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Healthy Relationships Plus Program Facilitator Training Feedback

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Brief Report

Healthy Relationships Plus Program Facilitator Training Feedback

REPORT OVERVIEW

The Fourth R Healthy Relationships Plus program (HRPP) is an evidence-informed small groups program that aims to equip students with the skills they need to build healthy relationships and help themselves and their peers reduce risky behaviours. The HRPP consists of 14 one-hour sessions covering topics such as peer pressure, help-seeking, media literacy, healthy and unhealthy peer and dating relationships, healthy communication, and the impacts of substance use.

The HRPP has the capacity to positively impact youth; however, program content alone does not lead to benefits. Delivering effective programs requires facilitators to feel comfortable and prepared to implement the program with their students. Additionally, it is important that facilitators maintain program fidelity and implement the program as it was designed. Facilitators' confidence, competence, and understanding of fidelity can be developed through well-designed trainings. Quality training provides facilitators with the opportunity to understand the program objectives, learn the content, and enhance their knowledge of program fidelity.

As part of the evaluation project, the researchers aimed to examine training outcomes and build capacity through trainings. The purpose of this report is to provide a summary of the facilitator training feedback surveys, specifically examining the skills learned and their satisfaction with the training.

METHOD

From 2014 to 2016, 120 facilitators across 4 provinces and territories completed training feedback forms after participating in in-person training to implement the HRPP.

FACILITATORS

The facilitators trained to implement the HRPP represented a diverse sample. Table 1 summarizes the gender, occupation, and teaching experience of the facilitators, as well as the geographical location.

Table 1 Facilitator Demographic Statistics

Demographic	N	%
Facilitators	120	
Male	35	29
Female	82	68
Province		
Alberta	13	11
Northwest Territories	39	33
Ontario	45	38
Saskatchewan	23	19
Occupation		
Teacher	79	66
Child Youth Worker / Counsellor	11	9
Program Facilitator / Coordinator	14	12
Other	16	13
Teaching Experience		
0 to 5 Years	18	15
6 to 10 Years	34	28
11 to 20 Years	45	38
21 to 30 Years	17	14
31 to 40 Years	4	3

FACILITATOR TRAINING

Prior to implementing the HRPP, teachers and community members received formal, in-person training. Facilitators also received all program materials.

MEASURE

Upon completion of the HRPP training, facilitators were asked to complete a feedback survey. The survey consisted of 37 questions ranging from Likert scale rankings to open-ended questions. The survey also included pre- and post-questions asking facilitators to reflect on their knowledge (e.g., “I know what skills need to prevent violence”) and their self-efficacy (e.g., “I am confident I can engage youth in interactive learning about relationships and mental health”).

RESULTS

A paired samples t-test was conducted to examine whether the facilitators’ pre-knowledge scores differed from their post-knowledge scores. The difference was significant, in that the ratings on the post-knowledge scale ($M = 3.45$, $SD = 0.42$) were higher than the ratings on the pre-knowledge scale ($M = 3.12$, $SD = 0.45$), $t(114) = -11.3$, $p < 0.001$, $d = -1.0$. According to Cohen’s d , this is a strong effect size.

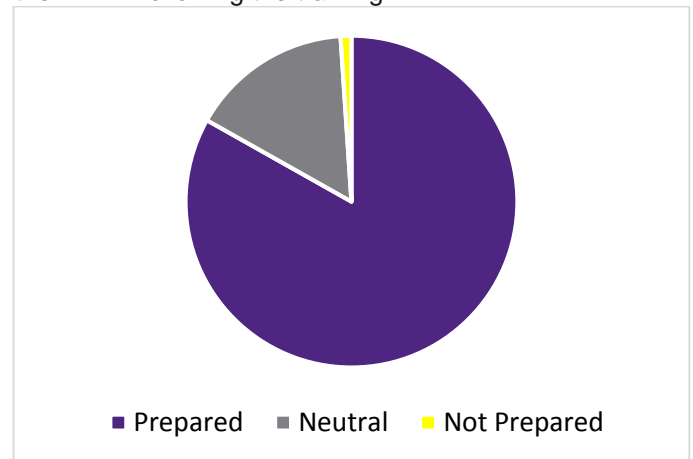
A paired samples t-test was also conducted to examine whether the facilitators’ pre-self-efficacy scores differed from their post-self-efficacy scores. The difference was significant, in that the ratings on the post-self-efficacy scale ($M = 3.48$, $SD = 0.47$) were higher than the ratings on the pre-self-efficacy scale ($M = 2.99$, $SD = 0.55$), $t(114) = -11.0$, $p < 0.001$, $d = -1.0$. According to Cohen’s d , this is a strong effect size. Facilitators’ knowledge and self-efficacy scores are presented in Table 2.

Table 2 Descriptive Statistics for Knowledge and Self-Efficacy Scales

	<i>N</i>	<i>M</i>	<i>SD</i>
Pre-Knowledge Scale	115	3.12	0.45
Post Knowledge Scale	115	3.45	0.42
Pre-Self-Efficacy Scale	115	2.99	0.55
Post-Self-Efficacy Scale	115	3.48	0.47

According to the training feedback surveys, 98% of facilitators believed that the training provided increased their capacity to promote positive relationship skills among youth. In addition, over 90% of facilitators reported being satisfied with the training and the topics covered. Finally, upon completion of the training, 79% of facilitators reported feeling prepared to implement the HRPP. Of the remaining 21%, only one participant reporting feeling unprepared, and the rest rated their preparation as neutral (see figure 1 below).

Figure 1. Majority of facilitators felt prepared to implement the HRPP following the training.



Open-ended questions on the feedback training survey were analysed to determine successes and challenges. Based on the facilitators’ responses, 3 themes emerged related to training success.

Satisfaction

- “I enjoyed the practical elements, anecdotes, and multimedia involved in the training.”
- “It was helpful, clear, and usable materials.”
- “Great review of information, I liked going over the activities to get an idea of how they work.”

Self-Efficacy

- “I feel more prepared and confident.”
- “Gave me more confidence to discuss mental health with students.”

Resources

- “Great resources and program ideas.”
- “Fantastic materials, engaging, great activities.”
- “The manual looks easy to follow.”

Upon completion of the training, the facilitators were also asked to reflect on concerns they may have about implementing the HRPP. Based on the facilitators’ responses, 3 themes emerged related to perceived challenges.

Time Constraints

- “Ability to get enough session time to complete it.”
- “There is a lot of content to get through in the classroom time slot.”
- “Finding time for the HRPP.”

Youth Participation

- “My only concern is the youth showing up for the sessions on a regular basis.”
- “Our students do not attend consistently and therefore may not all receive the 14 sessions.”
- “Many of our students struggle with high anxiety. My fear is that they won’t buy in.”
- “Student buy-in, will they participate and use it?”

Classroom Logistics

- “Number of kids in the group(s).”
- “I have a small class, average 5 to 6 students.”
- “Large number of students in the class.”
- “Space is my biggest concern.”

CONCLUSION

Overall, the 2014-2016 HRPP facilitator trainings were successful. Based on the feedback received, facilitators enjoyed the training and reported significant changes in their knowledge and self-efficacy related to implementing the program. These findings are important because when facilitators feel they have the capacity and skills needed to implement a program, they are more likely to maintain program fidelity.

At the same time, a smaller group reported feeling neutral about the extent of their preparation. It may be important to explore additional training opportunities (such as booster sessions) to support the readiness of all prospective program facilitators. In the past year we have developed and launched an online training module as well. It will be important to evaluate the relative strengths and weaknesses of this training approach compared to our traditional in-person training.

Recognizing the importance of facilitator training, we have recently certified a number of Master trainers who can facilitate HRPP training across Canada. Specifically, we have a solid presence in both Western Canada and Northwest Territories that can reduce future training costs. It is beneficial having these regional champions to support training facilitators as well as promote the program among various community groups.

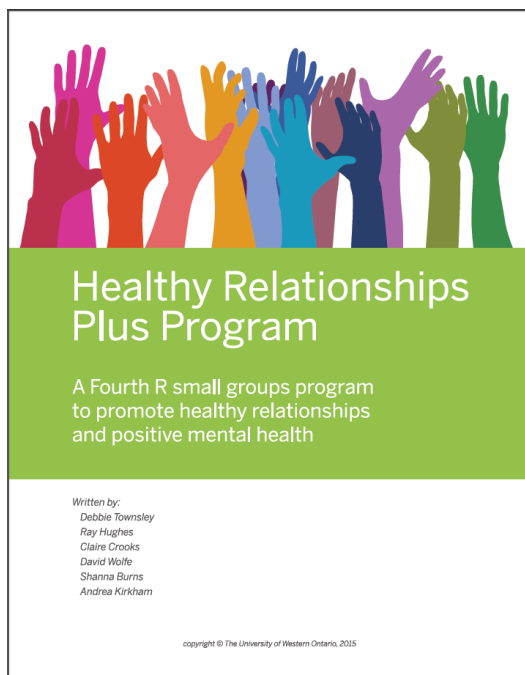
About the Authors:



Amanda Kerry is a PhD Candidate at Western University and works as a Research Assistant for the Centre for School Mental Health, Western University. Her clinical and research work focuses on promoting resilience among youth offenders and redirecting youth from a trajectory of unhealthy, antisocial behaviours.



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