

Service providers identified five enablers to improve program evaluation. These were:

- access to simple and effective evaluation tools

- more knowledge and skills in evaluation

- opportunities to share experiences with other service providers

- program budget to include time for evaluation activities

- new evaluation reporting systems that are more relevant for peer-based programs.

Access to simple and effective evaluation tools

Service providers identified a need for simple, practical evaluation tools that did not require high levels of literacy within the target group or substantial resources. Importantly, these

tools should provide useful data about program effectiveness, not just efficiency as measured by attendance counts or program costs. The involvement of young people in developing and implementing suitable evaluation approaches may help ensure that the language used in evaluation tools is appropriate for the literacy levels of the target group and that activities are of an acceptable length. Collecting data that may improve or support decision-making for service improvements was considered beneficial.

More knowledge and skills in evaluation

Service providers felt most comfortable implementing traditional evaluation activities such as survey tools or questionnaires, but realised that these approaches were not always suitable for at-risk youth with low literacy levels and low levels of engagement. Training opportunities for service providers to increase knowledge and skills in other evaluation approaches were suggested. Service providers also expressed interest in learning about creative evaluation strategies, including digital storytelling, group artwork, journal writing and games that may promote increased youth engagement and participation.

Opportunities to share experiences with other service providers

Hearing about evaluation strategies that had been used successfully by other programs and sharing tips for engaging at-risk youth in evaluation activities were considered beneficial. Resources were scarce and needed to be directed wisely with a focus on service delivery.

Service providers would prefer to implement evaluation strategies that have been shown to work with at-risk youth and not waste time and resources on strategies that are unsuitable.

Program budget to include time for evaluation activities

Current program plans generally did not factor in adequate time and resources for evaluation. Additional resources and recognition of the efforts associated with evaluation activities by the parent organisation and/or funding bodies were considered important.

New evaluation reporting systems that are more relevant for peer-based programs

Current reporting systems focus on quantifiable indicators including levels of program attrition and service hours delivered. Changes in the attitudes, behaviours, knowledge and skills of young people were not reported. These types of data would help inform decision-making for service improvements. Thinking more laterally and creatively about what constitutes 'evidence' of program success was suggested. For instance, one program facilitator suggested that being nominated for a community

award should be considered evidence that the program was meeting community expectations. In another example, the facilitator of a theatre-based youth peer program suggested that the production created by the young people constituted evidence that the youth had learned the intended information. In this case, a DVD could be sent to funding bodies as evidence of the program's positive outcomes.

Discussion

The barriers to evaluating peer-based youth programs identified by the study show some consistency with the themes evident in the literature—in particular, the lack of evaluation resources and the challenges of conducting rigorous evaluation studies of small, community-based programs and hard-to-reach populations. In addition, the findings identified organisational and cultural barriers influencing the evaluation of peer-based youth programs, most notably inadequate funding, a reliance on volunteers, the absence of evaluation activities within day-to-day program activities, and frustrations associated with current reporting requirements. The heterogeneity of the target groups and the need for programs to be flexible and responsive to individual needs were also highlighted.

The enablers associated with evaluating peer-based youth programs identified by the study were focused on increasing evaluation capacity of service providers. Simple evaluation resources are needed that are suitable for peer-based program settings and that do not put unrealistic demands on service providers. Increased knowledge and skills in evaluation, access to best practice, additional budget for evaluation activities, and more relevant reporting systems were also suggested as key enablers for improving evaluation practice.

The implications of the findings for policy, practice and further research

The findings presented above have implications for policy, practice and research.

Implications for policy

Service providers involved in the study were required to report on key performance indicators that they felt did not fully reflect the impact of their programs or their efforts. While quantitative data may be useful, collection of some qualitative data would give a fuller picture of how, and why programs are working for various target groups. Practitioners and funding bodies need to establish a common understanding of program objectives and what counts as evidence of program effectiveness, so that limited evaluation capacity can be targeted to generate the most useful data. Funding bodies need to recognise that small, incremental changes for at-risk youth may be significant precursors to larger outcomes and represent important milestones of progress. As such, they should be considered as positive outcomes. Related to this is increased

recognition that successful outcomes will be different for every service user and that program evaluation systems should reflect the heterogeneity of their target groups. Bodies operating on behalf of the youth sector (such as Youth Affairs Councils throughout Australia) and research organisations could help advocate for changes to current reporting systems on behalf of time-pressured practitioners.

An increase in evaluation skills and knowledge is also needed if service providers are expected to undertake more extensive program evaluation work. This could be achieved through the provision of training workshops and manuals or facilitating partnerships with researchers or evaluation consultants. Additional funding for evaluation activities should be provided in budgets.

Implications for practice

Lack of knowledge about evaluation leads to misconceptions about what evaluation is and how it can be used. There are differences between: 1) evaluating a program rigorously to prove its long-term effectiveness or to enable the results to be generalised to other settings, target groups and program types; 2) providing evidence that a program is delivered as intended; and 3) providing evidence that a program is contributing to positive short-term or immediate changes in a particular group of participants. There are also limitations to what sort of evaluation will be possible given a particular program context. Ethical practice must also be addressed when considering evaluation designs that involve control or comparison groups.

Evaluation activities need to become commonplace in program delivery as a means of collecting data for continuous service improvement and to secure project funding. The findings revealed a limited understanding of using evaluation for needs assessment, quality audits, program monitoring or to ensure programs do no harm and remain safe for all participants. Some of the current activities within youth programs, such as group discussions, role-plays and journal writing, could be used for evaluation by adding some simple measures to increase the reliability of the data and to comply with ethical practice. Examples include collecting video or audiotape recordings of program activities and asking group members to sign a consent form assuring anonymity and confidentiality of data when appropriate. Using more creative evaluation strategies that increase youth engagement is also recommended.

Implications for future research

Service providers in this study reported difficulties in determining realistic outcomes for programs and how program effectiveness should be measured, given the heterogeneity of the target groups and variable outcomes that could be expected. A theory and practice-based evaluation framework for peer-based youth programs would help to demystify the process of program evaluation for practitioners. The diversity of programs and target groups coupled

with less tangible outcomes for socio-emotional development have also created a need for developing commonly understood indicators and evaluation tools in this field.

While efforts were made to consult a range of youth service providers and peer-based programs, resources did not permit data collection in all types of peer-based programs or potential target groups.

The following peer-based programs and target groups could be considered for future research studies in this field:

- peer-mentoring programs

- peer-based programs for other socially isolated youth, including those in rural or remote communities, children who have parents with a mental illness, young carers, and young people who have a mental or physical disability

- outdoor-based or adventure programs for at-risk youth

- peer support groups for young people experiencing a chronic condition, young people who have siblings or parents with cancer or a chronic condition, young people who have experienced trauma or violence, and young people who are HIV positive

- programs for refugee youth, migrants or culturally and linguistically diverse populations.

Conclusion

In summary, a limited theoretical framework for peer-based programs and a lack of suitable indicators and measurement tools create challenges for evaluating peer-based community youth programs that have limited resources and target hard-to-reach groups. Increasing the evidence base to demonstrate that peer-based youth programs are effective will require a multifaceted approach to overcome barriers to program evaluation. Critical success factors include: finding ways that make it feasible for service providers to evaluate their services in terms that are relevant for them; developing evaluation methods that are acceptable to young people; and being realistic about what can be evaluated, how it can be evaluated and what the results can be used for.

Acknowledgements

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