

WHAT IS THIS GUIDANCE?

Plan International has been using peer-based interventions, most notably peer education, across different programmes and contexts for many years in health, education, protection, and humanitarian work. However, the delivery of these interventions varies significantly and we recognise the need to provide additional guidance to ensure that the peer-based interventions that we support are of a consistently high quality. This document provides specific and practical guidance to strengthen our programming practice by minimising all possible risks associated with the design, content and delivery of peer-based interventions on SRHR. Discussions around SRHR involve topics that may be particularly sensitive and guidance ensuring that all young people in our programmes are protected, safe and not exposed to risks that may harm them is particularly important.

What do we mean by 'do no harm' principles?

'Do no harm' is a key principle that Plan International has committed to mainstream across all projects to ensure that no child or young person is harmed or placed at risk of harm as a result of our programming or association with the organisation. In practice this means:

- We have a responsibility to care for and protect children and young people, especially those that are vulnerable, to make sure that they are not exposed to risk or harm.
- Ensuring our work does not unintentionally reinforce or exacerbate stigma of specific groups in communities or harmful social and gender norms that sustain gender and social inequality e.g. LGBTIQ+ young people, people living with HIV, pregnant and parenting young people.
- Ensuring respectful, positive and inclusive language of all young people and avoiding discriminatory messages based on gender, gender identity, sexual orientation and/or identity, disability, race or ethnicity, sexual activity or any other differences.
- Taking a sex positive, evidence-based approach to programme content and language; avoiding fear-and risk-based messages.

What are Plan International's 'do no harm' principles for peer-based interventions on SRHR?

This guidance provides practical suggestions to safeguard young people and minimise their risk to harm during different stages and components of a peer-based intervention for SRHR. It covers issues to consider for 7 areas:

- 1. Programme design
- 2. Roles and responsibilities
- 3. Selection and training
- 4. Appropriate context
- 5. Support and supervision
- 6. Safety and safeguarding
- 7. Privacy and confidentiality (including online)



This Guide also includes a summary checklist for easy reference. See page 7.

1. PROGRAMME DESIGN



• Ensure that peer-based interventions are implemented as one component of a wider programme that includes strong linkages with youth-friendly and gender responsive services to support referrals; peer-based interventions should not be implemented in isolation. Involving peers in conducting a mapping and quality assessment of a comprehensive range of support and services (e.g. family planning, SRHR, HIV, child protection and GBV) is an important first step so that they can refer programme participants and feel confident about the quality of services offered. If these services are not in place – or are poor quality – peers risk referring young people and them not receiving the necessary support and services, potentially causing more harm and undermining the credibility of the programme and peers.



• Work with health, education and social care sectors to ensure that peers are integrated appropriately within the relevant system(s) and receive the necessary professional back up and case management support. Peers cannot be expected to work in isolation but need additional support to manage their work from trained professionals, who can arrange debriefs and provide counselling, advice, guidance and support with case management.



• Allocate dedicated budget to ensure that peers receive the professional back up and financial support required to undertake their roles well. This includes budget for trained professionals to provide regular debriefs with peers to offer guidance and case management support; stipends for peers; and sufficient budget allocation to cover all financial costs incurred in their work. Budget also needs to be available to address issues identified during the problem analysis and programme design, for example investing financial resources to train teachers to deliver CSE content and methodologies is a frequently identified need.



• Conduct a risk assessment before implementing the programme to identify sensitive topics and challenging scenarios, and agree responses/actions to mitigate risks of harm. These issues should be addressed in peer training, so that peers know how to respond to difficult situations that might arise, for example if a programme participant seeks support on LGBTIQ+ issues or abortion in a country where these issues might be illegal.



 Seek consent from parents/carers and individuals taking part in the programme to ensure community support and minimise the risk of backlash and harm. Peer-based interventions on SRHR often include sensitive topics; working with the community and in particular parents/ carers to build trust, explain the programme objectives and seek consent is critical to support programme delivery and minimise community resistance and backlash.

2. ROLES AND RESPONSIBILITIES



• Ensure that responsibilities and expectations placed upon peers are realistic in terms of time and scope. Do not expose young people to risk by expecting them to deliver detailed technical content that they are not well prepared to deliver and may include sensitive topics that may result in community backlash and expose peers to risk and potential harm. Peers are not trained professionals and we need to consider carefully what is relevant, appropriate, and effective for them to cover. Peers should build upon and complement other programme interventions and the selection of appropriate peer-based interventions should be based upon the desired outcomes that the programme seeks to achieve. See *Guidance on Peer-based Interventions for SRHR* for more detailed information.



• Make a clear distinction between the role of teachers/other professionals and peers. It is not appropriate for peers to 'replicate' activities better implemented by trained professionals such as teachers or health care workers. Peer educators should not be expected to take a teacher's place and lecture students in front of a class. Asking an untrained peer to manage a large group of young people without professional support is irresponsible and using young people to fill a gap where a teacher is not available or not comfortable with the content is not peer learning. If schools lack trained and confident teachers to deliver CSE, organisations should invest in teacher training to address this gap in place of peer education. Peers who are not properly supported can find themselves giving advice that they are not fully prepared or informed to provide and may feel pressure to say things when they don't know the answers. This can lead to the dissemination of inaccurate information that undermines the confidence and trust in peers and may have other harmful consequences.



• Support peers to be positive role models, recognise the power that they may hold in their relationships with programme participants and ensure that they use their power responsibly. Peers have power and status and can hold access to resources and information. Ensure that peers do not use this power inappropriately which may have harmful consequences, for example by trying to impose their point of view on others or bargaining with resources.

3. SELECTION AND TRAINING



• Support and invest in rigorous, transparent processes to recruit peers, including making reference and safeguarding checks prior to selection. This includes interviewing peers to discuss their motivations for this work and to explore their attitudes towards key issues such as gender, sexuality, disability and/or race. Ensure that this is a merit-based process and that feedback is provided to those who are not successful to encourage and support their progression.



 Recruit peers with different backgrounds and experiences to reach a broader, more diverse range of young people. Do not discriminate in the selection of peers due to gender, sexual orientation, race, disability, parenting status and/or other differences.



• Provide in-depth initial training and follow up trainings to peers. Comprehensive training of 3-5 days is a pre-requisite to ensure that peers are well prepared to undertake their role to the best of their ability, deliver accurate messages, maintain professional boundaries and follow safety and safeguarding guidance. In-depth training covers roles and responsibilities; thematic content; explores values and attitudes; discusses personal boundaries, support and supervision; safety and safeguarding; and covers referral and support systems. It should be followed up with regular 'refresher' training to continue to build peers' knowledge and competencies and to address specific issues that they identify in their work or are raised through supervision. A minimum of 2 days 'refresher' training is recommended each year and can be delivered as consolidated training or as two one-day trainings. Focused training is also complemented by ongoing professional supervision and support.

4. APPROPRIATE CONTENT



• Avoid detailed technical or clinical content – such as delivering sessions on the symptoms of sexually transmitted infections (STIs) or discussions on sexual abuse and exploitation – which is not appropriate for peers to deliver. This places unrealistic expectations on young people and can result in inaccurate information or harmful messages being delivered. Peers do not have to be experts on specific topics but should be able to encourage and facilitate discussions with young people and refer them to specialist services. Content focused on young people's rights and consent, and activities to help young people think about their attitudes and values around sex and relationships; explore and assess risk; and develop skills that support decision making, assertiveness and self-esteem are more appropriate for peers to deliver.



• Ensure that the SRHR content of peer manuals and resources aligns with Plan International's quality standards on CSE. National curricula for peer interventions that contradict organisational values and positions and include inaccurate and/or harmful messages – for example including the promotion of abstinence-based messages or discriminatory messages about homosexuality – should not be used. Content should be sex positive, relevant to young people's lives, inclusive and avoid fear, blame, and/or discriminatory messages.



• Ensure that content is tailored to different age groups. Content that is appropriate for 10-14 year olds should be different to discussions tailored to older adolescents. Similarly, content developed for older adolescents may present topics or scenarios in a way that may cause discomfort or distress to younger children.



Provide peers with resources that are clear and simple to use to support them in their
work, including flashcards, pictures with questions, simple sessions and creative activities and/
or games. Ensuring that peers have access to appropriate and trusted resources to support
their work is important to make sure that the information they deliver is accurate and to get the
best out of peers within SRHR programmes.

5. SUPPORT AND SUPERVISION



• Ensure that peers maintain appropriate professional boundaries in their discussions and support to other young people. Peers are not expected to have all the answers or to 'solve' all the issues; clients may have an over-dependence on peers that results in peers trying to fulfil requests that are inappropriate and makes them vulnerable to burn out. It is critical that peers understand the limitations of the support that they are able to provide and can refer young people to other more specialised services where necessary. This is an important component of any peer-based training.



• Provide financial support to peers to cover all costs that they incur in their work. Do not expect peers to use their own money to attend sessions or trainings. Take care not to exploit their volunteer status; aim to provide stipends to recognise their work, which may be difficult for peers to sustain without payment and cover out of pocket expenses such as transport, phone data and/or commodities required by clients.



Recognise that peers have similar challenges, vulnerabilities, risks and support needs as the young people they reach and that Plan International has a 'duty of care' to peers to respond to these needs. Peers share circumstance and experiences with the programme participants they work with and may require their own support for health issues, treatment, appointments and counselling.



• Provide ongoing professional support and supervision to peers. This should take the form of regular sessions so that peers have the chance to share concerns, discuss difficult scenarios and identify appropriate support and solutions to improve their practice. The frequency of the support required will depend upon the intervention, for example if peers are providing intensive support on a daily basis, professional supervision and support sessions should be offered weekly, whereas peers delivering weekly sessions require less frequent support (e.g. monthly).



• Ensure that peer supervisors (e.g. health care workers, teachers) provide feedback and support to peers in ways that uphold Plan International's safeguarding policy, for example respecting confidentiality and avoiding discrimination and punishment. Monitoring of peers' practice and supervision and support is important to continually improve the content and delivery of peer-based interventions and to reduce inaccurate or misleading information and risk, as well as to monitor the wellbeing of peers.

6. SAFETY AND SAFEGUARDING



• Ensuring peers' safety – and the safety of programme participants – is paramount at all times. Do not ask peers to deliver content that may be very sensitive within a particular context, for example in restrictive environments where discussions around issues such as homosexuality or abortion may have negative or harmful consequences. Guidance to peers about how to respond to challenging situations (for example, if a programme participant asks about abortion services in a country where this is illegal) is an important component of training, and is informed by the risk assessment conducted.



Provide a safe space for peers to carry out their activities without harassment and/or risk. Put in place additional safety mechanisms to ensure peers' welfare, for example working in pairs where appropriate and establishing a 'check-in' system when peers return from outreach. Consider carefully the use of branding on clothing and bags and whether this could identify individuals and put them at greater risk, such as inadvertent HIV disclosure. Also consider the time and place for work carried out by peers e.g. reaching some groups requires night work or visiting high risk areas; appropriate safeguarding procedures must be in place.



• Ensure clear and documented guidance for peers on reporting and responding to safeguarding violations in accordance with Plan International's Safeguarding Manual.

This is a key part of any peer training and covers, for example, use of language, boundaries on personal relationships, and agreed mechanisms to report safeguarding concerns.

7. PRIVACY AND CONFIDENTIALITY (INCLUDING ONLINE)



Implement additional safety mechanisms to ensure the privacy and confidentiality of peers and young people online. The Covid-19 pandemic has meant that some face-to-face sessions are now being delivered online, requiring additional focus to ensure the safety and safeguarding of young people. This might be through invite- only groups and meetings, or the use of passwords. It might be through people using nicknames for discussions and questions so that they can't be identified. This is especially important for young people sharing phones or computers with others who might see their conversations.



Ensure that peers are fully prepared around safeguarding for online interactions. All participants need to be provided with guidance on working together online, covering issues that affect group learning and interaction such as respect, use of language, guidance on not sharing certain types of personal information during 1:1 interactions online, and respecting confidentiality.



SUMMARY CHECKLIST

The following questions have been developed as a checklist before implementing peer-based interventions and/or when reviewing a programme. The questions are not exhaustive and further considerations might be required depending on the context.



Does your programme include components to ensure a **supportive environment** for the successful delivery of peerbased interventions? Is there community support for the programme? Have relevant permissions and consent been sought? Is thepeer-based interventions being delivered as part of a broader package of interventions that includes access and referrals to adolescent and youth-friendly and gender responsive SRHR services?



Are the **roles and responsibilities** assigned to peers in the programme appropriate? Are peers fully prepared and supported? Are they working alongside, rather than replacing, other professionals? A training and ongoing mentoring, supervision and support systems in place to support peers? Do peers have access to financial support to cover their expenses and/or stipends?



Is the work of peers supported by **organisational back-up and services**? Do peers receive professional supervision and guidance to manage case load? Has a mapping been conducted in collaboration with young people to identify local SRHR and other relevant services (e.g. GBV and child protection services)? Have effective linkages and referral systems been established?



Is the **content** that peers are delivering appropriate and accurate? Are they delivering lots of detailed technical content? Are peers engaging young people in participatory discussions that explore young people's rights, assess risk and develop communication and assertiveness skills? Do they have access to appropriate resources to support them to deliver their work? Are you engaging peers in planning for monitoring and supporting them in collecting insights, information and feedback on the process (activities we organise, strategies we apply, support we provide)? Are you supporting peers in documenting any learning?



Are **safety and safeguarding** processes in place? Do peers have a safe space to carry out their work and/or have additional safety measures been implemented to reduce the likelihood of harassment and harm? Have peers received training on safeguarding? Do they have access to documented guidance on reporting and responding to safeguarding violations in accordance with Plan International's organisational guidance? Have you considered ways to ensure programme participants' safety online?



This material is financed by the Ministry for Foreign Affairs of Finland (MFA). MFA Finland does not necessarily share the opinions expressed herein. The sole responsibility for content belongs to Plan International.



First published 2021

Text © Plan International 2020. All rights reserved.

No part of this publication may be reproduced or transmitted in any form or by any means, electronic, mechanical, photocopying or otherwise, without the prior permission of Plan International.

Plan International (2021). Peer-based interventions on SRHR: 'Do no harm' Guidance. United Kingdom: Plan International.