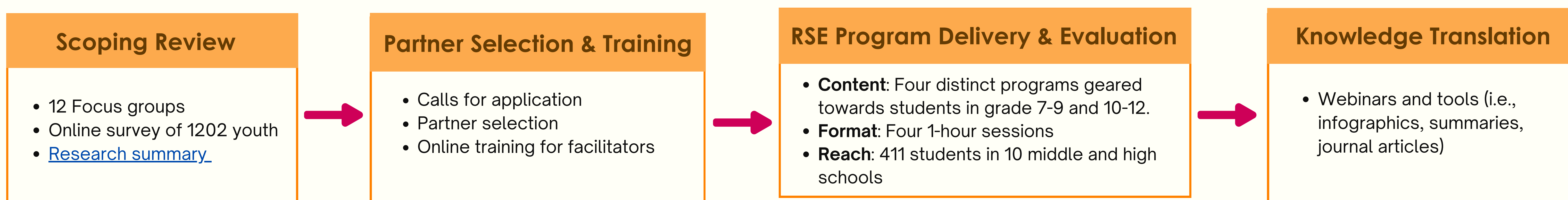




Building Capacity for Comprehensive Sexuality Education in Canada: Facilitator Experiences and Lessons for Scaling

Working with the Centre for Sexuality (C4S), CPHA developed a project called “**Preventing Youth Dating Violence: Building Capacity for Comprehensive Sexuality Education in Canada.**” This included adapting C4S’s *Relationship and Sexual Health Education (RSE)* program as an intervention for youth dating violence prevention and training organizations across Canada to deliver and assess the program with young people in their communities.

Project Timeline



Program Delivery

The RSE program focuses on providing youth with an opportunity to develop the knowledge and skills needed to make healthy and informed decisions about their sexual and reproductive health, and to participate in healthy relationships.

CPHA and C4S offered online training to partner organizations and facilitators to build their knowledge and skills to deliver sexual health and healthy relationships education to youth.



Figure 1. Program Sites Across Canada

Topics Included:



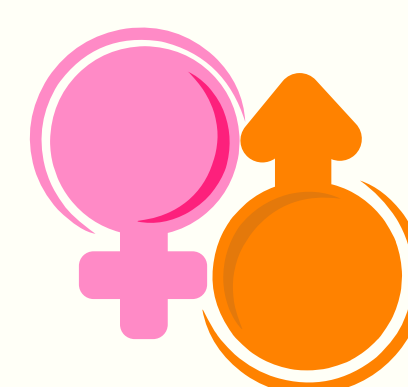
Partnership requirements



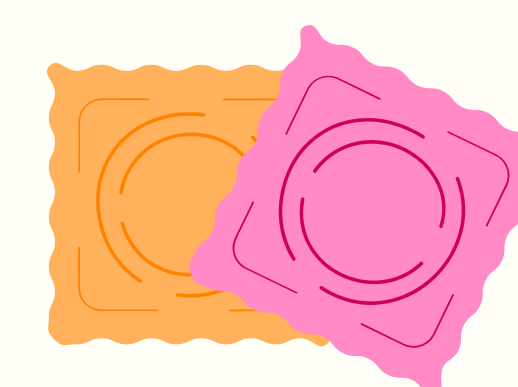
Using inclusive language



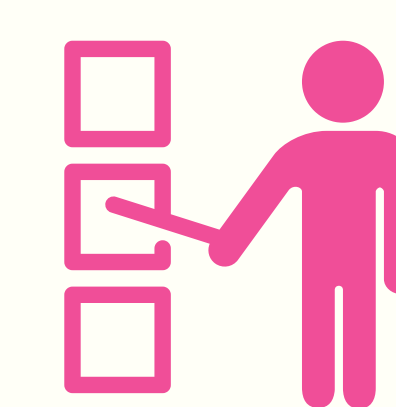
Addressing disclosures of sexual violence



Teaching anatomy & physiology



Promoting sexual health



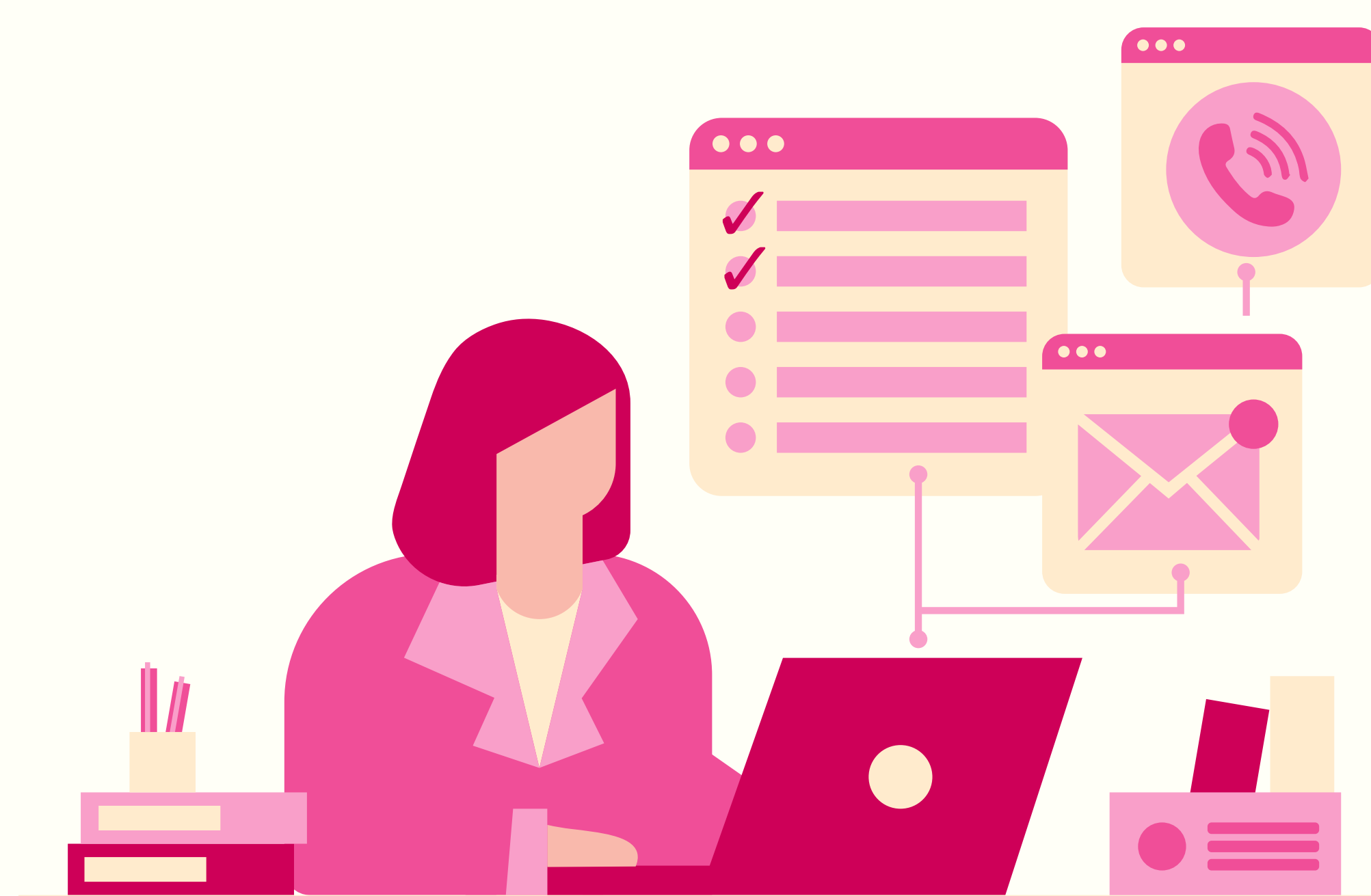
Using trauma- & violence-informed facilitation techniques

Program Delivery

Facilitators at each of our partner organizations were invited to complete various online surveys and interviews throughout the project, including:

- ◆ Pre- and post-training surveys to assess growth in knowledge and capacity.
- ◆ Checklists after each RSE module to assess curriculum fidelity and facilitation strengths and challenges.
- ◆ Annual interviews to discuss experiences with delivery and areas requiring support.
- ◆ Annual surveys after program delivery.

Interested in the experiences and outcomes for youth who participated in the RSE program? Read the Integrating Youth Dating Violence Prevention in Relationship and Sexual Health Education: Youth Experiences infographic.



Positive Outcomes for Facilitators

Growth in knowledge, capacity and confidence, particularly in relation to having conversations with youth about their sexual health and relationships

Dealing with challenging situations such as youth disengagement

Access to evidence-informed resources, tools and activities

Desire to apply specific tools and activities, to their work in other areas

Renewed passion for sexual health and healthy relationships education for youth

Developing contacts with organizations in Canada similarly committed to improving sexual health and youth relationships

Areas for Improvement

Challenges facilitating all activities in the first and last session given the time needed for youth to complete program questionnaires

Reducing length and reading level of the questionnaires

Additional training and support were needed on:

- Disclosures of sexual violence and balancing youth safety with respect for school policies and procedures
- Classroom management (e.g., dealing with disengaged youth or youth with varying experiences and knowledge)
- Knowledge of sexually transmitted and blood-borne infections (STBBI)
- Enhancing support from school leadership
- Time management (i.e., having enough time to complete all activities in a module)



Lessons Learned

Lessons learned from scaling sexual health and healthy relationships education in Canadian communities highlight the need for careful consideration at each stage of scaling.

Some key points include:

Partner Recruitment

Whether doing open or targeted recruitment, partners should demonstrate stability, leadership support, relevant experience (e.g., working with youth or with facilitation), have existing relationships with host sites (e.g., schools, community organizations), and be aligned with project values (e.g., cultural safety, harm reduction).

Partner Training

Training should be tailored to partner organizations' prior knowledge and curriculum content. Training should include content-specific training, practical components such as dealing with youth disclosures of violence, include multiple learning opportunities where knowledge and skills are built over time, content related to planned and/or unplanned curriculum adaptations, and multiple opportunities to practice facilitating the curriculum.

Host Site Preparation

Defining roles and responsibilities and making sure host sites and partners (including school administrators and teachers) understand said roles in advance is crucial. Consider the use of checklists, host site agreements and needs assessments, and where possible, opportunities to connect directly with host sites. Be sure that host sites are clear on the frequency, duration and topics covered in your curriculum, as well as how youth disclosures of violence will be dealt with.

Partner Support

Consider whether a more comprehensive (e.g., mandatory check-ins and knowledge sharing with other scaling partners) or a more flexible (e.g., optional and minimal check-ins) support model will be used. For either model, consider content areas including classroom management, host site management, curriculum adaptations, and time management. Consider opportunities for observation and/or co-facilitation of the program with scaling partners.

Program Evaluation

Evaluation is essential for any scaling project but it can be time-consuming; build evaluation activities into the work plan. Where possible simplify evaluation requirements, consent/assent forms, and consider creative ways of eliciting youth feedback over traditional surveys (e.g., use of photovoice, focus groups).

Support for Others

Consider the needs of other stakeholders, such as school principals, teachers, and parents/caregivers, before and after program delivery.

These lessons emphasize the importance of flexibility, clear communication, and alignment with project values in successfully scaling sexual health and healthy relationships education programs.

Questions? Contact: info@cpha.ca

*This infographic has been made possible through a financial contribution from the Public Health Agency of Canada. The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada.

*This infographic was created with support from students in the Fall 2024 Health Communications course at the University of Toronto: Jolly Noor, Sumeya Hassan Ahmed, Nasma Ashraf, Asma Adam.