

In Brief

An evaluation of Project Jump 2005: a sexual health drama project for 'hard to reach' young people



Myrtle Theatre Company
Specialists in Creative Learning

btp
Bristol Teenage Pregnancy Partnership

 **bristol**
neighbourhood renewal

A collaboration between Bristol Teenage
Pregnancy Partnership, North Somerset
Teenage Pregnancy Partnership and Myrtle
Theatre Company

Centre for Public Health Research

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Overview

Project Jump 2005 is a joint initiative developed by the Bristol Teenage Pregnancy Partnership (BTPP), North Somerset Teenage Pregnancy Partnership and the Myrtle Theatre Company in Bristol. This is in response to increasing Government concern over the rates of teenage pregnancy and sexually transmitted infections in young people. Specific groups were highlighted as particularly vulnerable in the National Sexual Health and HIV Strategy (Department of Health, 2001). These include those experiencing deprivation, children of teenage mothers, black and ethnic minority groups and young people who dislike school or have low educational achievement. Recently there has been increasing investment in Arts programmes based on a growing belief that young people's engagement with the arts can help even the most vulnerable young people to develop skills which transform their lives (Arts Council England, 2003a; Arts Council England, 2003b). The aim of the project is to enable young people to consider their sexual behaviour and its impact and consequences on themselves and other people. Project Jump is a drama performance lasting 40 minutes followed by a package of work and support that aims to initiate longer-term sexual health work with groups of young people. Issues considered in the play and workshop included: unsafe sex; teenage pregnancy; sexual abuse; alcohol misuse; personal safety and relationships. All of these are explored through the use of a range of drama techniques and activities. The University of the West of England, Bristol (UWE) was commissioned by BTPP to undertake the evaluation of a tour of Project Jump across 21 organisations working with vulnerable and 'hard to reach' young people. This took place between October 2005 and April 2006.

Methods

UWE's study consisted of a process evaluation which sought to understand the experiences of young people participating in the project and examine the views of professionals working alongside them. In addition we examined the role of drama in facilitating discussions and exploration of sexual health related issues with 'hard to reach' young people and identified the mechanisms necessary for identifying, engaging and working with 'hard to reach' young people in vulnerable communities. Sustainability and future development of the project is assessed from a range of stakeholder perspectives.

The evaluation methods used included standardised observation, postcard surveys, one to one interviews with young people, semi-structured questionnaires and interviews with professionals from participating organisations and key stakeholders. Over 121 young people (55 male, 66 female) aged 13-16 years were observed across 12 organisations including Pupil Referral Units, Children Looked After, Open Access Youth Projects or outreach projects and a Youth Work Project located on bus. Of these, 21 took part in semi-structured face to face interviews and 100 completed a postcard survey to ascertain their views on the play and workshop. In addition 34 professional workers completed semi-structured questionnaires and 15 agreed to be interviewed to establish their views on young people's participation, ongoing health promotion work and future development of the project.

Findings

It is important to appreciate the ambitious nature of this project in its aim to engage with the most 'hard to reach' young people to enable them to think about their sexual health behaviour and its consequences for themselves and others. Young people involved in the project had a wide range of individual needs and experiences, which made the groups particularly challenging in terms of supporting meaningful engagement within a drama based health promotion project.

Project Jump achieved access to the range of young people it was developed to target. Education, the youth offending service, the youth service and social services all identified young people with a range of educational, social and behavioural difficulties who they believed would benefit from the project. Problems ranged from school exclusion, poor educational achievement, risk of criminal activity, family violence to living in deprived communities, all of which impacted on the

ability of these young people to develop sexual health life skills. Any discussion about the effectiveness of this project therefore has to be understood in the often complex and challenging context of the participants' lives.

This project demonstrated a clear ability to identify a wide range of 'hard to reach' groups of young people. These groups included young people with a diverse range of needs which reflect the difficulties of 'hard to reach' young people generally, irrespective of the project. However these young people were all identified through their active engagement with organisations or services and while this did include some outreach work there is still significant scope to identify and engage young people who do not use such formal structures e.g. homeless young people. Increased vulnerability can also be the result of deprivation and poverty. It is possible that mainstream education is still the most effective way of identifying these young people and the development of the project within school settings should be considered in the future.

Overall the majority of the young people found their involvement in the project to be a positive and exciting one. The approach was perceived as being realistic and encouraged them to identify, discuss and analyse a range of difficult sex and relationship related situations. Identification with and discussions about the characters in the play offered the participants a degree of emotional safety to be able to speak out and ask questions about a range of sexual health related issues.

The overwhelming observation from both researchers and professionals working directly with the young people was the high level and quality of engagement shown by the audiences, with relatively few disruptions. Professionals commented on how the skilful use of drama activities successfully enabled the young people to explore the consequences of real-life situations, empathise with others, understand the motivations around sex and relationships and consider ways they could change undesirable outcomes.

The Theatre Company in collaboration with the commissioners had gone to great lengths to identify and establish relationships with appropriate groups, however there were a number of occasions where aspects of the project were cancelled due to organisational difficulties. Given the level of funding necessary to support the delivery of this project these cancellations were wasteful and frustrating. Similarly while participation by young people was generally high, there was a range of disruptive incidents that impacted on group experience which were not always managed successfully by supervising workers.

Recommendations

The use of a drama approach with 'hard to reach' young people is clearly important and effective in encouraging them to think about their sexual health behaviour and its consequences for themselves and others in ways that are accessible, realistic and exciting. There is clearly room for further investment and development of this work to further promote and sustain improved sexual health outcomes for young people and build on participating young people's involvement and learning. Drama is an innovative and engaging approach for young people who find learning in traditional academic ways difficult and should be prioritised over these approaches when considering health promotion interventions with these groups.

The preparation of agencies and organisations prior to the performance and workshops is central to the successful implementation of the project. This should include: the involvement of young people in the pre-project briefing sessions to generate user support for delivery situations; compulsory attendance at the briefing day by high level managers and workers who will be involved in the delivery; the development of a clear strategy for non-attenders and the identification of support mechanisms for young people who disclose or have additional emotional needs as a consequence of the drama.

Disruption to the project should be managed on two levels. Firstly poor attendance or cancellation (particularly in open access youth work settings) should be minimised through a strong commitment by organisations to actively recruit young people through a range of methods and the cost implications of cancellation should be made very clear. Secondly organisations, and in particular key workers who attend the briefing day, need to undertake

careful needs assessment of participants identifying the need for any additional support; identify and clearly communicate any behaviour management strategies including: maintaining adequate staffing level, providing alternative physical space for young people who do not wish to take part or who are disruptive and make explicit the role of workers and theatre practitioners in managing disruption prior to the workshop taking place.

In terms of sustainability and follow-up work within agencies and organisations further time and attention should be given to further collaboration between the Primary Care Trust and Theatre Company to develop strategies for disruption and management of 'hard to reach' groups that centre around keeping young people's engagement. This includes developing strategies to undertake follow-up work for those who miss workshops or would like further input. The commitment to sharing and disseminating good practice and the learning from this initiative is important.

Responsibilities lie with commissioners, evaluators and the Theatre Company to consider how best to achieve a regional and national profile. Wider funding sources need to be sought which should include education and arts based organisations to extend this work to other vulnerable and 'hard to reach' groups.

A more structured approach needs to be sought within organisations to identify how the improved outcomes associated with sexual health, drama and communication skills for young people will continue to be built upon. This could be either as part of an ongoing programme of work or a developing culture within the organisation. More evaluation work is needed to monitor how the outcomes from this project can be built on and sustained into the medium and long-term. Given the enthusiastic reception young people gave the project, a number of young people were identified who could benefit from more ongoing drama work of this nature. Different models could be evaluated to assess the most effective ways to continue to work with this group of 'hard to reach' young people and improve their longer term outcomes particularly around sexual health.

References

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