PEER LED HEALTH PROMOTION IN HIGH SCHOOLS: CONSTRAINING AND FACILITATING CONDITIONS EXPERIENCED BY YOUNG WOMEN

by

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A thesis submitted in conformity with the requirements for the degree of Doctor in Philosophy Graduate Department of Community Health University of Toronto

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Doctor in Philosophy in Community Health 2001

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ABSTRACT

Currently national and provincial interest is focussed on promoting the health of children and youth. Given that children and youth spend significant amounts of time in schools, schools are important locations for health promotion initiatives. One type of health promotion initiative carried out in schools is peer led initiatives.

In this thesis, I examined Fly Higher, a peer led initiative directed to promoting young women’s health. I examined young women’s overall experiences with this peer led initiative, and, in particular, identified constraining and facilitating conditions as they developed peer led initiatives in their schools.

Naturalistic inquiry, with an emergent design was used for this investigation. McLeroy’s social ecological model was a guiding conceptual framework (McLeroy, Bibeau, Steckler & Glanz, 1988). In-depth interviews with 22 youth leaders were carried out focussing on their perceptions of training and the issues relating to developing peer led initiatives: what facilitated their involvement, what constrained it, and what impact their involvement had on the youth leaders themselves and their schools. Interviews with 10 supporting adults and 12 school administrators were conducted to enhance understanding the influences of the larger school
environment on youths' efforts to develop peer led initiatives. Constant comparison analysis was applied to the data. Subsequently, McLeroy's conceptual framework was used to classify constraining and facilitating conditions.

The major study findings yielded two themes describing the experiences of youth involvement, and yielded the outcomes for youth and their schools. The themes were: Setting the Stage, which included recruitment and training; and Negotiating their Way, which included three processes: connecting, finding a niche, and managing a plan. The constraining and facilitating conditions to youth leaders occurred at different analytic levels of intrapersonal factors, interpersonal processes, organizational and community factors. Several youth reported personal gains and some youth reported negative consequences to their involvement. Limited impact was reported in seven schools and no impact was reported in five schools.

The discussion emphasizes the importance of understanding the many constraining and facilitating conditions affecting the success of peer led initiatives and affirms the importance of collaborating with adult members and administrators in the school. Practice implications relate to recruitment, training, and ongoing support in schools.
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CHAPTER 1: INTRODUCTION

Federal and Provincial governments across Canada have identified the health of children and youth as a priority (King, Boyce & King, 1999; Health Canada, 1995; National Forum on Health, 1997; Premier’s Council on Health, Well-being, and Social Justice, 1994). As one of many examples, in 1994 the Ontario Premier’s Council on Health Strategy recommended that action be taken to "to create supportive environments for children and youth, improve their ability to participate effectively, and enhance their sense of belonging in the wider community" (Premier’s Council on Health, Well-being, and Social Justice, 1994, p. 52). One assumption underlying these documents is that children and youth need to be actively involved in enhancing their own health and making their surroundings more health promoting. Thus, understanding and addressing ways to involve youth in health promotion activities is essential.

For several reasons, schools are important locations for young people to involve themselves in health promotion efforts. They are located in every community. They reach a large proportion of children and youth daily over many years. They provide natural locations for adolescent social networks and are mandated to provide health education (Bartfay, 1994; Coonan, Owen & Worsley, 1991; Pentz, 1997).

Within school-based programs, youth have been involved through peer led initiatives. They have taken on various roles, such as teachers, helpers, and as members of action teams (Pransky, 1991). They have been extensively involved as positive role models in smoking and alcohol abuse prevention programs (Botvin, Baker, Filazzola & Botvin, 1990; Clarke,

After extensive reading of the literature, I concluded that adults direct most peer led initiatives, although youth participate actively. However, we know little about direct attempts by young people to involve their fellow students in setting the agenda, initiating, and running health promotion activities in their schools, or about what happens when they target their entire school instead of a single classroom.

In this thesis, I examine a specific program called Fly Higher. In it, young women and an adult member from their high school participate in a training workshop where young women learn about women's health issues, how to mobilize their peers to lead healthy lifestyles, and how to develop supportive school environments. Young women are then expected to develop peer led initiatives in their schools based on what they decide they want to do. This approach reflects current health promotion ideas such as: community members should participate in identifying issues or problems, community members should plan actions to address the identified issues, and then act on their plans (Labonte, 1993).

In this study, I describe and explain youth leaders' overall experiences in this peer led initiative. In particular, I identify the constraining and facilitating conditions to peer led initiatives. In doing so, I add the youth perspective to our understanding of adolescent peer led initiatives in schools. Understanding the youth perspective is important to potentially increase the success of such interventions.
Organization of Thesis

Following the Introduction in Chapter One, I present a review of related literature in Chapter Two that includes: key aspects of adolescent health, different models of health promotion in schools, and peer led health promotion in schools. Chapter Three describes the development of the Fly Higher program, its conceptual underpinnings, and my involvement with the program. Chapter Four presents the purpose, research questions, and methodological issues of the study, and explains my choice of naturalistic inquiry as an overall methodology. As well, my guiding conceptual framework, McLeroy’s social ecological model is outlined and my perspective as a researcher is presented. Chapter Four also describes the recruitment of participants and background information about schools and participants, my data collection and data analysis procedures, strategies to ensure methodological rigour, and ethical considerations.

Chapters Five, Six and Seven present the study findings. In Chapter Five, the first theme, labelled ‘Setting the Stage’, describes processes involved in the recruitment and training of youth into the Fly Higher program. Chapter Six examines what happened when youth returned to their schools. This second theme is labeled ‘Negotiating their Way’ in order to capture a sense of the maneuvering youth needed to do to develop peer led initiatives in their high schools. There are three process; connecting, finding a niche, and managing a plan. Constraining and facilitating conditions are identified at different analytic levels throughout the processes. Chapter Seven examines the impact of Fly Higher on both youth and on their schools. Chapter Eight discusses the major study findings and implications for practice and further research.
CHAPTER 2: LITERATURE REVIEW

Federal and Provincial policy documents suggest that health promotion for youth is important and that youth need to be involved in identifying their own health issues and acting on them (Health Canada, 1995; National Forum on Health, 1997; Premier's Council on Health, Well-being, and Social Justice, 1994). Compared to very young children and the elderly, adolescents suffer from few immediate life threatening conditions (King, Boyce & King, 1999). However, when young people fail to reach their optimal development or to enter adulthood as healthy and resilient citizens, costs to governments and individuals are substantial (King et al., 1999).

This chapter examines adolescent health, in particular: mortality rates, self-rated health, and lifestyle behaviours. As schools are locations for health promotion with youth, different models of school health promotion are presented. Finally, peer led initiatives, where youth are involved in promoting their peer's health in the school setting are examined.

The Health of Adolescents

Evidence about the current state of adolescent health in Canada is mixed. One crude measure of the health of a group is its mortality rate. The mortality rate for adolescents 15 to 19 years of age is low (56 deaths per 100,000 population) compared to children less than one year old (551 deaths per 100,000 population) and the elderly 70 to 74 years old (2790 deaths per 100,000 population) (Statistics Canada, 1999a). Furthermore, the adolescent mortality rate has consistently decreased (deaths per 100,000 population 15 to 19 years of age 2000 to 2005).
years) over time, from 250 in 1926, 130 in 1946, 80 in 1965, and 60 in 1997 (personal communication, K. Wilkins, Statistics Canada, June. 2. 2000). This is a positive indicator for the health of adolescents.

In addition to mortality rates, self-rated health is considered an important indicator of overall health because it is a good predictor of more ‘objectively’ measured health, as well as health care utilization and longevity (Adams, 1988). Self-rated health is a global measure that summarizes physical and mental health as experienced by individuals (Statistics Canada, 1997, p. 217). In the National Population Health Survey (NPHS), respondents were asked the question: "In general, how would you say your health is?". There were five response categories: excellent, very good, good, fair, and poor. Overall, in 1996-97, 63% of Canadians ranked their health as excellent or very good (65% of males and 62% of females). For adolescents, 72% of 15 to 17 year old youth and 75% of 18 to 19 year olds ranked their health as excellent or very good. There were notable gender differences among adolescents. In the 15 to 17 year old group; 77% of boys versus 65% of girls ranked their health as excellent or very good; and in the 18 to 19 year old group, 80% of boys as compared to 71% of girls ranked their health as excellent or very good. Thus, of Canadians in general, more young people report their health as excellent or very good, and there are notable gender differences with boys reporting higher rates of overall health than girls.

Even though mortality rates are low and self-rated health is good for the adolescent age group, there is cause for concern about the lifestyle behaviours of youth. Lifestyle behaviours are important because they help minimize immediate risks facing adolescents and increase their likelihood of maintaining health over the long term (Dryfoos, 1994; Parcel.
Regular physical activity, weight control and healthy eating are three areas that have been identified as important to address in childhood and adolescence to improve adult outcomes (Thomas & Brunton, 1997). In addition, common adolescent risk behaviours, such as smoking, alcohol abuse, unprotected sex, and delinquency have also been addressed in lifestyle health promotion for adolescents. Because Fly Higher is an adolescent heart health promotion program, I examine concerns about weight control and healthy eating, regular physical activity, and smoking behaviours because these are particularly relevant. Evidence presented is taken from: the National Population Health Survey 1994-95 (Statistics Canada, 1995); the National Population Health Survey 1996-97 (Statistics Canada, 1997); Health Reports (Statistics Canada, 1999b) and lastly, the Health Behaviour in School Aged Children Survey (HBSC) (King et al., 1999). Indicators are described, and time trends are examined using data for Canadians in general. These data are then compared to adolescents, and in particular, to young women.

Weight control. The proportion of Canadian children who are overweight has increased in recent years. In the NPHS, Body Mass Index (BMI) was used as a weight indicator. BMI was calculated using the standard formula of weight in kilograms divided by height in meters squared and interpreted in standard groupings. The categories reported on here are: acceptable (BMI between 20.0 and 24.9), some excess weight (BMI between 25.0 and 26.9), and definitely overweight (BMI of 27 or greater). In 1996-97, 44% of Canadians were an acceptable weight for their height, 19% had some excess weight to the point of possible
health risk, and an additional 29% were overweight to the point of probable health risk (Statistics Canada, 1997).

The proportion of the Canadian population that was definitely overweight (BMI of 27 or greater) has been increasing between 1985 and 1998-99 and may carry more substantial health risks than having some excess weight (Gilmore, 1999). The rate for all Canadians (over 15 years old) in 1985 was 17%, this increased to 30% in 1998-99. The rate for the 15 to 19 year group went from 5% in 1985 to 9% in 1998-99. There were differences between males and females. The male rate of definitely overweight went from 6 to 10% and the female rate went from 4 to 8%. Although less significant from a health perspective, there were also increases in some excess weight for adolescents 15 to 19 years: overall 32% to 47 %, with males going from 12% to 20% and females going from 8 to 13% (from 1985 to 1998-99)(Statistics Canada, 1999b p. 88). The increase since 1985 in the percent of young people who are definitely overweight or have some excess weight indicates that weight control should be an important target for youth health promotion.

_Healthy Eating._ Healthy eating in the NPHS was examined by looking at reported dietary practices and diet and weight issues, both of which indicate concerns for adolescents. Dietary practices were examined by reported fat intake and concerns about fat intake (Statistics Canada, 1997). Overall, Canadians eat 38% of their diet as fat intake, rather than the recommended 30%. In the Canadian population over 12 years old, 59% reported being concerned about fat in their diet. There were gender differences in concern over fat intake; 66% of women were concerned and taking action to reduce fat in their diet compared to 50%
of men (Statistics Canada, 1997). There were no data available specifically on 15 to 19 year olds with regards to fat intake and concerns about fat intake.

King and colleagues (1999) offer self report data on specific dietary practices and weight concerns for Canadian youth. Questions reported on here relate to general nutrition intake such as fruits, vegetables and milk consumption, eating breakfasts, and weight concerns. For grade 10 students, 62% of boys and 65% of girls ate fruits and vegetables daily. In addition, 42% of boys and of 36% girls ate whole wheat or rye bread daily. Also, 75% of boys and 69% of girls drank low fat milk daily.

Eating daily breakfasts decreased with age, from grade 6 to grade 10. Seventy-one percent of boys ate breakfast daily in grade 6, while only 55% of boys in grade 10 did so. The same was true for girls, with the decrease being more marked: 67% of girls ate breakfast daily in grade 6, while 41% did so in grade 10. Thus, the diet of grade 10 students was less nutritious than the diet of younger students.

Adolescents also reported weight related concerns. Whereas 6% of boys and 7% of girls in grade 6 were on diets to lose weight; 4% of boys and 16% of girls were on diets to lose weight in grade 10. For girls, dieting increased with age. There was also lower satisfaction with their current body weight among grade 10 girls (55%) as compared to grade 10 boys (82%). Thus, dieting habits and concern about weight appear to be more an issue for girls than boys (King et al., 1999). The data on dietary practices coupled with adolescent's weight concerns indicate that nutrition should be regarded as a high priority in health promotion for adolescents, especially for girls.
Physical activity. Moderate physical activity is important to maintain health, and it is known that activity patterns decrease with age (Statistics Canada, 1997). In the NPHS, physical activity practices were measured by asking about leisure activities in the last three months: the kinds of activities, frequency of participation and amount of time engaged in activities (Statistics Canada, 1997). Levels of activity were classified by the estimated kilocalories per kilogram of body weight per day: active (3.0 or more), moderate (1.5 to 2.9), and inactive (less than 1.5) (Statistics Canada, 1997, p.189). Although less than 50% of Canadians were moderately active, overall, they are becoming more active. Thirty-seven percent of Canadians were at least moderately active in 1994-95 and the rates went up to 40% in 1996-97 (Statistics Canada, 1999b). The proportion of teens aged 15 to 19 engaging in at least moderate leisure-time physical activity increased five percentage points, from 54% to 59% between 1994-95 and 1996-97 (Statistics Canada, 1999b). The increase was similar for boys (from 62% to 66%) and girls (from 45% to 51%). Across all age groups, males were more active than females. However, forty percent of adolescents are not at least moderately active, adolescent females participate less in physical activities, and are less likely to be active by age 20 than males. Among young people, physical activity and physical fitness may favourably affect risk factors for cardiovascular disease (National Center for Chronic Disease Prevention and Health Promotion, Centres for Disease Control and Prevention, 1997).

Smoking. Smoking is widely acknowledged to be the number one preventable cause of death in industrialized countries (Schabas, 1992; Statistics Canada, 1997). Smoking rates were measured as smoking daily or occasionally. Smoking rates have decreased for the past
25 years in the overall population (15 years and older) levelling off in the 1990's. In 1996-97, 28% of Canadians age 12 and older smoked (either daily (24%) or occasionally(4%)) and this level was unchanged from the 29% who were smokers in 1994-95 (Statistics Canada, 1995).

Significantly, teen smoking patterns are distinctive from that of the general population. Most significantly, the proportion of teenage smokers increased from 21% to 29% between 1990 and 1994 and stayed at 29% in 1996-97 (Statistics Canada, 1995; Statistics Canada, 1997, p. 165). The only age group in which females were more likely to smoke than males was the 12 to 17 group (Statistics Canada, 1997). This was most pronounced at age 15 to 17 but occurred as young as age 12 to 14. Among grade 10 students, 61% of boys and 66% of girls tried smoking and 17% of boys and 23% of girls smoked daily (King et al., 1999).

Clearly, there is ongoing cause for concern about the initiation of young people, especially girls, to smoking.

From the evidence presented above, while nearly three quarters of adolescents report that their health is good, there is cause for concern upon closer examination of lifestyle behaviours. Data suggest more adolescents are overweight than in the past. Eating habits appear to be deteriorating with age. Although the activity levels of adolescents are increasing, still 40% of adolescents are not at least moderately active, and activity levels decrease with age. Lastly, while smoking rates for the overall Canadian population are decreasing, smoking rates for adolescents, particularly girls are not. Thus, health promotion to enhance youth lifestyle behaviours is important and effective means must be found to do so.
Health Promotion in Schools

Schools have been considered an important setting for youth health promotion for several reasons. First, most children and youth attend school regularly. Health promotion interventions have the potential to reach many young people in the schools. Also, relationships formed in school are frequently central in young people’s social networks (Feiring & Lewis, 1989). Thus, schools are socializing agents for youth. As the primary goal of schools is to increase academic performance of students, and since poor health can disrupt learning, improved health of children and youth is consistent with improved academic performance (Anderson, Kalnins & Raphael, 1999; King, Wold, Tudor-Smith & Harel, 1996; Parcei et al., 2000). Schools emphasize learning and adolescents congregate in schools. Thus schools are a crucial avenue for health promotion efforts (Perry, Kelder & Komro, 1993). Lastly, health promotion literature is reiterating the value of creating social and physical environments conducive to health (Poland, Green & Rootman, 2000; Rowling, 1997). The recent National Forum on Health (1997) identified schools as a setting for youth health promotion. Interventions can be directed towards two inter-related targets. Schools can be locations where health promotion interventions are carried out directed towards young people; and settings for health promotion, where the target of interventions is the school itself.

There are limitations that need to be identified when examining the potential of health promotion interventions in schools. From the educator’s perspective, the school has a different set of priorities, and its educational role should not be compromised in pursuit of
health objectives (Green & Kreuter, 1991). The broad ranging demands placed on teachers is perhaps the most critical barrier. Teachers are already overburdened because they are expected to address a multitude of social problems, yet often lack the resources to do so (Parcel et al., 2000). Spending on education and public health is being frozen or reduced (Anderson et al., 1999). Thus, while schools are important settings where health promotion initiatives can occur, there are barriers that must be recognized and overcome in order to succeed within the school setting.

Parcel et al., (2000) have offered a useful synopsis of the development of school health promotion from the 1950's to the 1990's. They labeled the major approaches: knowledge-based, affective, behavioural, empowerment and multi-component models. Health promotion in schools has expanded over time and the models have become increasingly complex. Therefore, although these approaches are useful ways of examining school-based health promotion programs, in reality, programs often represented combinations of approaches. In the following sections, each approach is described with reference to its key underlying assumptions, health topics commonly addressed, program elements, and effectiveness.

**Knowledge-based models.** These were the first models used in school-based health promotion. Knowledge-based models focused on providing information and were based on the assumption that increasing information would allow rational choice. The link between knowledge, attitude and behaviour was assumed rather than tested (Goodstadt, 1978). Knowledge-based programs typically focused on specific behaviours, such as alcohol and illicit drug use. Programs used lectures as the main educational strategy, although there were group discussions led by adults. Several meta-analyses of drug prevention programs,
including knowledge-based ones, have revealed that these programs had positive effects on knowledge and attitude, but were unsuccessful in changing alcohol or other drug use behaviors of students (Bangert-Drowns, 1988; Hansen, 1992; Tobler, 1992). Knowledge-based programs developed for tobacco prevention education have shown similar results (Hansen, 1992; Tobler, 1992). A recently completed systematic review of published reviews of school-based programs over the last 10 years aimed at reducing adolescent risk behaviors concluded that programs that imparted knowledge using didactic methods increased knowledge, changed attitudes, but had no effects on behaviors (Thomas et al., 1999).

*Affective models.* The failure of knowledge-based models to effect behavior change led to the search for other approaches that could produce changes in behavior. Growing evidence indicated that values and expectations were important factors in changing behavior (Goodstadt, 1978; Parcel et al., 2000). This evidence led to the development of affective education models. These models focused on the learners’ values, attitudes and feelings, emphasizing personal development and included self-esteem building, interpersonal skills and problem-solving skills (Hansen, 1992; Parcel et al., 2000; Tobler & Stratton, 1997). Affective approaches assume that values are central to influencing choice. Young people who feel good about themselves, who develop effective relationships with others should be less at risk for drug abuse. Affective models were used for drug and alcohol abuse prevention programs, tobacco use prevention programs and sexual health programs. The programs focused on the personal development of the learner, rather than on facts and concepts related to the risk behaviors. The activities often included group discussions led by teachers. Some programs had an affective focus only, whereas others combined
knowledge-based with affective components (Hansen, 1992; Tobler, 1992). Several reviews of affective approaches to preventing substance abuse concluded that, in general they made no significant impact on substance use behaviours (Hansen, 1992; Schaps, Churgin, Palley, Takata & Cohen 1981; Tobler, 1992). Affective models were similar to knowledge-based models in that they sought to affect an individual's behaviours, while ignoring the interpersonal or peer context (Tobler & Stratton, 1997).

**Behavioural models.** These models became popular in the 1980's, and were largely derived from social psychology theories, particularly Social Cognitive Theory (SCT) (Bandura, 1986; Harden, Weston & Oakley, 1999; Parcel et al., 2000; Shannon & McCall, 1997; Thomas et al., 1999). "Human behaviour is explained in SCT in terms of a triadic, dynamic and reciprocal model in which behaviors, personal factors and the environment all interact" (Baranowski, Perry & Parcel, 1997, p. 153). A crucial role is played by cognitions which allow the individual to understand the meaning of their actions. Thus, health promotion efforts based on SCT have sought to influence the underlying cognitive variables as a means of achieving behaviour change (Bandura, 1986; Baranowski et al., 1997).

I discuss two developments in behavioural models. One very popular behavioural model developed from the SCT orientation was social influences, sometimes also called resistance training. Social influence behavioural models focused on the role of peers. It was assumed that peers play a key role in adolescent decisions to engage in risk behaviours and that if students can learn to identify situations and to develop skills to resist these peer influences, they will not engage in risk behaviours. At the same time peers also became valuable members of health promotion teams because it was assumed that they could more easily
relate to their fellow students (e.g., Gibson, Shah & Mamoon, 1998; Nagelberg, 1981; Rickert, Jay & Gottlieb, 1991). Programs using this approach teach students to resist pressures from their peers and in their environment that may encourage health risk behaviours, such as smoking. These influences could be from peers, siblings, parents, adults and the media (Hansen, 1992). Teaching strategies used in these programs include: teaching students knowledge about the short term consequences of risk behaviors, peer pressure resistance training, education about manipulative media messages, establishing normative expectations for healthful behaviors, using peer leaders as role models, and lastly encouraging students to make a personal commitment to engage in healthful behaviors (Parcel et al., 2000, p. 93). Films and discussions demonstrated peer pressure, information about how to deal with pressure situations, role playing about how to say no, and assertiveness training.

Programs have been shown to be successfully applied to smoking prevention and drug abuse prevention (Hansen, 1992; Perry et al., 1992). Success has been attributed to strengthening individual skills to recognize and deal with influences in their environments. In addition, the focus of changing adolescent perceptions of what is normative or expected adolescent behaviour emphasized the need to influence the larger environment to be supportive of healthy choices.

A second behavioural model developed from the perspective of SCT was Life Skills Training (LST). This approach involved teaching adolescents a general set of skills that have a broader application than simply resisting drugs. LST is based on the assumption that students lack both intrapersonal skills and interpersonal skills that interplay to cause drug use
students lack both intrapersonal skills and interpersonal skills that interplay to cause drug use (Botvin et al., 1990; Tobler, 1992). Because this model assumes that social and behavioural skills, such as decision making, problem solving, communication and stress management are essential for making decisions about health behaviours, LST programs focus on improving communication and skills for gaining social acceptance, and developing skills for resolving interpersonal problems (Hansen, 1992). In LST, teaching strategies include discussions, role playing and didactic presentations. LST training involves intrapersonal strategies that focus on affective education, such as self esteem building, feelings, self awareness, values clarification, and decreasing anxiety, all of which aim to enhance personal competence. Students are given opportunities to practice interpersonal skills: communications skills, modeling, feedback with social reinforcement, and assertiveness training (Tobler, 1992).

Generally, studies evaluating the effectiveness of LST approaches have found significant behavioural effects regarding the delay or prevention of substance use, typically lasting a few years after program delivery (Botvin, Baker, Dunesbury & Diaz, 1995; Tobler, 1992). These programs offer an assortment of strategies, but little is known about what combinations are most useful (Hansen, 1992; Paglia & Room, 1998).

Behavioural models represented an advance over both knowledge-based and affective models. The behavioural models were more complex and reached beyond the individual to look at interpersonal and environmental influences on health behaviour. They also placed an emphasis on the learning being interactive, that is students are actively involved in their learning and the programs encourage face-to-face peer interaction rather than student-teacher interaction. Authors of several meta-analyses agree that behavioural models are interactive
(Black, Tobler & Sciacca, 1998; Bruvold 1993; Hansen, 1992; Rooney & Murray, 1996; Tobler & Stratton, 1997). Thomas and colleagues, in a systematic review of reviews found that interactive programs were the most effective programs even though the results were modest (Thomas et al., 1999).

**Youth empowerment models.** These models are recently emerging in school health education (Parcel et al., 2000). Health promotion programs have usually targeted individual behaviours, while acknowledging the social and environmental influences. Traditionally, health education assumes individuals can make healthy decisions with enough information, skills and reinforcement. However, Freire, a Brazilian educator, recognized as the father of empowerment education, proposes that knowledge does not come from experts, rather knowledge emerges from group sharing and understanding the social influences that affect group members' lives. There are three stages to Freire's empowerment model: listening - in partnership, dialogue, and action. Empowerment models have roots in critical pedagogy, empowerment education, and community organization (Freire, 1983; Minkler & Wallerstein, 1997; Parcel et al., 2000). Empowerment models recognize that a lack of control, or feelings of powerlessness leads to poor health and frequently deal with disenfranchised populations (Wallerstein & Bernstein, 1988). Because many of the issues addressed in school-based health promotion, such as drug abuse, have roots in community and social problems, youth empowerment education seeks to enable students to recognize these roots and determine appropriate community and social action (Parcel et al., 2000, p. 93). Thus, the underlying tenet is that students are responsible for identifying and defining the problem to be addressed.
Youth determine what actions should be taken and these actions include a social action component.

Little research exists in the literature about health promotion in schools based on empowerment education (Parcel et al., 2000). A notable exception is Wallerstein and Bernstein's (1988) report on a peer led substance abuse prevention program in New Mexico called ASAP. In the ASAP program, small groups of students from minority high risk community high schools addressed their fears, attitudes, and anger about substance abuse. They made four visits to interview persons both in jail and in hospitals about the consequences of their alcohol use (Freire’s listening phase). Students then met together, with an older trained peer leader, and critically analysed what they learned (Freire’s dialogue phase). Peer leaders educated adolescents about the consequences of alcohol use in a student-centred participatory mode. Students participated in a curriculum that incorporated methods from other adolescent health programs, such as social learning and resistance to peer pressure, life skills competencies and decision making about alternate choices (Wallerstein & Bernstein, 1988). Students then received additional training to become peer educators in their own high schools, in primary schools, and in other community settings (Freire’s action phase). Evaluation of this program demonstrated that students had an increased awareness of the consequences of drinking behaviour. The peer teaching experience assisted them to develop empathy and a sense of responsibility. As more students participate in the program, the authors hope there will be a critical mass to effect community change (Wallerstein & Bernstein, 1988). This may take some time because adolescent behaviors are inherently difficult to change in the face of health damaging environments, that include media
influences, unemployment, and cultural identity conflicts. These conditions are intractable to immediate solutions and require long term broad based policy and social change (Wallerstein & Bernstein, 1988).

With empowerment approaches, power relations are a challenge as youth become co-learners and challenge existing hierarchies in schools (Wallerstein & Bernstein, 1988). Long term commitment is essential and the role of the adult facilitator is crucial (Wallerstein & Sanchez-Merki, 1994). Youth empowerment models hold promise, but significant difficulties exist because schools need to relinquish control to students. Kalnins and colleagues (1994) suggest that issues of control may not be different from other community development projects. However, with young people and adults unequal power relationships exist which could lead to adult driven programs. Aspects of the empowerment approach are incorporated into other models, such as multi-component models.

**Multi-component models.** The most complex approach to school-based health promotion are multi-component models (Parcel et al., 2000). Lynagh, Margot, Schofield and Sanson-Fisher (1997) suggest that although the 1980's health education models were based on theoretical models, often SCT, and they showed good short term benefits, these benefits largely disappeared by 4 to 5 years. This led to a new approach to school health practice. The Alma Alta (WHO, 1978) conference and the Ottawa Charter (WHO, 1986) both recognized that health education is just one strategy to improve children’s health. These authors argued for a more holistic view of health behaviour that takes into account the environment and the community. Multi-component models in Canada and the US are called comprehensive school health (CSH), and Health Promoting Schools in Europe/Australia.
The underlying assumption of these models is that by linking multiple components including curriculum, supportive school environments, families and communities, a greater range of factors affecting young people's health can be addressed (Anderson et al., 1999). Multi-component models are based on the premise that health and learning are interdependent. Therefore, programs that improve health will contribute towards increasing school performance, and increasing school performance will contribute to health. Thus, health promotion programs in this model are integral to the school’s education program, rather than peripheral (Anderson et al., 1999; Parcel et al., 2000). Multi-component models are currently a major thrust in school-based health promotion. For adolescents, the prevalent message is an emphasis on community-based approaches for reducing adolescent risk behaviours and supporting adolescent health (Raphael, Brown, Ruskholm & Hill-Bailey, 1996).

Multi-component models go beyond health education to include all aspects of school life that could affect health. Thus, the multi-component model works to increase student knowledge, skills and self-efficacy, and change the school environment. Initially, the multi-component model had three components; health education, health services, and healthy environment. Currently, the multi-component model has expanded to an eight component model including: health instruction to all grade levels, health services, a healthy safe environment, physical education, food services, guidance and counselling, interactions with families and community organizations and wellness programs for employees (Canadian Association for School Health, 1991, 1992; Lavin, Shapiro & Weill, 1992).

The multi-component approach seeks to coordinate health education with services in schools, and to include parental and community involvement. For example, students would
learn about healthy nutrition practices (in the classroom) and have healthy foods available in the cafeteria. Parental involvement is thought to be important because parents are significant health role models for their children (Nader et al., 1989). Parents provide specific opportunities and barriers to their children's health through for example, the foods they buy, the access they provide to physical activity, or through their personal use of alcohol or tobacco. Parents are also important role models for adolescents and affect their choice of peer group, which in turn affects health choices (Brown, Mounts, Lamborn & Steinberg, 1993). Community involvement is considered necessary for supporting health enhancing behaviours taught in the schools. For example, community policies that limit selling cigarettes or alcohol are important reinforcers for messages taught in schools. Several school and community based programs were carried out in areas such as drug prevention (Pentz et al., 1989b; Perry et al., 1992; Vartiainen, Fallonen, McAllister & Puska, 1990). A number of reviews suggest that multiple components offer the greatest potential for having a positive impact on children's knowledge, attitudes and behaviours (Coonan, Owen & Mendoza, 1990; Lavin et al., 1992; Wiley, James, Jones & Crosman, 1991).

In the United States multi-component models, known as Comprehensive School Health (CSH) focus on a curricular approach to providing health information from early elementary grades through to grade 12 in high school together with supporting environmental changes. The CSH programs have been used to address health issues such as smoking, healthy eating and exercise habits, substance abuse prevention, and promotion of responsible sexual behaviour in schools (Allensworth & Kolbe, 1987).
To assess the effectiveness of CSH approaches in the US, Pentz (1997) conducted a literature review to examine the school-based health promotion programs and their community linkages. She found that most CSH programs offered universal health education for youth in schools. The major focus was on smoking and drug abuse prevention and used teachers or peer leaders to achieve health behaviour change. She then examined whether school alone or school plus community programs were more efficacious. In examining school only programs, representing 246 studies, she found there were strong short term effects on experimental use rates of smoking, drug use, sexual risk behaviours, and few effects on regular use rates; and no effects on five year follow up (with one exception). The magnitude of effects averaged 6% (Pentz, 1997).

Current thinking in school health education suggests programs include one or more community components as community linkages are thought to be necessary to offset the new social morbidity. These could include involvement of: a community trainer, parental involvement, external peer trainer, community review of materials, complementary community activities, lobbying for policy change, and mass media coverage (Pentz, 1997). Overall, when she reviewed 30 studies, Pentz found school programs that included one or more community components showed similar short term effects on smoking and drug use to comprehensive school programs with a larger number of sessions together with booster sessions. However, school plus community appeared to have larger long term effects on heavier use rates (monthly smoking and drug use) averaging 8% net reductions. Overall, these studies showed greater effects on youth smoking when schools included parent and/or mass media components. These studies suggest a synergistic effect between the school and
the community. These general findings of greater effect size were supported in Tobler and Stratton’s (1997) meta-analysis that demonstrated twice the weighted effect size for school-based programs that were implemented with community support.

The studies reviewed by Pentz were based on intense community involvement that may exceed the capacity of most school systems. None of the lesser involved school community partnerships have been adequately reported on in the literature (Pentz, 1997).

In Canada, the multi-component approach, also know as CSH, espouses a whole school approach to health promotion, with an emphasis on changes both at the individual and school levels. CSH take an empowerment approach based on the current definition of health promotion as, "a process that enables people to increase control over the conditions that affect their health" (WHO, 1986, p.iii). As outlined in the Ottawa Charter of Health Promotion, the strategies for doing so include: developing personal skills, creating supportive environments, strengthening community action, re-orienting health services and building healthy public policy (WHO, 1986). CSH in Canada addresses and separates promotion of health and prevention of health problems and the Canadian model seeks to see the potential in young persons rather than their shortcomings (Anderson et al., 1999). Students are urged to take an active part in all aspects of the school and to share decision making power with their teachers. The British Columbia Ministry of Health program, Healthy Schools Project, offers evidence of participant enthusiasm and activities carried out, but no evidence of changes in attitudes, skills or behaviours of the target audience (Ministry of Health and Ministry Responsible for Seniors, Province of British Columbia, 1992).
In Europe and Australia, multi-component models are called Health Promoting Schools (HPS). As in Canada, the emphasis is on changing the school environment rather than changing the individual students. The concept incorporates the five principles of the Ottawa Charter to link health and education. It was recognized that in addition to knowledge, skills and community participation components, health policy and supportive environments are important to encourage children to make healthy lifestyle choices (Nutbeam, Macaskill, Smith, Simpson & Catford, 1993). Together with reorienting health services, these components combine to form the five principles of the Ottawa Charter (1986). In HPS it is necessary for school community members to create a healthy school environment, address school policies relevant to health issues, involve local community groups, improve health related knowledge, skills and attitudes of students and staff; and reorient school services to provide healthy choices (Lynagh, Schofield & Sanson-Fisher, 1997, p. 45). The WHO (1995) supports these areas as criteria for HPS. This represents a clear philosophical shift, but a less clear practice shift.

Lynagh and colleagues (1997) examined the application of HPS principles to school health promotion programs over the past 10 years, with particular attention to smoking, alcohol and solar protection. The authors identified 600 citations, with 86 relevant studies further examined. Of those examined, smoking and alcohol use were the two most commonly targeted behaviours. The authors analysed the extent to which the programs incorporated the five principles of the Ottawa Charter; developing personal skills, creating supportive environments, strengthening community action, re-orienting health services and building healthy public policy (WHO, 1986). Their findings indicated that developing
personal skills was the most frequently used principle, with all programs addressing it. The next most frequently used principle was community action (27.9%) which typically involved parents or other organizations in programs. The other components; healthy school policy and supportive environments, were infrequently incorporated. Sixty-seven percent of programs used only one component, 25% used two components, 2% used three components, and 4% used four components. 0% used five components. None of the 86 programs incorporated the four components together with looking to make the school environment more healthy (goal of HPS). Thus, the HPS approach, in its entirety has not been implemented and evaluated. Multi-component models, in the forms of CSH and HPS offer a comprehensive, broad ranging approach to the promoting the health of children and youth, but clearly there are difficulties in implementation.

In summary, school-based health promotion has evolved. Initially, knowledge-based and affective models of school health promotion sought to enhance the intrapersonal level factors by promoting knowledge, skills and attitudes at the personal level. Later, behavioural, empowerment, and multi-component approaches went beyond the individual to address interpersonal, organizational and community level influences on individual health behaviours. No models have been completely successful. Nonetheless, given the importance attached to youth health and the key role that schools could play, the search for effective means of school-based health promotion continues. Once educators incorporated theories relating to social learning, school peers became involved in school-based health promotion. This next section reviews key literature related to peer led health promotion in schools.
Peer Led Health Promotion in Schools

Peer education is a strategy that has become an increasing popular way over the last 20 years of carrying out health promotion with young people (Backett-Milburn & Wilson, 2000; Harden et al., 1999; Turner & Shepherd, 1999). Peer education generally includes the teaching or sharing of health information, values, and behaviors by members of similar age or status groups (Sciacca, 1987). Peers have been involved as part of school-based health promotion programs that have used a number of different theoretical approaches, such as: social influences approach, life skills training approach (LST), empowerment approaches, and multi-component approaches. The peer education component itself does not appear to have roots in a particular school of thought, rather it relies on several principles and assumptions (Turner & Shepherd, 1999).

It is assumed, from a developmental perspective that peers can be effective because young people identify with their peers and frequently turn to them for information and advice (Clements & Buczkiewicz, 1993; Milburn, 1995; Peers, Ledwith & Johnson, 1993). Thus, peer education uses already established social networks as a means of sharing information and advice. Furthermore, it is thought that peers are viewed as credible sources of information, especially social information because young people perceive that other young people experience the same struggles; therefore, they are better able to give advice and empathize (Bangert-Drowns, 1988; Henderson, Champlin & Evashwick, 1998; Milburn, 1995; Perry et al., 1989; Woodcock, Stenner & Ingham, 1992).
It is assumed that peers can act as positive role models. Social Cognitive Theory (SCT) claims that role models are an important part of the learning process (Bandura, 1986; Clements & Buczkiewicz, 1993; Dielman, Campanelli, Shope & Butchart, 1987; Perry & Sieving, 1993). Bandura suggests that an important way that behaviour is learned is through observation of credible role models. In addition, there needs to be an opportunity to practice the necessary skills to perform the behaviors and positive reinforcement of the behaviour must be given (Bandura, 1986). It is argued that peer education provides these elements (Harden et al., 1999).

Another assumption is that peers can assist in providing realistic examples of social pressures and how to resist these (Harden et al., 1999). The social influences approach is based on the assumption that individuals do not want to engage in unhealthy behaviors, but they may lack the skills necessary to resist peer and other social pressures (for example from family and the media). Individuals who have already developed skills for resisting this pressure will be less likely to engage in unhealthy behaviors. Helping young people develop resistance strategies is said to ‘innoculate’ them against social pressures. Peers can be used in programs that take a social influences approach.

It is thought that peer educators themselves benefit from their involvement (Turner & Shepherd, 1999). Authors suggest that peer education is empowering for those involved because through reciprocal interactions in peer education programs, young people learn to share, help, comfort as well as learn critical social skills (HEA, 1993; Redman, 1988). In addition, peer education provides an opportunity for young people to participate in meaningful roles (Berkley-Patton, Fawcett, Paine-Andrews & Johns, 1997; Klepp, Halper &
Taking part in peer education provides an opportunity to develop collaborative and conflict resolution skills (Milburn).

It is purported that peer led initiatives provide young people with opportunities to act as potential change agents, rather than only the targets of prevention efforts (Berkley-Patton et al., 1997; Hart-Zeldin, Kalnins, Pollack & Love, 1990). This is consistent with current emphasis within health promotion on community mobilization, empowerment and participation, whereby groups and individuals work in partnership with professionals to define and work out strategies for social change (Hart, 1998; Labonte, 1993; Svenson, 1998).

Lastly, from a practical perspective it is assumed that peer education is inexpensive relative to other methods requiring the involvement of health professionals (Jones, 1992; HEA, 1993; Peers et al., 1993). However, practitioners recognize that good peer education approaches require training and commitment which can be labour and time intensive (Milburn, 1995).

There are many difficulties in reviewing and assessing the literature on school-based peer led initiatives. The first challenge arises from the plethora of terms used to describe peer involvement in health promotion activities (Milburn, 1995). Some of the terms used are peer educator, peer trainer, peer facilitator, peer counselor, peer tutor, peer leader, and peer helper (Milburn). These terms suggest youth leaders are involved in many different ways. Pransky (1991) suggests peer involvement occurs in fundamentally three ways. First, peers are used to convey information to their peers. In such programs they are often called peer tutors, peer educators and teenage health consultants. In programs in which peers impart social information such as relating to alcohol and drug use, they are often called peer teachers (Pransky, 1991, p. 170). Second, peers may counsel other young people, help mediate
conflicts and offer similar forms of assistance (Berkley-Patton et al., 1997; Sloane & Zimmer, 1993). In such cases, the literature generally identifies them as peer counselors, peer mediators, or also peer educators. Third, young people have been engaged in decision-making with schools or other systems. In these approaches, the terminology used is peer participation or youth action teams (Pransky, 1991). This examination of the literature leaves aside peer counseling and mediation and focuses specifically on peer education and peer participation in health promotion activities in schools since they are most relevant to the research carried out.

The second challenge is understanding how peer involvement occurs in the wide range of health topics covered in the literature (Harden et al., 1999; Turner & Shepherd, 1999). In one systematic review, Harden and colleagues (1999) addressed 16 topics, such as; tobacco, drugs, alcohol, sexual health, general health promotion, healthy eating, sexual and physical abuse and cardiovascular disease prevention. Historically, peers were initially involved extensively with smoking prevention, then alcohol/drug prevention, then HIV prevention/sexual health promotion. Also, many of the earlier studies were focused on single behaviors, such as smoking (Clarke et al., 1986). Later, as programs became more comprehensive and multi-component, studies addressed combinations of behaviors, such as multiple substance abuse prevention and sexually transmitted diseases (STD) and pregnancy prevention and occurred as school only or school plus community initiatives (Basen-Engquist et al., 1997; Botvin et al., 1990; Kelder et al., 1993). Whereas interactive programs using peer leaders had modest effects relating to drug abuse prevention, there were mixed results for sexual health programs (Thomas et al., 1999).
A third challenge is that definitions vary as to who is a peer. Some peer leaders are identified as same aged youth, others are slightly older (2 to 4 years) and still others are college students (Botvin et al., 1990; Moberg & Piper, 1990; Perry et al., 1992). There may be different processes at work if the youth are same aged or older. As young people are not a homogenous group, different strategies may work with different groups. The literature suggests peer education in schools that assumes young people are uninitiated to drug use, needs to offer different strategies for young people already involved in smoking and drug use (Paglia & Room, 1998).

A fourth challenge is the diversity of settings where peer education occurs. These include schools (curriculum based, extra curriculum, student leadership), colleges, youth centres, community settings (local community groups, municipalities, churches, clinics) and informal networks (Turner & Shepherd, 1999). The context may influence the effectiveness of peer led initiatives.

Lastly, peers are involved in programs to different extents. For example, in a school-based program in Finland youth delivered all classroom sessions (for a smoking prevention project), whereas in another similar smoking prevention program, using the same social influences approach, youth simply demonstrated resistance strategies and teachers offered the rest of the program (Ary et al., 1990; Vartiainen et al., 1990). Thus, it is difficult to compare the outcomes. The interventions peers use also differ. Harden et al., (1999) reported eight categories of peer interventions: providing information, skill development (resistance, negotiating, and generic), advice and counselling, social support, resource access, services access, biofeedback and other (mostly incentives, and environmental modification). Thus comparing effectiveness is challenging.
Despite the challenges noted, a recent systematic review concluded that peer-directed initiatives are worth pursuing. Harden, Weston and Oakley (1999) of the EPI-Centre, Social Science and Research Unit (UK) examined both outcome and process studies to address the effectiveness of peer-directed initiatives compared to traditional health education approaches. The aim was to survey the available literature in order to critically examine the claim that a peer-delivered approach was a more appropriate and effective method for promoting young people’s health than more traditional approaches, whereby adults delivered health education messages. The review maps the available literature on peer-directed initiatives. It looks across health topics addressed and contains methodological appraisal of the evaluation of intervention studies. It addresses studies that both describe processes as well as those designed to assess impact. For the review, literature searches were undertaken for all studies describing, discussing or evaluating peer-delivered interventions aimed at the primary prevention of disease or health promotion of young people aged 11 to 24 years, in English, excluding peer counselling and peer mediation. Literature searches found a huge literature (5124 citations), of which 523 met the inclusion criteria. There were 106 background studies and 316 intervention studies.

Of the 316 citations, there were 271 separate interventions that described or evaluated interventions. All studies were then reviewed for common health focus, setting, age of peer leaders, intervention strategy, basis for developing intervention (felt need or expert defined), and lastly, interventions developed in partnerships (with the peer leaders and/ or target population). The most common focus of the 271 studies was drug use; including alcohol, tobacco and other drugs (42%), then sexual health (28%). Seventy-nine percent of studies were carried out in educational settings (54% in high schools and 25% in tertiary educational
settings). Seventy-three percent of interventions were carried out by young people the same age (or less than one year older) and they used information only or skill development strategies (62%). In only 23% of studies were interventions based on the expressed needs of the target group. Fifty percent were based on expert's assessment. In 37% of the studies, interventions were developed in partnership with the target population. Of the 271 reports, 49 outcome studies and 15 process studies were reviewed in more detail. The outcome evaluation studies are presented first, followed by the process evaluation studies.

For the 49 outcome studies, the most common focus was drugs (tobacco and alcohol use 53%). Ninety-three percent of outcome studies were carried out in educational settings (75% in high schools). Only 45% of interventions used same aged peers as the target group and 78% of interventions used skill development. Only 8% of outcome studies developed interventions based on felt needs of the target population, whereas 69% developed programs based on expert defined needs. Forty-five percent of outcome studies reported developing interventions in partnership with young people. The 49 outcome studies were also examined for how peer leaders were selected, if training occurred, and the amount of training. Twenty-nine percent of peer leaders were selected by their teachers, 26% were selected by their peers. Eighty percent of peer leaders were trained and 32% received one to 8 hours of training.

Subsequently, specific methodological criteria were applied to the 49 outcome studies and outcome studies that focused only on the outcomes to peer leaders were excluded. The methodological inclusion criteria were: to have prospective experimental design, with one or more control/comparison groups; equivalent control/comparison groups; and reporting of pre and post intervention data on the outcome measures. Based on these criteria twelve outcome studies were assessed as methodologically sound. Eight of the 12 sound outcome evaluations
evaluated peer-directed health promotion in high school settings and of these five sought to prevent smoking. Of the five studies, three of these were found to be effective for at least one behavioural outcome (smoking in the last week or the last month) (Armstrong, De Klerk, Shean, Dunn & Dolin, 1990; Elder, Woodruff, Sallis, DeMoor, Edwards & Wildey 1994; McAlister, Perry, Killen, Slinkard & Maccoby, 1980), one showed no effect (Vartiainen, Tossavaonen, Viri, Niskanen & Puska, 1991) and one was unclear (Macri & Tsiantis, 1997).

Five of the 12 sound outcome studies compared peers and teachers as providers of the same health promotion interventions. Of these 5 studies, peers were more effective in two studies (Jordheim, 1976; Orpinas, Parcel, McAlister & Frankowski, 1995) the same in two studies (Armstrong et al., 1990; Best, Davis, Vaz & Kaiser, 1996) and neither was effective in one study (Vartiainen et al., 1991). It is suggested that interventions that have active involvement of young people may be more important than who does the intervention (Harden et al., 1999).

A unique contribution of this systematic review was the inclusion of process studies (Harden et al., 1999). The most common health focus was sexual health (56%), followed by alcohol/drugs (32%). The interventions site was a high school for 50% of the studies. Sixty-nine percent of the peer leaders were the same age (or not more than one year older). Fifty-six percent of the studies provided information only and an additional 32% addressed information and skill development. Thirty-one percent of interventions were based on expressed needs. Sixty-nine percent of interventions were developed in partnership with young people. Thirty-one percent of peer leaders were selected by their teachers, 25% volunteered and 6% were chosen by peers (38% were not stated). Sixty-nine percent of peer leaders were trained and 12% were not trained (19% were not stated).
The process studies had to be either formative (first stage of planning), intermediate (around the mid-point) or summative (end of intervention) evaluations. The process evaluations represented two distinct foci; training peer leaders (4 studies) and implementing peer-delivered interventions (11 studies). The critical appraisal of process evaluations assessed the studies against seven criteria commonly used for qualitative studies: an explicit account of a theoretical framework and/or inclusion of a literature review; stated aims and objectives; a clear description of context; a clear description of the sample; a clear description of methodology, including systematic data collection methods; an analysis of the data by more than one researcher; and lastly, the inclusion of sufficient original evidence to mediate between evidence and interpretation. Only two studies met all 7 criteria, however all 15 process studies were analysed further.

SCT using role models was the dominant theoretical approach in the reviewed process studies, with empowerment approaches used in the training of peer leaders.

Often process studies addressed more than one issue and in all a total of 39 issues were examined and seven main categories were identified. Acceptability of the intervention was addressed 25% of the time, young people reported feeling positive about being able to relate to their peers. Factors influencing implementation were addressed 23% of the time. The main issue arising was the significant impact the organizational context had on the functioning of peer delivered health promotion. Working in partnerships with young people was addressed 8% of the time and showed conflicts often occurred that were similar to organizational context issues. There were major problems in supporting peer educators in school settings. Also there was a stated belief of equity and partnership, however once problems arose, professionals tended to take control. Training of peer leaders was reported
on 17% of the time, with the main finding being the importance of ongoing training and support for peer leaders. Personal development of peer leaders was addressed 13% of the time. There was general agreement that training gave peer leaders knowledge and skills and provided them with an opportunity for personal development. Accessibility of intervention was examined 8% of the time, showing very limited data. A consistent finding was the likelihood of a peer leader being female. Lastly, there were limited data on the qualities of peer leaders, as it was examined only 5% of the time. Less shy and more sociable individuals were positively regarded by the target group.

Overall, when considering both process and outcome studies, this systematic review found guarded evidence to support the effectiveness of peer-directed health promotion for young people. There were more sound outcome evaluations which demonstrated peer-directed health promotion to be effective than ineffective. However, using Harden’s inclusion criteria, there were few methodologically strong studies. Thus, it was difficult to identify specific characteristics of an effective model. Most studies reviewed gave little information about the attributes of peer leaders, methods of recruitment, or kind and length of training. As most studies were not based on young peoples’ expressed needs or developed in partnership with them, clearly there is room to increase the extent to which researchers evaluate interventions based on what young people themselves say they need and which are developed in some sort of partnership with them (Harden et al., 1999).

In summary, peer education has been, and continues to be, an integral part of health promotion in school-based programs. Peer education continues to be considered important because it is thought that peer leaders are viewed as highly credible role models for other adolescents and can work through their existing social networks to reach other youth. Peer
led initiatives are also considered beneficial to the peer leaders themselves. Overall, the literature reviewed provides positive support for continuing to include peer led initiatives in school-based health promotion initiatives.

Although youth participation is widespread, almost all programs are designed and directed by adults addressing lifestyle health issues considered to be important for health in adolescence and later on in life. Despite calls in the health promotion literature for the active participation of young people in helping meet their own needs (Nutbeam, 1990; Oakley et al., 1994; Rowling, 1997), few programs have examined peer led initiatives from the perspective of the processes involved where youth take on major design and implementation roles.

In this thesis, I examine a health promotion program in which youth, after a short training period, are expected to initiate activities important to them. The program, Fly Higher, is a peer led initiative directed to promoting young women's health by providing youth leaders with knowledge and skills so they can develop initiatives within their schools that empower young women to make healthy choices and to develop supportive school environments. The fact that youth themselves initiate activities is a departure from the traditional model in which adults assume the leading role, yet is consistent with the current emphasis in health promotion on community mobilization, empowerment, and participation whereby groups and individuals work in partnership with professionals to define and work out strategies to meet their needs (Hart, 1998; Svenson, 1998).

The literature on peer led initiatives has also tended to focus on understanding peer led initiatives from the perspective of their effectiveness in changing behaviour, or their effect on youth leaders themselves. As already pointed out in the literature overview, there are considerably more outcome studies than studies of process. In this thesis I undertook a study
of process in the belief that improvement in peer led initiatives may involve not only changing the content of a program or its delivery method but other factors such as recruitment, training, and school and community support which interact with one another to ultimately influence the success of a program. In order to fully understand the processes and their potential interrelationships, I examined all stages of the program including recruitment, training, experiences at school and consequences. Using a naturalistic inquiry approach I sought to understand from the young women's perspective their experience with Fly Higher. In particular, I focused on the factors that facilitated and constrained their efforts to meet the expectations of the program.
CHAPTER 3: THE FLY HIGHER PROGRAM

As this study examines young women's experiences in a particular peer led health promotion called Fly Higher, it is important to describe this program. This chapter presents background information about the development of the Fly Higher program, its conceptual underpinnings and my involvement with this program.

Background

Fly Higher was developed by the Heart and Stroke Foundation of Ontario (the Foundation): a community organization concerned with cardiovascular diseases. The Foundation supports research aimed at decreasing cardiovascular related mortality and morbidity. Staff at the Foundation also run community programs directed at specific groups at risk for cardiovascular diseases. The Foundation was interested in targeting adolescents and children because they felt that lifestyle habits that place one at risk for cardiovascular disease develop in childhood and adolescence. They decided to develop a program that would influence young women to choose not to smoke or to assist in smoking cessation. Their rationale was that smoking is the number one modifiable risk factor for cardiovascular diseases and recent evidence suggested that smoking prevalence was decreasing more slowly among young women than among young men.

To design a program to reach young women, the Child and Youth program of the Foundation together with various community groups sponsored a Youth Forum in order to learn from adolescent women how to promote and support healthy lifestyles in a way that
would prompt positive action (Youth Forum, Heart and Stroke Foundation, 1995). Seventy young women attended the Youth Forum and shared their stories and suggestions for a program to keep young women smoke-free or to become smoke-free. Forum participants suggested focusing on the precursors to smoking. In addition, they suggested the strong need for tobacco prevention programs to be gender specific, to use peer education strategies, to talk about promoting good health in general, rather than tobacco prevention specifically, and to educate not preach. Based on these ideas, members of the Child and Youth program at the Foundation together with community partners developed a proposal for the Fly Higher program that was funded by the Ontario Ministry of Health, Tobacco Strategy Unit for a two year period (1995 to 1997).

The Child and Youth program manager of the Toronto office of the Foundation was responsible for the program on an overall management basis. The program was run on a daily basis by a program coordinator. A Steering Committee of youth, a teacher, a public health nurse, and other community volunteers (about 15 people) was formed and met every one to two months. A framework was set in place to train young women as core trainers and to advertise and invite Ontario schools to participate in this new initiative. Core trainers were recruited from different regions in Ontario through student leadership organizations and personal contacts.

Twenty female high school students were trained as core trainers in a week long workshop in the summer. They learned about young women's health issues, and how to facilitate groups, be a peer leader, teach other young women to form school teams and act as
peer leaders in their schools. It was a train-the-trainer model.

Following the core trainers workshop, the role of the core trainers was to facilitate day long regional health promotion workshops for high school teams across Ontario. These school teams consisted of three to four young women and one female staff member from each school (Fly Higher, 1995). The purpose of the regional health promotion workshops was to familiarize young women with health issues facing them, to provide them with skills, encourage them to foster initiatives in their schools that would promote healthy choices for young women and foster a supportive school environment. During the regional workshops, each school team received a tool box that included information on how to mobilize their fellow students and obtain support and resources for peer led activities. The core trainers facilitated seven regional workshops across Ontario in the 1995-1996 academic year and eight workshops in 1996-1997. In this study I am concerned with the participants of the regional workshops as they became the youth leaders in their schools.

**Conceptual Assumptions of Fly Higher**

As the conceptual underpinnings of this project were not explicit, several sources of data from the Foundation were reviewed and selected individuals were interviewed to establish the conceptual underpinnings of the Fly Higher program. The original proposal to the Ministry of Health, the Heart and Stroke Newsletter announcing the new program, the Fly Higher Business plans for years one and two of the program, minutes for all Steering
Committee minutes and minutes for all Evaluation Committee meetings were reviewed. Discussions with both the past and current program managers, and the original and current program coordinators were held.

I concluded that the conceptual underpinnings of Fly Higher remained implicit rather than explicit. Early documents indicated that the initial intention was to develop an explicit conceptual framework for the program, but it was not developed. Perhaps, the reality of the work situation led practitioners to be concerned with ongoing activities and measurable results, rather than theories that would direct their practice. Buchanan (1998) reports that this is a common finding in community-based health promotion programs.

The documents reviewed and the interviews conducted led me to identify several implicit assumptions. The most important assumption was that the program would use a peer to peer approach in which the main strategy would be peer modeling. Training was given to support the capacity of both the core trainers and the school team members to act as models or leaders. The core trainers would be peers to the youth on the school teams who attended the day long workshops. Core trainers would model behaviors that they wanted the school team members to learn. The training workshop would provide the school team members with knowledge, skills and attitudes necessary to successfully develop peer led initiatives back in their schools. The youth leaders would then be peers to high school students in their home schools. They would model behaviors they wanted school youth to learn. All participants would be high school students between grades nine and OAC (thought of as grade 13 in Ontario) because it was felt that young women would best understand the needs of other
young women. Above all, school team members would educate and motivate by actively involving their school peers and NOT by preaching (passive learning). Young women strongly felt preaching would not work.

A second assumption was that the Fly Higher program would *empower young women* to take charge once back at their schools. In line with this assumption, a week long summer training workshop was designed to provide the core trainers with knowledge and skills that would promote their self efficacy. It was expected that if the core trainers had the skills and belief in themselves, they could then empower the school team members during the regional workshops by increasing their knowledge, skills and confidence to develop initiatives back in their home schools. In turn, school team members would empower their fellow students in their schools by engaging them in peer led initiatives in their schools which they themselves (school youth) had chosen because they thought these were important. The idea was that an informed and skilled student population would have more control over their health.

A third assumption of Fly Higher was the youth would *mobilize their peers to develop health promotion initiatives*. Core trainers would mobilize the school teams at the regional workshops by having the members develop action plans with short and long term goals. Core trainers would also help team members become familiar with possible resources in their communities. It was expected that the team members would mobilize their fellow students to plan and carry out health promotion initiatives in their schools. It was assumed that youth in schools would be interested because it was their peers (not adults) directing activities.

A fourth assumption was the Foundation *staff would provide support and resources* to
core trainers, school team members, and the school communities involved in the Fly Higher program. In particular they would work closely with school teams in the school setting by providing them with necessary resources. Also, it was assumed the school community would be supportive of the school teams efforts in developing peer led initiatives.

Finally, it was assumed that the outcomes of school team members developing peer led initiatives would be twofold. The first outcome would be improved health behaviors of youth in schools, primarily related to promoting and improving heart health. The Steering Committee members selected: healthy eating, increasing physical activity, stress management, and promoting non-smoking, or assisting with smoking cessation, as relevant healthy lifestyle behaviors on which to focus. Other adolescent behaviors, for example healthy sexuality, and alcohol and drug use were not addressed specifically or encouraged. However youth were told they were free to deal with any issues of their choosing. The second outcome would be improvement in the school environments. School team members were encouraged to make their school environments more supportive of healthy choices for young women. For example, it was hoped that through changing available food in the cafeteria and school vending machines, young people would make healthier food choices.

Based on the assumptions, the following processes and outcomes of the Fly Higher program were expected. The processes were expected to occur during the regional training workshops and back at school. The outcomes were expected to occur back at school.

**Training.** School team members received a day long experiential training workshop led by core trainers. The aim of the workshop was to give school team members the
knowledge, skills and attitudes necessary to carry out initiatives in their schools. School team members learned about current health issues relating to young women, and participated in group building exercises. They were encouraged to make short term and long term goals for their school teams directed towards making their schools healthier for young women. School team members brainstormed about resources in their communities. Each school team was given a tool box of pamphlets, posters, a binder with action plans for activities, and a handbook with a summary of learning from the training workshop, to use as guides when back at school. It was hoped that as a result of the training, school team members would feel more comfortable and confident and could then initiate activities.

**Developing Peer Led Initiatives.** Refers to activities that youth would engage in once they returned to their schools. School team members were expected to meet and decide what was needed in their particular school context. They would then plan activities, develop strategies to gain support from school administration and students, use available resources, mobilize their fellow students and carry out activities.

**Impact.** Refers to expected impact on both individual school youth and their school environment. It was expected that by developing peer led initiatives, the school team members would have an impact on their fellow students' health and their school environment. The Steering Committee members were most interested in school youth improving their heart health behaviors, such as less smoking, more healthy eating, more physical activities, and better stress management. In addition, the Steering Committee members were open to school team members supporting any other health behaviors youth identified as important for
members of their school community. Also, it was intended that school team members would try to make their school environment more supportive of young women's healthy choices through structural changes that would include such changes as improving the healthy meal choices in school cafeterias and increasing the availability of non-competitive physical activities for young women.

**My Involvement**

I responded to a request for volunteers for the Fly Higher program in October 1995. I negotiated with the program manager to be an active member of both the Steering Committee and the Evaluation Committee and that I would use the program as a basis for my dissertation.

During the first year of my involvement with the Fly Higher program, I attended Steering Committee meetings, a regional school team workshop in Toronto, and was actively involved as a member of the Evaluation Committee in carrying out the year one process evaluation of the program. An external evaluator, a Heart and Stroke support staff member, and I telephoned the core trainers, members of school teams, and school principals to question them about their experiences with the Fly Higher program. Overall, the core trainers rated the program very favourably in terms of their personal growth and also the activities they had implemented through their association with the Fly Higher program. Youth school team members spoke about their enthusiasm for the program on the day of the
workshop and immediately afterwards. However, life seemed to get in the way of their plans drawn up at the workshop. Once back at school, the school team members frequently mentioned feeling alone and not supported by either the core trainers or the Fly Higher staff. Many adult members of school teams talked about a lack of time on their part and a lack of support from their school administration. School principals often did not know about the Fly Higher team in their school, even though they might have passed on the initial information about the program to the adult member of the school team. Few school teams carried out activities during the first year.

During the second year of my involvement, I continued to be an active participant on the Steering Committee and the Evaluation Committee. In order to address the shortcomings identified in year one, changes were made to the Fly Higher program. It was changed from a specific tobacco prevention focus to a more comprehensive, but still heart health focus. Special support systems were set up to assist school teams in initiating and successfully running activities in their schools. Support activities included follow up calls from the Fly Higher office to the adult members, letters to school principals informing them a group from their school had attended a workshop, and core trainers were matched to school teams and were asked to stay in contact with them.

In year two, I attended all local workshops to learn more about what was happening with the school teams. Also, I contacted a representative from each of the three participating school teams following the first local workshop (in Mississauga, December, 1996). I did monthly follow up calls (January to April) to one member of each school team (two youth
members and one adult member). I learned from these phone calls that the projects developed in distinctive ways in each location. By spring, I was disappointed to discover that in one team, the youth who attended the Fly Higher workshop were no longer involved. In the second team, the youth had actively decided to put activities on hold. Only the third team was active. I realized that the enthusiasm and energy the school team members had on the day of the workshop was not enough to ensure they could carry out initiatives in their high schools. I wondered what were the processes that occurred when they returned to their schools that would help explain how things unfolded as they did. Given the importance placed on youth involvement in health promotion prominently mentioned in many key policy documents, I wanted to understand the processes involved, what helped and what hindered youth as they tried to develop peer led health promotion initiatives in their schools. To do this, I decided to examine the youth experiences at the training workshop and the processes that occurred when they returned to their schools, from their own perspectives.
CHAPTER 4: RESEARCH METHODS

This chapter addresses the purpose of the study, the research questions and the methodology. The choice of naturalistic inquiry as an overall methodology is explained and McLeroy's social ecological model as the guiding conceptual framework is outlined. My perspective as a researcher is briefly accounted for. The specific methods used in this study are described: the recruitment of participants and background information, data collection and data analysis procedures, different strategies to ensure methodological rigour, and lastly, ethical considerations.

Purpose and Research Questions

The purpose of this study was to examine young women's experiences as they developed peer led health promotion initiatives in their schools. Initially, I started my interviews wanting to look generally at the experience youth had in developing peer led initiatives in their high schools. As the study continued, I realized that a "process of refining and specifying the question" began (Strauss & Corbin, 1990, p. 40) and the overall question guiding this research evolved to be: What are the factors and processes that facilitate and constrain young women as they develop peer led health promotion initiatives in their high schools? To fully understand the process, I developed questions that addressed recruitment and training, planning and initiation of activities, and consequences. Although the focus of my work was on youth perceptions, I included information from adult members and administrators to enhance understanding of the influences of the larger school environment.
on youth's efforts to develop peer led initiatives. My research was guided by the following questions:

1. How did youth perceive their training experience?

2. How did youth develop peer led initiatives in their high schools?

3. What were the conditions that youth, adult members and administrators identified as promoting peer led initiatives?

4. What were the constraints that youth, adult members and administrators identified as barriers youth experience when developing peer led initiatives?

5. What did youth perceive were the consequences for themselves?

6. What did youth perceive were the consequences for their school environments?

**Overall Methodology: Naturalistic Inquiry**

Selection of a paradigm is one of the most fundamental considerations in research (Cresswell 1998; Lincoln & Guba 1985). As Guba and Lincoln (1994) point out "Questions of method are secondary to questions of paradigm, which we define as the basic belief system or world view that guides the investigation, not only in choices of method, but in ontologically and epistemologically fundamental ways" (Guba & Lincoln, 1994, p.105). Furthermore, I agree with Philips (1990) who proposes that "paradigms serve as lenses, not blinders "(p. 41) to guide researchers.

Traditionally much of health research has been guided by a positivist paradigm whose basic tenets are outlined below in Table 4.1. In essence the positivist perspective rests
on an assumption that there is a distinct reality that can be studied using a deductive process. The aim is to produce findings that can be replicated and that are therefore generalizable. The researcher is thought of as being unbiased and value free.

The naturalistic paradigm is a major alternative system for conducting disciplined inquiry. Table 4.1 shows that in this paradigm it is thought that there are multiple realities because reality is constructed by both the individual providing the information and the researcher who interprets this information. In comparison to the positivist paradigm, the methods used tend to be qualitative instead of quantitative and inductive rather than deductive (Tesch, 1990). The reader must decide for herself/himself the degree to which the findings are relevant to other situations. It is recognized that the researcher’s values are important in the way in which information is gathered and interpreted.
Table 4.1 Comparison of the Positivist and Naturalistic Paradigms

<table>
<thead>
<tr>
<th>Philosophical Questions</th>
<th>Positivist Assumptions</th>
<th>Naturalistic Assumptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is the nature of reality</td>
<td>reality is single, tangible, and fragmentable</td>
<td>realities are multiple, constructed, and holistic</td>
</tr>
<tr>
<td>How is the inquirer related to those being researched</td>
<td>knower and known are independent, a dualism, findings are not influenced by the researcher</td>
<td>the knower and known are interactive and inseparable, findings are the creation of the interaction process</td>
</tr>
<tr>
<td>What is the possibility of causal linkages</td>
<td>there are real causes, temporally precedent to or simultaneous with their effects</td>
<td>all entities are in a state of mutual simultaneous shaping. It is impossible to distinguish causes from effects</td>
</tr>
<tr>
<td>How is knowledge obtained</td>
<td>deductive process, emphasis on discrete, specific concepts verification of researcher’s hunches, fixed design, tight controls over context, emphasis on measured quantitative information, statistical analysis seeks generalizations</td>
<td>inductive process, emphasis on entity of some phenomena, holistic emerging interpretations grounded in participants experiences, flexible design, context bound, emphasis on narrative information, qualitative analysis seeks patterns</td>
</tr>
<tr>
<td>What is the role of values</td>
<td>inquiry is value free, biases and values are held in check, objectivity is sought</td>
<td>inquiry is value bound, subjectivity and values are inevitable and desirable</td>
</tr>
<tr>
<td>What is the possibility of generalization</td>
<td>time and context-free generalizations are possible</td>
<td>only time and context bound working hypotheses are possible</td>
</tr>
</tbody>
</table>


For my study I chose to work within the assumptions of the naturalistic paradigm because my interests seemed to be best served by each of the major tenets of this paradigm. I discuss each of these and describe how I dealt with them.
First, the naturalist view is that the world is complex and interconnected and that research must maintain complexity if explanations are to be trustworthy (Mayrutt & Morehouse, 1997). Reality is a construction of the individual participant in the research and many constructions are possible. The acceptance of complexity and multiple realities permitted me to explore the entire process of young women’s experiences in the Fly Higher Program including their recruitment, training, activities back at school, and long-term continuation of the project. Since I was interested in the youth perspective, I particularly wished to understand how they constructed their experiences while recognizing that their experiences would reflect their particular context and that many constructions would probably emerge (Bryman, 1995; Eastabrooks, 1997).

Second, in the naturalistic paradigm, it is assumed that knowledge is maximized when the distance between the inquirer and the participants is minimized. The voices and interpretations of those under study are key. As Millstein (1993) has noted, youth views are absent in the literature. Although youth are perceived to play a key role in peer led initiatives their own accounts about these are lacking. I felt that a naturalistic inquiry would provide youth with the opportunity to give their own accounts. To minimize distance between myself and the youth, I made all of the arrangements with the youth and I collected all the data from study participants myself as well as interacted with them. In addition, I familiarized myself with the context by attending all of the local training workshops in order to see first hand how they were run and how youth reacted to them.

Third, in the naturalistic paradigm the researcher’s understanding of causal linkages stems from the first two assumptions. If reality is multiple and constructed, therefore in
terms of what an event or action means, the event is multidirectional. Thus, the researcher must seek patterns or multi-directional relationships that emerge from the data. In naturalistic inquiry, the meanings of the data are negotiated with the participants (Lincoln & Guba, 1985). Therefore, I checked with each participant after each interview if I understood their responses correctly and I contacted a select number of participants later in the analysis to confirm if they agreed with my interpretation of their experiences.

The fourth assumption of the naturalistic paradigm is that data collection and data analysis use mostly an inductive approach. Findings are a product of the interactions between the inquirer and the participants. The emphasis is on understanding the human experience as it is lived through careful collection and analysis of narrative, subjective materials (Polit & Hungler, 1997). In this way, I acknowledge the inherent complexity of humans, the ability of humans to shape and create their own experiences and the idea that truth is a composite of realities. Inductive data analysis is preferred because in inductive data analysis the findings emerge from the data, rather than being imposed on the data from apriori hypotheses.

Flexibility regarding procedures are used to capitalize on findings that emerge in the course of the study. As new insights are gained, new questions emerge and further evidence is sought. The research design flows, rather than being pre-constructed. Thus, I began my study with a general research question, to describe and explain youth experiences in a peer led initiative. However, once I was in the setting, I learned that what seemed most important to youth were the facilitating and constraining conditions that they had to deal with while developing peer led initiatives in their schools. Thus, I changed my focus to examine more carefully the facilitating and constraining conditions they experienced.
Data are assembled and organized to permit comparing, contrasting and bestowing patterns on them (Miles & Huberman, 1994, p. 7). Qualitative researchers develop concepts, insights, and understandings from patterns in the data (Taylor & Bogdan, 1998). They do however work within theoretical frameworks, as pure induction is impossible. Within a broad theoretical framework, the goal is to make sure the theory fits the data and not vice versa (p. 8). Thus in analysing my data, I allowed patterns to emerge from the data and later I re-examined the data and applied McLeroy’s social ecological model to my findings.

Fifth, the naturalistic paradigm assumes that values are embedded in the whole research process. For example, values guide the decision about what topic to study, the way the issues are examined, and the researcher (Lincoln & Guba, 1985). Since it is important to account for the researcher’s values (Lincoln & Guba, 1985; Miles & Huberman, 1994) I engaged in my personal reflection of what I brought to the study (see section on researcher’s perspective) and how this might affect my data collection and interpretation.

Sixth, and last, researchers working within the naturalistic paradigm value context sensitivity. They assume phenomena examined are complex and exist within a particular situation and environment at a certain point in time. Naturalists are hesitant about broad generalizations because findings are somewhat dependent on the interactions between the researcher and the participants that may not be duplicated elsewhere. Furthermore, the extent to which findings may be applicable elsewhere depends on the empirical similarity of sites (Lincoln & Guba, 1985, p. 42). Thus, there are only tentative application of the findings in naturalistic studies. In order to assist with the application of findings, the researcher describes the participants and sites. To assist the reader, I like other qualitative researchers
provide a detailed description of the context for the study and my role in it. In addition, I provide numerous quotes to support my analysis.

**Guiding Conceptual Model for this Study**

As noted by Miles and Huberman (1994), most naturalistic qualitative studies lie somewhere between a loosely structured, emergent, inductively grounded method and a deductive, confirmatory technique. This means that the researcher begins with some hunches, ideas, and frameworks from past experiences and readings both to frame the questions to explore issues and to analyse the findings (Creswell, 1998). My presupposition on the need for an exploratory approach does not preclude the use of a proposed model as a guiding framework. For this thesis I adopted a social ecological model as a guide to understand the complexity of youth experiences with Fly Higher. Social ecological models recognize that there are multiple dimensions of influences on behaviours (Green, Richard & Potvin, 1996; McLeroy et al., 1988; Minkler, 1999; Sallis & Owen, 1997; Stokols, 1996). These dimensions are generally grouped as intrapersonal factors, social and cultural environments, and physical environments. Intrapersonal influences are generally thought of as psychological, cognitive and emotional influences on behaviour. Social and cultural influences include family, peers, organizations, communities, institutions, and public policies. Lastly, the physical environment influences include both natural and constructed environments.

Social ecological models propose that there are interactions of influences across dimensions. For example, students may have knowledge of healthy food choices (intrapersonal influence), but there may be no local stores in which to purchase healthy foods (community level influence). Similarly, schools influence students physical activity patterns through access to physical activity classes, opportunities for physical activities at recess, and
health education in schools (organizational level influences). The community can also influence students’ physical activity patterns through the availability of parks and walking and cycling trails (community level influences).

There are many social ecological models. For this thesis, I selected McLeroy and colleagues’ social ecological model (McLeroy et al., 1988) as a guide because it has been used in understanding influences on behaviours and in complex efforts at health promotion efforts in school and work settings (Perry et al., 1996; Sorensen et al. 1998; Stiffman, Dore, Cunningham & Earls, 1995; Sword, 1997). In McLeroy’s model, individual behaviour is posited to affect and be affected by the social environment. The model divides the environment into five analytical levels to assist with focusing attention on different types of social influences on behaviours. These levels are intrapersonal, interpersonal, organizational, community, and public policy (McLeroy et al., 1988). Intrapersonal factors are factors within individuals such as their knowledge, attitudes and skills that may influence their behaviour. Interpersonal processes include interactions with families, friends, neighbours and others and involve social relationships. Social relationships provide important resources such as: emotional support, information, access to new social contacts and social roles, and tangible aid. Organizational factors include the rules, regulations, values and culture of organizations, and the way in which organizations operate. Community factors refer to relationships among organizations, institutions, and informal networks within defined geographic boundaries. Public policy, the fifth level of influence refers to local, provincial, and national laws and policies. Each of the five levels of influence are “seen as intimately interdependent levels of analysis that must be considered if we are to better understand both health related behaviours and interventions that may be appropriate at each level” (Minkler, 1999, p. 132).
In this study, I use McLeroy's conceptual model as a vehicle to assist me in understanding the different levels of influences affecting school team members' experiences in developing peer led initiatives. The only level specifically excluded in this study is policy (local, provincial and national). I also use this model to assist me in examining the different levels of impact of peer led initiatives, as the model focuses attention on both the individual

![Figure 4.1: A Conceptual Model to Understand Different Levels of Influences on Youth Leaders' Experiences Developing Peer Led Initiatives](image)

and the environment as targets for health promotion interventions. Figure 4.1 shows how I superimposed the McLeroy social ecological model on the Fly Higher program.
The outermost circle represents community level factors that would impact on young women's ability to develop peer led initiatives. The next circle is the school context where young women are attempting to develop their peer led initiatives and represents organizational level influences. Interpersonal level influences is the next level, followed by intrapersonal level factors. At the centre of the figure, the three columns of Training, Developing Peer Led Initiatives, and Impact represent the sequence of events that was supposed to happen in the Fly Higher program. The training column represents the aims of the Fly Higher training workshops. These were designed to increase young women's knowledge about women's health issues; develop skills in working in a group, organize activities and access resources; and foster more confident attitudes about initiating activities in their schools. All of these represent intrapersonal factors that were thought to be necessary for the success of the program. During the training, Fly Higher also attempted to address interpersonal factors by assisting youth leaders to become a team and involving an adult member who would later act as an advisor to the student team.

The second column refers to Developing Peer Led Initiatives in Schools. This involves planning and carrying out activities of their own choosing and can be thought of as interpersonal level factors. Organizational level influences such as school rules and regulations may affect youth developing strategies to gain support and mobilize students.

The last column refers to Impact of the Fly Higher program. It was hoped that developing peer led initiatives would affect both individuals and their school environments. At the intrapersonal level, school team members would experience changes in self knowledge and perceptions of self efficacy. Depending on the peer led activities carried out, their fellow students would have increased awareness of health issues and/or changes in their health
behaviours. At the school level, it was hoped the activities would result in environmental change, such as better food in the cafeteria. Thus, consequences could be viewed as occurring at intrapersonal (individual) and organizational (school) levels.

I used the framework presented in Figure 4.1 as sensitizing concepts both to guide the questions asked during the interviews and to guide data analysis. As such, it was useful to organize the mass of complex information provided by participants about their experiences.

**Researcher’s Perspective**

In naturalist inquiry, the presence of self must be accounted for because it is recognized that the researcher has a profound influence on the research process (Lincoln & Guba, 1985). My decisions about how I approached the study, how I interviewed participants, and lastly, how I analysed the data were affected by who I am.

When reflecting on my interest in young women and peer led initiatives and how I wanted to approach this study, I realized my personal experiences as a teenager affected my outlook on this study. When I was 15, I joined a group which invited adolescents from high schools in Montreal to work with less fortunate people. During my two years with this project, I met many individuals who had difficult life circumstances. I came to realize that there were many different “lived experiences” that I had not previously been aware of and would need to consider in enhancing my understanding of participants stories.

In addition, I became involved in the Fly Higher project because I was fascinated by the potential youth have and I was very interested in learning how they could be supported in their initiatives. As a volunteer with the program, I was enthralled with their enthusiasm and their potential to make a significant difference in their peers’ lives. This led me to start the
research with a positive and uncritical acceptance of the underlying assumptions of the program.

During the research process, I was aware of my potential influence on the kind of information I was obtaining from participants. I used strategies to facilitate participants' level of comfort, such as allowing participants to select the interview location so that they would feel comfortable expressing their views. I also assured them of their right to refuse to answer any particular question. I was not judgmental to their responses and I encouraged them to tell me their stories. Although I gave a voice to the participants, I recognized that, ultimately, I had control over the interpretative process. My very positive feelings towards youth, and their potential to make a contribution towards society, may have led me to interpret my data positively towards youth and less positively towards adults and the bureaucratic structures of schools. I tried to be aware of these feelings and ensure that they did not bias my interpretations of the data.

My perspective on the process of youth developing peer led initiatives was that it would be a complex one influenced by multiple conditions and constraints and changes over time. I believed that the perspectives of youth would be different than the perspectives of adult members and administrators. For this reason, I included interviews with some adult members and administrators. This increased the complexity of my data analysis and its presentation, but I have a fuller account of the process.
Methods

Recruitment of Study Participants

In qualitative methods, sampling is purposeful rather than random (Miles & Huberman, 1994; Patton, 1990). In this study, maximum variation sampling was used to gain as much information as possible about the range of youth experiences (Lincoln & Guba, 1985). I chose participants from all five Fly Higher workshops across Ontario done prior to February. This ensured I had as much variation as possible and also ensured that school teams chosen for this study would have had sufficient time left in the school year to develop initiatives. At my request, the Fly Higher Co-ordinator identified two school teams from each of the five workshops, one that in her judgement would become successful and the other she felt would run into difficulties. Thus, for the initial selection, there were 10 school teams. I decided that two youth from each school team would be interviewed for a total of 20 interviews. In addition, I wanted to interview the adult member (10) and principal (10) from each of the school teams to have their perceptions on issues affecting youth’s efforts to develop health promotion initiatives. When two adult members declined to participate, I chose two additional school teams that were close enough geographically for me to interview and in which the adult members and principal agreed to participate. Therefore, the total number of school teams recruited for this study became 12. This given, I planned on interviewing 24 youth from schools, 10 adult members and 12 administrators (see Appendix A for workshop schedule and team selection). I intended to stop interviewing when I did not receive any new information as theoretical saturation would be reached (Lincoln & Guba, 1985; Strauss & Corbin, 1990). Conversely, I intended to add more interviews if the data provided by the participants I had selected was not sufficient.
The recruitment process involved a staff member or volunteer from the Child and Youth program at the Heart and Stroke Foundation calling the adult members and administrators to ask if they were interested in hearing about my study and possibly participating. If the respondents agreed, I called them, described the study, and asked them to participate. I recruited youth by asking the adult member of each school team to ask youth on the team if they were interested in hearing about the study. If the youth agreed, I called them, explained the study and asked them to participate.

**Background Information**

The 12 schools represented by the school teams were diverse. In size, they ranged from 700 to 1,860 students, with the average school having 1,099 students. Seven schools served populations in four urban areas (Kitchener, Mississauga, North York, and Windsor) and five schools served populations in five regions of the province (Dryden, Fort Francis, Kirkland Lake, Listowel, and New Liskert). The communities were located in Central, South Western and Northern Ontario. The schools were located in a range of communities from affluent communities to communities with high unemployment rates (See Appendix B).

Although the sample was selected during the school year, the interviews were carried out in the summer following the end of the school year. I had planned to interview two youth from each of the 12 school teams. However, in one situation, I learned that only one youth attended the workshop and in a second situation, one youth was not available at the time of the interview. As theoretical saturation was reached at that point, I deemed it unnecessary to contact more youth. Thus, I conducted 22 interviews with youth.
At the time of the interview, the youth were from 15 to 19 years of age. During the academic year, one youth was in grade 9, seven were in grade 10, four in grade 11, six in grade 12 and four youth were at the OAC level. The youth were predominantly born in Canada and spoke English at home. Three of the 22 youth spoke a language other than English in their homes and two students were born in countries other than Canada. Most of the youth had attended their respective schools for two to four years. They participated in many extracurricular activities; mostly sports, student council, and school committees. Several students had attended conferences and workshops, were involved in leadership work, and/or were involved in music, art or drama. These young women were very active and involved in their school communities. Besides extracurricular activities in school, more than half of the youth worked between one to 15 hours a week during the academic year. Four students worked more than 16 hours a week. (See Appendix C).

Interviews were conducted with 10 adult members of the Fly Higher school teams. Eight adult members were full time teachers, one was a half time teacher and a half time department head. The remaining adult member was a public health nurse who worked in the school two half-days a week. All of the adult members were baccalaureate prepared and half of the teachers had degrees in physical and health education. Most of the adult members reported that they had been working at their respective schools for an average of nine years. They frequently cited past experiences in coaching, other student programmes, as a school counsellor, and family experiences as influences on their role of working with young people. (See Appendix D)

I interviewed one administrator in each of the 12 schools that participated. Ten were high school principals, one was a vice principal and another was a department head. All administrators had baccalaureate degrees, and seven had masters degrees. The majority of
administrators had their highest degrees in education, while others had their highest degrees in physical education, the arts or the sciences. Most of the administrators had been in their position for more than five years and had been employed at their current schools for an average of nine years. All administrators held full time positions (See Appendix E).

Data Collection

A semi-structured interview guide was prepared to make sure key topics were explored with participants (Taylor & Bogdan, 1998). Open ended questions were used because they are most appropriate for examining complex issues or processes and when the paradigmatic and theoretical underpinnings of the study make it necessary to probe participants’ perceptions (Waltz, Strickland & Lenz, 1991).

I developed slightly different interview guides for youth school team members and adult members. The youth school team members interview guide included questions about their recruitment and training, their planning and initiation of activities, their perceptions of barriers and facilitators encountered while they developed their initiatives, and their perceptions of the outcomes of involvement, with regards to their school environment and themselves (see Appendix F). The interviews with youth ranged between 30 to 95 minutes in length, with the average interview length being about 40 minutes. The interview guide for adult members covered the same topics. In addition, the adult members were asked about their role as members of the school teams (see Appendix G). The interviews with adult members ranged from 15 to 55 minutes, with the average interview length also being about 40 minutes. School administrators were asked questions that focussed on conditions in their schools and school board policies that supported or acted as a barriers to youth driven
initiatives (see Appendix H). The interviews with administrators ranged between 15 to 30 minutes, with the average length being about 20 minutes. At the end of each interview, I asked all study participants background information questions (Appendices C, D & E). I then verbally recapped the information the participants had given me during the interview to ensure what I heard was consistent with their intention (Denzin & Lincoln, 1994).

I interviewed all participants in this study either in person or by telephone. When the travelling time involved was more than two and one half hours by car each way, I conducted interviews by telephone. Telephone interviews are the best source of information when the researcher does not have direct access to individuals, for example from a wider geographic area (Creswell, 1998; Waltz et al., 1991). Telephone interviews do not allow the researcher to observe the setting or the respondent’s non-verbal communication (Creswell, 1998; S. Faux, personal communication Oct 11, 1999). However in both face to face and telephone interviews, the interviewer can probe for information and clarify responses (Polit & Hungler, 1997). Although I was concerned about possible differences between the in person and telephone interviews, I could not detect a difference in participants’ responses.

Participants were contacted at times and locations convenient to them. At the participants’ request, interviews occurred during work hours (from 7:30 am to about 5:00 pm) and also throughout the evening (to 11:00 pm). Each in person interview was held at a location convenient to the participant (Dilman, 1978; Waltz et al., 1991). Locations included their homes, coffee shops, schools, and a park.

During the interviews, I felt I was able to establish rapport without much difficulty. I was friendly and non judgmental in my approach to participants. The participants knew I volunteered with the Fly Higher program and that I wanted their views on their experiences. Participants appeared comfortable discussing issues relating to their involvement in the Fly Higher program.
When participants addressed certain topics, I encouraged them to provide details and sought clarification with gentle probes like “Can you tell me more about...” (Taylor & Bogdan, 1998).

In keeping with the principles of naturalistic inquiry, I adapted the interview questions as participants highlighted certain areas and dismissed others (Lincoln & Guba, 1985). For example, in initial youth interviews, youth talked about the importance of becoming a group. Therefore, I explored this issue more fully in subsequent interviews with other participants. In several early interviews, youth reported being busy with extra curricular activities. Therefore in later interviews I asked all youth about their extra curricular activities. Also, I initially asked youth about an internet chat line (supposedly set up for them for support by staff at the Heart and Stroke Foundation). After questioning a few youth about it, and no one was aware of it. I checked with the Heart and Stroke Foundation, and I found out it was not up and running, therefore it was irrelevant and dismissed as a question.

I wrote field notes following each interview. These included my responses to each interview and theoretical notes, including working hypotheses, concepts, and hunches (Lincoln & Guba, 1985; Morse & Field, 1995; Taylor & Bogdan, 1998, see Appendix 1). These field notes suggested themes that needed to be followed up in subsequent interviews. For example, initial youth interviews suggested that group process issues and the adult members role were important considerations. I explored these issues with subsequent interviews to support or disconfirm their importance.

A limitation occurred with data collection. Although I was interested in understanding a process that occurred over time (from their experiences at the training workshop, back at school and to the end of the year), I interviewed participants at one point in time. However, I volunteered with the Fly Higher program for a three year program, two years before my study and one year after. Thus, I had continued involvement with overall processes in the project.
Data Analysis

As is consistent with naturalistic inquiry, data collection and analysis occurred concurrently (Lincoln & Guba, 1985; Miles & Huberman, 1994; Strauss & Corbin, 1990; Taylor & Bogdan, 1998). A number of strategies recommended in the literature dealing with qualitative analysis were used (Miles & Huberman, 1994; Patton, 1990; Strauss & Corbin, 1990). After each interview, I listened to the audiotape and reviewed my field notes. I reflected on the content of the interview, insights, interpretations and working hypotheses (see Appendix I). For example, youth talked about getting along in a group, and adults talked about the stresses and strains in schools. I developed one hypothesis that group process issues were important to youth attempting to develop peer led initiatives in their schools and a second hypothesis that adults felt constrained by conditions in their schools. I continued my interviews seeking further information on these issues.

Data analysis advanced as interviewing continued and as each interview was transcribed. I used constant comparative methods coding techniques recommended by Strauss and Corbin (1990) to guide my data analysis. Initially, when reviewing each interview transcript, I examined the text line by line within the paragraph, words were highlighted, and I made coding notes. I asked questions of the data and made comparisons looking for similarities and differences between each incident and event (Strauss & Corbin). Specific incidences in the data were continuously compared, concepts were refined, properties were identified, and relationships were explored (Taylor & Bogdan, 1998).

I shared my initial interview transcripts and preliminary codes with committee members and received feedback on my developing coding scheme. The preliminary coding framework
were entered and coded on a NUD*IST 4 data base (NUD*IST. 1997. Non Numerical Data Indexing and Systemic Theorizing) (see Appendix J for preliminary codes).

As suggested by Patton (1990). data were analysed first at the level of the individual interview. However. I realized that although the learning that occurred at the workshop and outcomes for youth were individual level data. what happened back at school was best examined by school teams. Thus. I combined the interviews to become school team stories for further data analysis. Also. I found the chronology of school team members experiences emerged as a useful analytic tool. Thus. the story of their experiences unfolded from prior to the workshop. in the workshop. and once they returned to their high schools.

Data analysis focussed on developing a range of conceptual categories and codes. saturating these categories. explaining and interpreting the themes. and explaining the data (Miles & Huberman. 1994). Data analysis was not a rigid step by step process. rather flexibility and going forwards and backwards was important (Strauss & Corbin. 1990). I reflected on the data and developed more understanding for the analysis I was attempting. Strauss and Corbin suggest three levels of coding: open. axial. and selective coding. I used the first two levels of coding. open and axial.

Open coding helps with “the process of breaking down. examining. comparing. conceptualizing and categorizing data” (Strauss & Corbin. 1990. p. 61). Open coding involves dealing with the data in small pieces. naming and categorizing phenomena. I made comparisons looking for similarities and differences between each incident and event; and I grouped similar phenomena together to form a category. For example. when I noticed that youth were selected by their Phys Ed teacher or by another teacher. I developed a category called recruitment. I identified two sub categories. direct recruitment by the adult member and recruitment by personal referral to the adult member.
Whereas open coding breaks down the data into small pieces, axial coding provides a means to “put back together in new ways after open coding, by making connections between a category and its sub-categories” (Strauss & Corbin, 1990, p. 97). Axial coding involves finding relationships among categories developed in open coding. I related categories to sub-categories by asking questions and making comparisons. Statements were verified against data and propositions were supported or disconfirmed. Qualitative data analysis is a back and forth process involving both induction and deduction (Miles & Huberman, 1994; Taylor & Bogdan, 1998). Suggesting propositions was a deductive method that led to further data collection and theoretical sampling. This in turn led to more induction and provisional testing. I further developed categories and sub-categories in terms of their properties and dimensions. In my data, I realized that various events prior to them returning to school had important implications for the youth’s experiences once they returned to school. For example, how they were recruited, the number of students who attended the workshop, the characteristics of the youth who were recruited, all had implications for what happened at the further stages of the project. Thus, I related all of these categories into one large theme called “Setting the Stage”. This theme highlights relationships in the recruitment experiences and workshop learning and sets the stage for youth experiences back at school. Once youth were back at school, I identified that youth needed to connect as a team. The school teams needed to get started, manage difficulties and work with their adult members. Connecting was the first process in the overall experience back at school. I called the overall experience of youth being back at school by the theme “Negotiating Their Way “. Variations in youth leaders experiences relating to these processes added density to the developing theoretical explanation of their experiences.

Thus, the initial coding emerged directly from the data. Later, I added my guiding conceptual model as an analytic framework in my analysis. I grouped my categories under levels of influences on youth leaders behaviours as occurring at the intrapersonal, interpersonal.
Thus, the initial coding emerged directly from the data. Later, I added my guiding conceptual model as an analytic framework in my analysis. I grouped my categories under levels of influences on youth leaders behaviours as occurring at the intrapersonal, interpersonal, organizational and community levels. I also identified consequences of this health promotion initiative at both the intrapersonal (individual) and organizational (environmental) levels. I found for example, intrapersonal level factors that affected how youth were able to develop peer led initiatives included how youth managed their time, and if youth felt they had the abilities and the desire to carry out initiatives. Interpersonal level processes identified in the data included the relationships students needed to develop both with each other, their adult member and lastly, for their initiatives to succeed, their school peers. Organizational level factors identified in the data included school rules, resources and school atmosphere. Community level factors included resources available to students from the community. As a social ecological model is a systems model and the different levels interact, the different levels of analysis proposed were not strictly independent, rather they overlapped. Thus, in my data analysis, judgements had to be made regarding the level of influence represented by a particular observation. In instances where there was a lack of clarity, observations were subsumed in what I considered the best location.

Interview excerpts are quoted in the Findings chapters. Quotations are provided verbatim from the interviews, with some exceptions. At the suggestion of my committee members, when there were several "likes" and "uhms", they were removed because they were found to be very distracting. For example:

Actually, like getting contact with people, getting like, the information is tough. Like, there was meetings, and; it was free lunch. and it was for girls only. Like, people thought it was kind of dumb. (uh huh) kind of. I don't know. It's just the way our school
is. It's really difficult. like, it's really hard. It's hard to get people motivated and to understand that the school's not this. all work and no play. Like you know.

*Was changed to:*

Actually, getting contact with people, getting the information is tough. Like, there was meetings, and, it was free lunch, and it was for girls only. People thought it was kind of dumb, kind of. I don't know. It's just the way our school is. It's really difficult. it's really hard. It's hard to get people motivated and to understand that the school's not this. all work and no play.

Also, words or phrases in brackets have been added to clarify the context of remarks. For brevity and clarity for the reader, words or sentences of the interview have been omitted when they were not directly relevant to the interpretation. In terms of punctuation to illustrate the context:

... refers to an omission of words/ sentences in a participants' reply at one time. For example:

I asked them for leaders. Somebody who would be good, and bring back issues...They suggested quite a few, but some weren't available, and that was a problem. I was only able to get two senior students.

*Was changed to:*
I asked them [guidance teachers] for leaders. Somebody who would be good, and bring back issues... They suggested quite a few [students] but some weren’t available, and that was a problem. I was only able to get two senior students [in all].

**Methodological Rigour**

I used several strategies to ensure methodological rigour. All interviews were audiotaped. They were transcribed verbatim by a research assistant. I proofread the transcripts while listening to the audiotapes and made corrections.

Lincoln and Guba (1985) suggest we can have confidence in our findings in qualitative research when the findings are deemed trustworthy. Trustworthiness in qualitative inquiry means the data support our interpretation of them. Trustworthiness is determined on the basis of credibility, transferability, dependability, and confirmability. These four terms are the Naturalists’ equivalents for the conventional terms of internal validity, external validity, reliability and objectivity (Lincoln & Guba, 1985, p. 300). The following table outlines the techniques I used to establish trustworthiness in this study.
### Table 4.2: Summary of Techniques Used for Establishing Trustworthiness

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Technique</th>
</tr>
</thead>
<tbody>
<tr>
<td>Credibility</td>
<td>triangulation of sources</td>
</tr>
<tr>
<td></td>
<td>peer debriefing</td>
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<tr>
<td></td>
<td>negative case analysis</td>
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<tr>
<td></td>
<td>member checks (in process and terminal)</td>
</tr>
<tr>
<td></td>
<td>researcher credibility</td>
</tr>
<tr>
<td>Transferability</td>
<td>description of study participants and study sites</td>
</tr>
<tr>
<td>Dependability</td>
<td>audit trail</td>
</tr>
<tr>
<td>Confirmability</td>
<td>audit trail</td>
</tr>
<tr>
<td>All of the above</td>
<td>reflective journal</td>
</tr>
</tbody>
</table>

Adapted from Lincoln and Guba, (1985) and Patton (1990)

Credibility refers to truth value and implies that each theme is firmly grounded in the data and is explained by the researcher's interpretive scheme. In this study, I enhanced credibility by using triangulation of sources. I interviewed 22 youth, 10 adults and 12 administrators. I interviewed people in different status positions representing different points of view (Patton, 1990). In addition, there were different sources for the same information since two youth school team members reported about their shared experiences in their schools.

Peer debriefing is a process of exposing oneself to a peer for the purpose of exploring aspects of the inquiry that might otherwise remain only implicit in the researcher's mind (Lincoln & Guba, 1985, p. 308). I discussed my analysis with colleagues at work who had experience with qualitative data analysis, but were unfamiliar with my study. They concurred with my emerging
analysis and directed me to explore other issues, for example they guided me to examine unintended consequences for the youth involved in my study.

Negative case analysis refers to finding cases that do not fit the developing theory and refining the analysis to account for all known cases without exception (Lincoln & Guba, 1985, p.309). It is important that the researcher search for alternative explanations for the data (Marshall & Rossman, 1989). In my study, based on the analysis of several youth interviews, I hypothesized that having an adult member present was essential for youth to develop initiatives in their schools. However, I came across a case in which the adult member was not active, yet the school team was successful. On further analysis, I learned that another adult in the school community, a public health nurse, assumed the role. Thus, I realized that it was important that some adult member of the school community be available and supportive, rather than necessarily the designated adult member.

Lincoln and Guba (1985) posit that member checks are an important technique for establishing credibility. They recommend data categories, interpretations and conclusions be tested with members who contributed the data. I conducted member checks both on an ongoing basis and after the analysis was completed. I validated possible meanings with participants during the interviews. This enhanced theoretical sensitivity of the data (Strauss & Corbin, 1990). I reviewed the interview contents with the study participants immediately after the interview, thus giving the participants an opportunity to correct any errors or volunteer further information.

A limitation of this study was the time delay of several months between conducting interviews and doing terminal member checking. This was due to the length of time needed to
manage and analyze the data: to transcribe the interviews, to learn the NUD*IST computer program, and to learn how to do qualitative data analysis.

For terminal member checking, I contacted selected participants (six youth, three adult members and three administrators). I asked them to review my analysis and share with me if my summary appropriately represented what they told me. I then sent them a letter with a summary and my interpretation of the findings. In a follow up telephone call I asked whether the summary included their views; if anything appeared missing; if anything hit them as "right on"; if it fit with their understanding, and, if they had any further comments they wished to add. Participants confirmed that the findings represented their views and they agreed with my interpretation. Many youth focused their comments on their enthusiasm during the workshop and immediately afterwards, and how difficult it was for them back at school. The youth made recommendations about spending more time learning to get along as a group and learning more time management skills. In some instances, participants commented on the variation of experiences and expressed surprise at some participants experiences. All participants agreed that "Managing Competing Demands" was relevant to their experience in this peer led initiative (See Appendix K, L, and M for Letters to Participants). All participants gave me an update on what was currently happening in their schools relating to the Fly Higher program.

As the researcher is the data collecting instrument and creator of the analytic process, information about researcher training and experience is important in establishing researcher credibility (Lincoln & Guba, 1985; Patton, 1990; Polit & Hungler, 1997). As a new qualitative researcher, I had to check with experienced qualitative researchers, both on my committee, and at my workplace. I made explicit my connection with the participants in this study and have been
my workplace. I made explicit my connection with the participants in this study and have been involved with the program in which they participated for two years prior to the study. I also accounted for my perspective as a researcher earlier in this chapter.

Qualitative researchers are concerned with the application of study results to other contexts. This is referred to as transferability. Sufficient data must be presented so transferability can be assessed (Lincoln & Guba, 1985; Polit & Hungler, 1997). I provided descriptions of the respondents and their contexts, so that others can determine how meaningful and applicable the findings are to other settings and populations (Lincoln & Guba, 1985, Marshall & Rossman, 1989; Sandelowski, 1986).

Dependability refers to the reliability of the data. I sought to establish dependability by setting up an audit trail in which the research design decisions and the rationale behind them were recorded (Lincoln & Guba, 1985; Marshall & Rossman, 1989). All the materials are available such that an audit trail could be done by an outside source. This decision trail allows for retrieval of the decisions made about theoretical, methodological and analytic choices (Koch, 1994; Sandelowski, 1986). My audit trail includes a) raw data, that is interview transcripts and field notes; b) data reduction and analysis products, that is theoretical notes and tentative categories (NUD*IST coding categories); c) progress notes, such as methodological notes and notes from member check sessions; and d) data reconstruction products, such as drafts of reports (Lincoln & Guba, 1985; Polit & Hungler, 1997).

Confirmability refers to characteristics of the data rather than objectivity of the researcher (Lincoln & Guba 1985). The findings must be grounded in the data. Throughout this dissertation,
quotes are used to support my interpretations. Thus, it is up to the reader to judge if the analysis is supported by the quotes provided.

As self awareness of the researcher is essential, a reflective journal of the content and process of interactions with respondents was kept (Lincoln & Guba, 1985; Koch, 1994). In addition to keeping the journal I reviewed it on an ongoing basis. As a final strategy, I engaged in critical analysis of the interpretation of the findings with my thesis committee members on a regular basis.

**Ethics**

Before proceeding with the research, the proposal was approved by the University of Toronto Ethics committee. Adult members and administrators were first contacted by a staff member or volunteer from the Child and Youth program at the Heart and Stroke Foundation and asked for permission to give their name and phone number to the researcher. I then called those who agreed. Similarly, potential youth participants were first asked by the adult member if they wished to hear about the study, and were asked for permission to have their name and phone number given to the researcher. Only then did I then call the youth. All participants signed a consent form, and in addition, for youth less than 18 years old, their parents or guardians signed the consent form (see Appendix N, O, & P). In the next Chapter, I present the findings of my study.
CHAPTER 5: SETTING THE STAGE

In this chapter relevant factors and processes that occurred prior to youth actually developing peer led initiatives are addressed. Setting the Stage refers to the factors and processes involved in recruitment and training of youth into the Fly Higher program. First, the process of recruiting school teams is examined with information from administrators, adult members and youth. Second, youth stories are shared about their learning during the training workshop that prepared them to develop peer led initiatives in their schools.

Part 1: Recruitment of School Teams

Schools received a brochure from the Heart and Stroke Foundation inviting them to participate in the Fly Higher initiative. Once the request was in the school, adult members were recruited followed by youth members. Overall, my analysis revealed that decisions made along the way had the impact of channelling the initiative through the Physical Education (Phys ed) and Guidance departments in the schools. For the most part, this resulted in the selection of previously identified school leaders to be involved in their school teams, rather than students more representative of all students in the school.

Initial Contact

In six of the 12 schools in this study, information about Fly Higher was sent to specific individuals. The targeted requests for participation went to members of the Phys ed departments in four cases and to youth in two situations (Fly Higher, 1996). These
individuals were targeted because they had expressed an interest in participating; because the neighbouring Public Health department thought the school would be interested; or because there were youth Heart and Stroke volunteers attending the school. The intention of sending targeted requests was to involve already interested individuals.

In the remaining six schools, the administrators received an unsolicited brochure from the Heart and Stroke Foundation informing them of a new program to promote health in young women (Fly Higher, 1996). These schools were in the same geographical area as the targeted schools. This was done deliberately by the Heart and Stroke Foundation because it wanted to give workshops in the targeted geographic locations and thought this would increase the number of participating schools. It was unknown whether these schools would be interested in this initiative. Given that they did respond to the request, a level of interest was demonstrated.

**In School Processes**

**Administrators**

Regardless of who received the information, it was passed along to the school administration. Administrators reported they frequently received requests to be involved in activities from many different organizations and they decided whether or not to pass along the information in their schools. They acted as *gate keepers or traffic directors*. Administrators reported they saw the Fly Higher program as possibly worthwhile either because it dealt with women’s lifestyle issues, or because it dealt with peer initiatives and
their schools were open to peer initiatives.

The administrators passed along the information based on *pragmatism*, a practical approach to problems and affairs. Administrators decided how each request was to be handled and to whom to send it in their school. They passed along the information to whomever, in their school it seemed to best apply to or fit. Dale, a principal, reported:

I know Fly Higher is related to young women and promoting... healthy lifestyles among young women. I know, when the information came in, I passed it on to one of the teachers who basically took care of it.

Administrators who saw Fly Higher as a lifestyle program passed on the information to the Phys ed department because phys ed teachers often teach health classes. Alternately, if they viewed it as peer focussed, they passed it along to the Guidance department. Lastly, administrators forwarded information directly to teachers who demonstrated leadership in women's health issues in their schools. Carolyn, a principal, passed it along to Pat, a teacher in guidance, who was actively involved in extra-curricular women's health issues:

I passed it on to the staff member for whom that would be most relevant, and so, would be showing some leadership in that area....I know there would be some action.

**Adult Members**

All participating schools needed a female adult member in order to participate in the
Fly Higher program. There were two main reasons why adult members agreed to become involved and be the “contact person” for the youth led team. First, they reported seeing the mandate of the Fly Higher program as compatible with part of my job. Phys ed teachers who taught health classes felt the content would be especially relevant and useful to them. Guidance counsellors saw the program as another way to help young women in their schools. A public health nurse (PHN) described her work with high school students as involving health promotion activities and the Fly Higher mandate would provide her a vehicle to do health promotion activities with youth in her school. These adult members saw their involvement in this extra activity as fitting in with doing their job. Pamela, a PHN expressed her views:

I read the material, and I thought, you know this fits in perfectly with our mandate. Being a public health nurse, I was very attracted to it. Because, I thought it was a unique approach. And, it got the students involved. It used us in a more facilitating way, but, that the onus was more on the students to decide what they wanted to do within the school. And so, I liked that approach.

A second reason adult members became involved was through current extra-curricular activities. Some teachers were staff sponsors for either a girls’ group or a peer advisory group. This would suggest these adult members were interested in activities relating to promoting young women’s health. Pat, a teacher and guidance counsellor, reported how
she saw the fit for the Fly Higher program.

Well. we had already been doing body image work here at the school as a group. a peer led group. We had been running a club. a volunteer club. When this came in. we thought. now this looks wonderful ... that we could take three or four [students] and head out to the workshop.

Whether adult members became involved because they viewed it as their job or as an extension of their existing extra-curricular interests. it is significant to note that most adult members were associated with the Phys ed and Guidance departments in their high schools. The result was that only a particular kind of youth was chosen to be involved in the Fly Higher program.

**Youth Leaders**

Youth were recruited by adult members. All adult members decided that it was important to select students who. in their opinion. already had leadership skills. or it appeared they could learn leadership skills easily. Their rationale for wanting leaders was to help increase the probability of initial success of the program. Generally. they looked for student leaders. regardless of ethnic background. However in one instance. a specific effort was made to recruit a First Nations student in order to reflect the make-up of the student body. Amelia. a Phys ed department head and teacher. reported how she selected students and what she was looking for in students. Her approach was typical of other adult members:
I taught a grade 10 all girls class, and, I also coach basketball. And so, I sort of got those type of kids ...leadership and interest...people who could organize.

Many adult members tried to select youth from all age groups, from grades 9 to grade OAC level, but most were unsuccessful. Pamela, a public health nurse explained:

I asked them [guidance teachers] for leaders. Somebody who would be good, and bring back issues... They suggested quite a few, [students] but some weren’t available, and that was a problem. I was only able to get two senior students [in all].

Besides trying to recruit youth from all grade levels, adults tried to recruit four youth members. Many were unsuccessful and came to the workshop with fewer youth than they wished. This proved to be difficult later as they were not a large enough critical mass back in the school setting.

In recruiting students, initially adults sought them through personal contacts both through their classes (e.i., leadership phys ed) and through involvement with existing school groups, like the Student Executive Council, or clubs such as a Body Image Club. They asked for volunteers. Margaret, a grade 11 student reported that:

Oh probably, because I’ve had her for two years. And so, she knows me pretty well. And she knows that I’m a pretty good student and everything... I remember, a lot of the girls she chose would take it pretty seriously. So, I
think. she thought. well. if she chose us to do it. we'd. you know. we'd help her out. and be reliable for her.

Next. adult members asked for personal referrals from guidance counsellors and other teachers for students who demonstrated leadership abilities. Katie. a grade 10 student was referred by her guidance teacher:

Uhm. 'cause. I guess I'm involved in the school. And I do a lot of sports. and I have good grades so...

And Melanie. a grade 12 student told me:

The phys ed director at our school had asked me. knowing that I was involved in sports. and that I was doing my co-op at a Fitness club. She asked me if I wanted to attend this Fly Higher seminar.

In two schools. youth members were contacted directly by staff from the Heart and Stroke Foundation because they were volunteers with the Heart and Stroke Foundation. One youth asked her friends to participate. They were grade 12 and OAC students. However. they had heavy workloads and one youth graduated in January (following the December workshop). In the second situation. the youth asked a guidance counsellor already involved with a peer helping group at school to help select students from various grades whom they viewed as leaders. This proved to be a more successful strategy than having all students who
were in grade 12 and OAC.

The majority of youth were felt very positive about being selected. Ali, a grade 10 student commented:

My phys ed teacher asked me... I was kind of excited to go.

However, they stated that an important aspect of getting together a school team involved the youth who did not come to the training workshop. In several cases, youth had been invited but were unable or uninterested and they did not come to the workshop. Thus, one team had only one youth member attending the workshop and four teams had fewer members than they wanted attending. These teams did not have a critical mass of people involved, and they also had specific age groups missing on their teams. This happened to Ashley, an OAC student’s school team:

Pamela [our nurse] asked around five people. I think it was. five people. And they were younger students too. And, uh, some were senior students. And the last minute. They said they can’t come [the younger students]. They called her. and they told Pamela that they couldn’t come. So, we ended up a group of just two people [both grade OAC students]. They should get younger students to come... who are more enthusiastic.

**Summary**

Using McLeroy’s framework as an analytic guide, recruitment can be seen to be
influenced mostly by organizational level factors. that is, how the school worked as a system to deal with the request. The principal acted as a gate keeper. Teachers became involved as part of their jobs or the request to become involved fit with their existing extra-curricular activities. When the administrators and adult members identified the program as a lifestyle program the adults selected students in phys ed courses. Adults passed along the request to selected youth based on personal contacts and personal referrals. Youth were sought who were already school leaders: that is they were on the student council and involved in extra-curricular activities, rather than representative of the whole school body.

It was difficult to recruit youth because they were often busy with other activities, extra curriculum sports, arts and part time jobs. Those recruited reported being happy about being selected. However, at the interpersonal level, several youth were concerned that they had few members on their team, especially from younger students, and they felt they were less able to engage in activities back at school.

Recruitment of school teams was the first step in Setting the Stage. The next step was the training day.

Part 2: The Training Workshop: Getting Away for a Fun Day

Recruited school team members, both youth and adults, were invited to attend a Saturday day-long youth training workshop led by ‘core trainers’. These core trainers were other adolescents who had been trained by staff at the Heart and Stroke Foundation to
provide an experiential learning day for the school team members. During their training, school team members were exposed to knowledge, skills and attitudes that would support them in developing peer led initiatives in their high schools. At all the workshops I attended, core trainers role modelled communication skills and demonstrated a caring and accepting environment. The experiential learning day involved ‘ice breaker games’, where youth got to know one another and feel more comfortable in the group. The core trainers were explicit about establishing group norms of respect and comfort. Youth were engaged in team building exercises. They were asked to identify young women’s health issues in their schools and to visualize their school environment currently and in the future as an ideal environment. The core trainers reviewed the contents of the ‘tool box’, of resources to assist youth in developing a plan. and helped the youth brainstorm about resources that may exist in their communities. Each team spent time developing action plans; establishing short, mid and long term goals for their school teams, and possible strategies for how to reach their goals. The day ended with a wrap up/ stay in touch session (Patterson & Katsileris, 1996).

In the following sections, my analysis of young people’s experiences during their training is presented. Findings show that young people gained an increased awareness of health issues, some skills, and came away generally excited about the workshop and the idea they would initiate something in their school.

**Increased Awareness of Issues**

Overall, youth spoke about gaining an *increased awareness of issues* rather than
gaining new knowledge per se. Some youth felt they gained more awareness in general about women’s health issues. Kerri, a grade 12 student, talked about general issues.

I see the most important things that I learned in Fly Higher was the development and importance of awareness in schools, especially on women's health concerns.

Several youth talked about specific issues that they became more aware of. The most common issues were stress, smoking, and peer pressure.

Uhm. well, one was stress. I never really thought of it as a health issue... Stress is a big big issue in any high school. (Kris, grade 11)

Like you know... smoking, and just how, there was like, help and stuff like that. (Katie, grade 10)

I definitely learned that... peer pressure was probably the biggest influence in high school. Ummm. I know that I went through it, and I know that all my friends went through it, and talking to other girls from other schools, that it wasn't just our school. It was all the schools. (Megan, grade OAC)

Many youth mentioned how problems and issues were common across schools (for example. Kris and Megan above). Youth realized that they were not alone in how they felt, there were others who shared their concerns. Sonia, a grade 12 student reported:
Uhm. oh that's just. I guess. the knowledge that there's other people here worried about the same thing. And. there's so many issues. And. I know a lot of times we think, oh God I'm the only one going through it. And especially our age. you know. that's like the main thing. There's nobody in the world understands what I'm going through. And someone like. wow. there's other people my age who are feeling the exact same way. And that's just, that's really important. Cause it makes me feel less alone in the world.

In sum. an increased awareness of issues was clearly one important outcome for youth following the workshop.

**Changes in Skills**

Implicit in the training process were a variety of activities to build group skills among the participants. Several youth stated they learned *general group skills*, but they did not elaborate.

I learned a lot more about working with others. And you know. and it's working your positive energy towards something that everyone wants to work on. And everyone wants to. you know. make better. (Katie, grade 10)

Others recalled *specific communication skills* they learned during the workshop. such as: listening to others. not using put downs. expressing your opinions. and valuing the
opinions of others.

You listen to one another... You like, you listened to one another instead of you know, shutting each other up... cause you knew that everybody cared, and they all had valid points to make, and everything. (Margaret, grade 11)

Just, uhm. listening to each others’ opinions, and not putting them down, if they're not good ideas. And putting your opinion in too. (Ali, grade 10)

I just learned that you have to really listen. Like, I consider myself a leader, kind of, in a group, so it’s sometimes difficult to just take everyone’s opinion. As equal... But I just learned, that everyone has a very valuable opinion. Whether it agrees with your idea or not. (Melanie, grade 12)

A few youth felt they already had group skills, and did not feel they learned any new group skills at the workshop.

Further to the process skills of getting along in a group, school teams were also exposed during the workshop to ‘how to’ skills to develop peer led initiatives. When asked if they learned about planning activities and organizing activities, and accessing resources, youth had both general and specific responses. Marnie, grade 11, offered a typical general statement about planning.

Uhm. I learned that (pause). like, a lot can be done. I learned different ways to
plan activities. Like, we all worked together during the day... and I learned how to get started, and how to get my group together.

Some of the specific examples that youth mentioned about learning to plan and organize activities were: how to get people interested and how to set short term and long term goals.

They discussed how they get people interested in their activities, and ways to go about advertising. Like, when we were having a movie night or something.

(Julie, grade 10)

We did learn a lot of organizational skills, and we went over those lists, and we were kind of doing that when we were there. And, we actually did pick things that we wanted to try and accomplish at the school. And we had to narrow it down and look at things realistically. And short term goals and long term goals. (Melanie, grade 12)

Some youth were unsure whether they learned how to initiate activities and in follow up to the workshop, they did not initiate any activities.

I don’t know. Like, I’m not really familiar with it myself. (Zara, grade OAC)

Many youth came to the workshop with extensive leadership experience. They felt it was
more 'fine tuning' than learning new skills. Ellen, in grade 12 was student council president:

Oh. it. it taught me how to organize a little better. 'Cause. I could organize it fine, but. it helped me a little bit here. and helped me a little bit there.

At the workshop. youth were also taught about community resources. In response to questions about learning about accessing resources. several youth stated that they learned ideas about how to access resources in their community; some youth already knew how to access resources; and lastly. some youth clearly felt they did not learn how to access resources.

We learned about organizations we could go to. We can go to our community health nurse who visits our school. We also learned that we can. phone organizations. like. you know Heart and Stroke Foundation where they will give us a lot of information about stuff. just. you know. stuff that we are very interested in. like smoking and stress. And. there are actually a lot of things that can help us that are not necessarily organizations. but maybe businesses want to contribute something... So there are many areas in the school and. outside of the school we can go to. (Julie, grade 10)

Well. uhm. I have most of that. I personally have most of that stuff (yes)... I didn't learn anything new...I already knew where all that. where that stuff was. (Ronda, grade 10)
Thus, young people who attended the training workshop reported a range of responses relating to developing group skills, and skills needed for developing initiatives in their schools. Having group process skills and some skills in developing, planning, and organizing peer-led initiatives are necessary prerequisites to carry out peer-led initiatives. In the next section, their feelings and beliefs about the workshop are addressed.

**Feelings and Beliefs about the Workshop**

I found that feelings and beliefs about the workshop could be categorized into three areas: feelings relating to the process of the workshop, how the workshop affected them personally, and how the workshop experience empowered them to do something in their schools.

When describing the *process of the workshop*, students talked about their feelings during the workshop, and also how the workshop day was run. They felt encouraged to express their opinions and secure that their opinions would not be judged.

I liked how everybody could just express their opinions, and just see different views...And just how we could get along, and no one was like higher than anybody else. (Katie, grade 10)
I felt good. It makes you feel more confident and people there were so friendly and, didn't judge you. Like, I didn't. I went in, and I felt sort of uncomfortable, and I didn't know what to expect. But then, once we started doing the games and all the activities, and they made me feel more comfortable with the group. (Laura, grade 12)

Many youth thought the workshop topics were interesting and relevant and they enjoyed having students from different grades.

We had a lot of fun. Like, some of the topics we discussed were really interesting. And I thought, like, we could really use them. (Katie, grade 10)

I've never really thought of the younger grades as being different. thinking that they had different points of view, but they really do. The younger grades, they're important. (Ellen, grade 12)

The all girls aspect of the workshop provided an environment where they felt safe to discuss issues. The workshop leaders (core trainers) were the same ages as the participants of the workshop and the core trainers made everyone feel comfortable. Participants felt the core trainers were more in touch with them and their issues than adults would be.

Cause it made me feel a lot more comfortable, with just the girls, cause I'm a very shy person. (Clara, grade 10)
It was good that it was run by students. Because they’re more, in touch, and they also understand. And, since they are still doing things within their own school, they have, like, hands on... They know how things run, and they gave us suggestions on what they did to change it, and stuff like that. (Krista, grade 10)

Sonia, a grade 12 student, commented how the safe environment of the workshop was so different from the school environment where young people feel they are always judged.

With the Fly Higher workshop, where no body cares if what you said was stupid or not. And, it’s. you said it, and that’s how you feel, and that’s great....And that’s. I think, that compared to school, is very different. In school, you can be judged a lot by what you say, and, it's not as comfortable.

But, it’s like, with Fly Higher that's what it's designed to do. Make you feel comfortable.

Most young people expressed how it affected them personally by describing having a really good time and being excited about the experience. However, two young people reported going to the workshop was just one more experience they had. One found it boring. and another enjoyed it only somewhat. These two young people felt the workshop had a limited impact on them. The remainder reported feeling more comfortable (less shy), happy about attending, inspired and ‘really pumped’, very enthused, accepted and motivated.
Motivated. really motivated about, like, getting things done and everything. Because, now you thought of a problem at school. and you really learned a lot of the things about it [at the workshop]. And ways it could be prevented. and ways to help. (Margaret. grade 11)

I was really pumped up right after training...Well, it really. lifted my spirits. and also lifted other peoples' spirits. And it really opened up a lot of people. (Ronda. grade 10)

Lastly. when thinking about their workshop experiences. young people talked about how they felt empowered to do something in their schools. They felt “revved up” to go back and make a difference. They talked about being anxious to get started and wanted to go back right away.

Very motivated. Wanting to make a difference in the school. Uhm. I thought that I had enough ideas to bring back to the school to help the other students. (Kris. grade 11)

It was really motivating because they want to see changes in the school. And. uhm. it was really like you get there. and then you're pumped. and you go back. and you want to get stuff done...that's really good because. once you're pumped. you get stuff done. and then you can carry on with it. (Krista. grade
Young people also discussed how they had “a whole bunch of new ideas” about how to deal with young women’s health issues. They wanted to ‘change the world’. They saw so many possibilities that they felt they could do something about.

So, it was neat to see the kind of empowerment that a group of women can have. Inspirational by far. And, it made me, uh, just learn more and more about it. Like, I felt, wow, core leader, and ooh, so much you can do. And, you just feel so revved up afterward that you wanted to go back to your school and change the world. You know. I, I loved it. It was just insane. (Melanie, grade 12)

I felt so excited. Like, I just wanted to go to school right away and do it. everything. (Marnie, grade 11)

I think that when you find something that you do believe in, and you are educated about, you want something to go on.

(Margaret, grade 11)

Clearly, the feeling and beliefs for most participants were that the workshop was an exhilarating, fun experience that they treasured. They spoke fondly and excitedly about their
workshop day.

Summary

The changes young people reported from the training workshop related to the intrapersonal level: knowledge, skills and attitudes. They reported an increased awareness of women's health issues and learned some skills from the training workshop. Although they reported the workshop learning assisted them in learning group skills, there was limited opportunity for practice and feedback during the workshop.

Feelings they had about the workshop were very powerfully expressed. Their sense of enthusiasm and excitement were particularly noteworthy. Most young people left the workshop feeling empowered to make positive changes in their schools. For many, there seemed to be an underlying element of respect of themselves and of others, that was fostered at the workshop. They felt accepted and valued during the workshop and were motivated to go to their schools to “make a difference”.

The peer to peer assumption of the Fly Higher program was supported at the workshop. The core trainers modelled behaviours they wanted the youth leaders to learn. However, from their reports, the knowledge, skills and attitudes they needed to develop peer led initiatives varied. The second assumption, to empower young women was also addressed. Although the school teams felt empowered, whether they had the knowledge, skills and attitudes was unknown.
CHAPTER 6: NEGOTIATING THEIR WAY

This chapter examines what happened when young people returned to their schools following the training workshop. The first part of this chapter gives an overview of school team activities and then describes the key findings around the processes involved as they developed peer led initiatives in their schools. Each process is described, first from the young people’s point of view, then from adult members and administrators’ views. Processes that occurred were affected by selected levels of influences at intrapersonal, interpersonal, organizational and community levels. These levels are explicated within each process. This section is labeled ‘Negotiating their Way’ to capture a sense of young people’s efforts back in their schools and the maneuvering they need to do to accomplish developing peer led initiatives in their high schools.

Part 1: Report on School Teams

There were 12 school teams. Upon return to their schools, these teams had various levels of success in fulfilling the expectations of the Fly Higher program. Their experiences were examined in relation to a set of criteria for success that were both explicit and implicit within Fly Higher. This grouping of responses by school teams allowed me to better detect differences and further explore processes along a continuum. Activities youth implemented and the resources they used were also examined.
Criteria for School Team Success

To define success for the school teams, four criteria that reflected the expectations of the Fly Higher program were identified. The first criterion was that the school teams met. The second was that they attempted to develop one or more initiatives. The third was that the initiative had an impact on their school (by self report). The fourth was the team and/or their activities would continue beyond the initial year. Table 6.1 shows how these criteria permitted me to group the school teams on a continuum of success with respect to meeting program expectations.
Table 6.1: Criteria for School Team Success

<table>
<thead>
<tr>
<th>Types of School Teams</th>
<th>Met</th>
<th>Developed initiatives</th>
<th>Impact</th>
<th>Status at year</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>least successful school teams</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 1</td>
<td>no</td>
<td>no</td>
<td>no</td>
<td>inactive</td>
</tr>
<tr>
<td>school 2</td>
<td>no</td>
<td>no</td>
<td>no</td>
<td>inactive</td>
</tr>
<tr>
<td>school 3</td>
<td>rarely</td>
<td>no</td>
<td>no</td>
<td>inactive/faded</td>
</tr>
<tr>
<td>school 4</td>
<td>rarely</td>
<td>no</td>
<td>no</td>
<td>inactive/decided</td>
</tr>
<tr>
<td><strong>somewhat successful school teams</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 5</td>
<td>yes/ weak</td>
<td>yes</td>
<td>some</td>
<td>inactive/ faded</td>
</tr>
<tr>
<td>school 6</td>
<td>yes/ group issues</td>
<td>yes</td>
<td>some</td>
<td>inactive/faded</td>
</tr>
<tr>
<td>school 7</td>
<td>yes/ weak</td>
<td>yes</td>
<td>some</td>
<td>active</td>
</tr>
<tr>
<td>school 8</td>
<td>yes/ group issues</td>
<td>yes</td>
<td>some</td>
<td>active</td>
</tr>
<tr>
<td>school 9</td>
<td>yes/ group issues</td>
<td>yes</td>
<td>no</td>
<td>inactive/decided</td>
</tr>
<tr>
<td>school 10</td>
<td>yes/ strong</td>
<td>yes</td>
<td>some</td>
<td>inactive/decided</td>
</tr>
<tr>
<td><strong>most successful school teams</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 11</td>
<td>yes/ strong</td>
<td>yes</td>
<td>some</td>
<td>active</td>
</tr>
<tr>
<td>school 12</td>
<td>yes/ strong</td>
<td>yes</td>
<td>some</td>
<td>active</td>
</tr>
</tbody>
</table>

As the above table shows, students on the four least successful school teams did not meet as a team. Two school teams did not meet at all. Two school teams met initially, but one team faded after the initial meeting and the second team actively decided to stop meeting. These four school teams did not develop or implement youth led initiatives or have any impact on their schools. All four school teams in the least successful group were inactive at
the end of the school year.

Students on the six somewhat successful school teams did meet. Two of these teams met a few times, but students had different levels of commitment. For students on three school teams, there were significant group issues that were not resolved. The last school team in this group felt happy to work together as a team. All six school teams developed some initiatives in their schools. Five school teams reported some impact on their schools. The last school team however was unable to get school youth to come out to their activities, therefore, they had no reported impact. The teams’ status at the end of the year was inactive or active. Four school teams stopped meeting before the end of the school year: three of these school teams faded and one school team actively decided to stop meeting. Of the two school teams that remained active in the somewhat successful group, both school teams were unsuccessful in resolving group process issues.

The two school teams who were most successful met. Although both school teams experienced group conflict, they worked through their issues successfully enough that they did not report ongoing tension, rather one team felt happy about their team interaction, and the second team felt sufficiently satisfied to continue without stated tension. Both school teams developed and implemented initiatives that had some impact on their schools. Both school teams in the most successful group remained active at the end of the school year.

Activities Carried Out

At the training workshop, school teams identified activities they wanted to carry out.
Once back at school, some teams tried to develop these initiatives, while others did not. An overview will briefly be presented here with information about who was involved in their peer led health promotion initiatives, resources they reported using, and lastly, the kinds of activities the school teams carried out.

Youth leaders and adult members were the central people involved in developing peer led health promotion initiatives. Other school and community members were recruited as needed. For example, an aerobics instructor was recruited to run fitness classes for youth at lunch time. Also, student council executive (SEC) members were involved in setting up bulletin boards and arts students were asked to design a mural for a school team. A community osteoporosis nurse was invited to work with students to plan and implement a mall walk.

School teams used resources available to them within their schools. They secured permission to use a room for meetings and the gym for phys ed activities. Youth leaders used components of the Fly Higher tool box they received at the training workshop. The resources they used from the tool box included pamphlets, posters, and action guides. In addition, when they had fund raising activities, they contacted the Heart and Stroke Foundation for organizing kits for these events: such as the Dress Red kit box. Community resources for the osteoporosis walk were provided by the community osteoporosis health nurse.

Many school teams formed clubs and gave themselves names like "WOW" (Working on Wellness), "FIT" (Focus on Issues Today) and "US" (United Sisters). Other school teams called themselves the Fly Higher club.
Once school team members formed as a team they decided what activities to do. Many of their activities were directed towards increasing other students awareness of health issues. They did this by putting up theme bulletin boards and posters around the school, and a filling a display case in the school cafeteria. Theme bulletin boards were on such topics as healthy eating, smoking, sexual harassment issues and healthy body image.

In addition to raising awareness of women’s health issues, school teams organized actual physical fitness activities that included lunch time activities such as ping pong, intramurals, and aerobics. One school team, concerned with the lack of healthy nutrition choices in their school, started a ‘healthy combos’ meal plan. Youth leaders worked together with the cafeteria supervisor to develop menu choices that were healthy and priced competitively with other meals. One school team, discouraged with the poor physical environment in their school, painted a wall in the school cafeteria to improve the attractiveness of their school environment.

Lastly, school team members engaged in fund raising activities for various organizations. These included: guess the number of Cinnamon Hearts, Muffin Monday, Dress Red, and an osteoporosis mall walk. Table 6.2 summarizes the various peer led initiatives that were developed. It is organized by the three school team groups: least successful, somewhat successful, and most successful. For a breakdown by individual school teams see Appendix Q.
Table 6.2: Overview of Implementing Peer Led Initiatives

<table>
<thead>
<tr>
<th>Who was involved in implementing the initiatives</th>
<th>What resources did they use</th>
<th>What activities did they carry out</th>
</tr>
</thead>
<tbody>
<tr>
<td>least successful teams 4</td>
<td>none</td>
<td>none</td>
</tr>
<tr>
<td>youth members</td>
<td>youth accessed in school resources</td>
<td>developed bulletin boards in cafeteria</td>
</tr>
<tr>
<td>adult members</td>
<td>used tool box resources</td>
<td>provided information pamphlets in guidance department</td>
</tr>
<tr>
<td>school council</td>
<td>Heart and Stroke Dress Red package</td>
<td>conducted fun physical activities at lunch</td>
</tr>
<tr>
<td>executive members</td>
<td></td>
<td>set up a display case in cafeteria</td>
</tr>
<tr>
<td>aerobics instructor</td>
<td></td>
<td>developed a combo board for healthy food choices in cafeteria</td>
</tr>
<tr>
<td>somewhat successful teams 6</td>
<td>none</td>
<td>participated in fund raising activities</td>
</tr>
<tr>
<td>youth members</td>
<td>youth accessed in school resources</td>
<td>hung posters around the school</td>
</tr>
<tr>
<td>adult members</td>
<td>used tool box resources</td>
<td>participated in community osteoporosis walk</td>
</tr>
<tr>
<td>school council</td>
<td>Heart and Stroke Dress Red package</td>
<td>organized in noon hour display about osteoporosis</td>
</tr>
<tr>
<td>executive members</td>
<td></td>
<td>participated in fund raising - Dress Red</td>
</tr>
<tr>
<td>most successful teams 2</td>
<td>none</td>
<td>public health nurse</td>
</tr>
<tr>
<td>youth team members</td>
<td>youth accessed in school resources</td>
<td>osteoporosis walk</td>
</tr>
<tr>
<td>adult members</td>
<td>used tool box resources</td>
<td>organized in noon hour display about osteoporosis</td>
</tr>
<tr>
<td>arts students</td>
<td>Heart and Stroke Dress Red package</td>
<td>participated in fund raising - Dress Red</td>
</tr>
<tr>
<td>public health nurse</td>
<td></td>
<td>painted cafeteria wall</td>
</tr>
<tr>
<td>community</td>
<td></td>
<td>with[ Fly Higher] mural</td>
</tr>
<tr>
<td>osteoporosis nurse</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
From Table 6.2 it is evident that young people involved a limited number of individuals outside the school team when implementing initiatives. Also, they relied mostly on resources within their school. They rarely sought out community resources other than those provided by the Heart and Stroke Foundation and their public health nurse. Lastly, the activities they carried out were mostly focused towards awareness raising, with some fitness and nutrition activities.

Several young people reported there were activities they desired to carry out, but were unable to do. Young people on the least successful school teams reported they wanted to run fund raising activities and increase awareness of women’s health issues. Youth on the somewhat successful school teams had hoped to hold fund raising activities, like Dress Red and Hoops for Heart. They also wished to do a student survey about what their peers wanted and they wanted to hold activities that would raise awareness of women’s health issues; such as a forum on non smoking for grade nine students. They also wanted to hold fun physical activities, promote healthy nutrition, and hold stress reduction workshops for their peers around exam times. Students on the most successful school teams had also hoped to hold stress reduction workshops, provide better nutrition in their school cafeterias, and increase awareness of specific women’s health issues, and fund raise with Hoops for Heart. Clearly, young people were not lacking in ideas about activities to pursue with their peers. The difficulties arose in making their ideas happen. (See Appendix R for a summary of activities young people desired to carry out, but were unable to).

In the remaining parts of this chapter, processes underlying young people’s attempts
to develop peer led initiatives in their schools are described. These processes help explain why some of the teams were successful while others were not and why generally it was difficult for them to develop initiatives despite the fact that following the workshop most young people were eager to do so. I suggest that the events that occurred can be thought of processes that represent their attempts to Negotiate their Way toward implementation of peer led activities in their schools. These processes include: connecting, finding a niche, and managing a plan. In connecting, students deal with issues around group dynamics as they tried to become a group. In finding a niche, they carved out some space in their schools for their initiatives. And in managing the plan, they carried out their initiatives. These three processes were not entirely consecutive, rather they overlapped. For example, young people continued to deal with group dynamics issues as they strove to carve out some space and develop and manage their initiatives. Inherent in these processes, are different levels of factors that acted as barriers and facilitators to the unfolding processes. These factors occurred at intrapersonal, interpersonal, organizational and community levels. Where relevant, adult and administrator views are included to further explain youth experiences.

Part 2: Connecting

The school team members needed to meet because they could not develop initiatives individually. However, just meeting was not enough. In order to work together, they had to ‘connect’. that is they had to learn to work together as a team toward a common goal. My
findings showed that the process of connecting was difficult for students. In the sections below, the various processes that occurred and the levels of influence in these processes are described. Both intrapersonal and interpersonal level influences acted as barriers or facilitating conditions for the youth as they connected to form a team.

Youth Views

Several intrapersonal factors influenced young people's ability to connect. These factors were related to their beliefs about their abilities to meet and develop peer led initiatives. Although not common, some youth felt they lacked the abilities and skills that they needed. They expressed the idea of being young and/or shy. This made it very difficult to work in a team.

And, I kind of found it hard, like, being younger, to initiate things, you know. Like, it's not supposed to be a problem but, that's what I felt, you know. (Noelle, grade 10)

Well, probably my shyness, [made it harder] because it took me a while to feel comfortable. (Clara, grade 10)

When these students were on school teams with other students who felt the same way, it became such a barrier that they were unable to develop initiatives.

Degree of commitment was also an important factor in developing initiatives. Some youth stated they did not feel strongly about the issues raised in the workshop "I just don't
feel strongly about the issues" (Zara, grade OAC). This student did not continue with involvement in this peer led initiative. Her school team did not meet together to form a group.

A major facilitator that enabled youth to develop initiatives was a sense of enthusiasm and excitedness gained from the workshop.

[I was] Very motivated. Wanting to make a difference in the school. I thought that I had enough ideas to bring back to the school to help the other students. (Kris, grade 11)

This student was on a team with other motivated students who met and became a group. I suggest that she and others were **empowered to act** because they had the affective desire and also had specific ideas to bring back to school. They were also fortunate not to be shy themselves or not to have team members who were shy.

Most of the factors that affected the ability of young people to connect and become a group were at the interpersonal level. These issues were labeled getting started, making decisions, managing difficulties and working with adults. Their ability to deal with interpersonal level issues was important to becoming a group.

**Getting Started**

Once young people met, they faced new challenges. One of these issues was not knowing what to do. My findings show that school teams who were unclear about their
goals met less often and did fewer activities. Megan, an OAC student recalled:

We kinda just left. and said well. we want to do this. but how do we start it?
That was our main problem. was. how we were gonna start it?... We got
together. actually. the Monday afterwards. We had gotten together. and no
one really knew exactly what we should have done.

Young people on Megan’s team were unable to move on from the initial meeting to develop
any activities.

Teams that chose an activity they had identified as a goal at the training workshop
were more successful. The identified goal helped the school teams connect and start a
course of action.

Making Decisions

Once the school teams chose a general focus for their Fly Higher activity. three
patterns of decision making were used in the planning of these initiatives. In one pattern.
they worked with an adult member who guided them by giving options and ideas from
which to choose. In a second pattern. the adult member and young people engaged in shared
decision making. In the third pattern. the young people came up with a plan and then
consulted the adult member for resources. Katie. a grade 10 student. shared how her adult
member gave them options:

She gave us options. and we kind of decided on what to do... If we wanted to
put up the bulletin board or not. If we wanted to put the flyers out. And, uh.
if we had like any other ideas. Or, if we had any like future ideas.

Ronda, a grade 10 student felt the *decision making was shared* in her group:

*We talked about. what we're going to do...We all kind of came together and
got everybody involved. We just kind of talked all about it. Really analysed
what had happened. and was going to happen in the future (uh huh). And we
came up with our plan [in our group].*

Kerry, in grade 12 was part of a group whose adult member was recruited after the
workshop. therefore *they decided what to do on their own.*

*Well. right after the training workshop. we went to one of the students’
homes and we looked through the tool box that we got from Fly Higher.
And. we’re looking through things. and we just discussed ... a strategy to start
a new club in our school... We just have to start our new club...We took the
idea to one of the teacher advisors who's in our school and. she suggested she
thought it was a very good idea. But we need to write up a proposal to the
principal [which they did].*

**Managing Difficulties**

Another aspect of connecting as a group involved the management of interpersonal
level difficulties. Two types of problems emerged for the school teams: not getting along with fellow students on the school team, and uneven sharing of group work. For example, Ronda, a grade 10 student stated:

One of the girls on my Fly Higher group actually said it to me [it refers to not wanting to work with me]. And that brought me down a lot. It really put me down. And, just negative comments, just don't work for people... I just can't talk to her. She doesn't respect me.

Ronda did not know how to deal with this interpersonal level conflict issue. She did not deal with it directly, rather she avoided dealing with the individual. "We never did deal with it." Although her team initiated some activities, the team did not develop a sense of shared purpose and stopped meeting before the end of the school year.

With respect to sharing the work, an uneven sharing of work led to hard feelings amongst school team members. As Laura, a grade 12 student commented:

It was, like, they knew [fellow team members] we had a meeting. And I would pass them in the halls on our way to the meeting. And they didn't get there. Like, they just sit in their spot, and then they'd come, like, 15 minutes or half an hour later. It was like, okay, we're not going to pressure you to come, but we'd like, you've got to be a bit more enthused in coming. And like, then you come to the meetings, and you say you'll get involved, and nothing ever happens. So, that was hard... Yah, that's a drag.
Laura continued to work with her school team. She and other students put up with differences they didn’t really like, in order to work together. Marnie, a grade 11 student shared another example of having difficulties, and putting up with them:

Uhm. well. I know. I just said. okay. Like. there was one girl who really likes to be in charge of a lot of things. And. I just let her do that. Like. if she is that way. if that's something to make her feel good about herself. like. that's fine. Like she can. Just sort of. take charge of different things. so. It wasn't too much. and. I think it was okay.

Although Laura and Marnie’s groups had difficulties, they developed initiatives in their school and continued to meet until the end of the year. They never addressed the conflict issues directly, but tolerated fellow team members behaviours and continued to work together.

Lastly, some young people spoke about resolving their difficulties and learning to work together. Krista, a grade 10 student talked about how her team met initially and did an activity within a very short period of time. They had some difficulties doing the activity, but they talked about their difficulties at a follow up meeting.

..after we did Dress Red. [fundraising] we kinda realized that we had to be a bit more pulled together...This year we really pulled together, and now we all have the same goals...Like. we really learned about communicating in our
Having this initial activity helped the group develop cohesion. In carrying out the activity they had a sense of accomplishment and after the activity, reviewed what went well and what did not. They addressed group process issues.

**Working with Adult Members**

It was intended that adult members of the school teams would guide and support young people in developing peer led initiatives. In reality, their availability ranged from not readily or frequently available to consistently available for students. When they were not readily or frequently available, it was because they were not in the school often, they were too busy with other activities, or lastly, they were not interested after the workshop and refused to take the initiative to call meetings to help the students get started. The adult members’ availability to young people was crucial to their ability to develop peer led initiatives. When adult members were not readily or frequently available, some students did not meet.

Well. I was going to help Pamela [adult member], but I couldn't contact her...

I - Is she at your school for limited periods of time?

Y - Only once a week. So that was hard... I hardly met her in the hallways. (Ashley. grade OAC)

When the adult member was not readily available (and someone else did not take her...
place). and the students were meeting on their own. it was difficult for students to resolve interpersonal relationship difficulties. Julie, a grade 10 student explained:

Especially when a couple of the people in the group were, like, head on with ideas and they were arguing. There was nobody older ... so it was kind of hard.

Students in this group carried out some initiatives. They did not openly address their difficulties. Interestingly, in three other school team situations, the students reported the adult member was available to them, but that she was unaware of group tensions. Both she and the other school team members did not address group process issues openly in the group.

In one school team situation, the adult member was more available and accessible and she helped the group deal with interpersonal issues by suggesting strategies for dealing with such issues. For example:

I was saying, some people work. And this one's not doing much at all. and so. I mean. it's a bummer. And Anna and I, we're like. trying to do everything at once. And Mrs. C. (Carmen) said to us. well, sometimes you have to let things fail. so that other people realize that if they don't pull their weight. it's not going to get done. So that's what we tried to do. (Krista, grade 10)

This group carried out initiatives, continued to meet and felt satisfied with their accomplishments. A key factor seemed to be the adult member's facilitative style in assisting the youth members to address group issues.
In eight school teams that met, students in five groups identified tension in the group as an issue. Only one adult member both recognized group tension as an issue and helped the school team members deal with it. In three situations, the adults members were available, but unaware. In one situation, the adult member was not available to help. Because the availability and skills of the adult member affected the ability of youth to connect and work together, the adult role is an important one and must be carefully considered.

**Adult and Administrator Views**

Connecting was affected by factors at both intrapersonal and interpersonal levels for adult members also. Adult members and administrators corroborated the perspectives of youth regarding the nature of intrapersonal factor barriers for youth: lack of ability, lack of confidence, and lack of commitment. They attributed the lack of young people's ability and confidence to their young age and inexperience. They suggested that adults needed to help youth see the whole picture and young people needed to 'learn the ropes'. As they pointed out:

*They come with ideas...they don’t know the global picture...that’s just maturity and inexperience.* (Leanne, a department head)

*Most kids have good ideas, what they don’t have is, they don’t have a lot of experience.* (Ray, a principal)

Adults and administrators’ views on some youth’s failure to continue in the program
differed from youth’s accounts. Adults and administrators felt it was due to youth’s general lack of commitment. They felt this was related to generally being a teenager: whereby youth get enthused but then get busy with other activities and move on. Nathalie, a vice principal, reported:

> The attitude of students is often to get an idea and, let’s run with it. The enthusiasm is short lived, especially when they find out how much work is involved.

I found when youth returned to their schools, some youth did lack commitment in continuing the program because they were too busy, they felt it was not relevant, or they felt they lacked skills. However, youth who were motivated after the workshop persisted in their attempts to meet. They only gave up when they felt that they could not get projects going by themselves, without adult support, or they were having difficulties with peers that they could not work out on their own. In the youth’s explanation, they had a sense of being let down, rather than getting busy or just moving on.

In schools where youth were able to meet and form a group, adult members and administrators spoke about their high motivation and strong leadership skills. There was a general sense of being very proud of the skills and abilities of the young people involved in the program.

> The kids. You have to have the right kids on your team because they’re the ones who will take the issue and go with it...So you need leadership skills...and they have leadership skills. (Amelia, teacher and department head)
I think as a group. they had confidence. they can do anything. They’re that type you know. those type of people. They just. like. of course. we can do this.

(Carmen. teacher and guidance counsellor)

**Adults Taking on a Role**

During the process of connecting, young people saw the adult member as important in helping them work out interpersonal issues amongst group members. whereas adult members saw interpersonal issues as relevant only in one group situation. This is a key finding because without being able to get along and form a group. young people did not persist in their efforts. Adult members saw themselves more as helping students ‘learn the ropes’ in the school system. rather than helping young people learn to get along.

Adult members acknowledged their importance in general. to the school team. They acknowledged that they should try and assume a facilitative role. However, they had difficulties defining their role. Some became directive. some laissez faire. and some facilitative.

Adults who adopted a *directive* role found that it did not work. Pamela, a PHN explained:

I would like to be a facilitator. but I felt like. I was holding the whole thing myself. I felt like. without me doing anything. there would be nothing. and there was close to nothing...So. I did the whole thing myself.

Carla. a teacher. was also unsuccessful in her efforts to steer the school team. She ordered
material from the Heart and Stroke Foundation. but it did not arrive. Therefore, the young people did not have supplies for their desired project. However, she had another activity she wanted the youth involved in. She wanted them to do a girls’ night out for elementary school students. The youth team members were unsure about participating in this event. They did not define this as their goal, and it did not seem realistic to them. These two factors decreased student motivation to participate. Carla stated:

I guess, because I didn’t push it. [“the girls’ night out”]... I think the whole idea of the workshop in October. was to get the kids, just to do more for themselves. And I thought, well, I’m defeating the purpose here if I go ahead and do it... [and nothing happened]

Amy, a teacher, was determined not to initiate meetings to assist young people in planning activities they wanted. She adopted a laissez faire manner. She did not pursue activities after the workshop and she rationalized it by stating:

I wanted to help them out in any way I could, and at no time was I ever going to become the leader... I mean I lead in my classroom...they don’t need me to do that.

Adult members who adopted a facilitative role in the connecting phase called initial meetings, and then encouraged youth members to take the lead. This worked very well for school teams. Carmen, a teacher and guidance counselor, talked about what she did to help her
team.

I think, as teachers, sometimes we tend to want to jump in and organize, and get things done. But, I think this can be that only valuable for them if they do all that stuff. And, sometimes they stumble along a little bit, but, you know finally they’ll sort it out... at the beginning, they didn’t. They didn’t call meetings. They expected me to call the meeting. So, I called the first one to get them going, and then called the second one, and then the third time I asked if they thought they should have a meeting. And, oh, maybe, okay. So, after that third one I didn’t say a word. and finally, Krista came in and said to me, I really think we should have a meeting. And I said, yah. Well, what do you want to do about it? She says well. I’ll make out some slips and I’ll get the other girls out and we’ll have a meeting. I said, okay that’s fine. So, from that point on they basically, they’ve done it... I think, I am more comfortable with sort, of sitting back and letting them go at it. And knowing, that they will work it out, and they’ll do a great job.

Some adult members were directive, others laissez faire, and lastly facilitative. Adults who were directive or laissez faire had school teams with poor results. Adult members who took on a facilitative role by calling meetings and encouraging young people to take the lead had groups who developed cohesion; a commitment to the group’s goals and these school teams were more successful.
Summary

Following the workshop, school teams took different paths. Factors at the intrapersonal level that affected the ability of young people to plan and implement activities included feeling they lacked abilities, or their low level of commitment. This led to inaction. Individuals feeling motivated who were together with other motivated students, led to action. At the interpersonal level, barriers occurred when students had trouble getting started; when they had no idea of what to do; when decision making was not shared; when youth had difficulty getting along; and lastly, when they had an unavailable, directive or laissez faire adult member on their team.

Alternatively, facilitative interpersonal level factors included using goals to get started, shared decision making, learning to get along as a group, or at least put up with differences, and having a somewhat available adult member. Student groups who had facilitative factors continued to be active.

Students found learning to deal with interpersonal conflicts an important and necessary step in connecting as a team. They found having an available adult member necessary to continue. However, frequently, the adult member was not aware, or too busy, and therefore, not available to help young people deal with interpersonal issues. Clearly, this was an important gap in support for student leaders.

Part 3: Finding a Niche

Once youth met and formed a group, they explained that they had to locate themselves
within the bureaucracy of their schools, in order to carve out, and make space for their initiatives. This process, labeled Finding a Niche, included three sub-processes: finding time, getting permission, and competing for attention. The levels of influence affecting Finding a Niche were at the intrapersonal and organizational levels. Each sub-process is described from the young people’s point of view and then information from the adult members and administrators’ point of view is added.

Youth Views

Finding Time

Time was important for youth. They lead very busy lives with extra-curricular school sports, artistic activities and part time jobs. Thus, finding time for developing peer led initiatives was an important issue. They had various levels of success finding time: ranging from not able to find time, struggling to find time, making time, and lastly, balancing time and energy. Some students were not able to find the time to become actively involved.

Well, I guess, it was like, time management. It was really hard. Like, I had lots of work, with my schooling and stuff. I didn't really have time for more extra-curricular. I was involved in volleyball too, and badminton. So it was kind of taking up lots of my time. So, I didn't really have much to spare. (Clara, grade 10)

Other students struggled to find time. They chose to work on the peer led initiative, but it was a struggle for them.
I was trying to manage co op, going back to the school [co op was in another location] and trying to get into college. When all the projects came up from school. And then, you had to do your resume and everything to send to the colleges at once. And, it was like, I was going to orientations at the different colleges that I wanted to go to. And so, I had to miss a couple days of school for orientations. And, it was just trying to catch up after you got back. So, I managed it, like, just taking time and then put it back on our club... So, just managing time [was a struggle]. (Laura, grade 12)

To some students, making time was important to them. Although students were very busy with many extra-curricular activities, they made being involved a priority. For example:

I started on Hoops for Heart ... I am a very busy person. So, it's just. I think it's a really great project, that every body has put together and I'm so excited it's here. (Ronda, grade 10)

Lastly, balancing time and energy proved to be a challenge. This was both a process, and an outcome for Marnie.

I found. I learned how to manage my time. How to balance school, and Fly Higher. and home. and myself. So, that was good. I learned a lot out of it. (Marnie, grade 11)
Mamie was part of a team that carried out activities and continued to meet to the end of the year. Making time individually is necessary for young people to develop peer led initiatives, however even for students who have managed to do so, it was not sufficient. Students needed to work within the organizational structure of their schools.

**Getting Permission**

High schools are institutions where there are large numbers of individuals contained for long periods of time. King and Peart (1990) suggest schools work because they have highly structured management systems and many rules. To find a niche for their activities, school teams have to take into account school rules and structures. In this study, all student leaders needed to secure permission from two sources in order to proceed. The first source was adult based, requiring an adult sponsor: and the second source was student based, requiring support from student councils and athletic councils.

In all schools in this study, students could not do any special activities in their schools without securing permission from an adult sponsor. Permission was required to hang posters, to start a group, and to carry out activities. Power was delegated from the principal to the adult representative to ensure student activities were consistent with school rules. Adult members who were not available to explain the rules created difficulties for students.

We didn’t know what was legal, and what wasn’t legal. What kind of things we could change. School policies, things like that. It was really difficult. And the
teachers. the teachers know that. When she [adult member] wasn't around and we had a question. like. well. maybe we could do a civy's day. I don't know. if we can do that? It was hard. (Melanie. grade 12)

Melanie talked about the need for the adult member to support young people learning the rules. and when the adult member was not available, the consequences for them. Her team was delayed in scheduling activities it wanted to do. because the students had to keep running after and checking with a very busy adult sponsor, who was unable to attend several of their meetings. The students felt powerless to go on without input.

Alternately. when the adult member shared her knowledge of the rules. this facilitated students' initiatives. Kerry. a grade 12 student. explained how her teacher advisor told them about how the rules work in trying to start a new group they called FIT.

Focussing on Issues Today... we took the idea to our teacher advisor in our school. And. she thought it was a very good idea. But. we needed to write up a proposal to the principal saying that we want to start a new club. And we did...She can't pass it. the principal has to pass it.

The students wrote a proposal and the principal approved it. They were free to then recruit members to their new group. The students felt their adult member was supporting them.

Once adult support was secured. support was needed from student and athletic councils. Both of these councils have access to resources and are legitimate or official student voices in all
Ontario schools (King & Peat, 1990). Thus, it was not surprising that the school teams needed to work with these councils. There were some situations where students felt in competition with student council. Alternately, when the Fly Higher group had friends on council or they themselves were on council, student councils were collaborative. Melanie, a grade 12 youth talked about her concerns about possible competition with her student council when she wanted to book a speaker on Healthy Eating to talk to high school students at an assembly.

We didn't want to come across as trying, to look better than them, or steal any of their activities. If anything, we wanted to be able to work together with them...

...We, like, thought well, we don't want to impose on student council. It's not our goal...We went to student council, and we said, this is what we're doing. We want you to be well aware of it, and we're not trying to do it behind your back, or anything like that. We want it to be very clear, that we aren't in competition with you.

When school team members had friends who were on student or athletic council, this facilitated collaborative relationships and working things out on a personal basis. Student leaders felt they could count on their friends on student council.

We have an excellent student council. I'm really good friends with the president... I really find that he understands me. And, I can relate back to him. We confide in each other. (Ronda, grade 10)
Lastly, there were situations where they themselves were members of student council or athletic council. In these situations, they used their "in" to work collaboratively and accomplish activities. They made practical decisions about how to get things done. In one situation:

Joann and I [student council president] were so busy...Some of the girls came to my student council meetings and we really worked together to, to work and organize. for. Play Day [a physical activity day]. Like, it's a big thing at the end of our school year. (Ellen, grade 12)

This group was able to hold a large school activity that was successful because they collaborated with other student/athletic council students. Getting permission from adults and working collaboratively with student/athletic councils helped the students work within the official rules and groups in their schools.

**Competing for Attention**

The third sub-process in Finding a Niche was competing for attention. The number of other activities already going on in a school affected how young people were able to compete for their fellow students' attention. Many schools had a variety of activities and it was difficult to find time for another extra-curricular activity.

We have a very different school. We have an art school, and there are a lot of things going on all the time. (Megan, grade OAC)
Fitting in with already scheduled events was important. Active school teams took into account when their schools were having already scheduled activities and were careful not to compete at the same time as both students and staff devote attention to scheduled school events.

It's [refers to an activity] been in our school for something like, 20 years. So, it's been a production that our school takes on every year. And, it's really great for our school. No other schools do anything like it. So, it's very special to the school. It brings the school and staff together. Once it starts, everything else drops off. After that, by that time we're thinking about exams and year end, and major projects that are due. (Kris, grade 11)

Fitting their initiatives into other activities occurring in schools affected young people's ability to access resources. In terms of actually booking rooms to have activities. (like the gym for Hoops for Heart). Ronda could only get the gym for the long weekend in May and then many teams canceled because students had other plans.

**Adult and Administrator Views**

**Finding Time**

Similar to youth members, time was an issue for adult members. Extra-curricular activities involved time and effort and many adult members felt they did not have sufficient time to devote to Fly Higher because of other competing demands. Three of the adult members were in new work situations, and they found the time requirements of this extra-curricular activity
demanding. Most adult members felt they were unable to give the time they had wished.

Well. I was enthusiastic about it...But at the same time. I knew my limitations.

And. that's what I was worried about. as a teacher. I'm a phys ed head. first year.

then. I ended up applying for a super head position... I was really impressed with the girls...But. they needed a staff person there. attending their meetings... And. I couldn't be there for them. I just couldn't. (Amelia. a teacher and department head)

Thus. both students and their mentors struggled to find time.

Getting Permission

Adult members recognized that they were important to helping students 'learn the ropes' and find a niche for their plans. They knew how the school as a system worked. and understood that by sharing their knowledge with the school team members. they could facilitate youth led activities. However. on many occasions. adult members were unable to be as available and supportive as they stated they wanted to be because of limited time to devote to the Fly Higher health promotion initiative.

Competing for Attention

Adult members and administrators were very cognizant of the difficulties students experienced in competing for attention. From the adults' point of view. fitting in involved
sharing the turf and this needed to occur in order for students to develop initiatives. Carolyn, an administrator, talked about the need for students’ new initiatives to fit in to already existing school activities.

They have to be sure that there’s coordination, that it’s not stepping on the toes of something, another initiative that somebody else is trying.

There were situations with teachers in the school setting, where negotiations needed to occur in order for youth to “find a niche”. In one situation, a PHN adult member tried to negotiate with a female staff member, to work together with her student group on sexual harassment issues in the school. The teacher refused, as she wanted to continue to lead the group she had started. The PHN felt the teacher wanted ‘control’ and recognition for her work. In another situation, the adult member saw the Fly Higher team’s mandate as similar to a Health Coalition already existing in her school, and therefore, did not encourage her group to do any activities. She did not openly discuss this with the young people, she simply let everything drop. In a third situation, members of the Fly Higher school team (two youth and one adult) were also members of a school based peer helping group. They developed the Fly Higher activities to be separate and distinct from the peer helping group activities. They successfully carried out initiatives in their school. When sharing the turf was an issue, clearly there were challenges.

Adult members and administrators all stated that youth would encounter difficulties competing for attention because of numerous scheduled school activities. Norm, an administrator at a large community high school, explained:
This school has a million activities every week... The biggest constraint in my opinion is that we're almost, overly bombarded with options. You know, sports events, and then it's blood banks, and then it's food drives. I mean, this is a school that tends to get involved in a lot. And, as a result, for it to grab a piece of that pie is sometimes, a pretty small piece, if it isn't a hot item. If you're running up against the fact that this week we're in the provincial volleyball championships and you're trying to run something else, you might not get much people's attention... I see kids getting frustrated, because they're running up against other things and, something that's pretty worthwhile, is second to something else that seems more worthwhile.

Administrators also saw many outside groups wanting to bring their specific causes to schools for fund raising or research. This put added strain on schools as schools could not open their doors to everyone. George, a principal, expressed a common sentiment:

We get inundated with all sorts of projects, and causes, and stuff. Could we do this, could we do that? I mean the public health,[department] they want to come in and do an alcohol awareness thing... We have an AIDS awareness day, you know... I mean some demands are quite unreasonable, what they expect... People come in with causes and concerns, and that's their sole issue. Well, you know, you bring it into a school, and... it's just one of a hundred issues. Some of them are disappointed, but maybe we don't, rejoice with everything that they bring in.
Administrators saw further challenges in large schools: specifically difficulty communicating with everyone with some teachers being 'out of the loop', and trouble scheduling common times. In some schools there were triple lunches and one common period every fourth day. This made meeting together very difficult.

In addition to the many activities already going on, in some schools advanced scheduling was important. Advance planning was required when an activity involved time out of class. Schools often made the decision in June prior to the academic year for time for an out of class activity. The impact of these restrictions was to limit spontaneous activities for students.

Because, you know, the way a school works, is you plan in June for the following year. And, they don't like any curve balls. Like they, [the youth members] wanted to do Dress Red for Heart, and you know and they couldn't. (Amelia, teacher and phys ed head)

Summary

When trying to find a niche in the school for their activities, young people encountered both intrapersonal and organizational level barriers. At the intrapersonal level, finding time in their personal lives was a challenge for both youth and adult members. At the organizational level, seeking permission from adult members and collaborating with student councils was necessary; as was competing for attention with other activities going on in their schools as they tried to fit in plans for new activities. Adults and administrators reported more organizational
issues. especially barriers. for young people to develop peer led initiatives such as: sharing the turf. too many activities already going on. many requests from other organizations. and inflexible scheduling.

The outcomes for finding a niche were variable. Some school teams were completely unsuccessful in finding a niche. they stopped meeting and ceased to exist as a team. For many school teams. it became a matter of partially finding a niche. and trying to continue along. Lastly. only a few school teams were able to successfully find their niche. and were able to proceed to manage the plan they had developed.

Part 4: Managing the Plan

Once youth connected with one another. developed an idea for an activity. and found a niche in their school environment for the implementation of their activity. they then proceeded to manage a plan. Managing the Plan involved sub-processes I identified as spreading the word. taking risks. and building momentum. In this section. each sub-process is described from young people’s perspective then the adult members and administrators views are presented. My analysis shows that intrapersonal. interpersonal. organizational and community level influences affected youth leaders’ ability to manage the plan.
Youth Views

Spreading the Word

Beyond seeking permission in their schools, young people needed to spread the word about their intended actions to members of their school community. They were pragmatic and started with people they knew. They started with their friends, then they brought ideas to Phys ed class and other students. They spoke to teachers, and some youth contacted administration.

All students reported being verbally supported by their friends, and some reported receiving help. The responses ranged from positive and potentially helpful to positive and helpful:

Like, mostly. WOW (Working on Wellness Group) consisted of our friends. cause we got them interested. That's how it starts. You gotta start somewhere. So that's right. the closest people are your friends. (Kris. grade 11)

Some of my good friends were most helpful ... In the first place because they have my lunch. And. we were together all lunch. and. other people talk with the other people [and they told others]. (Marnie. grade 11)

In addition to telling their friends, young people brought their ideas to their classrooms. Joann. a grade 12 student. brought her ideas to her phys ed class. trying to spread the word and elicit help:

I took this stuff that I learnt, and the [tool] kit back to my phys ed class. And we
talked, and the girls in that class were excited about it. And we tried to have a meeting where we had free lunch for all the girls that showed up or whatever. And there's about 15 of us there [in my phys ed class].

However, when young people tried to move beyond their classrooms to other school students, many young people said it was difficult to motivate their peers. Joann commented about her attempts after securing her phys ed classmates' support:

Actually, getting contact with people, getting the information out, is tough. Like, there was meetings, and, it was free lunch, and, it was for girls only. People thought it was kind of dumb, kind of. I don't know. It's just the way our school is. It's really difficult, it's really hard. It's hard to get people motivated and to understand, that the school's not this, all work and no play.

Besides reaching out to students, school team members had access to other school teachers for help in spreading the word. However, it was very common for young people not to involve other school teachers as they felt the other teachers were already busy. When they did look to teachers and other staff for help, some were helpful.

A lot of school staff is involved in other sports or whatever. So, it was mostly Mrs S [Amelia, adult member] helping us. And the other ones, were just, kind of, doing their own thing. (Julie, grade 10)
There's teachers that are, like, you know "You go do this. I'm really happy. Here's a bonus buck for going and doing that extra work and getting involved in your school". [when youth leave class early to participate in extra-curricular activities] (Ronda. grade 10)

Our vp's, and our principal, and our gym activities director, they were, they were really supportive about the whole thing. And, they wanted to see something happen. [referring to the osteoporosis walk](Kris. grade 11)

When asked about eliciting help from the school administration, responses varied from not being aware that administrators could be a resource to administrators being helpful. Generally students were not aware that administrators could be helpful and, unless there was a specific reason to contact administration, students did not do so. In other situations, youth appreciated both the concrete support and the emotional support the principal gave their team.

I - The administration in your school? Are they helpful?

Y - I'm not sure. I've never really thought about it. (Clara, grade 10)

Yah. administration was really helpful. They were the ones who gave us the room. and they. let us put up our posters everywhere. (Julie, grade 10)

This year, our principal was very interested in our committee. And, he was there
for us too. He would always keep up with what we were doing. (Marnie. grade 11)

In all situations where the youth were successful in sustaining peer led projects. the principal was openly supportive of the school team. Clearly, having support from administration is helpful.

Taking Risks

The second sub-process of managing the plan is taking risks. Developing school activities involved trying out new things. and. in the process. taking risks. Some youth were unable to take risks when planning initiatives. They expressed either concerns about fellow students not wanting to take risks or they worried that something would go wrong. Ali. a grade 10 student. talked about how students at her school did not want to take risks. She did not feel any support from other students. and she did not proceed to develop initiatives.

We. I guess. no one just wants to do it [new stuff] by themselves. And there's not enough people [in our group] who will do it. And then. the other people [school mates] just won't do it [new stuff] either.

Young people expressed concerns that they did not want something to go wrong. Some students wanted to try new activities. but were unsure of their success.

When I first started. I was like. I'm not going to do this. somebody else can do it.
Because I didn't want to do something wrong... If someone would say something [I would be upset]... now, I think it's just basically, you know, you try. If you don't succeed, hey, it's okay. Do it, try again. Don't worry about it, you know.

(Ronda, grade 10)

She persisted in developing initiatives in her school rather than giving up. Ronda had developed a sense of self efficacy about her ability to carry out initiatives, and this belief encouraged her to continue. Once youth members started developing initiatives, how these initiatives worked out affected their desire to continue.

**Building Momentum**

The third sub-process in managing the plan addressed building momentum. Having some initial success built momentum for groups and helped the students continue developing peer led initiatives.

When activities were poorly received by fellow students, youth became discouraged and did not continue with activities. Brandy, a grade 9 student, and her group, did a Muffin Monday, that was poorly received by students. Similarly, Joann, a grade 12 student, worked together with students in her phys ed class to do lunch time fitness that was poorly attended. Students in both groups felt discouraged. And Sonia, grade 12, tells of trying to recruit new members to their FIT [Focus on Issues Today] club:

Well, at that point Sara had left school. She had finished [in January]. It was
myself, Rachael and Terri, and then, two friends of mine, Dawn and Emma. I begged them to come, and they showed up. And they were like, well, do you go any farther with this, and. they were like how?... We didn't have a lot of funding and stuff, and that was when we just realized how difficult it was going to be.

The above students were unable to build momentum, and they all stopped meeting before the end of the year.

Other school teams had more positive outcomes. One school team wrote a mission statement they felt proud of, and they then secured a room for their group to meet and hold activities. These youth felt encouraged to continue (Julie, grade 10; Melanie grade 12). Another group did a Dress Red program that was well received and the school team learned some group process issues from their experience. Anna, a grade 11 student, discussed a follow up to their Dress Red experience:

*We had a meeting after the Dress Red, just to say, what went well. What didn't go well... We talked about the problems that happened so we all knew how we felt.*

When learning a new skill, success in the small steps enhances self efficacy and encourages individuals to continue in their attempts (Bandura, 1986). This school team went on to organize painting their cafeteria wall as a project to improve the physical environment of their school.

Besides people's responses in the school, school characteristics were relevant influences to students building momentum. Factors that affected young people's ability to build
momentum included their school rules, resources, and school atmosphere.

Rules. Rules were viewed as an necessary aspect of school life. When rules were unfairly applied or viewed as unfair, young people felt upset. Ronda, a grade 10 student spoke to this and was very annoyed about the unfairness and the arbitrary nature of staff in her school choosing to be upset about students wearing hats when they were not upset about students smoking on school property. Ronda considered the smoking issue as significant, and the hat issues as trivial:

Well, we just started a hat rule at the start of school. Which is, no hats, like, on the school property. But, they let kids smoke on school property. Like, the kids will smoke right outside the door, they smoke in the bathrooms. But you're upset about wearing hats?

Also Laura, a grade 12 student, expressed frustration when her plans fell through because of the new need for ‘permission slips’ and the subsequent consequences:

Every year, before, it was, okay. We have meetings, we'll just leave. But this year, it's more. you had to have everything signed. For every day that you went out... We needed permission slips every time we weren't in class... So we were going to go. and do, like, aerobics with them[ developmentally challenged youth]. And then the day came. and it was, like, no you can't go. cause we didn't get permission slips.
Alternately, other young people felt rules were fair and this facilitated their developing peer led initiatives. Kris, a grade 11 student, recalled:

The teachers basically lay down the rules. And they’re really fair, really reasonable. Something that’s kind of, it’s not a problem.

**Resources.** A second relevant school factor to building momentum was available resources. For youth on two school teams, there was ‘work to rule’ shortly after the workshop. Therefore, after school resources were not available. Other youth reported a variety responses ranging from not being aware of resources, a lack of available resources, especially money for their initiatives, and lastly young people reported adequate in-school resources. Noelle, a grade 10 student reported:

When we went back to school. uhm. we had some problems. cause we went into a work to rule... we put up a bulletin board...but like nothing after school. and no running things and stuff.

There were many situations when the students were not aware of resources available to them. For example, public health nurses (PHN) are assigned to all high schools in Ontario. When asked if a public health nurse was involved in her school, Brandy a grade 9 student responded in a typical manner:

Uh I don’t know... I don’t know if we have a nurse or not.
Although students did not talk about lacking resources in general, they did talk about a lack of available money for their initiatives. Melanie, a grade 12 student wanted to invite a guest speaker to a student assembly, but money was not available to pay his fees. This was related to timing, as often money in schools is allocated from student councils to different school clubs at the beginning of the school year. As Fly Higher did not exist in their schools at the beginning of the school year, teams did not have access to money from their student councils.

When there were adequate resources, students were better able to develop initiatives. As Marnie, a grade 11 student reported:

It [the activities office] can be a meeting place. It's important in our school. It has supplies, and it has a secretary, and the activities director's office as well

...There's a lot of supplies, and, a secretary helped us out a lot.

I think it was not just the resources, but also the atmosphere of being valued and allowed access to resources that youth found supportive. Ultimately, resources are controlled by the principal. Permission and encouragement from the principal was present in all situations where youth were successful to the end of the year.

School Atmosphere. A third factor related to school characteristics was school atmosphere. This referred to how students felt about the climate in their schools: if they felt students got along. Students responses ranged from feeling their schools were tough places to
attend. their schools were mixed, and lastly, their schools were warm and friendly. Youth who felt their schools were *tough places to attend* found planning and doing activities an uphill battle. Megan, an OAC student found her school a difficult place to go to. Megan was graphic in her description of her school as a tough place to attend:

There are a lot of grade 9 girls that come in, and they are, they're tiny. And, you just look at them, and it was .like. you can't be smoking a cigarette. You're not really smoking that...But, there is a lot of drugs at our school too...The school is very big for drugs... We had a lot of students who would urinate on the radiators, and they had to evacuate the school. We had bomb threats constantly, and fire alarms constantly. and... It's just the students. I can't even tell you. It is a hard school to go to.

When most young people spoke about their school atmosphere, they described both interested, keen students and other students, they felt did not care about things in their schools. They described their *schools as mixed*:

I mean there's. like. two halves. There's a half that's really for leadership. and really getting involved, and then there's a half that just doesn't care. So, it's very hard to intertwine the two of them...It's, a big population and, there's, uh. a certain amount that have a negative attitude. Don't want to get involved. Feel like it's retarded, it's stupid. And, there's another group that really go for it. and, like to get involved. They like to speak what they think (Kris, grade 11)
Well, there's the people that go to everything. And then, there's the people that just want to go, get high and drunk and stuff. And, that's all they want to do.

Like, that's. I think, that's the main thing.

I - Are there a lot of the second kind of people?

Y -...There's lots of them. There's, like, maybe, probably, about 50% of our school's like that. (Brandy, grade 9)

Kris and Brandy's comments represent responses most students gave about their school atmosphere. The challenge was in the diversity of the student body. The student leaders felt they could connect only with part of the student body, the students who were similar to them. They expressed the view that it was a start.

In only one school, did youth describe the atmosphere as friendly, and without difficulties. Katie, a grade 10 student felt her school was friendly:

It's [my school] pretty small. So everybody really knows each other and... like the kids notice students, and...the teachers know all the kids. So, it's like, it's really friendly...We're very well-behaved. Like, when we have assemblies, when our principal gets up to speak, everybody's quiet right away. And, we're like, you know, polite. We just have unknown rules, that we act well, and we behave proper.
School atmosphere was an important contributing factor to the young peoples' ability to do activities in their schools. Students who felt their school's atmosphere was totally non-receptive were unable to develop initiatives. Students who felt their school atmosphere was mixed, both positive and negative, were able to develop initiatives, but only directed to the students in the school who were interested. Lastly, students on one school team who felt their school was warm and accepting developed limited peer led initiatives and did not continue to the end of the year. School atmosphere alone was not sufficient.

**Community Factors**. An assumption made in the Fly Higher program was that young people would access community resources when developing initiatives. Although community support may involve many sources, for the young people involved in the Fly Higher program, community support was limited to the Heart and Stroke Foundation and their public health nurse. They talked about how it was difficult when they did not receive support. Ali, a grade 10 student, told about when her team wanted to do a fund raising activity called Hoops for Heart. They needed to receive a box with instructions, rules and prizes from the Heart and Stroke Foundation.

We just couldn't do much, cause we had no information from the Heart and Stroke Foundation. So we couldn't really get started, until we heard from them.

Alternately, youth felt supported when they received resources they needed for an activity, like Dress Red. Also, when they had ongoing contact, they felt supported. Marnie, a
grade 11 student stated her delight in being important enough for ongoing community support:

Well, we got... some newsletters, and I filled out a survey for the WOW [Working on Wellness] committee. And so, that helped, and then, just like, the newsletters and survey came up now. And then, we realized that okay, they're still there for us. So like, they're there for students.

In summary, my analysis showed that in order to develop an initiative and to manage it, young people had to spread the word about it, overcome a fear of taking a risk, and go ahead with an initiative and build momentum to involve other students. In the next section, the perspectives of the adults and administrators on young peoples attempts to manage the plan is added. Adult team members and administrators elaborated extensively about barriers that school team members encountered in today's schools. They identified far fewer facilitating conditions than they identified barriers.

**Adult and Administrators Views**

**Spreading the Word**

Many adults and administrators saw the *school team members as different* than the regular school body. They thought that this made young people selling their message difficult because the general student body may not identify with the youth leaders.

I'm not sure that there's a lot of peer acceptance. The students that are involved,
are involved in many other things in the school. And they're are seen as, you know the SEC [student executive council] groupies. And, already are seen by the student body as. there's so and so again. (Tammy, a teacher)

You're dealing with the kind of kids who are pretty healthy, interested kids anyway... You see it's already attracted people that have a pretty strong leaning in that direction. However, I think the average guy that is eating a cheeseburger with fries everyday probably doesn't care all that much. (Norm, a principal)

The adult members needed to work together with the youth members to spread the word to the school community. When available adult members took on the role of advocates and guides, this was supportive for youth developing initiatives. Amelia, a phys ed teacher and department head addressed how she viewed her role in advocating for her student group in her school:

...You step in. and you make a path through. Because, sometimes teachers will just put up road blocks. because it's student led, and you have to be there...to legitimize I think...you have to champion their cause.

And Carmen, a teacher and guidance counsellor, the adult member for another school team spoke of how she tried to guide her school team:

I view my role more as a liaison person. Helping them to sort of go down the right
avenue in terms of where to get supplies. and I can give them suggestions that way. In terms of what they do, and how they organise the details, I think that has to be left to them ... They had to do all the leg work, you know, get all the permission stuff. So. they’ve done it. I think they’re pretty proud of it this year...and there’s a lot of red tape to go through in the school.

Taking Risks

One adult member identified the issue that school team members would have difficulty standing out because she viewed her school culture as supporting the status quo.

Cliques still very much rule...And I think in a lot of ways. not doing anything is very popular [in our school]. Just hanging out . You know. you don't want to be too different. you don't want to stick out in a crowd, and you just sort of want to go along with the group. (Carla. a teacher)

Building Momentum

Adult and administrators identified several school issues that affected school team members trying to develop peer led initiatives in their schools. School issues that they identified were having diverse students in their schools, seeing today’s school youth as more stressed (than in years past), having to do more with less in today’s schools, and lastly, school atmosphere.

Administrators and adult members saw their schools as having diverse groups of students, both in-school cliques. and also multi-culturally diverse.
We have different groups. and we draw from an area of 40 square miles. So, we have outlying communities that send their students here. They...probably mingle more according to. I would say their social background, their economic backgrounds. (George, a principal at a Northern school)

The student population themselves... Our school in general is very hard to promote things. and to try new things. We are a very multicultural school. Some issues that might. [with a school with] one culture background might target ...and. in our school. it's a tough sell [like Christmas carols in a mixed religion school].(Sharron. a teacher)

Many adult members and administrators saw today's youth in high schools as more stressed than young people in previous years and felt that students are not as available to participate in extra-curricular activities. They suggested many more young people are from single parent homes. more work at part time jobs. and more deal with serious life issues like sexual or drug abuse.

Kids are now...dealing with difficult home situations. They're often working. what I would consider to be full time. But. I think. when you put those kind of stresses on students it's. sometimes really tough. So. people [students] know they want to do something, but they can't, they don't have the time or the energy...It's the current day stressors that limit what they try to do. (Nathalie. a vice principal)
I think we got a larger number of students with sort of more social and emotional and psychological baggage with them. That needs to be dealt with, and it's a whole variety... It could be at home and a learning disability, whatever. More kids have personal problems. (Dale, principal)

I do think that these kids are much more stretched. [There are more] Time limitations than there ever were before. There's a rare kid that doesn't have a part time job by the time they get to about grade 11. And 10 years ago, lots of kids didn't work. You know, and here so many of them do, or they have other responsibilities at home. Like, "I don't know if I can't be part of this I can't be on this team or whatever. I gotta go home and babysit". ..They have much more adult responsibilities. (Leanne, an administrator and department head)

Adult members and administrators saw the situation exacerbated by a school system that has to do more with less. They reported fewer teachers in the classroom and fewer available resources.

Like we've actually [been] cut back [by] our board roughly 10% in the last couple years. If you include personnel resources, human resources, and, financial resources. Yes, they have. The over-all picture has become a little more bleak in the last, two or three years...I have no doubt that what has tended to happen as the needs have gone up, the support is decreased. (Dale, a principal)
Along with fewer teachers and resources in schools, administrators reported having an ageing teaching staff. All but two administrators reported that an ageing teaching staff, with several members being resistant to change, acted as a barrier to students.

There has been a very much an ageing staff. There are no young teachers at this time to even come into it now. It is the young teachers who have the energy to stay to seven p.m. to show them how to make posters and get organized.

(Nathalie, a vice principal)

Like the students, they also acknowledged that school atmosphere could act as a barrier to peer led initiatives.

Knowing unfortunately, a bit about our school environment, a lot of this stuff would have just been. you know, poo poo'd away type thing, or ignored... We have a lot of very conscious health conscious kids in our school. And we have, of course, those that don't. But, it's a feeling that I have is, you don't talk nutrition. You know, you eat your french fries with gravy on them, even though you know it's bad for you, and if there was something, uh, if a video was on, people would just ignore it and they'd walk about or they'd push it away. Or they'd turn it off. or you know, whatever. They wouldn't sit and go, oh look this is nutrition. This is us ...if one student did want to watch it, the others would of course, peer pressure, push that person away. (Amy, a teacher)
The adults were also aware that in a school with a *warm and inviting* school atmosphere, students felt welcomed and supported in trying their initiatives.

We have a lot of young women in really strong leadership roles here. We have lots of them [extra-curricular activities] happening all the time (sure). So, there's encouraging staff members. there is role modeling, there is hearing announcements about other initiatives. ...If the kids want to do something. [there are] very few road blocks. (Carolyn, a principal)

I think in our school, part of what helped out, is that we already have a peer helping group. So, I think our principal as well, is very open to the students doing stuff, and wants them to take more of a leadership role. That kind of thing. So, I think we had kids that were already used to that climate, so the fact that they wanted to do something, they weren't afraid to go and try it. (Carmen, a teacher and guidance counselor)

Administrators noted various barriers to young people’s efforts related to board policies. As already indicated in the section on recruiting school teams, principals have significant decision making powers in their schools. They act as gatekeepers, deciding what gets approved and what needed to be passed on their respective boards. How principals interacted with their boards seemed to be related to their history with the board. Many principals stated that they were trusted to bring relevant issues to members of the board. There was significant discretion left to
principals. Even in the same board, principals indicated that some followed the letter of the law, whereas others followed the spirit of the law.

Although principals were aware of board policies in general, several were not aware of any particular board policies that would facilitate or constrain youth led initiatives. They often referred to a *general board philosophy* supporting student involvement in school activities and support for student leadership programs. The only direct board policy, the principals identified supporting youth driven initiatives, was a policy to have a *non-voting student trustee* on the school board. Because this would increase youth visibility to the board, this was thought to be supportive.

I don’t think our board has policies that exist, but our board does run each year a multi-cultural, multi-racial leadership program... It's promoting the whole idea of youth initiatives. (Dale, a principal)

I suppose indirectly. This last year we had a student trustee ... so they could have input...so that, they would have a voice where they could speak to their concerns.

(Ray, a principal)

Because of the nature of the peer led activities young people developed, there were no situations in this study where students needed to seek board approval. If however, their activities would have involved *student safety/ board liability and controversy/board image* issues, their principals would have sought board approval, or at least informed the board members. This
would have been an added barrier to the spontaneous development of initiatives.

There's a board policy where, if you're going to do fund raising, for example, it'd have to be brought to the board first, because of, the liability you know, through say, selling something door to door, and, they get ... raped, or something like that.

(Richard, a principal)

The only thing that I think consistently comes forward is liability. And, if the trustees themselves have any doubts about whether students are at risk, or they're not going to be able to protect themselves, or the system as a whole. Then, the answer's no. (James, a principal)

Following student safety and board liability issues, principals identified board image and controversial topics as inhibitors to youth led initiatives:

Well, the board wants to be aware of what these activities are going on, and, to make sure it falls within what they think's an appropriate fund raising thing.

(Richard, a principal)

Most of these things, they allow us to become involved. Now, if it was something that was very controversial, they, you know, they may expect to be informed about it. But, generally speaking, you know, they give us the right, the principals, the right to make decisions. (Dale, a principal)
Community Factors. While youth talked about community in terms of finding resources, administrators and adult members felt that broad community issues, such as lack of community resources and high unemployment presented barriers to young people's initiatives.

I know that the kids in this particular school don't have contacts in the community. Somebody who did this, who you know, is a doctor, who would come and speak. So, they don't have the resources in their lives to draw on. And this is very much a limiting factor. (Nathalie, a vice principal)

We had that the mine closing a number of years ago now... There's one mine that's operating in the immediate area right now in [our community]...And, they closed the mine for a month, and then looked at whether or not they'd be able to reopen it. And then it came that they would be able to open it... And, the end result was that they only had a work force of 240 well they've cut it by a 100. Now, so the idea behind that is, you get some welfare, you get unemployment, and of course, those things are felt at home, and in turn, they're carried from the home to the school. So motivation, there are some kids here that need a lot of encouragement, and a lot of motivation. (Richard, a principal in a Northern town)

Administrators reported that many students attending their schools had such significant issues to deal with, that many were not open to peer led health promotion initiatives. Rather they were
negative to 'health issues'.

Summary

In this section on Managing the Plan, data have been presented on the processes and factors involved as young people tried to develop peer led health promotion initiatives in their schools. Managing the Plan involved three sub-processes: spreading the word, taking risks, and building momentum. In spreading the word, young people identified barriers at the interpersonal level of influence that included difficulty motivating other students, difficulty involving teachers, and being unaware of administrators as resources. Adults and administrators pointed out that young people on the school teams were different than the rest of the student body, and that these differences caused difficulties for the school team members when they tried to work with other school youth. Interpersonal level facilitators included helpful friends and classmates, some helpful teachers and very importantly, administrative support. Adults identified themselves as advocates and guides for youth as youth try and spread the word.

Young people identified barriers at the interpersonal level affecting their abilities to take risks. These barriers included being unable to take risks because their fellow students would not help them, and school team members being worried something would go wrong.

Organizational level barriers were more prominent with respect to building momentum. Barriers included poorly received initiatives, unfair rules, lack of resources and difficult school atmosphere. Adults and administrators identified several more organizational barriers than young people did. These included schools having diverse student populations, high stress among
today’s students, limited school resources, tough school atmosphere, and some board policies that could limit student activities if these were perceived to affect the safety of young people or raise controversy for the school board.

At the community level, young people limited their contacts to their public health nurse and the Heart and Stroke Foundation. They had little idea that other resources could be used or were inhibited through lack of funds or support. Adults and administrators however identified general conditions such as limited resources in their communities and high unemployment rates as barriers for young people in developing peer led initiatives.

**Part 5: Different Outcomes for Youth Negotiating their Way**

The expectation for young people involved in the Fly Higher initiative was that their school team would be active at the end of their school year. However, for most teams this did not happen. The four least successful school teams, that never or rarely met, did not develop initiatives, were all inactive at the end of the school year. The six somewhat successful school teams’ status at the end of the year were inactive or active. Four school teams stopped meeting before the end of the school year: three of these school teams faded and one school team actively decided to stop meeting. Of the two school teams that remained active, both school teams were unsuccessful in resolving group process issues. Lastly, in the most successful two school teams, both school teams experienced group conflict, they worked through their issues successfully enough that they did not report ongoing tension, and they continued to be active as groups to the
end of the school year.

After developing a proposal to start a club, getting it approved by the principal, and holding two general meetings that few people attended, Sonia’s school team *actively decided* that they would not continue in the current year, but rather they would save their energies for the upcoming year.

We were pretty much in the mind set that when we have the time we’ll do it...We prioritized, so that we did what’s important. That mid-terms come first. And school comes first, and that was our mind set. We would wait until we all had time and we could all work on it together. (Sonia, grade 12)

Ronda, a grade 10 student, reported how her school team simply *faded* over the term. It was not an active decision. There were several contributing factors:

We’re not together anymore...I still talk to one of the girls who is Brandy. We still talk about. you know. getting stuff done. But our team has totally [gone]. Lots of us have changed attitudes. and I think I haven’t seen one of the girls at school. So. I think two of them have gone away to university. And one of them. I just can’t talk to her. She doesn’t respect me even though how much I try.

Krista, a grade 10 student, talked about their plans for next year after a successful initial year where they had some group issues, but resolved them. Rather than changing the plan, this group *continued* their plan.
This year, we really pulled together, and we all have the same goals. And we
started really late... So next year when we run it again[referring to a Dress Red
fund raising event]. We'll have more time, and plus, the students [in our school]
will know what it is. They'll be more into it, cause like Fly Higher. people didn't
know about it.[this year]

Clearly, from examining the processes and factors that were involved as youth attempted
to develop peer led initiatives in their schools, it became evident that there were several relevant
factors that were necessary. I consider youth were managing competing demands. At the
intrapersonal level, youth needed time in their personal lives to be involved in this extra-
curricular activity. At the interpersonal, school team members needed to learn to get along in a
group, and they needed an supportive adult. And at the organizational level, a moderately
supportive school environment, available resources, and a principal who believed and supported
young people in their efforts was essential.
CHAPTER 7: IMPACT OF FLY HIGHER

Although the intent of the Fly Higher program was to have an impact on schools, few school teams were able to successfully carry through. The impact on young people relating to their workshop experience is reported in Chapter 5. This chapter addresses the impact on young people following their return to school. Then impacts on schools are examined. There were five schools where there was no reported impact, and seven schools with limited impact. Nonetheless, it is important to examine impacts to further understand peer led health promotion initiatives.

Impact on Youth Leaders

The emphasis in health promotion is on implementation of activities rather than on the impact of those involved in developing the initiatives. However, as youth reported, the impact was significant to them. Young people reported the impact on them as neutral, negative and positive feelings. These feelings were very real to them. My findings indicated that when young people returned to their schools, they had strong negative and positive feelings, depending on their experiences.

Neutral/ Negative Feelings

Young people whose teams did not meet, reported either neutral or negative feelings. Other young people on school teams that did meet, but whose teams were unable to accomplish their activities or resolve group issues, reported negative impacts. A typical
response from them when their groups did not meet, and they did not report any negative personal feelings was:

We just didn’t get around to it and that was okay with me (Zara, grade OAC)

Young people like Zara seemed pleased with their positive experiences at the workshop. They explained to me that life went on. They did not express regrets that they had no further involvement in the Fly Higher program beyond the training workshop.

Other young people who were on school teams who did not meet, mentioned feeling alone and unsupported when they did not have any contact after the workshop. Their expectations had been raised and they were looking forward to ongoing contact.

First I thought it would be going on for longer times...but we didn’t hear anything else...no one else knew about it. I mean it would have helped if someone else knew, you know. (Ashley, grade OAC)

Also, young people reported feeling: disappointed, discouraged, frustrated, and angry when they ran into difficulties back at school. One group was unable to do their planned activity because Heart and Stroke staff members did not send equipment they needed. Young people expressed a sense of disappointment. There was a sense of helplessness. Ali, grade 10 was disappointed. things seemed beyond her control.

I wanted to do the Hoops thing and we couldn’t...that was a downer.

Eight of the twelve school teams met and carried out some activities. However, there
were often negative feelings when things did not work out. When students were unable to meet their expectations, they felt discouraged. Students planned on carrying out activities, but were unable because they could not get their fellow students attention to attend their group meetings.

When we got together after the actual, uh, workshop...and we were really excited. But, it kind of, it went down hill as time went on because it was sort of the middle year...I'm kind of discouraged with the outcome we got from it.

(Sonia, grade 12)

Having to cancel a Hoops for Heart fund raising event one day before the scheduled date elicited further negative feelings:

I had to cancel the whole thing. There were people out of town and my teams dropped...everything was so depressing. (Ronda, grade 10)

When young people met and developed activities, but had unresolved group process issues, they reported feeling frustrated and angry at their peers. This resulted in the groups either dismantling before the end of the year or continuing to meet, but not dealing with the issues and having ongoing tension.

You could sense tension big time...it wasn't an open conflict...you could feel it building...we never did talk about it. (Melanie, grade 12)

Thus, students in groups who met and ran into difficulties expressed negative impacts from
their experience.

**Positive Impact**

Several students reported a positive impact from their involvement in this peer led initiative. This positive impact that occurred once young people were back at school included both young people who did not participate further and others who participated further in activities. Reported personal gains included: stress management skills, increased sense of confidence, improved organizational skills, improved group skills, and a sense of recognition.

Some youth, both who did not meet after the workshop and those who did meet, reported using resources in the tool box and benefitting personally from these resources. They reported learning specific skills relating to *stress management*.

Ya, the program did help [me] with those stress packages because the OAC’s stress me out... I’m not stressed anymore ...It was very good for me. (Nellie, grade OAC)

Several students reported having an *increased sense of confidence* when back at school. They felt more comfortable joining clubs and participating in school activities. A typical comment was:

I think it did help me. Because, I was able to use it for other things. like bringing opinions to other clubs. and sports. and things like that....Being able to stand behind it... The sense, to be able to lead programs, without being
self-conscious of myself. Like, being able to voice my opinion very well... 

have confidence in myself to be able to do the job. (Margaret, grade 11)

Young people who met and developed several activities spoke about improving their organizational skills, working with others to get things done.

Uhm, the organizing things, huge, huge thing...I, personally, found out that it takes a lot more work than just you. I found, you need a person to do this and a person to do this. You need to organize. (Ronda, grade 10)

Also, youth whose school teams worked out group process issues spoke about learning to 'get along' in their group and that was important for them.

I learned, like, my group, and about communicating within my group. Because, when you don't, it just makes everything, less better...I think it will go better next year cause it's better now. (Krista, grade 10)

The groups of young women who resolved their group process issues and carried out activities, expressed the most positive experiences. They cited feeling a sense of accomplishment. Also, they spoke about feeling important. They appreciated receiving the newsletter, they felt the principal and vice principal were behind them. They felt they had something valuable to contribute to their school. I have named this a sense of recognition.

Uhm, I feel like I did something. First of all, I gave something back to them...[did fund raising for the Heart and Stroke Foundation] And, I feel like
I've given something to the school, because that mural eventually is gonna get painted over, but, for at least a couple of years, it's there right. And my name's on it. And, it's part of the school. So that's something. (Anna, grade 11)

Overall, students on school teams who developed health promotion initiatives had more positive feelings than students on school teams that did not. Students on school teams that resolved group process issues reported the most positive feelings. Next, the impact of this peer led initiative on their schools is addressed.

**Impact on Schools**

The intention of the Fly Higher program was to assist young people to develop initiatives that impacted both students in their schools and their school environments. The initiatives they developed/or did not develop in their schools led them to feel their involvement did/or did not have any impact on their schools. Thus, the fact that there were no reported activities for five of the 12 schools in this study was a significant finding. In the other seven schools, the activities students reported doing that led to impacts on their schools included: increasing awareness of certain health issues; fund raising; physical activities: nutrition activities; and physical changes to the school environment. There was some overlap between increasing awareness of health issues and fund raising. In fund raising, in addition to increasing awareness of health issues, students raised money for specific causes.

The following table gives an overview of the activities carried out and their reported
impact. As is evident by the table, there were both limited activities and limited reported impacts. (See Appendix S for more detailed information for individual school teams' activities and reported impacts)

Table 7.1: Student Activities and Perceived Impact on Schools

<table>
<thead>
<tr>
<th>Activities Carried Out</th>
<th>Student Perception of Impact on Schools</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Awareness Campaigns</strong></td>
<td>limited increase in knowledge &amp; awareness of women's health issues/ e.g. smoking, good nutrition, sexual harassment, healthy body image</td>
</tr>
<tr>
<td>Posters, public service announcements, theme bulletin boards, pep rally, display case</td>
<td></td>
</tr>
<tr>
<td><strong>Fund Raising</strong></td>
<td>money donated from school teams to the Heart and Stroke Foundation and the Osteoporosis Society</td>
</tr>
<tr>
<td>3 fund raising activities for Heart and Stroke Foundation - Dress Red. Guess the Number of Cinnamon Hearts. Muffin Monday</td>
<td></td>
</tr>
<tr>
<td>1 fund raising activity for the Osteoporosis Society</td>
<td></td>
</tr>
<tr>
<td><strong>Physical Activities</strong></td>
<td>few students participated. did not continue over time, developmentally delayed students participated in ping pong</td>
</tr>
<tr>
<td>Intramurals, aerobics at lunch, ping pong</td>
<td></td>
</tr>
<tr>
<td><strong>Nutrition Activities</strong></td>
<td>combos sold well and were continued</td>
</tr>
<tr>
<td>Healthy combos were offered in one school cafeteria</td>
<td></td>
</tr>
<tr>
<td><strong>Physical Environment</strong></td>
<td>improved physical surroundings - attractive wall in cafeteria</td>
</tr>
<tr>
<td>Painted cafeteria mural in one school</td>
<td></td>
</tr>
</tbody>
</table>

Summary

There were both negative and positive impacts at the intrapersonal level for young people involved in this peer led health promotion program. They reported many instances of
feeling frustrated, disappointed and discouraged. Young people who were more involved reported more positive gains than those who were less involved. Young people reported they felt more confident, and they developed stress management and organization skills. Young people who developed collaboration and conflict resolution skills reported the most positive gains and succeeded the most in their health promotion initiatives.

Following the workshop seven school teams reported they did some of the following: they raised awareness of health issues, did fund raising activities, held physical fitness activities, and held nutrition activities, and lastly made physical changes to their school environment. All these reported activities led to outcomes at the intrapersonal level for the school students who participated in the activities. I interpret the awareness campaigns that aimed to increase awareness and knowledge of individual school community members as at the intrapersonal level. The physical activities and nutritional activities were directed towards improving physical health behaviors and were also at the intrapersonal level. In addition, I suggest the young people were trying to have organizational level changes with the physical fitness activities and nutritional activities on an ongoing basis in their schools.

However, they were unable to sustain the physical fitness activities over time. There were no reported community level outcomes. However, the osteoporosis mall walk was one reported activity that was directed towards community members. Although it occurred in a community setting, the intended outcomes were again at the intrapersonal level, to increase knowledge for individual community members. As the reported outcomes were all short term and mostly limited to increasing awareness. I would suggest the overall impact of the Fly Higher program on the 12 schools involved in this study was minimal.
Several months following my study, I contacted all the school teams by telephone. Unfortunately, all the school teams involved in this study ceased to be active in the academic year following the study. A province wide teacher's strike made initiatives at the beginning of the year impossible. Although it was possible to initiate activities after the province wide strike was settled in the late fall, no school teams did so successfully. In the schools with the least successful school teams, one school team tried again (PHN based), the others did not try any activities. Reasons given for not trying initiatives related to not being friends with the remaining youth members, and the adult member did not remain involved (she had other priorities). In the schools with school teams who were somewhat successful in the study year, some teams tried activities but they did not receive a positive response in their schools. The two schools with the most successful teams in the study year, had adult members who moved on from their school teaching positions: one teacher moved to another school and the second teacher went on maternity leave. In one situation the adult member was replaced. Although there were different attempts made to develop initiatives, there were no 'successful teams' the year following this study in any of the 12 schools.

However, interestingly, youth who were very keen and active during the year of this study moved on and were active with other activities in their schools. They reported bringing ideas from Fly Higher with them to their new activities. For example, one young person started a fun physical activity at her school, three-on-three basketball for young women, and another young person became student council president and incorporated what she learned to how she is running her student council. Thus, although there were no active Fly Higher school teams one year after this study was conducted, the youth leaders seemed to have
ongoing benefits. The minimal impact on the schools involved in Fly Higher is cause for concern for peer led health promotion. Clearly, issues need to be addressed to further understand peer led health promotion initiatives with adolescents in high schools. The concluding chapter addresses issues learned about in the study: relates the findings to the existing literature, and addresses implications for practice and research.
CHAPTER 8: CONCLUSIONS

In this chapter the study findings are compared to existing literature and then implications for practice and for further research are explored.

Consideration of the Findings in View of Existing Research

My study showed that to understand the development of peer led initiatives in schools it is important to recognize it is a complex process. It begins with the recruitment of young people and their training, which I have labelled as Setting the Stage. It then continues on to young peoples' return to school and their attempts to initiate activities, a process I have labelled Negotiating their Way. Throughout, youth are influenced by a combination of intrapersonal factors, interpersonal processes, organizational factors, and community factors which make developing peer led initiatives very challenging for them. A major study finding is the large number of factors that acted as barriers to young women as they developed peer led initiatives in their schools. In the following discussion relating the major study findings to the existing literature, I use McLeroy's conceptual model as an analytic framework to discuss the factors that constrained and facilitated young women's efforts.
**Intrapersonal Factors**

Intrapersonal factors are factors within individuals such as their knowledge, skills and attitudes that may influence their behaviour (McLeroy et al., 1988). My study showed that intrapersonal factors were important both during the training workshop and once youth were back at school. The training workshop was designed to increase the capacity of the youth involved to become peer leaders. Core trainers who led the experiential training day were similar in age, race, and gender to the youth leaders participating in the workshops. During the training, youth leaders reported being able to identify with the core trainers and also reported developing increased awareness of women's health issues and group skills. According to Bandura (1977), the extent to which youth leaders identified with the core trainers affected how much they learned. Most youth left the workshop feeling empowered to make positive changes in their schools. At the intrapersonal level, youth felt accepted and valued during the workshop and they were motivated to go to their schools and try to "make a difference". Although the findings show that it was easy to impart knowledge and attitudes through a short-term training intervention, it alone was not enough to allow youth to successfully develop peer-led initiatives in their schools.

Although youth leaders felt motivated following the training workshop, this was not enough to carry them into actually doing a peer-led activity. Once youth were back at school, two further intrapersonal factors stood in their way. First, some youth felt that they lacked abilities needed to develop peer-led initiatives and this led to inaction. Lacking the belief in your ability to achieve a task has been identified as self-efficacy by Bandura (1977; 1986; 1989). Self-efficacy affects the intensity of efforts, and persistence in the face of obstacles (Ewart, Taylor,
Accordingly, youth who did not have a strong sense of self efficacy did not continue with efforts to develop peer led initiatives in their schools. Several youth who did feel they had abilities and skills continued in their efforts and developed peer led initiatives.

Second, lacking time in their personal lives stymied their efforts back at school to carry over the knowledge and enthusiasm from the training workshop. Youth leaders reported being busy with extracurricular activities, sports, arts and part time jobs: thus finding it difficult to find time to develop peer led initiatives. The number of high school youth working has increased from 1971 to 1991. In 1991, 55% of Canadian youth 15 to 19 years old were employed and over 70% were employed part time. This is an increase from 42% of youth employed in 1971. The number of employed females increased from 37% in 1971 to 54% in 1991 (Statistics Canada. 1993).

In summary, selected intrapersonal factors both at the workshop and back at school affected youth leaders' abilities to develop peer led initiatives. Although after the workshop youth felt they had more knowledge and skills, and were enthusiastic to go back to their schools and develop peer led initiatives, a one-day workshop was not sufficient to successfully develop peer led initiatives back at school. Once back at school, some youth felt they did not have the ability or the time to develop peer led initiatives. Several authors have called for "booster sessions" throughout the year to provide supplemental information, personal support, and team building for youth members (Berkley-Patton et al., 1997; CMHA. 1993; Fertman & Long, 1990; Harden et al., 1999; Langstaff, 1991; Orme & Starkey, 1999).
Interpersonal Processes

Interpersonal processes include interactions with families, friends, neighbours and others and involve social relationships (McLeroy et al., 1988). In this study, interpersonal processes refer to youth's relations with fellow students and adults. Youth leaders' ability to develop peer led initiatives was affected significantly at the interpersonal level by two key issues: their ability to form a cohesive group with other students, and the nature of their relationship with their adult member.

Forming a Cohesive Group. After training, youth realized they needed to work in groups in order to develop peer led initiatives. It was difficult for youth to get other students interested to the point of forming a cohesive school team capable of developing peer led initiatives. The first major source of difficulty was getting started. Getting started was made difficult when student teams had no goals. When youth leaders lacked goals and had no idea of what to do, members were not motivated to continue.

The literature shows that group cohesion and the ability to work together do not occur simply because members are enthusiastic. Groups are difficult to establish and maintain (Johnson & Johnson, 1994). Several authors report that when there are no goals, it is difficult for groups to have task activities to accomplish. Consequently there is no need to maintain relationships, and therefore, the emotional aspects of the group do not evolve. Establishing goals has been identified as a motivating factor for group members (Johnson & Johnson; Sdorow, 1998). The literature suggests it is important that the goals are related to the person's needs and values, that members define how to accomplish goals, that goals represent realistic expectations,
and that specific challenging goals produce better results than no goals or easy goals (Johnson & Johnson; Langstaff, 1991; Locke & Latham, 1990). Furthermore, having short term goals and feedback on progress is motivating (Bandura, 1989; Locke & Latham). In my study, the groups that accomplished their short term goals and evaluated their difficulties, continued successfully doing peer led activities.

An additional barrier to students' ability to form a cohesive group was their ability to manage group difficulties, particularly interpersonal conflict amongst group members. Five school teams experienced interpersonal conflict situations. Two teams reported that they resolved their conflict and continued to meet. One team avoided dealing with group conflict issues and stopped meeting before the end of the school year. Two teams struggled to continue without dealing openly with group conflict. Conflicts in groups are not unexpected and both their causes and solutions are complex. Several authors identify that participation in groups will inevitably produce conflicts (Johnson & Johnson, 1994; Stanhope & Lancaster, 2000). Conflict arises when individuals perceive that their concerns have been or about to be frustrated (Sitkin & Bies, 1993). Buehlman, Gottman & Katz (1992) and Gottman (1993) found that responses to conflict that were most damaging to relationships were criticism, contempt, defensiveness and withdrawal. When dealing with conflict, Thomas (1992) identifies assertiveness and co-operation to deal with conflict. He suggests they can lead to confrontation, competition, compromise, reconciliation and collaboration. He also identifies negative responses such as forcing with power, capitulation, and exclusion of a member as responses that fail to satisfy the concerns of frustrated parties (Stanhope & Lancaster, 2000). Resolving conflicts depends on
open communication, diffusion of negative feelings, focusing on issues, and fair procedures (Stanhope & Lancaster). Stanhope and Lancaster further suggest the group becomes fragile and helpless to face challenges when they do not address group conflict issues. In my study, one school team that did not address group issues stopped meeting, and the second team continued meeting.

Group members need time and experience working together to develop into an effective decision making group, a cohesive group (Johnson & Johnson, 1994). Group cohesion can be defined as "all the forces (both positive and negative) that cause individuals to maintain membership in specific groups" (Johnson & Johnson, 1994, p. 99). It is supported by compatible personal and group goals, attraction to group goals, attraction to other members, appropriate mix of leading and following skills, and good problem solving skills (Stanhope & Lancaster, 2000). Effective groups have three core activities - accomplish their goals, maintain good working relationships, and develop and adapt to changing conditions (Johnson & Johnson). As cohesiveness increases, so does group productivity and rise in participation of group members (Johnson & Johnson). My study showed that the two school teams that were the most successful developing peer led initiatives accomplished their goals, maintained good working relationships, and adapted to changing conditions in their schools.

Finally, the literature suggests that groups go through sequential phases of five predictable developmental stages which are labeled forming, storming, norming, performing and adjourning (Tuckman & Jensen, 1977). In the forming stage, members become oriented towards each other, being accepted and learn more about the group. In the storming stage, groups
confront their differences and managing conflict becomes the focus. In the norming stage, the group develops some consensus regarding group norms and increases group cohesion. In the performing stage groups work to achieve goals. Lastly, in the adjourning stage groups disband.

In my study, four school teams did not complete the first stage of group development as they did not meet or met rarely, and eight teams did complete the forming stage and moved on to the next phase. Of the eight, five teams reported experiences that related to the storming phase, and handled it with different levels of success, while the other three teams met so rarely, they did not develop conflict situations. All eight teams moved into the norming phase and had various levels of success in becoming cohesive. Only three school teams developed strong group cohesion. All eight school teams developed (rather than performed) group activities. As the intention of the program was to continue, the adjourning phase was not intended, but did occur in eight of the twelve school teams. Thus, Tuckman and Jensen's (1977) sequential stages of group development is supported overall by the experiences of students in this study. However, not only did youth leaders need to get along together to accomplish activities, a key person on the school team was the adult member. Her role will now be discussed.

**Role of the adult on school teams.** The adult member's role is significant in this study. There are two main aspects, first her availability, and second how she interacted with youth. Students found having an available adult member necessary for them to continue successfully, both to learn about what they could and could not do (learn the ropes), and also to help them deal with group difficulties. Although five school teams specifically identified group difficulties, frequently, the adult member was not aware of these group difficulties, or was too busy, and
therefore was not available to help them. Also, most adult members stated they did not devote the time they initially wanted to this project. These teachers may be representative of other teachers in Ontario who report being overwhelmed by academic and extra curricular demands (Grakist, 1999; Peirson & Prilleltensky, 1994). Clearly, this was an important gap in support for student leaders to have an adult member available. In this study, without an adult assisting youth to work out their interpersonal difficulties, student school teams were unable to successfully continue.

In peer led initiatives, adult members can be viewed as resource people whose role is to facilitate the entry of young people into the decision making process and encourage young people to take on responsibility. All of these require both time and skills on the part of the adult member. But keeping adult members involved can be a challenge. In my study, only three of the twelve adult members were active on their school teams (25%) by year's end. Similarly, Komro et al. (1994) found by the year's end, only one half of the adults were actively involved in a peer led program. Clearly, maintaining adult involvement is a challenge.

In addition to being available and staying involved, the role the adult member assumed significantly affected youths' ability to develop peer led initiatives. My findings showed that the relationship between the adult members and the youth could be characterized as directive, laissez faire or facilitative. Directive behaviours involved the adult member telling youth what to do, rather than listening to what the youth wanted to do. These directive behaviors contributed to the youth not pursuing activities. Hart, Daiute, Itus, Kritt, Rome and Sabo (1997) recommend that adults in young people's organizations need to understand the issues and needs of youth as youth
define them. This would support my finding that youth, whose adult member took on a directive role and established her own not youth driven goals, was associated with school teams who did not stay involved, rather they stopped meeting.

Students also found it difficult when adults took a laissez-faire approach. Laissez-faire behaviors occurred when adult members did not take any initiative to support youth in the early stages of their return to school. They did not call meetings and they avoided students. Youth commented that they needed the support of adult members to take the initiative to help them get started. Perhaps this relates to the adult members 'knowing the ropes'. Some authors identify that the ages of youth involved in peer led projects affects the interactions (Hart et al., 1997; Schwab, 1997). Younger youth need more initial guidance and support, older adolescents need less; thus, peer led projects who had younger students may be more vulnerable to having less guidance than those run by older students. The Canadian Mental Health Association (CMHA), suggests a key role for adults working with youth is helping youth avoid pitfalls (CMHA, 1993).

In my study, I found adult members who demonstrated facilitative behaviors were most helpful to the school teams' progress in developing peer led initiatives. Adult members who took the initiative to set up initial meetings, consulted with youth about what they wanted to do, and 'let go' over time, supported the youth to take initiative as they developed activities. These findings are in line with other authors who report that youth needed more guidance initially than later on (Komro et al., 1994; Schwab, 1997).

The underlying behaviors supportive of youth developing initiatives may be similar to those identified by Cross (1996) in a concept analysis of facilitation. She identified the defining
attributes of the concept of facilitation as: a process of enabling change, a climate for learning (mutual trust, acceptance and respect), and factors relating to the nature of the process; student centred, negotiated, and collaborative (Cross, 1996, p. 350). Harden et al. (1999) suggest that empowering young people involves equitable partnerships and a change for adults from teaching to facilitation. This in turn demands an understanding of group dynamics and empathy for young people.

Several authors have examined adult roles in different kinds of projects where adults work in partnership with youth. All report the importance of a trusting and meaningful relationship between the adult member and the youth members (CMHA, 1993; Finn & Checkoway, 1998; Gillis, 1996). Researchers with the Canadian Mental Health Association visited schools and youth serving agencies and conducted focus groups with youth across Canada looking at how to include youth in decisions about youth policy and youth programming. They suggest adult members' primary role is to listen to youth, make suggestions, ask questions, and help youth avoid pitfalls (CMHA). In a review of nearly 200 American initiatives where youth were actively involved in problem solving, planning programs, and providing services at the community level, Finn and Checkoway (1998) found that adults in successful programs recognized youth as resources, nurtured their personal development, fostered their experiences of success, and collaborated with them to have an impact on the world. Furthermore, Backett-Milburn and Wilson (2000) suggest adult members roles change over time. It is a dynamic process.

In summary, interpersonal processes that occurred back at school greatly influenced
youth leaders' ability to develop peer led initiatives. Both the experience of youth and literature suggest that health promotion programs need to consider group dynamics. While Fly Higher expected youth to be able to work together, this did not happen. This is not surprising in view of the literature on group formation which suggests that it is a difficult process. Also the adult member's availability for youth needs to be considered when planning health promotion initiatives with youth in high schools. Lastly, the role the adult member takes on is identified as crucial both in this study and in the literature.

Organizational Factors

Organizational factors include the way in which organizations operate: the rules, regulations, values and culture of organizations (McLeroy et al., 1988). The results of my study show that the way the school operates as a system influenced recruitment to Fly Higher and in turn the youth's ability to initiate and carry out activities within the school. The principal acted as a gate keeper in dealing with the request to participate in Fly Higher. Teachers became involved as part of their jobs or because it fit with their existing extra curricular activities. They then selected youth based on personal contacts and referrals. Youth were already school leaders, active on the student council and involved in extracurricular activities. Adults and administrators pointed out that youth on the school teams were different than the rest of the student body. They were not representative of the whole school body. This is similar to a UK study where, although the program organizers aimed to recruit students from all student groups, the majority of youth leaders were high academic achievers (Fife Healthcare NHS Trust, 1996). Therefore, although
active and even school leaders, youth stated it was difficult to motivate their fellow students to participate in peer led activities. The literature on adolescent development suggests one reason for the youth difficulties may be in the complex nature of adolescent society.

Adolescents are embedded in a rich network of peer relations, best friends, other close friends, cliques or friendship groups, and social crowds (Urberg, Degirmencioglu, Tolson & Halliday-Sher, 1995). Peer groups are important for healthy adolescent development. Peer groups may be characterized as those in which members share interests socially at regular intervals, hold their common values above those of society at large, and feel a mutual sense of belonging (Sherif & Sherif, 1953 in Hart et al., 1997, p. 41). "Like families, peer groups are best conceptualized not as a unitary entity, but as a complex network of relationships" (Brown, 1990 p.196). The basic adolescent peer group is the clique, which is a small group of friends of similar age, and generally of the same sex. Cliques are building blocks of peer society. Cliques are most important for youth in early adolescence from 10 to 14 years. They have changing group structure in the broad social world of adolescents (Cotterell, 1996). An adolescent may belong to several cliques containing different friends during the day. Cliques may be located in specific settings and the relationship is restricted to a particular context (eg, basketball court).

In addition to cliques there are social crowds. Adolescent involvement in cliques (friendship groups) and crowds (larger social groups) may overlap (Urberg et al., 1995). There are several kinds of adolescent crowds in high schools (Brown & Lohr, 1987; Urberg et al., 1995). Adolescent crowd types result from the tendency for adolescents to develop distinctive peer sub cultural identities, manifested in clothes, hairstyle, speech and behaviour. Crowd types
help adolescents develop collective identity in the public domain. There are several widely recognized different crowd types. Much of the crowd behaviour is associated with out-of-school behaviour, where styles develop and attitudes are nurtured before being transferred into the school context. Common crowds in North American schools are the jocks (athletically oriented), the brainers, the populars (well known students who lead social activities), the normals (middle-of-the-road students who constitute the masses), the druggies/toughs (known for illicit drug use and/or delinquent behaviour), and nobodies (low in social skills and/or intellectual abilities) (Brown & Lohr, 1987, p. 49).

That youth leaders did not represent all groups (crowds) in their schools may help explain why their activities were not easily accepted by other students. Interventions that conflict with sub-culture norms and values are resisted, while those that do not have a greater likelihood of being accepted (McLeroy et al., 1988).

Youths' inability to motivate other students was affected by other organizational issues such as competing for attention, rules, and school atmosphere. Young people had to seek permission from adult members and collaborate with student and athletic councils. This is consistent with the organization of high schools in Ontario where all student groups need adult sponsors and student and athletic councils are the legitimate voice for students in schools (King & Peart, 1990). They also found they needed to compete for attention with other activities going on in their schools. They could not time an activity to coincide with already planned school activities. Peirson and Prilleltensky (1994) identify timing during the school year as a relevant factor to introducing school change.
Young people had to follow rules, some fair and some unfair. When students found the rules unfair, it was more difficult for them to develop initiatives. Hart and colleagues (1997) suggest that an important influence on youth in schools is whether they perceive the rules are fair (Hart et al., p. 46). Samdal, Nutbeam, Wold and Kannas (1998) also showed that fairness of rules in schools is important in students developing a sense of well being (p. 393). King and Peart (1990), in a study examining good Ontario high schools, found students concern with fairness and consistency with rules and regulations a key element contributing to school atmosphere and in turn student satisfaction with their school experience.

Students in this study reported they had either tough, mixed or a good school atmosphere/climate in their high schools. Students in schools with a tough school atmosphere were unable to develop peer led initiatives. Students in schools with a mixed school atmosphere developed initiatives directed towards similar peers. Lastly, students in schools with a good school atmosphere, found that good school atmosphere alone was insufficient to support peer led initiatives. McNeal (1999) addresses student involvement in extracurricular activities and found a safe school climate was essential to fostering extracurricular activities. He measured school climate as a sense of school safety and security while at school. Problems with feeling safe included theft, vandalism, drugs, rape and weapons (p. 304). Students in this study who reported similar episodes of vandalism and rampant drug use in their schools were unable to develop any peer led initiatives.

In addition to safety, good school atmosphere includes components that can be managed by teachers and administrators (King & Peart, 1990). The five major areas found to be strongly
related to school atmosphere were: leadership style, teacher relationships with students, student services (guidance), the academic program, and extracurricular activities. Guidance and programs will not be discussed here. Leadership style included visibility and accessibility of school leadership together with shared decision making in school policies and fairness and consistency in rules and regulations. Teacher relationships with students included availability to students and understanding students needs. Lastly, extracurricular activities included a range of activities (something for everyone) and a significant percentage of students were involved (King & Peart, 1990, p. 12).

A very important aspect of school leadership is the behaviour of the school principal. In this study, all students who were successful reported having supportive principals. The presence or absence of administrative support for interventions is often cited as a contributing factor in the success or failure of new programs or changes in schools (Backett-Milburn & Wilson, 2000; Cherniss, 1991; Commins, 1986; Fullan & Steigelbauer, 1991; Huberman & Miles, 1984; Parcel, Simons-Morton & Kolbe, 1988). Clearly, administrators have a lot of influence over what does and does not happen in their schools. In the school setting, students often take cues from teachers, teachers and support staff take their cues from administration. If there does not appear to be 'support from the top', others are less likely to participate (Peirson & Prilleltensky, 1994). Huberman and Miles (1984), in a study of school innovation found that the predictors of good institutionalization were administrative support, accompanied by a lack of serious resistance and a reasonable degree of teacher-administrator harmony.

Adults and administrators corroborated students comments about organizational barriers
They also identified additional organizational barriers, such as, limited school resources. In my study, adult members and administrators reported that they had 'to do more with less', and this acted as a barrier to youth developing initiatives. In most western countries, secondary schools are under strain (Cotterell, 1996). An overburdened teaching staff poses a significant barrier to school health promotion (Parcel et al., 2000). In Ontario, teachers are overwhelmed with academic and extracurricular demands placed on them (Grakist, 1999). Teachers being overburdened by extracurricular activities was also addressed as a barrier for school innovation (Peirson & Prilleltensky, 1994). Tensions between teachers and the Ontario government continue to affect schools in Ontario (Nuttall-Smith & Brown, 2000).

In summary, organizational factors, both during recruitment and back at school greatly affected youth leaders' ability to develop peer led initiatives in their high schools. My findings together with the literature support the complexity of schools as organizational systems that challenge youth to work within them. Both the developmental needs of adolescents to relate to their peer groups and the bureaucracy of schools contribute to the challenges youth face developing peer led initiatives in their schools.

Community Factors

The last level of factors dealt with in this study is the community level. Community factors refer to relationships among organizations, institutions, and informal networks within defined geographic boundaries (McLeroy et al., 1988). In this study, the community factors young people identified were restricted to two community resources: the public health nurse
(PHN) in their school, and staff at the Heart and Stroke Foundation. This finding is very telling as no other outside resources were used, although using community resources was encouraged at the training workshop and an information kit about resources was provided. Informing young people about resources is not sufficient for them to use resources.

Adults and administrators, however, identified general community conditions as impacting on youth leaders' ability to develop peer led initiatives. These factors included youth under more stress than in the past, and families being more stressed. This is supported by current Canadian data wherein family incomes have shrunk by 5.6% since 1989, family debt has hit record highs to 114% of after tax income from 92% in 1989 and savings record lows to 1.5% from 10% in early 1990's (Vanier Institute of the Family, 1999). The number of children whose parents are separated or divorced has tripled in the past 20 years (Canadian Council on Social Development, 1998). The majority of children remain with mothers after separation and one third of families have no financial agreement in place. The Canadian Council of Social Development claims the lives of Canadian children and youth are getting worse. Youth poverty rates are rising and the gap between rich and poor youth is widening. Poor youth have fewer opportunities than in the past. Thus, there is evidence Canadian families and youth are under more stress and it is reasonable that adult members and administrators would experience the repercussions in their schools. Furthermore, these stresses on youth in schools would make their involvement in extracurricular activities more challenging. McNeal (1999) reports that youth from single parent families participate less in extra-curricular activities than youth from two parent families.
Thus far, I have reviewed the main study findings relating to factors at the intrapersonal, interpersonal, organizational, and community levels that affected youth leaders' abilities to develop peer led initiatives in their schools. Next I add the impact of youth involvement in this peer led initiative on the youth leaders and their schools.

**Impact of Fly Higher**

The impact of Fly Higher was examined at both the youth and school levels. Overall the impact on youth was positive, although some youth reported some negative consequences. Youth who reported positive consequences noted that they experienced improved confidence, stress management skills, organizational skills, group skills and a sense of recognition. Similar results have been reported by other authors (Backett-Milburn & Wilson, 2000; Klepp et al., 1986; Komro et al., 1994; Massey & Neidigh, 1990; McNeal, 1999; Orme & Starkey, 1999). As adolescents are struggling to find meaningful roles in society, participation in youth led initiatives offers opportunities (Benard, 1991; Hart et al., 1997; Milburn, 1995). Finn and Checkoway (1998) report how youth describe their involvement in peer led community projects as 'stretching their limits' (p. 339). Schwab (1997) further reports that youth aged 10 to 17 years who were involved in a community enhancement project reported feeling respected and accepted.

The finding that some peer leaders had negative consequences is infrequently reported in the literature. Harden et al., (1999) recognized that the experience could also be negative. She noted that this occurred particularly in school-based formal contexts where young people experienced conflict with both teachers and fellow students. Orme and Starkey (1999) caution
that youth leaders can find the experience disempowering if they are required to deliver 'adult' messages. Other authors, when examining group dynamics, report that youth who perceive disrespect, rejection or ridicule, do not develop trust in their group and are unable to continue (Johnson & Johnson, 1994). My findings show that possible negative consequences are an important dimension to include in the planning and study of peer led initiatives.

Although most youth reported positive personal gains from their involvement in this peer led initiative, they reported limited effects on their schools. Five of the 12 school teams were unable to get a project going and seven school teams developed short term initiatives that included: awareness campaigns, fundraising, physical activities and nutrition activities. Thus, most reported changes although theoretically addressing the school as an organization, in fact targeted individual behaviours of school members and remained limited to short term changes. Changes to the school and community environment require long term commitment and ongoing work (Wallerstein & Sanchez-Merki, 1994).

Implications for Practice and Research

The experiences reported by youth in this study show that programs must consider issues that include: recruitment, training, relationships with adults, organizational readiness and program sustainability.

With respect to recruitment, it appears important to begin with identified leaders (CMHA, 1993). After starting with identified leaders or youth with the requisite skills, youth representing
different subgroups must be sought out (CMHA, 1993; Harden et al., 1999) as youth need to view their peer leaders as credible sources of information and identify with them as people. In addition, Harden and colleagues (1999) recommend that youth leaders should not be based solely on personal characteristics. Rather, including young people who have experience with the health topic/ social issue and who are able to deliver messages in relevant ways is important.

My study suggests that special attention needs to be paid to target student leaders from specific subgroups in the student population in order to reach all school students (Berkley-Patton et al., 1997; Simons-Morton, Greene & Gottlieb, 1995). Furthermore, given that Canada is becoming increasingly multi-cultural, it may be important in future research to examine how peer led initiatives relate to youth of different cultures.

Harden and colleagues (1999) in their systematic review cite the paucity of young men's involvement in peer led initiatives. This was also a limitation of the present study and clearly points to a need for research on issues on the role of gender in peer led initiatives.

Training is an important component of peer led initiatives for both young people and adults because the training experience must support building team building (Berkley-Patton et al., 1997). My study showed that short-term training for young people was very successful with respect to creating enthusiasm for the project. However, it did not impart sufficient skills that enabled youth to carry through. In particular, my findings showed that youth faced major problems around their own group dynamics; an issue not covered during the training session or for that matter at any other time throughout the project. Given that my study showed that dealing with group dynamics is key to the success of peer led health promotion initiatives, it appears that
that considerable attention must be given in training around the issue of how to work together and how to resolve conflicts. Several authors suggest that booster sessions throughout the year should be included to provide supplemental content of needed information, enhance personal support, and enhance team building for youth members (Berkley-Patton et al., 1997; CMHA, 1993; Fertman & Long, 1990; Harden et al., 1999). To develop training programs that can incorporate training in group dynamics more research is needed on the nature of the problems youth face as they attempt to work together and the strategies they perceive would be useful to them to resolve problems.

Relationships with adults who are trying to work in partnership with young people is a key area that needs to be addressed at the level of both practice and research, since my work revealed many difficulties for young people when interacting with adults in the school setting. Despite good intentions, teachers were unsure how to work with young people. Several authors have noted that adults in school systems often have little experience working in small groups on issues identified by students themselves (Backett-Milburn & Wilson; CMHA, 1993) and that it is difficult for adults to relinquish control and allow youth to make their own choices (Backett-Milburn & Wilson, 2000; Hart et al., 1997). Empowering young people involves equitable partnerships and a change in student/adult relationships which in turn demands an understanding of group dynamics and an empathy for the lives of young people (Harden et al., 1999). Relationships need to be based on respect and genuineness, trust and support with defined structures and boundaries negotiated by all stakeholders (Egan, 1989; Gillis, 1996). Lastly, partnership relationships need to be based on the needs of young people themselves.
(Harden et al., 1999). This is a challenge for adults in today's school system.

Because this process requires a change in style for adults, my study suggests that adults involved in peer led initiatives need specific training and support in order to be sensitive enablers of youth participation (CMHA, 1993). Such training should cover issues such as how to take on a facilitative role, knowledge about small group dynamics, techniques for sharing power with youth, and community organizing (Wallerstein & Bernstein, 1988; Hart et al., 1997; Schwab, 1997). If programs that hope to empower youth are to be successful a great deal more research needs to be done to understand the process involved in adults sharing power with adolescents in high schools.

My study showed that considerable effort must be devoted to organizational readiness for a project. Within the school adults must directly support young people by offering opportunities for action and by advocating for young people throughout the organization (Nutbeam, 1999; Thomas et al., 1999). Resistance of organizations and individuals to change is a frequently cited barrier to youth participation (Backett-Milburn & Wilson, 2000; Cherniss, 1991; Commins, 1986; Fullan & Steigelbauer, 1991; Huberman & Miles, 1984; Parcel et al., 1988). Real commitment from decision makers is required. Several authors identify school principals as key influencers in supporting school-based health promotion, since they in turn influence the behaviour of their staff, set policy, and provide motivation and support (Backett-Milburn & Wilson, 2000; Peirson & Prilleltensky, 1994; Perry et al., 1997). Given that schools are large bureaucratic structures with a myriad of activities, health promotion research should be directed at understanding how health promotion can best fit into the school structure.
Although schools are important locations for health promotion initiatives, there is an increasing awareness that success must involve co-operative efforts between the school and other sectors of the community (Anderson et al., 1999; Parcel et al., 2000). Thus, organizational level readiness is also important in the community if youth are expected to use community resources in their peer led initiatives. While accepted in principle, building such relationships is difficult because they are labour intensive and involve a great deal of understanding of the work site, customs and institutional requirements of each partner (Golz, 1992; Kalnins et al., 1994; Minkler & Wallerstein, 1997; O'Neill, 1992). Teachers feel they have neither the time, resources or skills to engage in building such collaborative networks (Anderson et al., 1999). Reininger, Dinh-Zarr, Sinicrope and Martin (1999) recommend that for community involvement to occur, specific efforts must be made to increase awareness of issues and increase motivation for action in communities.

Finally, my study emphasizes that considerable thought must be given to sustainability. Sustainability of programs is a challenge in high school settings. CMHA (1995) suggests there are three different ways of involving youth: episodic, developmental, and networking. Episodic involvement provides short term and issue specific ways of involving youth. Developmental involvement offers structured and ongoing ways for youth to participate, and networking involvement develops a co-ordinating group of youth to connect to other groups of youth. Organizations wishing to conduct health promotion in schools must be clear about their expectations (CMHA). I feel Fly Higher attempted to use a developmental approach and hoped for ongoing involvement for youth.
My study showed that to expect long term commitment from young people is often not realistic because there is no mechanism for continuous renewal of student leadership as youth move on with other activities or graduate. Thus, our definition of successful involvement must also be modified to include different levels of involvement (CMHA). Different strategies may have to be used to involve young people, for example, working on time limited projects so that projects themselves are less affected by turnover and they can see the outcome of their efforts (Shannon & McCall, 1997). As adolescents experiment with new experiences and opportunities (Carnegie Council, 1989; Estes & Hart, 1993; Feldman & Elliot, 1990), we must be more sensitive to their needs and not always see the world through adult eyes.

In closing, my study demonstrates that youth leaders are enthusiastic and capable in carrying out peer led initiatives. However, specific support and commitment needs to be in place to assist youth as they cannot do it on their own. It would be unfair and unrealistic to set youth up for failure by tapping on their enthusiasm without providing appropriate structural supports.
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Appendix A

Fly Higher Workshops in Ontario - October 1996 to January 1997

<table>
<thead>
<tr>
<th>Date. Number of Schools and Number of Youth and Adults</th>
<th>Selected Schools Possibly Positive - attended workshop</th>
<th>Selected Schools Possibly Negative attended workshop</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 19, 1996 Dryden workshop¹</td>
<td>School 5 2 youth, 1 adult</td>
<td>School 6 4 youth, 1 adult</td>
</tr>
<tr>
<td>N = 7 schools 37 youth, 4 adults</td>
<td></td>
<td></td>
</tr>
<tr>
<td>November 16, 1996 Windsor workshop</td>
<td>School 4 4 youth, 1 adult</td>
<td>School 7 6 youth, 1 adult</td>
</tr>
<tr>
<td>N = 4 schools 15 youth, 3 adults</td>
<td></td>
<td></td>
</tr>
<tr>
<td>November 23, 1996 Sudbury workshop</td>
<td>School 3 3 youth, 1 adult</td>
<td>School 2 4 youth, 1 adult</td>
</tr>
<tr>
<td>N = 5 schools 14 youth, 3 adults</td>
<td></td>
<td></td>
</tr>
<tr>
<td>December 7, 1996² Toronto workshop</td>
<td>School 10 4 youth, 0 adult (adult was recruited after workshop)</td>
<td>School 1 2 youth, 1 adult</td>
</tr>
<tr>
<td>N = 3 schools 7 youth, 2 adults</td>
<td></td>
<td></td>
</tr>
<tr>
<td>January 25, 1997¹³ Kitchener workshop</td>
<td>School 9 4 youth, 1 adult</td>
<td>School 11 5 youth, 0 adult (adult member did not attend the workshop)</td>
</tr>
<tr>
<td>N = 8 schools* 36 youth, 8 adults</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

¹ these workshops included grade 7 and 8 grades
² one more school team chosen after study started School 8: 1 youth, 1 adult
³ one more school team chosen after study started School 12: 4 youth, 1 adult
### Appendix B

**School and Community Data**

Legend:
- Y - Youth
- A - Adult
- AD - Administrator

<table>
<thead>
<tr>
<th>School Number and Study Participants</th>
<th>School Size/Area Serviced</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>School 1</td>
<td>700 /urban</td>
<td>Southern Ontario</td>
</tr>
<tr>
<td>Y - Ashley</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Y - Nellie</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A - Pamela</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AD - Natalie</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School 2</td>
<td>750 /district</td>
<td>Mid/Northern Ontario</td>
</tr>
<tr>
<td>Y - Clara</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Y - Ali</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A - Carla</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AD - Richard</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School 3</td>
<td>1300 /district</td>
<td>Mid-Northern Ontario</td>
</tr>
<tr>
<td>Y - Zara</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A - Amy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AD - George</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School 4</td>
<td>700 /urban</td>
<td>Southern Ontario</td>
</tr>
<tr>
<td>Y - Margaret</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Y - Megan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AD - Dale</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School 5</td>
<td>975 /district</td>
<td>North Western Ontario</td>
</tr>
<tr>
<td>Y - Ellen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Y - Joanne</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AD - Steve</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School 6</td>
<td>1100 /district</td>
<td>North Western Ontario</td>
</tr>
<tr>
<td>Y - Rhonda</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Y - Brandy</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
A- Tammy
AD- Tom

School 7 820 /urban Southern Ontario
  Y- Katie
  Y- Noelle
  A- Jill
  AD- Ned

School 8 1230 /urban Southern Ontario
  Y- Laura
  A- Pat
  AD- Carolyn

School 9 1200 /urban Southern Ontario
  Y- Julie
  Y- Melanie
  A- Amelia
  AD- James

School 10 1500 /urban Southern Ontario
  Y- Kerry
  Y- Sonia
  A- Leah
  AD- Leanne

School 11 1860 /urban Southern Ontario
  Y- Marnie
  Y- Kris
  A- Sharon
  AD- Norm

School 12 1,050 /district Southern Ontario
  Y- Krista
  Y- Anna
  A- Carmen
  AD- Ray
School and Community Data

<table>
<thead>
<tr>
<th>Location (serving area)</th>
<th>Population</th>
<th>Municipalities, Counties, Districts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dryden (regional)</td>
<td>6,711</td>
<td>Kenora District</td>
</tr>
<tr>
<td>Fort Francis (regional)</td>
<td>8,790</td>
<td>Rainy River District</td>
</tr>
<tr>
<td>Kitchener (urban)</td>
<td>178,420</td>
<td>Waterloo Regional Municipality</td>
</tr>
<tr>
<td>Kirkland Lake (regional)</td>
<td>9,905</td>
<td>Timiskaming District</td>
</tr>
<tr>
<td>Listowel (regional)</td>
<td>5,467</td>
<td>Perth County</td>
</tr>
<tr>
<td>Mississauga (urban)</td>
<td>544,382</td>
<td>Peel Regional Municipality</td>
</tr>
<tr>
<td>New Liskert (regional)</td>
<td>5,112</td>
<td>Timiskaming District</td>
</tr>
<tr>
<td>North York (urban)</td>
<td>589,653</td>
<td>Toronto Municipality</td>
</tr>
<tr>
<td>Windsor (urban)</td>
<td>197,694</td>
<td>Essex County</td>
</tr>
</tbody>
</table>

Population of Regional Municipalities, Counties, Districts (Urban and Rural)

<table>
<thead>
<tr>
<th>Location</th>
<th>Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Essex County</td>
<td>350,329</td>
</tr>
<tr>
<td>Kenora District</td>
<td>63,335</td>
</tr>
<tr>
<td>Peel Regional Municipality</td>
<td>852,526</td>
</tr>
<tr>
<td>Perth County</td>
<td>72,106</td>
</tr>
<tr>
<td>Rainy River District</td>
<td>23,163</td>
</tr>
<tr>
<td>Timiskaming District</td>
<td>37,807</td>
</tr>
<tr>
<td>Toronto Municipality</td>
<td>4,263,757</td>
</tr>
<tr>
<td>Waterloo Regional Municipality</td>
<td>405,435</td>
</tr>
</tbody>
</table>

Appendix C

Background Information - Youth School Team Members

This information will be kept confidential and will not be shared with anyone from your school. It is helpful to know more about participants involved in the study.

Youth: (N= 22)

Q1: How old are you now?
15-16: 10
17-18: 10
19-20: 2
Mean age: 17
Mode age: 18

Q2: What grade in school are you in?
9: 1
10: 7
11: 4
12: 6
OAC: 4
Mean grade: 11
Mode grade: 10

Q3: What language do you speak most often in your home?
English: 18
English/Cantonese: 1
Vietnamese: 1
French: 1
blank: 1

Q4: Where were you born?
Ontario: 17
Quebec: 1
Western Canada: 1
Vietnam: 1
Jamaica: 1
blank: 1
Q5: How long have you attended your current school?
1 year: 1
2 years: 7
3 years: 5
4 years: 6
5 years: 2
blank: 1
Mean length: 3 years
Mode length: 2 years

Q6: a) Do you work? b) If you do, how many hours a week?
a)
yes: 12
no: 10

b)
1-5 hrs: 2
6-10: 2
11-15: 4
16 & up: 4

Q7: What other activities, other than work and Fly Higher, do you participate in?
Sports: 14
Councils/ committees: 8
Clubs: 6
Conferences/ workshops: 4
Music/ arts/ dance: 4
Leadership roles: 3
Volunteer: 1
Academic competitions: 1
Co-op: 1

Thanks for this background information
Appendix D

Background Information - Adult School Team Members

This information will be kept confidential and will not be shared with anyone from your school. It is helpful to know more about participants involved in the study.

**Adult:** (N= 10)

Q1: a) What is your highest education level attained?
   b) In what programme?

   a)
   Bachelor's degree: 10

   b)
   Arts: 1
   Health Science: 1
   Education: 1
   Life Science: 2
   Physical/ health education: 5

Q2: How long have you been teaching?
1-10 years: 3
11-20: 4 (one is a PHN)
21-30: 3
Mean length: 12 years
Range: 4-29 years

Q3: How long have you been at your current school?
0-10 years: 6 (one is a PHN)
11-20: 3
21-30: 1
Mean length: 9 years
Range: 1-26 years

Q4: Do you work full-time or part-time at this school?
F/T: 9
P/T: 1 (PHN - 2 half days a week in school)
Q5: What previous work experience do you have that you feel is relevant to your current role?

coach: 5
counsellor: 3
student programme/ school project involvement: 4
teaching experience: 2
leadership: 1
community work/ volunteer work: 2
athletics: 1
life/ involvement with children: 1

Thanks for this background information.
Appendix E

Background Information - School Administrators

This information will be kept confidential and will not be shared with anyone from your school. It is helpful to know more about participants involved in the study.

Administrator: (N= 12)

Q1: a) What is your highest education attained?
   b) In what programme?
   a)
   Bachelor's degree: 5
   Masters: 7

   b)
   Math/physics: 1
   Arts: 2
   Phys-ed: 3
   Education: 6

Q2: How long have you been an administrator?
   1-5 years: 1
   6-10: 8
   11-15: 3
   Mean length: 9 years
   Mode length: 8 years
   Range: 1 - 15 years

Q3: How long have you been at your current school?
   Less than one year-5 years: 8
   6-10: 2
   11-15: 0
   more than 15: 2
   Mean length: 9 years
   Range: 8 months- 30 years (+5 as student)

Q4: Do you work full-time or part-time at this school?
   F/T: 12
   P/T: 0
Q5: What previous work experience do you have that you feel is relevant to your current role?

Coach: 5
Teaching experience: 8
Vice principle: 2
Life/ parenting: 5
Counselling: 1
Student programme/ school project involvement:
business experience: 1
administration: 4
alternative education: 1
athletics: 3
leadership: 2

Thanks for this background information.
Appendix F

Interview Guide - Youth School Team Members

Introduction:
Hi, I'm Linda O'Mara a doctoral student from University of Toronto. I'm interested in learning about what your experiences have been as a member of a Fly Higher school team. I'm particularly interested in how you describe your participation, your ideas about what helped or what didn't help you, and what happened because of Fly Higher in your school. There are no right or wrong answers. I'm interested in your experiences, your feelings, and your opinions... the way you see things.

*Italicics questions are the actual study questions and are not asked directly but are used as an orienting framework*

The interview guide developed for this study includes questions that address all the components of the conceptual framework, although not in the same order because of the natural flow of the questions. **The Bold words: questions relating to training, questions developing peer-led initiatives, questions relating potential impinging factors and lastly questions relating to impact, link the questions to the conceptual framework.**

**OVERALL PURPOSE FOR THE STUDY IS:** to examine young women's experiences as they developed peer led health promotion initiatives in their schools.

Casual tone for interview
1. **General Intro:**
   - how is it going
   - small talk to set a welcoming tone.
   - tell me what first comes to mind when you think about your involvement with this program
   - how did you become involved in the Fly Higher program?

Questions relating to Training:

1. **How did youth perceive their training experience?**
tell me what happened when you went to the Fly Higher workshop to receive your training.
   - tell me about right after training.
how did you feel right after training.

what did you get out of the training?
probe
  • knowledge of women’s health issues i.e., what did you learn about young women’s health you didn’t know before
  • skills relating to working in groups i.e., ...
  • initiating activities with your peers i.e.....
  • organizing activities in your school i.e.....
  • knowing about resources in your school and community i.e.....
  • did you have a sense of what you were supposed to do?

Questions relating to Developing Peer-led initiatives in High Schools:

2. How did youth develop peer-led initiatives in their high schools?
   • what happened when you went back to your school after the training workshop?
   • can you tell me about your whole experience with Fly Higher since you attended the Fly Higher workshop.
   probe for
     • deciding what to do?
     • did you meet?
     • initiating activities
     • carrying out activities in your school or community(if any)
     • other activities you would have liked to initiate but were unable to do so?
     • accessing resources?

Questions relating to Potential Impinging Factors

3. What are the conditions that youth, adult members and administrators identify as promoting peer led initiatives?
now, we’re interested in getting to know what helped.
• when you’re trying to get something started what helped?
• when you were trying to get things done, what helped?...when you’re trying to keep things going?
• were there people who were helpful?
probe for:
  • students(willing to come to meetings and/or be involved in activities), friends and family
school staff - school administration, teachers/guidance staff, others
community resources e.g., Fly Higher staff or local Heart and Stroke staff
how were they helpful?

besides people, were there other things that helped?
- probe for
  - other resources e.g., the tool box, the Internet chat line.
what about personal issues that may have been particularly helpful
how did the above help you and your team

4. What are the conditions that youth, adult members and administrators identify as barriers youth experience when developing peer led initiatives?

what do you think didn’t help you (and your team) from getting started?
what do you think didn’t help you (and your team) from getting things done?
were there people who made things harder for you?
probe for
  - students (students not motivated or unwilling to come to meetings or be involved), friends and family
  - school staff - e.g., school administration, teachers/guidance staff, others
  - lack of community resources e.g., Fly Higher staff or local Heart and Stroke staff, others

what about things that may have made it harder for you?
probe for
  - e.g., school bureaucracy that makes everything a big deal
  - students’ lack of power in the school setting

what about personal issues that may have made it more difficult for you (and your team)
probe for
  - not enough personal time to get everything done

how did the above hinder you and your team.
Questions relating to Impact:

5. *What did youth perceive were the consequences for their school environments?*
   - when all is said and done, what do you feel you and your team have been able to do (accomplish) in your school because of your involvement with Fly Higher?
   - could you describe any changes to me
   - was there anything that surprised you about Fly Higher?

6. *What did youth perceive were the consequences for themselves?*
   - what were you personally expecting to get out of your participation in Fly Higher?
   - what did you personally get out of your participation with Fly Higher probe
     - able to participate in school activities?
     - change in confidence. abilities. skills. fun
   - did you learn anything while being involved in Fly Higher?
   - would you like to be involved with Fly Higher in the future? Why?

You’ve been really helpful. Is there anything else you’d like to tell me about your experiences in Fly Higher that perhaps I haven’t thought of?

Let me review what you’ve told me, to be sure I’ve understood you correctly. Linda - review main issues participants brought up in the interview.

If you think of anything later that you want to share with me, please call me collect (Linda O’Mara) at 0-905-849-8219. If I’m not home, I have voice mail and I’ll be happy to return your call.

Thank you again for your time. I’ll send you a summary of my findings
Appendix G

Interview Guide - Adult School Team Members

Introduction:
Hi. I’m Linda O’Mara, a doctoral student from University of Toronto. I’m interested in learning about youth experiences in peer-led health promotion projects, like Fly Higher. As you’re a member of a Fly Higher school team, I’m interested in talking to you and learning about your experiences. I’m particularly interested in how young women become involved, your ideas about what helped them plan and carry out initiatives or what didn’t help and what consequences if any occurred because of Fly Higher in your school. There are no right or wrong answers. I’m interested in your experiences, your feelings and your opinions.

*Italicics questions are the actual study questions and are not asked directly but are used as an orienting framework*

The interview guide developed for this study includes questions that address all the components of the conceptual framework, although not in the same order because of the natural flow of the questions. The Bold words: questions relating to training, questions developing peer-led initiatives, questions relating potential impinging factors and lastly questions relating to impact, link the questions to the conceptual framework.

*OVERALL PURPOSE FOR THE STUDY IS: to examine young women’s experiences as they developed peer-led health promotion initiatives in their schools.*

Casual tone for interview

1. General Intro question:
   • how has this past year been in your school?
   • small talk to set a welcoming tone
   • tell me what first comes to mind when you think about your involvement with the Fly Higher program.

2. *How did youth perceive their training experience?*

Questions relating to Training:
I’d like to start by going back to before your involvement with Fly Higher.
   How did you hear about Fly Higher?
   How did you decide to become involved?
   How did the youth members of the team get selected?
I’d like to go back to when you went to the Fly Higher workshop to receive your training.

- tell me about right after training.
- how did you feel right after training.
- what do you think the youth members of the school team got out of training?

probe
- knowledge of women’s health issues
- skills relating to working in groups
- initiating activities with their peers
- organizing activities in your school
- knowing about resources in your school and community

- what do you view your role has been on the Fly Higher school team
- how do feel about being part of the Fly Higher team.

Questions Relating to Developing peer-led initiatives in High Schools:

2. *How did youth perceive developing peer led initiatives in their high schools?*

- what happened when you went back to your school after the training workshop?
- can you tell me about your whole experience with Fly Higher since you attended the Fly Higher workshop.

probe for
- deciding what to do?
- initiating activities
- carrying out activities in your school or community (if any)
- other activities you would have liked to initiate but were unable to do so?
- accessing resources?

Questions relating to Potential Impinging Factors

3. *What are the conditions that youth, adult members and administrators identify as promoting peer led initiatives?*

- when your school team is trying to get things done. what helps?
- were there people who were helpful?

probe for:
- students (willing to come to meetings and/or be involved in activities), friends and family
- school staff - school administration, teachers/guidance staff.
others
- community resources e.g., Fly Higher staff or local Heart and Stroke staff
- how were they helpful?

- what about things that helped?
  probe for
  - other resources e.g., the tool box, the Internet chat line.
- what about personal issues that may have been particularly helpful
- how did the above help you and your team

4. What are the conditions that youth, adult members and administrators identify as barriers youth experience when developing peer led initiatives?

What do you think hindered your team from getting things done?
- were there people who made things harder for you?
  probe for
  - students (students not motivated or unwilling to come to meetings or be involved), friends and family
  - school staff - e.g., school administration, teachers/guidance staff, others
  - lack of community resources e.g., Fly Higher staff or local Heart and Stroke staff, others

- what about things that may have made it harder for you?
  probe for
  - e.g., school bureaucracy that makes everything a big deal
  - students’ lack of power in the school setting

- what about personal issues that may have made it more difficult for you (and your team)
  probe for
  - not enough personal time to get everything done

- how did the above hinder your team.

Questions relating to Impact:

5. What did youth perceive were the consequences for their school environments?
• do you feel you and your team have been able to make any changes in your school because of your involvement with Fly Higher?
• could you describe these changes to me
• if you were able to make changes, what helped you in making these changes?
• if you weren’t able to make any changes, can you think of why? What acted as barriers?
• was there anything that surprised you about Fly Higher?

6. What did youth perceive were the consequences for themselves?
• what were you expecting to get out of your participation in Fly Higher?
• what did you personally get out of your participation with Fly Higher
• what kind of impact do you think being involved in Fly Higher has had on the youth leaders
  probe
    • able to participate in school activities?
    • change in confidence, abilities, skills, fun
• would you like to be involved with Fly Higher in the future?

You’ve been really helpful. Is there anything else you’d like to tell me about your experiences in Fly Higher that perhaps I haven’t thought of?

Let me review what you’ve told me, to be sure I’ve understood you correctly. Linda - review main issues participants brought up in the interview.

If you think of anything later that you want to share with me, please call me collect (Linda O’Mara) at 0-905-849-8219. If I’m not home, I have voice mail and I’ll be happy to return your call.

Thank you again for your time. I’ll send you a summary of my findings.
Appendix H

Interview Guide - School Administrators

Introduction:

Hi. I'm Linda O'Mara, a doctoral student from University of Toronto. I'm interested in learning about youth experiences in peer-led health promotion projects, like Fly Higher. As you're a principal/vice-principal of a school with a Fly Higher school team, I'm interested in talking to you and learning about your familiarity with the Fly Higher program and about policies at the board level that support or inhibit youth initiatives. There are no right or wrong answers. I'm interested in your experiences, your feelings, and your opinions.

*Italics questions are the actual study questions and are not asked directly but are used as an orienting framework*

The interview guide developed for this study includes questions that address all the components of the conceptual framework, although not in the same order because of the natural flow of the questions.

*The Bold words: questions relating to training, questions developing peer-led initiatives, questions relating potential impinging factors and lastly questions relating to impact, link the questions to the conceptual framework.*

*OVERALL PURPOSE FOR THE STUDY IS: to examine young women's experiences as they developed peer-led health promotion initiatives in their schools.*

*Casual tone for interview*

1. *General Intro question:*
   - do you know about the Fly Higher initiative in your school?
   - how did the adult and youth members of the school team get selected for Fly Higher?
   - if they don't, is there another administrator who does?
   - if not, still ask about conditions that would support initiatives in their school
   - constraints that exist in their school relating to youth developing peer-led initiatives
Training:
- do you know about the Fly Higher workshop (one day workshop that 3 to 4 youth and one adult staff member from your school attended)?

Developing peer-led initiatives: do you know if your school team planned any activities in your school or community? (if any)
- do you know if they carried out any activities in your school or community?
- if they haven’t been able to carry mobilize students, can you think of why not?
- have any members of the school team approached you for resources?
- can you tell me about your whole experience with Fly Higher.

Impinging Factors

2. *What are the conditions that youth, adult members and administrators identify as promoting peer led initiatives?*
   - what conditions exist in your school that you think would support students trying to develop initiatives to promote health
   - what strategies can you think that youth could use to gain support from your school administration and school staff?
   - are there policies at the Board level that you feel facilitate youth driven initiatives?

3. *What are the conditions that youth, adult members and administrators identify as barriers youth experience when developing peer led initiatives?*
   - what conditions exist in your school that you think would act as constraints on students trying to develop initiatives to promote health
   - are there policies at the Board level that you feel make youth driven initiatives difficult to implement?

4. *What did youth perceive were the consequences for their school environments?*
   - do you feel the Fly Higher team in your school made any changes to the school environment?
   - could you describe these changes to me
   - if the team was able to make changes, what do you think helped in making these changes?
   - if the team was unable to make any changes, can you think of why? What acted as barriers?
was there anything that surprised you about Fly Higher?
- do you think being involved in Fly Higher has had an impact of the youth team members of the Fly Higher team
- would you like to be involved with Fly Higher in the future?

You’ve been really helpful. Is there anything else you’d like to tell me about your involvement in Fly Higher that perhaps I haven’t thought of?

Let me review what you’ve told me, to be sure I’ve understood you correctly. Linda -

review main issues participants brought up in the interview.

If you think of anything later that you want to share with me, please call me collect (Linda O’Mara) at 0-905-849-8219. If I’m not home. I have voice mail and I’ll be happy to return your call.

Thank you again for your time. I’ll send you a summary of my findings.
Appendix I

Guide for Recording Field Notes

1. Code (participant)
2. Interview date:
3. Length of interview:
4. Location of interview:
5. Technical problems (e.g., timing of interview, tape recorder)
6. Description of Environment:

7. Content of Interview (e.g., overview, focus, topics that stand out):

8. Non-verbal Behavior (e.g., tone of voice, posture, gestures):

9. Insights, interpretations, beginning analysis, working hypothesis:

Appendix J

NUD*IST Preliminary Codes

Q.S.R. NUD*IST Power version, revision 4.0.
Licensee: Linda O'Mara.

(1) /pre-workshop
   (1 1) /pre-workshop/how selected
   (1 1 1) /pre-workshop/how selected/nominated
   (1 1 2) /pre-workshop/how selected/volunteered
   (1 1 3) /pre-workshop/how selected/by whom, teacher, PHN, student
   (1 1 4) /pre-workshop/how selected/why, in leadership, already involved
   (1 2) /pre-workshop/role of past experiences
   (1 2 1) /pre-workshop/role of past experiences/leadership experiences
   (1 2 2) /pre-workshop/role of past experiences/sports experiences

(2) /workshop
   (2 1) /workshop/recollections of training
   (2 2) /workshop/feelings right after workshop
   (2 3) /workshop/what youth got out of workshop
   (2 3 1) /workshop/what youth got out of workshop/knowledge
   (2 3 1 1) /workshop/what youth got out of workshop/knowledge/new knowledge,
             refresher, increased awareness
   (2 3 1 2) /workshop/what youth got out of workshop/knowledge/topics
   (2 3 1 2 1) /workshop/what youth got out of workshop/knowledge/topics/women's health
               issues
   (2 3 1 2 2) /workshop/what youth got out of workshop/knowledge/topics/resources in
               school and community
   (2 3 2) /workshop/what youth got out of workshop/skills
   (2 3 2 1) /workshop/what youth got out of workshop/skills/new skills, refresher
   (2 3 2 2) /workshop/what youth got out of workshop/skills/communication, working in
             groups
   (2 3 2 3) /workshop/what youth got out of workshop/skills/initiating activities
   (2 3 2 4) /workshop/what youth got out of workshop/skills/organizing activities
   (2 3 2 5) /workshop/what youth got out of workshop/skills/accessing resources
   (2 3 3) /workshop/what youth got out of workshop/attitudes
   (2 3 3 1) /workshop/what youth got out of workshop/attitudes/more confidence
   (2 3 4) /workshop/what youth got out of workshop/know what to do after wkshop
   (2 3 5) /workshop/what youth got out of workshop/nothing learned
Impelling factors that help (enabling) people/staff and admin/other staff

Impelling factors that help (enabling) people/staff and admin/PhN

Impelling factors that help (enabling) people/staff and admin/other teachers

Impelling factors that help (enabling) people/staff and admin/guidance staff

Impelling factors that help (enabling) people/staff and admin

Impelling factors that help (enabling) people family

Impelling factors that help (enabling) people friends

Impelling factors that help (enabling) people/support/education council

Impelling factors that help (enabling) people/students/other school students

Impelling factors that help (enabling) people/students/other learn members

Impelling factors that help (enabling) people

Impelling factors that help (enabling)

Return to school/why meaningful

Return to school/access to resources

Return to school/wanted to do, but didn’t

Return to school/what they did on returning/carrying out activities/outcomes

Purpose

Return to school/what they did on returning/carrying out activities/for what people came

Return to school/what they did on returning/carrying out activities/many raising

Making a group, within a mission statement, inviting guest speakers, fund

Return to school/what they did on returning/carrying out activities/kinds.

Return to school/what they did on returning/meetings for what purpose

Return to school/what they did on returning/meetings/recency

Return to school/what they did on returning/meetings/sharing

Return to school/what they did on returning

Return to school
impinging factors that hinder (negative factors)/things that hinder
impinging factors that hinder (negative factors)/things that hinder/tool kit
impinging factors that hinder (negative factors)/things that hinder/tool kit/what and how
impinging factors that hinder (negative factors)/personal issues
impinging factors that hinder (negative factors)/personal issues/family issues
impinging factors that hinder (negative factors)/personal issues/personal hardships
impinging factors that hinder (negative factors)/personal issues/work-related hardships
impinging factors that hinder (negative factors)/school culture
impinging factors that hinder (negative factors)/school culture/size, big or small
impinging factors that hinder (negative factors)/school culture/diversity of student body
impinging factors that hinder (negative factors)/school culture/other school activities
impinging factors that hinder (negative factors)/school culture/power, rules in school
impinging factors that hinder (negative factors)/school culture/power, rules in school/people
impinging factors that hinder (negative factors)/school culture/power, rules in school/people/principal
impinging factors that hinder (negative factors)/school culture/power, rules in school/people/teachers
impinging factors that hinder (negative factors)/school culture/power, rules in school/people/student council
impinging factors that hinder (negative factors)/school culture/power, rules in school/people/student body
impinging factors that hinder (negative factors)/time - timing
impinging factors that hinder (negative factors)/time - timing/for meetings
impinging factors that hinder (negative factors)/time - timing/double lunches
impinging factors that hinder (negative factors)/time - timing/double lunches/positive and negative
impinging factors that hinder (negative factors)/money
impinging factors that hinder (negative factors)/money/no budget
impinging factors that hinder (negative factors)/money/how to get $
impinging factors that hinder (negative factors)/space
impinging factors that hinder (negative factors)/support services in schools
impinging factors that hinder (negative factors)/community - societal issues
(6) /impact on schools
(6 1) /impact on schools/activities done
(6 1 1) /impact on schools/activities done/# of students reached
(6 1 2) /impact on schools/activities done/increased awareness
(6 1 2 1) /impact on schools/activities done/increased awareness/of fly higher
(6 1 2 3) /impact on schools/activities done/increased awareness/of heart and stroke
(6 1 3) /impact on schools/activities done/physical changes to school
(6 2) /impact on schools/not done

(7) /impact on school leaders
(7 1) /impact on school leaders/expectations
(7 1 1) /impact on school leaders/expectations/surprises
(7 2) /impact on school leaders/outcomes of participation
(7 2 1) /impact on school leaders/outcomes of participation/knowledge
(7 2 1 1) /impact on school leaders/outcomes of participation/knowledge/new. refresher. ^awareness
(7 2 1 2) /impact on school leaders/outcomes of participation/knowledge/topics
(7 2 1 2 1) /impact on school leaders/outcomes of participation/knowledge/topics/women's health issues
(7 2 1 2 2) /impact on school leaders/outcomes of participation/knowledge/topics/resources in the school and community
(7 3) /impact on school leaders/skills
(7 3 2) /impact on school leaders/skills/new skills. refresher
(7 3 2 1) /impact on school leaders/skills/new skills. refresher/new skills. refresher
(7 3 2 1 4) /impact on school leaders/skills/new skills. refresher/new skills. refresher/new skills. refresher
(7 3 2 2) /impact on school leaders/skills/new skills. refresher/communication. working in groups
(7 3 2 3) /impact on school leaders/skills/new skills. refresher/initiating activities
(7 3 2 4) /impact on school leaders/skills/new skills. refresher/organizing activities
(7 3 2 5) /impact on school leaders/skills/new skills. refresher/accessing resources
(7 3 2 6) /impact on school leaders/skills/new skills. refresher/time management
(7 3 3) /impact on school leaders/skills/attitudes
(7 3 3 1) /impact on school leaders/skills/attitudes/more confidence
(7 3 3 2) /impact on school leaders/skills/attitudes/motivation to do for my peers
(7 3 3 3) /impact on school leaders/skills/attitudes/really feel good to help someone
(7 3 4) /impact on school leaders/skills/negative feelings
(7 4) /impact on school leaders/new skills. refresher
(7 5) /impact on school leaders/nothing
(8) /future plans
(8 1) /future plans/activities, list
(8 2) /future plans/deal with specific issues
(8 3) /future plans/to be involved in future
(8 3 1) /future plans/to be involved in future/yes or no
(8 3 2) /future plans/to be involved in future/why
(8 3 3) /future plans/to be involved in future/plans for next year

(9) /youth leaders - other activities
(9 1) /youth leaders - other activities/sports
(9 1 1) /youth leaders - other activities/sports/playing
(9 1 2) /youth leaders - other activities/sports/coaching
(9 2) /youth leaders - other activities/student council
(9 3) /youth leaders - other activities/athletic council
(9 4) /youth leaders - other activities/art
(9 4 1) /youth leaders - other activities/art/music
(9 4 1 1) /youth leaders - other activities/art/music/singing
(9 4 1 2) /youth leaders - other activities/art/music/playing
(9 4 2) /youth leaders - other activities/art/drama
(9 5) /youth leaders - other activities/volunteer
(9 6) /youth leaders - other activities/miscellaneous

(10) /summary of interview findings

(11) /adult member- role
(11 1) /adult member- role/at the workshop
(11 2) /adult member- role/back at school
(11 3) /adult member- role/impact of FH on adult member

(13) /administrators
(13 1) /administrators/familiar with FH
(13 1 1) /administrators/familiar with FH/how adult members are selected
(13 1 2) /administrators/familiar with FH/students are selected
(13 2) /administrators/planned any activities
(13 2 1) /administrators/planned any activities/approached for resources
(13 3) /administrators/carried out activities
(13 3 1) /administrators/carried out activities/strategies youth could use
(13 4) /administrators/familiar with board policies +
(13 4 1) /administrators/familiar with board policies +/culture of board policies
(13 5) /administrators/familiar with board policies -
(1351) /administrators/familiar with board policies - /culture of board policies

(136) /administrators/impact on school

(137) /administrators/impact on youth

(50) /basedata not included
Appendix K

Summary Letter to Youth School Team Members

Date
Dear NAME.

Last summer or early fall you spoke with me about your experiences with Fly Higher, a youth-led health promotion initiative in your school. I have completed interviews with other youth members and have been analyzing the data. I have summarized my findings and I would greatly appreciate it if you could take the time to read over these findings.

Please keep in mind that I have summarized everyone's interviews. I would like to check if the information I have is complete. I am asking you to check if my summary points include your experiences. If not, would you please make a note of what is missing. I will be calling you soon to discuss the findings and my interpretation. Thank you again for participating in my study.

How you became involved in Fly Higher:
You were invited to participate by a teacher, guidance counselor, public health nurse, or by other students in your school. A few of you volunteered. Many of you were selected because of your leadership skills and because you were involved in other school activities. You were happy about being selected, but a few of you felt you were already too busy with other activities. You expressed concerns that not enough students from your school went to the workshop, and all grades were not represented. That made it harder for you when you went back to your school.

What you experienced at the training workshop:
The workshop was a fun day. You felt comfortable at the all girls workshop. You could express your feelings openly, without being judged, and you felt accepted. You felt respected and valued.

You were impressed and even inspired by the core trainers. You felt that they were good role
models and you could relate to them better than if adults led the workshop.

You had some knowledge of women's health issues and some leadership skills before the workshop. The workshop increased your awareness of women's health issues. You learned more about communicating with others and a little bit about accessing resources in your school and community.

A few of you felt that mostly you just had fun at the workshop, as you already had confidence and skills working in groups. However, others said that you felt more confident and less shy after the workshop. You found it easier to talk with people and volunteer for things back at school. Making friends during the workshop was a good experience.

A few of you didn’t really expect to go back to your school and develop initiatives. Many of you said you felt motivated and wanted to go back to your school and make a difference.

**What happened back at school:**
Some teams were inactive after the workshop and other teams were active. I suggest that you ‘connected’ and became a team. You learned to work together. Next, you explored ‘finding a niche’ in your school. By this I mean you got permission from adults and student councils to do activities; you competed for your fellow students’ attention and you had to time your activities right, so they didn’t interfere with already planned activities. Then you moved on to ‘managing a plan’. This involved spreading the word to your peers, trying new things and taking risks, and building momentum.

**What you said helped you develop initiatives:**
Getting together and getting along with your Fly Higher school team helped you get initiatives done. The adult member of your team was helpful and supportive. She gave you ideas, helped you access resources and allowed you to get out of class for activities. Other teachers were helpful by being encouraging. Your principal was an advocate for your initiatives. Your family, friends and other students in your classes were helpful. You sought help from student council and from your public health nurse.

You identified the stress booklets, pamphlets and posters from the Fly Higher tool box as helpful. You felt supported by the Fly Higher staff when they sent you newsletters and
resources for Dress Red.

You identified that your personal interest in leadership, helping others, and/or women's health issues helped you to be involved with Fly Higher. Feeling confident in your abilities also helped you.

**What you said made it harder for you to develop initiatives:**
Finding time was a challenging issue. You were busy with other activities at school and it was difficult to find time to meet as a team and get things done.

There were group tensions and this interfered with your success as a team. Some team members didn't do their share of the work or they wanted to be in charge. It was difficult for you to work things out. The adult member of your team was not always available to help you.

When you were trying to get your activities done, you said that you did not get support or interest from your student body. Lack of school spirit and lack of interest prevented you from succeeding. Organizing activities was difficult because Fly Higher was a new group and no one knew about it; it was restricted to girls and your team lacked money.

You did not feel supported by teachers or other school staff. You identified that there were lots of rules in your school which made it difficult to organize activities.

You mentioned your own personal shyness made taking a leadership role difficult.

**Was there an impact of Fly Higher on your school?**
Teams did activities focusing on raising awareness of Fly Higher in their school, and raising awareness of health issues like nutrition and fitness by hanging posters around the school and by doing health displays. A few teams did special events and fund raisers like Muffin Monday. One team created a combo board in their school cafeteria with healthy food choices. Some teams organized sports at lunchtime to promote fun physical activity. Another team did a mural to make their school more attractive. Some teams did not do any activities.
Several of you felt there was no impact on your school as a result of Fly Higher either because you were unable to do any activities, or the activities were so brief.

Many of you said that there was an increased awareness of Fly Higher and women's health issues in your schools as a result of activities that you did. You were able to get other students in your schools involved in activities like sports at lunch and fund-raisers. One group impacted their school environment by painting a mural.

**Was there an impact on you, the youth leaders?**
For some of you, what you got out of your experience was limited to what you got out of the training workshop.

A few of you were disappointed and felt discouraged by your lack of success back at school. It seemed that some things were beyond your control.

For others, you learned about how to work successfully in groups; and how to organize and plan activities. You had a sense of accomplishment and recognition. You were more confident and felt good about yourself for being involved in this peer led health promotion project.

Several of you felt you were better able to manage your own stress and you were more aware of your own health since becoming involved in Fly Higher.

**Do you plan to be involved in the future?**
You said that you would like to be involved in the project again. Often you were enthusiastic about continuing. Some of you want to go on to become core trainers. A few of you were unsure about future involvement and said that you would get involved if you had time. Some of you cannot be involved because you are graduating.

**My interpretation of your experience trying to develop peer led initiatives in your school:** I developed a sense that you were "Managing Competing Demands" as you returned from the workshop and continued your school year. These demands included: having enough time, learning to get along in a group, juggling school work and extra curricular activities. Key issues seem to be: having a supportive available adult member of your team, having a
school climate that is open to initiatives and having resources in your school and community.

I hope this captures what you told me about your experiences. I will be calling you in about one week to have a discussion with you.
Thanks again
Sincerely

PS. If you have any questions, please call. My phone # is 905-849-8219.
Appendix L

Summary Letter to Adult School Team Members

Date
Dear NAME,

Last summer or early fall you spoke with me about your experiences with Fly Higher, a youth-led health promotion initiative in your school. I have completed interviews with other adult members and have been analyzing the data. I have summarized my findings I would greatly appreciate it if you could take the time to read over these findings.

Please keep in mind that I have summarized everyone's interviews. I would like to check if the information I have is complete. I am asking you to check if my summary points include your experiences. If not, would you please make a note of what it missing. I will be calling you soon to discuss the findings and my interpretation. Thank you again for participating in my study.

How you and the youth members became involved in Fly Higher:
You became involved either because you saw the experience as fitting in with 'part of your job' or it fit with your extra curricular interests of women's health and/or peer led initiatives.

When selecting students you sought students with leadership skills. They were often members of the student executive council or leaders of an athletic team. You also attempted to involve a mix of students on your team by including younger students, older students and those from different backgrounds. Not all students who agreed to come attended the workshop and this was difficult for the team later.

The workshop experience:
You were impressed by the quality of the core trainers and felt that they were good role models for youth on the school teams.

Youth gained skills from the workshop. Some learned about women's health, were better able to plan activities, learned about community resources, and gained leadership experience. Some youth gained confidence due to their participation in the workshop, whereas others did not gain confidence as they were already confident.

A few of you didn't really expect to go back to your school and develop initiatives. The youth on your team had a fun day at the workshop and gained enthusiasm for Fly Higher. Some youth felt that by working together they could develop initiatives in their schools.

What happened back at school, after the workshop:
Some teams were inactive after the workshop and other teams were active. I suggest that
your team ‘connected’ and became a team, they learned to work together. Next, the school
team explored ‘finding a niche’ in your school. By this I mean that the youth needed to get
permission from adults and student councils to do their activities; they competed for students
attention and they had to time activities right, so they didn’t interfere with already planned
activities. Then the team moved on to ‘managing a plan’. This involved spreading the word
to other school students, trying new things and taking risks. and trying to build momentum.

Your role as an adult member:
Adult members assumed different roles on the Fly Higher school team:

1) Not available - because of lack of interest or other time commitments
2) As a director - deciding what to do and giving the youth members options
   from a variety of choices.
3) As a facilitator - to initially take the lead and then let students go and act on
   their own initiative.
4) As a liaison or a resource person - to help youth access resources that are
   available to them.
5) As an advocate - a person who believes in them and “champions their cause”
   to other members of the school community.

Some of you assumed more than one role during your involvement in this project.
Many of you did not commit as much time and effort as you originally wished to do, because
of other pressing demands on your time.

What you said helped youth develop initiatives:
You identified that you, the adult member, are important in helping youth develop initiatives
because you ‘know the ropes’ and can help students ‘negotiate their way’ in the school
system.

Supportive administration, teachers and staff who were open to youth initiatives were helpful.

The Fly Higher tool box posters and handbook were useful.

Fly Higher staff sent Newsletters and stress resources to your school.

What you said made it harder for youth to develop initiatives:
Students not getting along was an issue. Lack of time was a constraining factor for both
yourselves and the youth members of your team. Both you and the youth members were not
always committed to ongoing participation in Fly Higher. The actual timing of the program
was a problem at times because the workshop was late in the term and your teams were busy
with exams and other activities. It was difficult for some teams to “Find a niche”. when
similar activities already existed in your school, or there were already several activities going
on in your school and students weren’t interested in more activities.
In general, students today are more stressed. There are more difficult family situations, youth frequently have part-time jobs; many youth are dealing with issues of sexual harassment, smoking, alcohol, and drug abuse.

Adolescent behaviours and attitudes constrain health initiatives because in some schools youth are less interested in wellness. You identified that low school spirit and lack of interest from your student body hindered the success of the Fly Higher initiatives.

You identified lack of support from the administration, and other teaching staff as a barrier. You felt this was related to administration having their own agenda; an aging teacher staff, some teachers not being open to change; and the increasing demands and stress on all school staff. You also felt that limited financial resources in schools was a barrier. You feel schools are having to do more with less.

Lastly, the Heart and Stroke staff did not send the resources you requested in order to carry out a planned activity and you were disappointed.

Was there an impact of Fly Higher on your school?
Teams did activities focusing on raising awareness of Fly Higher in their school, and raising awareness of health issues, like nutrition and fitness by hanging posters around the school and by doing health displays. A few teams did special events and fund raisers like Muffin Monday. One team created a combo board with healthy food choices. Some teams organized sports at lunchtime to promote fun physical activity. Another team did a mural to make their school more attractive. Some teams did not do any activities.

You felt there was no impact on your school either because youth were unable to carry out any activities or the activities were very brief. Others said that Fly Higher had impacted your school in a very minimal way. Still others felt that it was too early in the project for there to have been an impact. You identified that there was a short term impact on those school students who participated in the activities by doing noon time sports or eating more nutritious foods (healthy combos). You felt the focus was on increasing awareness about selected health issues in the school environment.

Impact of Fly Higher on the youth leaders:
There was no impact on some youth team members either because they were already strong women and good leaders or were not involved in Fly Higher beyond the workshop.

Youth members gained skills from their overall participation in Fly Higher. Some of the youth learned to work in groups and were better able to resolve group tensions.

There was a negative impact on some youth when their initiatives were not successful and the youth became discouraged and frustrated.
Impact of Fly Higher on you:
You felt being involved in this program offered you an opportunity to connect more with youth. You expressed pleasure and satisfaction when the youth members were successful in establishing initiatives.

You expressed disappointment when things didn’t work out as you wished.

Plans for future involvement with Fly Higher:
You said that you would like to be involved with Fly Higher in the future. However, it will depend on your time availability and your ability to recruit students.

My interpretation of your experience trying to support youth as they develop peer led initiatives in your school: I developed a sense that you were “Managing Competing Demands” as you returned from the workshop and continued your school year. These demands included; having enough time, helping students learn to get along in a group, juggling work responsibilities and extra curricular activities. Key issues seem to be: having students stay committed, having a school climate that is open to initiatives, and having resources in your school and community.

I hope this captures what you told me about your experiences. I will be calling you in about one week to have a discussion with you.

Thanks again
Sincerely.

PS any questions or concerns. my number is 905-849-8219.
Appendix M

Summary Letter to School Administrators

Date
Dear NAME,

Last summer or early fall you spoke with me about your experiences with Fly Higher, a youth-led health promotion initiative in your school. I have completed interviews with other administrators and have been analyzing the data. I have summarized my findings I would greatly appreciate it if you could take the time to read over these findings.

Please keep in mind that I have summarized everyone's interviews. I would like to check if the information I have is complete. I am asking you to check if my summary points include your experiences. If not, would you please make a note of what it missing. I will be calling you soon to discuss the findings and my interpretation. Thank you again for participating in my study.

How did your school become involved in Fly Higher?
You received information in the mail about Fly Higher and then passed it on to the appropriate teacher or department head in physical education or guidance who had expressed an interest in youth leadership or women's health.

Your school receives many solicitations for participation. You act as the gatekeeper and pass it on based the information to whomever in your school it would best apply to.

What would help youth develop initiatives in your school?
Support from staff and administration are key to enabling youth initiatives. Students need a staff advisory person in order to be allowed to have activities at school. Student advisors must help students "learn the ropes" and "open doors" because of the many rules and regulations in schools.

Whatever the youth decide to do, it needs to fit in with existing activities. Student councils are conduits for peer led activities

An open school environment with supportive staff is important; as is an environment where there are strong female role models.

What would make it harder for youth to develop initiatives in your school?
You felt that adolescent behavior in general can constrain youth-led initiatives. Youth lack the maturity and experience, sometimes lack confidence, and their initial enthusiasm that often fades quickly, making it difficult for youth-led initiatives to succeed.
The youth leaders involved in this program are already 'into health' and this may be a barrier to reaching a certain population in your school that isn't 'into health'.

Students today are more stressed. There are more difficult family situations, youth frequently have part-time jobs; many youth are dealing with issues of sexual harassment, smoking, alcohol, and drug abuse.

You identified lack of support from teaching staff as a barrier to youth initiatives. You felt this was related to an aging teacher staff, some teachers not being open to change; and the increasing demands and stress on teachers. You also felt that limited financial resources in schools was a barrier. You feel schools are having to do more with less.

Those of you who work in larger schools identified barriers relating to the size of your schools (E.I., over crowding and triple lunches). You said that communicating and organizing meeting times was often a challenge and that students and staff are overloaded with numerous activities to choose from. As well, some of you felt that student diversity made it harder to organize initiatives because the students have different needs.

In some of your schools, activities need to be approved at the school the June prior to the upcoming academic year. This makes spontaneous activities limited.

In some of your communities, there is high unemployment and this further stresses families and youth.

**How do Board Policies affect youth trying to develop peer led initiatives?**

You mentioned that as principal, you have a lot of discretion in making decisions about activities in your schools. Many of you were not aware of specific policies at the board level to promote or constrain youth initiatives. You felt that the board was generally supportive of projects that promote health and would support most initiatives. Activities that you identified as requiring board approval were those that involved legal and safety issues or that dealt with controversial topics (like condoms or pro-life activities). When decisions do need to go to the board, you mention that trustees make conservative (or safe) decisions. Some schools now have non voting student trustees and this should be helpful in increasing student 'voice' and presence at board meetings.

**Would you like to be involved in the future?**

You would like your school to be involved with Fly Higher in the future. However, you specified that it would depend on the availability of an adult member and that the decision would be left up to the teachers involved.
My interpretation of your experience trying to support youth leaders as they tried to develop peer led initiatives in your school:
I developed as sense that as administrators, you are "managing competing demands". You decide what extra curricular activities come into your school. You need to protect both staff time and student time.

You feel strongly that the whole school system is stretched: you have diverse student populations with varied needs, many youth come from families with more pressure on them; teachers are ageing and not volunteering as much; and lastly, in the school your staff are needing to do more in school with less resources.

You feel strongly that youth leaders need to learn the rules and how to follow them; how the system works and how to change it. They need to 'negotiate their way' in the school bureaucracy.

I hope this captures what you told me about your experiences. I will be calling you in about one week to have a discussion with you.

Thanks again
Sincerely,

PS any questions or concerns, my number is 905-849-8219.
Appendix N

Consent Form - Youth School Team Members

I understand that I will be part of a research study about youth experiences in a peer-led health promotion project. The study is being conducted by Linda O’Mara, a doctoral student in the Graduate Department of Community Health at the University of Toronto.

I consent to filling out an information form and taking part in an interview. I will be asked about my experiences as a member of the Fly Higher team, particularly how I describe my involvement, my ideas about what helped or what didn’t help me and what consequences if any occurred because of Fly Higher in my school. The interview will take about 45 minutes of my time. I understand the interview will be tape recorded and the reports of the study may include quotes from my interview. However, I also understand that my answers will be confidential that my name will not appear in any reports of this study. As well, no one will be able to identify me from any of the quotes used in the study.

I have been told my participation is entirely voluntary and, even after I consent to participate and the interview begins, I can refuse to answer questions or stop taking part in the interview. This will have no effect on my involvement in the Fly Higher program.

This study will help describe and explain the experiences of youth leaders’ experiences in a peer-led health promotion project. However, I will receive no direct benefit eg. financial, as a result of my participation. Also, there are no known risks to my participation. If I have any questions about the study or its results I can contact Linda O’Mara at 0-905-849-8219 or Dr Dennis Raphael (Thesis Supervisor)* at 416-978-7567.

I understand that if I am less than 18 years old I will also need my parent’s signature on the consent form.

<table>
<thead>
<tr>
<th>Participant’s signature and date</th>
<th>Parent or Guardian signature and date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I, the undersigned have fully explained the research to the above participant.

<table>
<thead>
<tr>
<th>Researcher’s signature and date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

* Ilze Kalnins was on sabbatical during data collection
Appendix O

Consent Form - Adult School Team Members

I understand that I will be part of a research study about youth experiences in a peer-led health promotion project. The study is being conducted by Linda O'Mara, a doctoral student in the Graduate Department of Community Health at the University of Toronto.

I consent to filling out an information form and taking part in an interview. I will be asked about my experiences as a member of the Fly Higher team, particularly how I understand how young women become involved, my ideas about what helped or didn't help them plan and carry out initiatives, and what consequences if any occurred because of Fly Higher in our school. The interview will take about 45 minutes of my time. I understand the interview will be tape recorded and the reports of the study may include quotes from my interview. However, I understand that my answers will be confidential that my name will not appear in any reports of this study. As well, no one will be able to identify me from any of the quotes used in the interview.

I have been told my participation is entirely voluntary and, even after I consent to participate and the interview begins, I can refuse to answer questions or stop taking part in the interview. This will have no effect on my involvement in the Fly Higher program.

This study will help describe and explain the experiences of youth leaders in a peer-led health promotion project. However, I will receive no direct benefit eg, financial, as a result of my participation. Also, there are no known risks to my participating in this study. If I have any questions about the study or its results I can contact Linda O'Mara at 0-905-849-8219 or Dr Dennis Raphael (Thesis Supervisor)* at 416-978-7567.

Participant’s signature and date

I, the undersigned have fully explained the research to the above participant.

Researcher’s signature and date

* Ilze Kalnins was on sabbatical during data collection
Appendix P

Consent Form - School Administrators

I understand that I will be part of a research study about youth experiences in a peer-led health promotion project. The study is being conducted by Linda O'Mara, a doctoral student in the Graduate Department of Community Health at the University of Toronto.

I consent to filling out an information form and taking part in an interview. I will be asked about my experiences as an administrator of a school where there is a Fly Higher team. I will describe my understanding of youth involvement, my ideas about what helped or what didn’t help the Fly Higher team, and what consequences if any occurred because of Fly Higher in my school. The interview will take about 10 to 15 minutes of my time. I understand the interview will be tape recorded and the reports of the study may include quotes from my interview. However, I understand that my answers will be confidential that my name will not appear in any reports of this study. As well, no one will be able to identify me from any of the quotes used.

I have been told my participation is entirely voluntary and, even after I consent to participate and the interview begins, I can refuse to answer questions or stop taking part in the interview. This will have no effect on my involvement in the Fly Higher program.

This study will help describe and explain the experiences of youth leaders in a peer-led health promotion project. However, I will receive no direct benefit as a result of my participation e.g., financial. There are no known risks to my participation in this study. If I have any questions about the study or its results I can contact Linda O'Mara at 0-905-849-8219 or Dr Dennis Raphael (Thesis Supervisor)* at 416-978-7567.

__________________________
Participant’s signature and date

I, the undersigned have fully explained the research to the above participant.

__________________________
Researcher’s signature and date

* Ilze Kalnins was on sabbatical during data collection
Appendix Q
Implementing Peer Led Initiatives

<table>
<thead>
<tr>
<th>Who was involved in implementing peer led initiatives</th>
<th>Accessing resources</th>
<th>Activities carried out</th>
</tr>
</thead>
<tbody>
<tr>
<td>least successful school teams</td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 1¹</td>
<td>youth 0</td>
<td>none</td>
</tr>
<tr>
<td>no one</td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 2²</td>
<td>youth 0</td>
<td>none</td>
</tr>
<tr>
<td>no one</td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 3</td>
<td>none</td>
<td>none</td>
</tr>
<tr>
<td>no one</td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 4</td>
<td>none</td>
<td>none</td>
</tr>
<tr>
<td>no one</td>
<td></td>
<td></td>
</tr>
<tr>
<td>more successful school teams</td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 5</td>
<td>youth accessed school resources</td>
<td>pep rally, aerobics at lunch</td>
</tr>
<tr>
<td>youth, adult member</td>
<td>s/a</td>
<td>play day at end of year</td>
</tr>
<tr>
<td>school council executive members</td>
<td></td>
<td></td>
</tr>
<tr>
<td>youth members and adult members</td>
<td>and used tool box resources</td>
<td>started group called US (United Sisters)</td>
</tr>
<tr>
<td>youth members</td>
<td>used school resources</td>
<td>put posters around school</td>
</tr>
<tr>
<td>youth members and aerobics instructor</td>
<td></td>
<td>had a muffin Monday</td>
</tr>
<tr>
<td>youth members</td>
<td>Heart and Stroke Dress Red package</td>
<td>did fitness at lunch x one week</td>
</tr>
<tr>
<td>youth and adult members</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who was involved in implementing peer led initiatives</td>
<td>Accessing resources</td>
<td>Activities carried out</td>
</tr>
<tr>
<td>--------------------------------------------------------</td>
<td>---------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>school 7 youth and adult members (work to rule for 3 months after workshop)</td>
<td>tool box. otherwise none used</td>
<td>bulletin board in cafeteria and pamphlets and Quit for Life CDs in guidance department</td>
</tr>
<tr>
<td>school 8 youth and adult members of Body Image club</td>
<td>tool box and school resources</td>
<td>display case in cafeteria combo board for healthy food choices in cafeteria</td>
</tr>
<tr>
<td>school 9 youth members</td>
<td>youth sought resources in school and secured a room</td>
<td>obtained room for Fly Higher club</td>
</tr>
<tr>
<td></td>
<td>adult member provided resources</td>
<td>Valentine's day Health awareness</td>
</tr>
<tr>
<td></td>
<td>school resources</td>
<td>ping pong at lunch</td>
</tr>
<tr>
<td>school 10 youth members</td>
<td>no in school resources were sought tool box posters</td>
<td>started a club called FIT (Focus on Issues Today) called a general meeting</td>
</tr>
<tr>
<td><strong>most successful school teams</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 11 youth team members</td>
<td>youth used in school resources and the tool box</td>
<td>started a group called WOW (working on wellness) hung posters around the school did osteoporosis walk did noon hour hour display about osteoporosis</td>
</tr>
<tr>
<td>youth team members, PHN and community osteoporosis nurse</td>
<td>PHN in school was a resource providing all osteoporosis resources</td>
<td></td>
</tr>
<tr>
<td>Who was involved in implementing peer led initiatives</td>
<td>Accessing resources</td>
<td>Activities carried out</td>
</tr>
<tr>
<td>--------------------------------------------------------</td>
<td>-------------------------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>school 12 youth and adult team members youth team members, art students</td>
<td>tool box posters youth contacted Heart and Stroke for Dress Red youth used school resources to paint mural</td>
<td>hung posters Dress Red paint cafeteria wall with Fly Higher mural</td>
</tr>
</tbody>
</table>

1 School 1 PHN contacted Heart and Stroke for stress booklets, she put posters around the school and ran a smoking cessation program, all without youth involvement
2 School 2 adult member tried to get information from Heart and Stroke to do the Hoops for Heart, but it was never sent
Appendix R
Activities students reported they wanted to do, but did not and their reasons

<table>
<thead>
<tr>
<th>School</th>
<th>Activity not done</th>
<th>Barrier</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>least successful school teams</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 1</td>
<td>form a group hold health awareness week</td>
<td>too busy as OAC students Adult member not often available</td>
</tr>
<tr>
<td>school 2</td>
<td>fund raise Hoops for Heart</td>
<td>equipment did not arrive students lost interest</td>
</tr>
<tr>
<td>school 3</td>
<td>fund raise Dress Red</td>
<td>too busy as OAC students no adult support</td>
</tr>
<tr>
<td>school 4</td>
<td>form a group get a room and supply health information for women</td>
<td>work to rule too busy with other activities lost momentum</td>
</tr>
<tr>
<td><strong>more successful school teams</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 5</td>
<td>hold week for women’s physical activity</td>
<td>poor student turnout</td>
</tr>
<tr>
<td>school 6</td>
<td>fund raise Hoops for Heart hold forum on smoking</td>
<td>poor student turnout group conflict lead to group breaking up</td>
</tr>
<tr>
<td>school 7</td>
<td>increase awareness for non smoking in elementary schools</td>
<td>work to rule younger students lost enthusiasm</td>
</tr>
<tr>
<td>school 8</td>
<td>student survey about general health issues aerobics with developmentally delayed youth</td>
<td>little enthusiasm from other team members no permission slips</td>
</tr>
<tr>
<td>School</td>
<td>Activity not done</td>
<td>Barrier</td>
</tr>
<tr>
<td>---------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>school 9</td>
<td>fund raise Hoops for Heart hold aerobics at lunch change cafeteria menu to healthier choices hold free breakfasts on regular basis invite speaker on Healthy Eating</td>
<td>group conflict issues not resolved adult member not available no money for speaker</td>
</tr>
<tr>
<td>school 10</td>
<td>conduct student surveys hold stress reduction workshops increase non smoking awareness to grade 9 students</td>
<td>unable to get students to attend meetings</td>
</tr>
<tr>
<td><strong>most successful school teams</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>school 11</td>
<td>hold stress management workshops around exam time increase awareness of eating disorders and sexual harassment</td>
<td>busy with other activities took time to work out group issues</td>
</tr>
<tr>
<td>school 12</td>
<td>fund raise Hoops for Heart have healthy foods days in cafeteria</td>
<td>busy with other activities took time to work out group issues</td>
</tr>
</tbody>
</table>
Appendix S

Student Activities and Impact on Schools

<table>
<thead>
<tr>
<th>Activities Carried out</th>
<th>Directed Towards</th>
<th>Expected Impact on School</th>
<th>Reported Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>least successful school teams</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School 1*</td>
<td>none</td>
<td>none</td>
<td>none</td>
</tr>
<tr>
<td>no activities</td>
<td>none</td>
<td>none</td>
<td>none</td>
</tr>
<tr>
<td>School 2</td>
<td>none</td>
<td>none</td>
<td>none</td>
</tr>
<tr>
<td>no activities</td>
<td>none</td>
<td>none</td>
<td>none</td>
</tr>
<tr>
<td>School 3</td>
<td>none</td>
<td>none</td>
<td>none</td>
</tr>
<tr>
<td>no activities</td>
<td>none</td>
<td>none</td>
<td>none</td>
</tr>
<tr>
<td>School 4</td>
<td>none</td>
<td>none</td>
<td>none</td>
</tr>
<tr>
<td>no activities</td>
<td>none</td>
<td>none</td>
<td>none</td>
</tr>
</tbody>
</table>

<p>| <strong>more successful school teams</strong> |                 |                           |                 |
| School 5                 | all youth in school | to increase awareness of sexual harassment | unknown |
| pep rally                | female students | to increase physical activity levels of girls in school | few students participated |
|                         | aerobics at lunch |                           |                 |
|                         | all youth in school | have fun to increase physical activity for one day | fun |
|                         | play day at       |                           |                 |</p>
<table>
<thead>
<tr>
<th>Activities Carried out</th>
<th>Directed Towards</th>
<th>Expected Impact on School</th>
<th>Reported Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>School 6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>started group called US (United Sisters)</td>
<td>all female students in school</td>
<td>give group a sense of identity</td>
<td></td>
</tr>
<tr>
<td>put posters around school</td>
<td>all members of school community</td>
<td>increase awareness of Fly Higher</td>
<td>short term</td>
</tr>
<tr>
<td>had a muffin Monday</td>
<td>all school members</td>
<td>increase awareness of good nutrition</td>
<td>sold mostly to staff</td>
</tr>
<tr>
<td>did fitness at lunch x one week and intramurals 1 day week x 2 months</td>
<td>all members of school community</td>
<td>increase physical activity of young women</td>
<td>poorly attended</td>
</tr>
<tr>
<td>had a Dress Red Day</td>
<td></td>
<td>raise money for The Heart and Stroke Foundation</td>
<td>money raised</td>
</tr>
<tr>
<td>School 7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>bulletin board in caf</td>
<td>all members of school community</td>
<td>raise awareness of Fly Higher</td>
<td>limited</td>
</tr>
<tr>
<td>put pamphlets and Quit for Life CDs in guidance department</td>
<td></td>
<td>assist smokers to quit</td>
<td>unknown if resources to help adolescents quit smoking were used</td>
</tr>
<tr>
<td>Activities Carried out</td>
<td>Directed Towards</td>
<td>Expected Impact on School</td>
<td>Reported Impact</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>--------------------------</td>
<td>----------------------------------------------------------------</td>
<td>----------------------------------------------------------</td>
</tr>
<tr>
<td>School 8 survey in cafeteria</td>
<td>all members of school</td>
<td>raise awareness of good nutrition</td>
<td>students reported it</td>
</tr>
<tr>
<td>display case in cafeteria</td>
<td>community</td>
<td>raise awareness of the nutritional content of food</td>
<td>was fun</td>
</tr>
<tr>
<td>combo board for healthy food choices in caf</td>
<td></td>
<td>make healthy choices easy choices</td>
<td>healthy combos sold well and were continued</td>
</tr>
<tr>
<td>School 9 did a skit on Fly Higher at school assembly</td>
<td>all school youth</td>
<td>raise awareness of group</td>
<td></td>
</tr>
<tr>
<td>obtained room for Fly Higher club</td>
<td>all school youth</td>
<td>room was to be used by Fly Higher team and youth who came to play ping pong</td>
<td></td>
</tr>
<tr>
<td>Valentine’s day Health awareness</td>
<td>all members of school community</td>
<td>raise awareness of Fly Higher and raise money for The Heart and Stroke Foundation</td>
<td>money raised</td>
</tr>
<tr>
<td>ping pong at lunch</td>
<td>all school youth</td>
<td>increase physical activity</td>
<td>increased physical activity of selected school youth who played ping pong (mostly developmentally challenged youth)</td>
</tr>
<tr>
<td>Activities Carried out</td>
<td>Directed Towards</td>
<td>Expected Impact on School</td>
<td>Reported Impact</td>
</tr>
<tr>
<td>------------------------</td>
<td>------------------</td>
<td>---------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>School 10</td>
<td>all school youth</td>
<td>increase visibility to other students. were unable to involve other school youth in developing healthy lifestyle activities</td>
<td>none</td>
</tr>
<tr>
<td>started a club called FIT (focus of youth)</td>
<td>called a general meeting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School 11</td>
<td>youth team members and other female students</td>
<td>increase visibility to fellow students</td>
<td>increased awareness, students joined group</td>
</tr>
<tr>
<td>started a group called WOW (working on wellness)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>did osteoporosis walk and displays about osteoporosis</td>
<td>all school youth</td>
<td>raise money for osteoporosis research raise awareness in youth of the problem of osteoporosis</td>
<td>raised money</td>
</tr>
<tr>
<td>School 12</td>
<td>all members of the school community</td>
<td>raise money for The Heart and Stroke Foundation</td>
<td>money raised</td>
</tr>
<tr>
<td>had a Dress Red Day</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>paint cafeteria wall with Fly Higher mural</td>
<td>all members of the school community</td>
<td>raise awareness of the Fly Higher group, improve physical surroundings of the cafeteria</td>
<td>attractive wall in school cafeteria</td>
</tr>
</tbody>
</table>

*School 1 Fly Higher posters around the school and smoking cessation program are two initiatives done by the PHN only with no youth involvement. The reported impact was a small increase awareness of Fly Higher and health issues facing young women and she assisted youth who were smokers to quit.*