



Young, Deadly, Free: Preliminary Evaluation Findings and Lessons Learned

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Young, Deadly, Free Project

Youth Peer Education Program

- Independent evaluation by SiREN
- Program seeks to increase awareness of STIs and BBVs, promote prevention of STIs and BBVs, and also help foster healthy relationships among Aboriginal and Torres Strait Islander young people living in remote and very remote communities .
- Target group is 16 – 29 year olds
- 30 participating communities from South Australia, Western Australia, the Northern Territory, and Queensland

The Program Sites

WA

- Beagle Bay WA
- Bidyadanga WA
- Broome WA
- Derby WA
- Carnarvon WA
- Leonora WA
- Warburton WA

NT

- Barunga NT
- Beswick NT
- Bulman NT
- Jilkimangan NT
- Katherine NT
- Mataranka NT
- Minyeri NT
- Ngukurr NT
- Urapunga NT
- Amoonguna NT
- Mutitjulu NT
- Tennant Creek NT
- Uluju (Areyonga) NT

QLD

- Atherton QLD
- Bamaga QLD
- Charleville QLD
- Cherbourg QLD
- Kuranda QLD
- Maneaba QLD
- St George QLD

SA

- Ceduna SA
- Coober Pedy SA
- Port Lincoln SA





Youth Peer Education Program

Regional Coordinators

- Implement program in each state and territory
- Responsible for recruiting and training young people as peer educators

Peer Educators

- Aged between 16 – 29 years
- Undertake 15 hours of peer educator training
- Deliver 3 peer education sessions to young people in their community
- Provided with toolkit and ongoing support from Regional Coordinator



Youth Peer Education Program Evaluation

Evaluation Objective

- Determine reach, impact, adoption, and implementation of the youth peer education program for young people

Evaluation Design

- Mixed method research design
- Survey and interviews used to collect data



Knowledge Survey

Purpose

- Assess knowledge, health service utilisation, behavioural intentions, and attitudes about STIs and BBVs

Administration

- Self-complete, paper-based survey
- Administered by the Regional Coordinators pre and post peer educator training

Preliminary Findings

Demographics of Peer Educators

- Age range 16 – 28 years, mean age 21 years
- Identify as Aboriginal and/or Torres Strait Islander
- More than half of the sample were female
- English first language and year 10 educated
- Western Australia had highest proportion of peer educators

STI and BBV Knowledge

Pre Knowledge Survey

- Generally high level of STI and BBV knowledge prior to training
- Limited knowledge for questions:
 - Gonorrhoea has no symptoms
 - Trichomonas is an infection that only affects women
 - There is a cure for HIV

Post Knowledge Survey

- Increase in proportion of correct responses, including HIV curability and trichomonas questions
- Reduced number of correct responses to gonorrhoea question



Health Service Access

Advice about STIs and BBVs

- 67% of peer educators in the pre knowledge survey and 80% in post knowledge survey sought advice from Aboriginal Medical Services/community clinics

STI and BBV Testing

- 50% of peer educators in pre survey, and 58% in post survey had been tested in the last 12 months for STIs
- Less than one-third had been tested for BBVs across both surveys

Test Location

- Aboriginal Medical Services most highly accessed for STI and BBV testing

Intentions

Pre Knowledge Survey

- 70% to 83% agreed to talk about STIs, get tested, and have / use condoms if they have sex with new partner in coming months
- 46% agreed to get a STI or BBV test in the next 3 months

Post Knowledge Survey

- 80% to 95% agreed to talk about STIs, get tested, and have / use condoms if they have sex with new partner in coming months
- 42% agreed to get a STI or BBV test in the next 3 months



Views about STIs

Pre Knowledge Survey

- 78% or more agreed that:
 - STIs could seriously affect their health
 - STI testing is a good thing
 - They were confident they could get tested for STIs when they want to
- One-third concerned about privacy/shame of STI testing

Post Knowledge Survey

- Responses consistent with the pre knowledge survey responses

Views about BBVs

Pre Knowledge Survey

- 56% were uncertain about when to get a BBV test
- More than 80% agreed a BBV test is needed if one has sex without a condom and shared injecting equipment
- 67% agreed a BBV test is needed if one has been in prison

Post Knowledge Survey

- Less than one-third were uncertain about when to get a BBV test
- 82% agreed a BBV test is needed if one has been in prison



Program Strengths and Challenges

Challenges

- Higher priority issues impacting on communities
- Working with young people from marginalised population
- Cultural sensitivities and stigmatisation of topic

Strengths

- National coordination of the program
- The role of the Regional Coordinators
- Strengths-based approach



Evaluation Reflections

Challenges

- Scale of program = logistical challenges
- Regional Coordinators tasked with data collection
- Develop processes and resources to ensure reliable collection of data and safe, secure transfer of data to SiREN

Future Considerations

- Interview Regional Coordinators
- Further data collection training with Regional Coordinators
- Consider scope and what is achievable in timeframe

Enquiries

Evaluation Enquiries

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