



Youth and Responsibility Go Hand-in-Hand: A Peer Education Program at Guangzhou University

Guangzhou University

**China Youth
Reproductive Health Project**



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Abstract: Guangzhou University is a pilot site of the China Youth Reproductive Health project. This article describes a peer education program in the university and documents the lessons learned, including the program's impact, successes, challenges, and students' reactions. This case study also provides suggestions for sustaining the program.

1. Background

In 2003, the family planning association (FPA) in Yuexiu District, Guangzhou City, selected Guangzhou University (GU) as a pilot site for the China Youth Reproductive Health (YRH) project, which provides sexual and reproductive health education to youth through life-planning skills (LPS) training.

1.1 Demographic characteristics of Guangzhou University

GU is a municipal university with 21 different colleges. The school has approximately 3,000 faculty and staff and more than 20,000 undergraduate and graduate students. About 83 percent of the university students are young people between the ages of 18 and 24. The number of GU students is growing every year due to government policies promoting higher education within China. This also means that a rising proportion of the student body will be adolescents and youth continuing their higher education.

1.2 Student reproductive health status prior to the project

GU has a large number of young people who have already reached their sexual maturity. Marriage among college students is still a controversial issue in China, largely because students do not typically work, and it is felt they cannot afford to marry. Getting married while in college is rare, so there is a relatively long period between when students reach sexual maturity and when they get married. At the same time, students are developing a strong interest in the opposite gender and becoming curious about love and sex. Many students look forward to dating and are starting romantic relationships, so issues such as how to refuse sex and negotiate safe sex have become relevant. A recent randomized survey conducted by GU faculty with 692 students revealed that 61 percent of the students, influenced by traditional Chinese values at home and school, never received sexual education while they were in high school, and, among those who did, typically only reproductive physiology was covered. Students cited magazines, newspapers, friends, and classmates as their prime sources of youth reproductive health knowledge, and these sources can be inaccurate. Of respondents, 63 percent had never discussed sexually related questions at home.

College students need to learn more about how to handle relationships and sexual impulses. For many students, masturbation and pornography are the only ways to release their sexual urges and these can stress and concern students. Some students have asked staff in the school counseling center what they should do if they constantly think about masturbation.

In 2005, the school pressed one charge of solicitation. A number of students, after learning about the charge, went to doctors asking what they should do if they have sexual urges but cannot go to a prostitute anymore. When asked if the student accused of visiting a prostitute should be dismissed from the school, 50 percent of the students said yes. One said that visiting prostitutes was normal on campus and that it was a matter of bad luck that this one student was caught. When asked, “What would you do if you found out that your classmate intended to visit a prostitute?” 60 percent said they would strongly disagree and try to stop him. When asked, “Would you consider becoming a prostitute due to family financial difficulties?” only 3 percent of female students said yes.

The survey also showed three major reproductive health concerns shared by GU students and many young people from other higher education institutes:

- **Unintended pregnancy.** The authors of this case study conducted a needs assessment in 2003 with 106 college students. It showed that approximately 3 percent were sexually active. Most of them did not know much about or use contraception, which led to occasional unintended pregnancies.
- **Abortion.** For most students, abortion is the only choice after pregnancy. Moreover, some students believe that “getting pregnant is not a big deal, since abortion can easily solve the problem.” Although the abortion rate is low on campus, abortion poses serious threats to student health, especially when they seek unregulated services to preserve anonymity. There were some individual cases of severe hemorrhage due to repeat abortion.
- **Sexually transmitted infections (STIs) and HIV/AIDS.** Students still have misconceptions about HIV/AIDS. Youth health volunteers interviewed 50 students from GU, and 45 percent of them had “shared toothbrushes, needles, syringes, and/or razors with someone else, gotten tattoos, pierced ears, acupuncture, and/or received uncertified blood products” and yet had no idea that sharing needles and syringes and receiving uncertified blood products were high-risk behaviors. The majority of students felt that HIV/AIDS is a topic of concern to college students, indicating some risk awareness, yet about 30 percent were uncertain. Some students did not know that having sexual relationships with fellow classmates could potentially expose them to HIV/AIDS. Many university students know about and welcome HIV/AIDS education programs on campus.

Overall, the needs assessment demonstrated the critical need to conduct reproductive health education among university students. GU agreed to provide high quality sex and reproductive health education to the students in order to help ensure their healthy development. The school invited expert gynecologists to conduct seminars at the Colleges of Engineering and Arts and Sciences, and this effort provided the foundation for conducting the youth reproductive health education program supported by the YRH project.

In March 2003, the Yuexiu District family planning department, the district FPA, the department of education, and five other government agencies issued the *Official Notice for Conducting the China Youth Reproductive Health Project*, which outlined the project goals, each agency's responsibilities, and implementation plans. At the same time, more than 400 people attended the project launching ceremony, during which GU was officially named as one of the pilot sites. The Yuexiu District family planning department and the district FPA granted a total of 40,000RMB (approximately US\$5,000) for this project. GU also contributed 50,000RMB (around US\$6,250) to help carry out the program activities.

2. Life-planning skills training

The project received tremendous support from college students. In September 2003, the GU College of Arts and Science appointed 51 “youth health ambassadors.” During the selection process, 127 juniors alone applied. In 2005, 61 more health education ambassadors were appointed, and more than 400 students school-wide applied for the volunteer positions. At that time, GU had five different campuses, and some students took a two-hour bus ride to the main campus just to interview for the positions. One student came directly upon his release from the hospital just for the peer educator orientation meeting, and he mentioned that “these sex and reproductive health-related questions often confuse us, and this program is a rare opportunity for us to get accurate answers.” Over two years, GU trained 117 volunteers as youth health ambassadors, responsible for conducting LPS trainings among the students. By the end of December 2005, 62 peer educator-facilitated LPS training sessions—each approximately 1.5 hours in length—were carried out, reaching 2,480 college students and 1,860 high school students and out-of-school youth.

2.1 Project goal, expected outcomes, and strategy

The project goal was to improve student reproductive health status by delaying sexual debut, reducing rates of unintended pregnancy and abortion, promoting healthy psychological and LPS, and promoting responsible life values and attitudes.

The strategy was to test a suitable implementation plan in a pilot phase. Once a sexual and reproductive health education model was tested and refined, it would be integrated into regular physiological and psychological education, thus promoting healthy student development on a wide scale.

2.2 Project phases

2.2.1 Pilot phase (May 2003–December 2004)

The rationale for piloting the training was that the youth sexual and reproductive health topic is sensitive. The project needed to determine how much information to provide to students and in what way. It also needed to anticipate and react to any negative community reactions, because although some people believe that such education can help students develop responsible attitudes, others feel it will only increase student sexual behavior. Secondly, the LPS training curriculum, *Path to Growth*, developed by the YRH project to address the needs of all types of young people, needed to be modified to meet the specific needs of university students.

GU selected the College of Arts and Sciences as the pilot site in May 2003. School faculty member Liang Hudong managed the pilot training, while Guong Yanzhen and Wu Ziwen served as student project administrators. GU's College of Arts and Sciences selected 51 students as youth health ambassadors in September 2003. After being trained by YRH project master trainers from the city and district FPAs, the 51 peer educators conducted 15 peer education sessions that reached a total of 655 young people, among them 613 college and 42 high school students. In addition to LPS training, the College of Arts and Sciences organized two seminars on sexual and reproductive health, with a total of 454 student participants, and hired a gynecologist to provide reproductive health counseling to students. Through a full year of experimenting with the reproductive health education program, there were no cases of abortion or unintended pregnancy in the 34 classes that received LPS training. On the other hand, in the 17 classes that did not receive the LPS training, there was one case of abortion and one case of unintended pregnancy that led to marriage. Students were enthusiastic about the participatory nature of the learning activities. LPS training and reproductive health services provided practical health care and education channels. The pilot project led to tremendous, positive reactions among higher education institutes in Guangzhou. On March 4, 2004, the Guangzhou FPA and Yuexiu District FPA organized a highly praised *Guangzhou University Peer Education Conference*, inviting volunteers and faculty from seven other universities and more than 60 project staff from four other project sites.

2.2.2 Expansion phase (February 2005–December 2005)

Supportive policy

Based on experience from the successful pilot phase, the project introduced LPS training to all 18 colleges in GU in February 2005. Led by the university FPA and youth league and implemented by the university Red Cross, the project appointed Liang Hudong as the technical adviser and Zhang Mingming, from the school counseling program, as the youth-friendly services adviser. The agencies listed above also issued a joint document, *Official Notice of the Implementation of the Youth Reproductive Health Project in Guangzhou University*, which outlined plans for the expansion phase and respective responsibilities.

Open recruitment of 61 additional youth health ambassadors

From over 400 volunteers, staff selected 61 new youth health ambassadors after oral presentations and interviews. They represented all 18 colleges of GU and were assigned different responsibilities, such as being facilitators, activity organizers, program evaluation staff, and topic analysts.

Training of the youth health ambassadors

In November 2003, two faculty members trained by the YRH project conducted a half-day training for the youth health ambassadors at the College of Arts and Sciences that covered participatory training methods, facilitation skills, and HIV prevention demonstration sessions. On February 18, 2004, two faculty members conducted another four-hour training session for the youth health ambassadors, focusing on research methods and how to conduct research activities. On March 27, 2004, youth health ambassadors facilitated a demonstration training session, *Learning About Sex and Responsible Decision-Making*. After the session, a project instructor provided feedback and analysis of the facilitation skills for LPS training.

In 2005, there were four trainings for peer educators:

- **In March**, a training session at the district FPA covered participatory training methods and facilitation skills. The peer educators also observed two demonstration sessions, *HIV Prevention* and *Learning About Sex and Responsible Decision-Making*, conducted by experienced facilitators.
- **In April**, a project adviser organized a problem-solving session for peer educators to discuss teaching plans and methods. Some of their main concerns were clarifying the goal of the activities, logistical problems in organizing their work, and some of the facilitation difficulties often encountered. This session, which lasted about half a day, also outlined monitoring and evaluation plans and guidelines for the evaluation group's activities.
- **In June**, the project advisers and district FPA prepared a half-day progress seminar that summarized the project activities and summer internship program (which introduced LPS training to local communities).
- **In September**, the project advisers conducted another seminar to address the most common questions or problems encountered by the facilitators. They also proposed work objectives for the new semester. These training sessions represented the "training-practice-reflection" agenda for the school volunteer program, which improved the overall qualification of the volunteers and helped ensure both high quality training and effective project expansion.

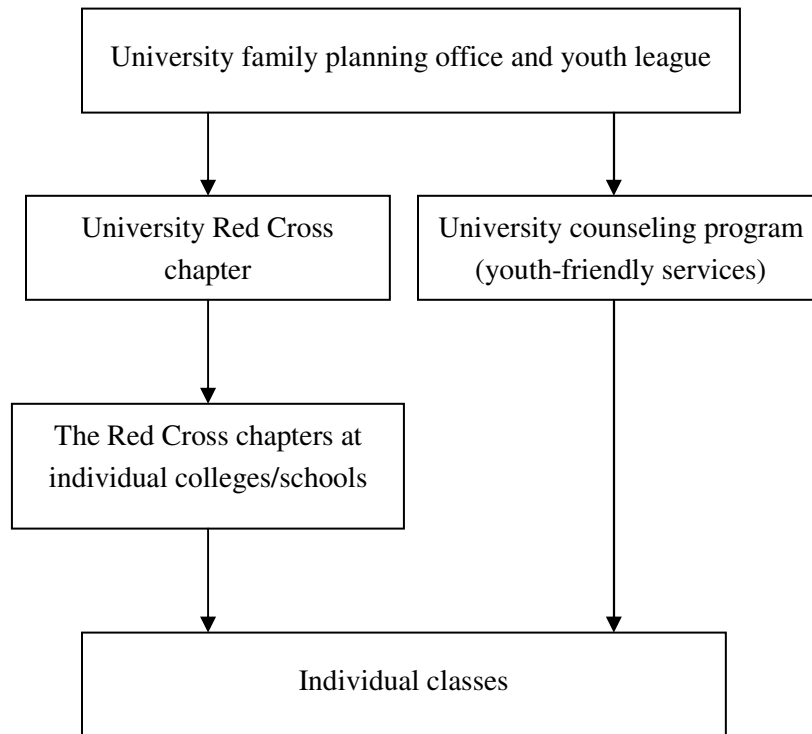
All facilitators conducted dry-run sessions in small groups of peer educators to practice facilitation skills so that they were both comfortable and well prepared before organizing any direct sessions with students. In April, peer educators presented a demonstration training session and received valuable, detailed feedback from city FPA project staff and advisors at the university. Through these practical sessions, facilitators deepened their understanding of the LPS

training materials and interactive techniques and became more confident, providing a better foundation for conducting sessions in the future.

School-wide expansion

Nearly all of the GU colleges and schools participated in the LPS training. From March to December 2005, the project was able to complete 62 LPS training sessions, each lasting 1.5 hours, that focused on learning about sex and responsible decision-making and HIV prevention. Discussions among the participating students included students' knowledge, attitudes, and intentions regarding reproductive health; ways to prevent HIV; how to establish a healthy lifestyle; and how to be responsible for themselves and others. Of two freshmen classes totaling 11,000 students, 2,480 (23 percent) participated in the LPS training.

2.3 Project structure



Led by the district FPA, the university family planning office, and the university youth league, the project was implemented by the volunteers and the school Red Cross chapter, representing a team effort.

Youth health ambassadors served in their own colleges or schools, a decision that grew from a comparison study. During the pilot phase, the College of Arts and Sciences applied two different tactics: one group of facilitators (from seven sophomore classes) conducted LPS training sessions for their own classes; in the other group, facilitators (all juniors) conducted training sessions for students from years or grades different than their own. The result showed that even though the second group of facilitators was well qualified, selected by the faculty in a highly

competitive process, and received a 99 percent satisfaction rating from the participating students, there were two unavoidable disadvantages. First, logistical arrangements for activities were more challenging, because their schedules and locations differed from their trainees. For the same reason, it was difficult for the second group of facilitators to provide follow-up services. In contrast, the facilitators from the first group could obtain feedback and learn students' needs easily, adjusting trainings as needed. The project decided to use the first model in the project expansion and to truly demonstrate the meaning of peer education.

The youth health education ambassadors did not simply conduct one training session; they adjusted and modified the training content according to observation, analysis of their fellow students' needs, the school's and project's requirements, and feedback from the students.

To institutionalize the program, more experienced ambassadors pass on the tradition to new health ambassadors selected from the freshman class. Current volunteers carry out a new cycle of facilitator training following the project objectives and procedures. This process will both pass on the tradition and ensure project sustainability.

Facilitators tailored the content of the LPS training to college students' needs. For example, one of the LPS subjects was interpersonal relationships. The GU LPS training program started a discussion on personal expectations and interpersonal relationships by analyzing the murder of a classmate in Yunnan Province. Peer educators also projected possible relationship and courting situations likely to be encountered by college students and designed *Partner Selection and Life Planning* to help participants associate dating with life planning and future success. The GU project has realized that in order for the project to be sustainable, it has to cover a variety of health and development concerns of the students.

2.3.1 Collaboration with local communities

The GU project attracted considerable positive attention from the community and local middle, vocational, and private high schools. In addition, community centers and businesses invited youth health ambassadors to conduct training programs. From September 2003 to December 2005, 1,860 out-of-school youth and middle school students received LPS training, with each session lasting about two hours and including topics such as reproductive health and contraception, HIV prevention, life expectations, and interpersonal relationships.

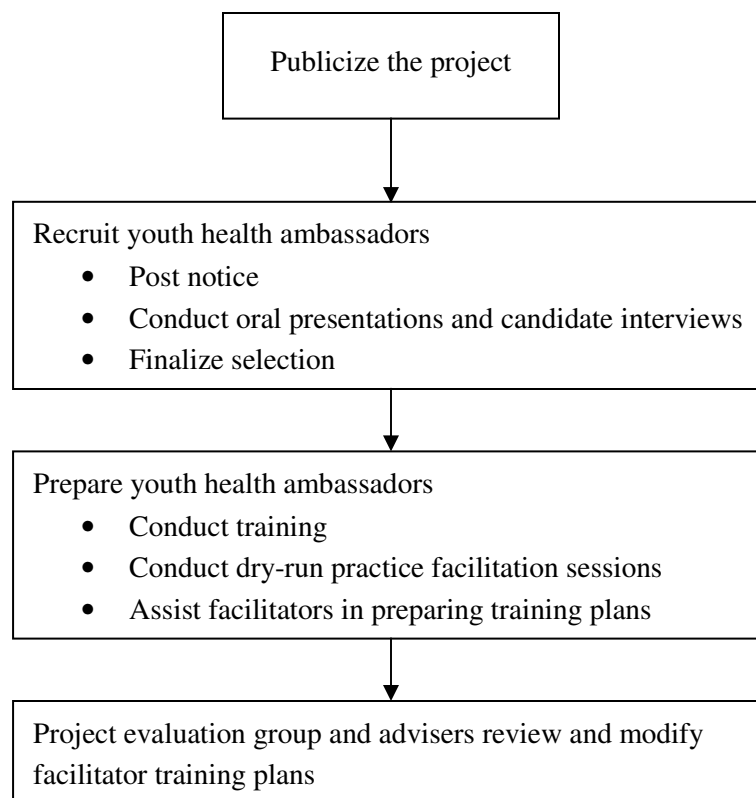
2.4 Project implementation methods

To ensure training quality, in March 2005, project staff divided the 61 youth health ambassadors into four thematic groups, as follows:

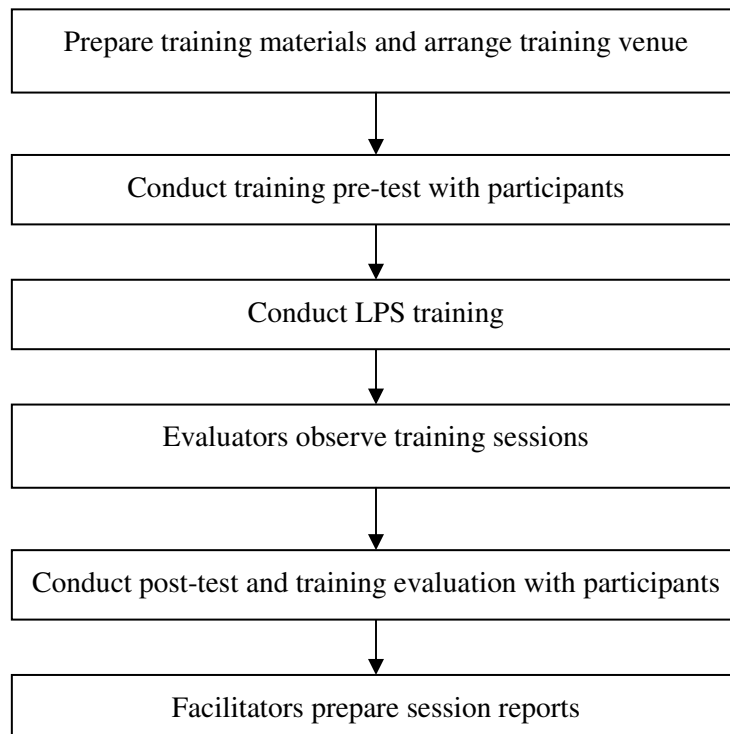
Group function	Main duties	No. of group members
Coordination group	Organize and coordinate all activities	11
Facilitation group	Conduct peer education LPS trainings	34
Monitoring and evaluation group	Collect feedback and conduct evaluations for each LPS training session	13
Research group	Develop new training materials and teaching plans and conduct research	3

GU learned from the pilot phase that project expansion should not focus on how many activities have been conducted, but rather on how the project affected the target population. The quality of every single training session should be the objective, not the number of activities conducted. To ensure the quality of LPS training, monitoring and evaluation has to be integral to the whole process. Thus, the team developed the following project expansion steps:

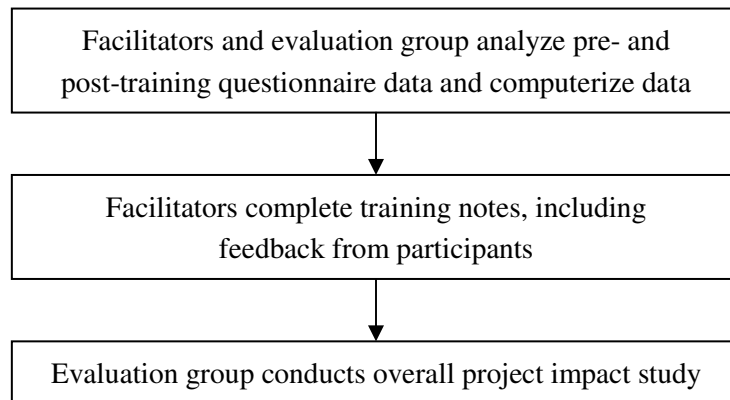
Stage one: Preparation



Stage two: Activity monitoring and evaluation



Stage three: Review, analysis, evaluation, and feedback



During the project expansion process, project advisers repeatedly reviewed and modified the training plan, within the framework of the project objectives, to continually improve and develop facilitators' skills. This method not only allowed young facilitators to show their creativity but also ensured training quality. At the same time, the student evaluation team, reflecting participants' input, also enhanced facilitator performance.

2.5 Life-planning skills training content

The LPS training provided different content to different groups, depending on their developmental needs. Freshmen just starting out in their first semester of college learned about interpersonal relationships and self-esteem. Facilitators helped students to objectively analyze themselves and the people around them, in order to ease their transition into university life. In the second semester, students covered sex and responsible decision-making and solving reproductive health problems. Students explored reasons to delay their sexual debut and how to use contraceptive methods, when needed. Students gained knowledge and skills related to the prevention of HIV and other STIs. They also participated in a number of discussion sessions related to dating, love, life planning, and marriage.

2.6 Project advocacy

LPS training sessions facilitated by peer educators are the center of sexual and reproductive health education in the university. At the same time, GU has also engaged in many advocacy activities. Peer educators conducted HIV/AIDS prevention activities around the university on World AIDS Day and during other HIV/AIDS prevention seminars and campaigns.

2.7 Serving society by providing community education programs

The project institutionalized the use of youth health education ambassadors to provide LPS training for out-of-school youth in local communities. Since 2004, two summer volunteer programs, in collaboration with the Yuexiu District FPA, have delivered LPS training at the community level. In July 2004, the College of Arts and Sciences organized the Guangzhou University Summer Volunteer Services Team, which conducted LPS training in ten communities, reaching 205 middle school students and 410 out-of-school youth. From July 11 to 15, 2005, the services team conducted a study on the current status of HIV/AIDS knowledge among out-of-school youth. During this research period, the volunteers went to ten different communities in the district and some workplaces (including the provincial transportation station, China Hotel, Guangzhou Hotel, Guangzhou Yingbinggua Hotel, Guangzhou Department Store, and the Guangzhou metro system). Most of the employees of these businesses are between the ages of 16 and 24, and since these enterprises are mainly in the entertainment and services areas, which puts youth at risk of unsafe sexual activity, HIV prevention and reproductive health and contraception were emphasized. Youth health education ambassadors conducted a total of 22 training sessions, reaching 1,058 people. Approximately 90 percent of participants welcomed the interactive teaching methods.

2.8 Youth-friendly services

Between 2003 and 2005, GU hired two gynecologists from the Guangzhou Medical University and the GU counseling center to provide youth-friendly counseling services.

May 2003–September 2005
Summary of the GU youth-friendly counseling services

Counseling problems	No. of cases	Percentage
Academic-related problems	808	25.31
Interpersonal relationships	723	22.65
Dating and courtship related	689	21.59
Self-esteem	405	12.69
Sexual psychology	243	7.61
Emotional and psychological problems	41	1.28
Reproductive health	160	5.01
Other	123	3.85
Total: all counseling cases	3,192	99.99

3. Project outcomes and achievements

3.1 Pre- and post-test knowledge

Peer educators distributed both pre- and post-training questionnaires at every activity. The following results are based on an analysis of 100 randomly selected questionnaires.

	Pre-training percentage	Post-training percentage
1. Have adequate knowledge about HIV/AIDS.	87	98
2. Able to correctly state three ways HIV is transmitted.	76	94
3. Able to identify behaviors that transmit HIV.	65	91
4. Can occasional sexual intercourse result in pregnancy?	Yes: 72	Yes: 95
5. Adequate knowledge about birth control methods.	87	94
6. Adequate knowledge about reproductive physiology.	47	91
7. If engaging in sexual behavior, intent to use sufficient birth control.	Yes: 75	Yes: 94

The results indicated that after the training, more than 90 percent of the participants correctly answered HIV/AIDS-related questions. The number of participants who agreed that “birth control should be considered as part of sexual behaviors” also increased after the training. In addition, the survey showed that self-protection intentions were strengthened among the participants. The number of students who agreed that “even occasional sexual intercourse can result in pregnancy” increased. Many students agreed that this project helped them abandon casual attitudes toward sex. This project can “help college students develop responsible attitudes in life and to be more prudent when it comes to sex.” Ultimately, these changes in knowledge and attitudes will help them adopt positive sexual behaviors.

3.2 Use of sexual and reproductive health counseling and services

Those students who participated in the training were more likely to go to youth-friendly agencies for services. For instance, a female junior student told a youth-friendly counselor, after refusing her boyfriend’s request for sex, that “because of the program, I now know that premarital sex can be a burden to women, and I want to avoid it, but I just want to know if you can tell me an appropriate way to refuse my boyfriend.” A male freshman came to the school’s youth-friendly counseling center, concerned about “sexual urges that made him very anxious, since [he didn’t] know how to control them.” He, too, was satisfied with the help received from the counselor.

Sexually active students would also come to the youth-friendly counseling service to address their questions and concerns. Girls and young women would call the counseling service, wondering if they were pregnant and what they should do.

3.3 Voices of life-planning skills training participants

Facilitators obtained immediate feedback by means of a quick evaluation form distributed after the training. From 100 randomly selected feedback forms, they found:

- 92 percent of the participants stated that “the activity was good.”
- 88 percent of the participants agreed that “facilitators were good.”

Participants indicated in the evaluation that the LPS training allowed them to discuss sensitive “sex-related” questions in a supportive environment, learn to avoid sexual harassment, protect themselves, understand the risks of premarital sex, and know more about contraceptive methods. “I knew so little about this topic. Through this program, especially after discussion with my fellow classmates, I realize that these questions are simple and of great interest to us. Keep your open and welcoming attitudes and we can learn a lot!”

3.4 Voices of the youth health ambassadors

Youth health ambassadors learned a great deal while providing the LPS training to others.

“We learned from the training and discussion that our behaviors are important to keep us healthy. All participants agree with this! Birth control, abortion, refusal skills, and HIV prevention and risks were all included in our training, with an ultimate goal to help us make careful choices and to practice healthy behaviors.”

This program has broadened my vision. As somewhat isolated college students, we have very limited understanding of the world out there. This project took us to the world. Also, some of the prejudices I had disappeared. Before, it was really impossible for me to be compassionate and care for AIDS patients. But now, I see that many people in world need our love and sympathy just to survive. I’ve also become more concerned about getting news and information about all these topics.

—Youth health ambassador

“Every facilitator feels braver and more self-confident. You wouldn’t understand if you have never facilitated a session. You are not only disseminating knowledge there, it is a bigger responsibility, which can let you face the challenges with incredible bravery.”

“Stress is a good motivator! As a facilitator, you have to learn new things constantly, thinking about the connections between different topic areas, designing new teaching plans, and modifying them again and again. It actually is very useful for improving my academic performance as well.”

“Life with skills is definitely more exhilarating! Our project uses participatory facilitation methods, which are interactive, not like everyday dull lectures. This method created a relaxed learning environment which benefits the participants. At the same time, it requires skilled facilitators with communication and interpersonal skills. It requires our facilitators to have a sense of humor and to be lively. They also have to be polite, kind, and nice. It improved the peer educators’ daily life, and their own manners.”

“Learning to communicate is a lesson. For facilitators, as the center of the training program, learning to communicate well with others is essential. Every word choice, look, or smile is part of the communication process. Due to this program, my interpersonal skills have improved a great deal. I also got to know many friends from diverse backgrounds, and can see the benefits and fun of working as a group.”

“This program has enriched our lives!”

3.5 Media coverage

GU used various mass media, such as television, newspapers, and billboards, to promote in-depth and widespread coverage of the program. *The Guangzhou Daily Information Times*, the

Guangzhou television station, and many other public media reported positively about the project, which also received positive appraisals from the general public. Articles such as *Fun Water Exchange Activity* (a lively HIV transmission exercise), *Transparent Peer Education*, and *International Youth Reproductive Health Education Project Enters Guangzhou's Higher Education Field* were published in a broad range of local newspapers. In addition, Guangzhou television's *People* program reported on the peer education summer volunteer program in local communities conducted by GU and the Yuexiu District FPA. The television program introduced activities such as the "water exchange game" to show the risks of unsafe sexual behaviors, a demonstration on how to put on a condom, and showed the documentary, *Youth Reproductive Health Education in Yuexiu District: In Collaboration with Universities*.

4. Discussion

4.1 Providing standardized and quality life-planning skills training among university students

From its experience, the project team concludes that to ensure the LPS training quality, facilitators' knowledge, attitudes, and skills are critical. For this reason, it emphasized the careful selection and training of the youth health ambassadors. Every youth health ambassador went through recruitment, training, dry-run sessions, and evaluation phases before facilitating an actual training session. After each training session, facilitators, observers, and note-takers filled out activity and observation forms and collected session evaluation forms, which helped the team make necessary modifications and improve future trainings.

Training for facilitators included reviewing the purpose and content of the LPS training curriculum, participatory methods, facilitator skills, and the opportunity to attend demonstration and dry-run sessions. At the same time, facilitators often got together to discuss project progress and plans at both the school and individual teaching levels. Project advisors conducted private sessions with facilitators to review their training plans and experiences. Facilitators were required to discuss any medical questions or content with a medical professional, ensuring the accuracy of the training content.

4.2 Providing life-planning skills training materials tailored to university students

GU tailored some of the discussion materials to their student population, with sessions such as *Why Do University Students Engage in Premarital Sexual Relationships?* and *What are Some of the Consequences of Sexual Relationships Among College Students?* to help generate in-depth thinking among students and to allow them to personalize the information. Also, modifications and improvements were made based on feedback from the participants, making the training material more appropriate. During one of the sessions, a male student said that "premarital sex will not only harm girls but also boys." The project reacted by immediately adding a new discussion question, "What risks/harms can premarital sex bring to boys?" to the training, which was welcomed by male students and promoted dynamic discussion among them.

5. Conclusion

As one of the project sites of Yuexiu District's YRH project, GU made concerted efforts to promote youth reproductive health. During the project expansion, the school received support from the Guangzhou FPA and financial and technical support from the Yuexiu District department of family planning and the Yuexiu District FPA. The China Youth Reproductive Health project was a collective success. It involved the hard work of countless adolescent health advocates and young people themselves. It was a rare opportunity for young people and adolescent workers to grow together.

These agencies remain committed to continued support of the youth health ambassadors, whose voluntarism, passion, and creativity made it possible for this program to be accepted and welcomed by college students.