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ORIGINAL ARTICLE

“I’m in their shoes”: Experiences of peer educators in sexuality and relationship education[†]

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Abstract

Background Sexuality and relationship education for adults with an intellectual disability has failed to include them in roles other than as learners. This paper reports findings from a study of the experiences of peer educators with an intellectual disability who co-facilitated a respectful relationships education program.

Method Qualitative data were collected about the experiences of 16 peer educators through in-depth interviews and observations of their work in delivering the program. These data were thematically analysed.

Findings Peer educators reported that peer education gave them a sense of empowerment, positioned them as credible sources of information about relationships, enabled them to help others, and gave them an opportunity to learn new knowledge about respectful relationships, community resources and supports, and new skills.

Conclusions This study presents an alternative approach to relationship education that involves people with an intellectual disability as peer educators and that benefits these people.

Keywords: *sexuality, relationships, abuse prevention, intellectual disability*

Background

Sexuality and relationship education for adults with an intellectual disability has had a narrow focus and has failed to include people with an intellectual disability in roles other than as learners. There has been little progress in developing programs that recognise the rights of people with an intellectual disability to make choices and determine for themselves how they will have relationships and be sexual. Attitudes held by family, carers, and the broader community about sexuality and relationships for people with an intellectual disability have influenced both the experiences they might have and the responses and support they may receive (Cuskelly & Bryde, 2004; Meaney-Tavares & Gavidia-Payne, 2012; Pownal, Jahoda, & Hastings, 2012; Young, Gore, & McCarthy, 2012). Families or other carers who view people with an intellectual disability as inherently vulnerable and needing protection can shelter them from opportunities to learn about sexual health or from experiencing

relationships (Parley, 2011). Often these responses are based on the assumption that people with an intellectual disability are not sexual, do not have intimate relationships and therefore do not need information or education about these aspects of adult life (Hollomotz & The Speakup Committee, 2008; Johnson, Hillier, Harrison, & Frawley, 2001).

Many studies point out that people with an intellectual disability, in particular women, are more likely to experience all forms of abuse (Hollomotz, 2011; Horner-Johnson & Drum, 2006) and have limited awareness of contraception and other areas of reproductive health (McCarthy, 2009). Prevalence of sexual offending is high for men with an intellectual disability (Hayes, 1991), and both men and women have low levels of sexual health awareness and knowledge (Simpson, Lafferty, & McConkey, 2006). Access to information and education programs is a key issue for people with an intellectual disability as few mainstream programs accommodate their needs and there is an overall lack of specialist

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programs for them (Swango-Wilson, 2010). This lack of access limits opportunities for people to develop knowledge and skills that they can apply to their own lives, limiting experiences that can lead to enjoyable and safe relationships (Healy, Howe, Humphreys, Jennings, & Julian, 2008). Although research, policy, and programs continue to identify these issues, there has been little positive change in any of these areas over the past decade.

Models and programs

Predominantly, relationship and sexuality education programs developed for people with an intellectual disability have reflected what Chivers and Mathieson (2000) refer to as a biological discourse. Such programs focus on sexual hygiene, sexual behaviour, in particular male sexual behaviour, and contraception and menstrual management for women. They concentrate on teaching rules and some skills. Most commonly, didactic teaching is used in these programs by professional educators who follow a set curriculum. Overall, research has indicated that this approach has limited quality outcomes for people with an intellectual disability and clearly positions them as passive learners and professionals as the experts (Gougen, 2009). Whereas some programs have been developed using different approaches (McCarthy & Thompson, 1992) and others have used new technology, including interactive programs on DVDs (see, for example, Chance to Choose; Dixon, 2012) and online information, there has been little change to program content or aims.

Education of this nature aims to change the individual, increasing their knowledge, developing their skills, and changing their behaviours. Swango-Wilson (2010) notes, "Intervening at only one level will fail to meet the participant's needs, as support in one level may be met with discrimination or opposition in another ..." (p. 160). Also, such a focus ignores the broader issues that need to be considered to ensure people can apply what they learn to their daily lives. Gougen (2009) has argued that this approach is neither effective nor meaningful to people with an intellectual disability, and what is needed is "... comprehensive sexuality education [that is] systematic, concrete, peer-taught and ... inclusive" (p. 283). She suggests the need for a broader systems approach and recommends that sexuality and relationship programs be developed with input from a broad range of professionals, people with an intellectual disability, and policy-makers. Sobsey's work on the abuse of people with an intellectual disability in the mid-1990s (Sobsey, 1994), and later that of Fitzsimons (2009) and Hollomotz (2011), used such an ecological

systems model to understand abuse and to develop prevention programs. However, there are no examples of this approach being used in broader sexuality and relationship education programs for people with an intellectual disability.

Peer education

Peer education, or involving the target group of the education in the delivery of programs, is widely used in health education and is promoted by the United Nations Population Fund as one action to address sexual and reproductive health (United Nations Population Fund, n.d.). Arguments for using peer education suggest that it is beneficial particularly for peer educators for whom it is empowering. Such research also suggests additional benefits are that it can be used to educate hard-to-reach groups, is cost effective, peers are credible sources of information, peer educators act as positive role models, and it uses already established means of sharing advice and information (Turner & Shepherd, 1999). However, sexuality and relationship education for people with an intellectual disability has seldom included people with an intellectual disability as peer educators or in the development of programs (Barger, Wacker, Macy, & Parish, 2009), and little is known about its effectiveness with this group (Black & Roberts, 2009). Peer education does reflect the central ethos of self-advocacy – "Nothing about us without us" – which suggests its applicability to programs for people with an intellectual disability. Self-advocacy groups conduct training for self-advocates on a number of issues, including knowing and asserting their rights, speaking up for themselves, and on particular issues like sexuality and relationships (see CHANGE UK; <http://www.changepeople.org/>), although this is not referred to as peer education and little systematic evaluation of this work has occurred. Programs that have used peer education do report success (Farnan & Gray, 1994; O'Shea, 1997), but this is in the main anecdotal (Women's Health Goulburn Valley North East, 2004).

Aims

This paper has two aims. First, to describe the Living Safer Sexual Lives: Respectful Relationships (LSSL: RR) abuse prevention model and summarise findings from an evaluation of it, with a particular focus on stakeholder's views about the involvement of people with an intellectual disability as peer educators. A more detailed exposition of the evaluation method and evaluation findings is available in Frawley, Barrett, and Dyson (2012). The second aim of the paper is to present findings from a study of the respectful

relationships education program (which was one component of the LSSL: RR model) that examined the perspectives of peer educators about their involvement in the program. The study explored the experiences of the peer educators, seeking to understand what the program had meant for them personally and their perceived contribution to it.

Methods

Living Safer Sexual Lives: Respectful Relationships

LSSL: RR is an innovative ecological model of abuse prevention that was implemented in five sites across Australia between 2009 and 2011. Local organising groups established in each site recruited peer educators and local professionals as co-facilitators, acted as a bridge to other local prevention initiatives and organised the delivery of the respectful relationships education program to people with an intellectual disability. The design of the model was based on knowledge from mainstream health promotion and violence and abuse prevention (VicHealth, 2007) and the more specific work of Dick Sobsey (1994), Nancy Fitzsimons (2009), and Andrea Hollomotz (2011) in ecological models for understanding, responding to and preventing abuse for people with an intellectual disability. The model has four components: a respectful relationships education program that is co-facilitated by peer educators and sexuality and relationship professionals; a learning partner approach; sector development; and research and evaluation. These are illustrated in Figure 1 and described briefly in the following sections.

Respectful relationships education program

The respectful relationships education program drew directly on training materials and the experiential approach of the earlier program Living Safer Sexual

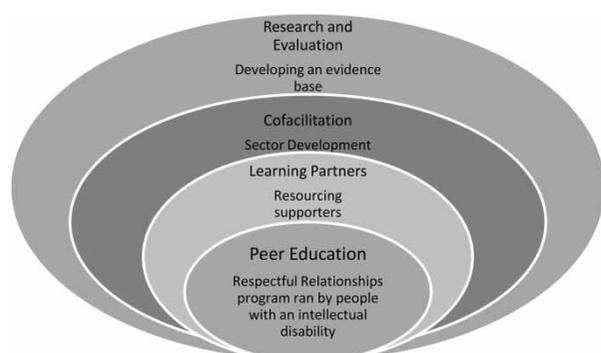


Figure 1. The Living Safer Sexual Lives: Respectful Relationships model (Frawley, Slattery, Stokoe, Houghton, & O'Shea, 2010).

Lives (LSSL), a sexuality and relationship education and training program developed in Victoria, Australia, in the early 2000s (Frawley, Johnson, Hillier, & Harrison, 2003). The stories of 25 people with an intellectual disability, developed in collaboration with researchers, had formed the basis of LSSL training programs for staff, families, and people with an intellectual disability (Frawley et al., 2003). Departing from the traditional structure and content of sexuality and relationship programs, LSSL was recognised as both innovative and promising (Barger et al., 2009). In particular, Barger and her colleagues (2009) suggested that programs such as this were needed to move beyond protective education to a broader relationships focus and to enable people with an intellectual disability to be involved in the planning and delivery of sexual assault prevention programs. Although it had been planned to include peer education in the earlier LSSL program, funding shortages had precluded this. The new LSSL: RR program provided an opportunity to incorporate peer education into a sexuality and relationship education program for people with an intellectual disability.

The respectful relationships education program was designed to be co-facilitated by peer educators with an intellectual disability and professionals from the community and disability sector. It was developed by the project team, which included two members with an intellectual disability. The program comprised four sessions: (1) Talking about sex and relationships, (2) Having rights and being safe, (3) Respectful relationships, and (4) Men and respectful relationships (Frawley, Slattery, Stokoe, Houghton, & O'Shea, 2011c). Each session had a set of key messages and used one of the stories from the LSSL program (Frawley et al., 2003) as the catalyst for peer educators and co-facilitators to stimulate discussion about the focal topic. For example, Angela's story, *I like to go on trains*, highlights issues of personal safety and abuse and is used in the session on having rights and being safe. Each session also includes a "self-care" activity, a debrief, and evaluation activity. Three sessions include additional activities including one on rights, one on intimacy in relationships, and one specifically about abuse prevention. A participant handbook includes each of the stories used in the sessions, its key messages, and supplementary information about services and supports (Frawley, Slattery, Stokoe, Houghton, & O'Shea, 2011b).

Learning partners

This component of the model encouraged participants in the education program to enlist a learning

partner who could help them make sense of what they were learning and support their developing ideas, learning, and development. At the same time, by nominating a learning partner, someone from their support network would gain knowledge about abuse prevention and how people with an intellectual disability can have respectful relationships. The learning partner did not normally attend the education program with the person; however, in some instances they did. A “Learning Partner” book (Frawley, Slatery, Stokoe, Houghton, & O’Shea, 2011a) provided detailed information about the program structure and content, and a list of resources and support agencies. This component acknowledged that people do not function independently of a range of supports and are influenced by those around them. For people with intellectual disability, support networks often include family members, paid and unpaid carers, support workers, advocates, and friends who can significantly influence the way they engage in the range of opportunities to be self-determining, to learn, and to participate.

Sector development

This component recruited and trained co-facilitators from disability and mainstream sexuality and relationship services to deliver the respectful relationships education program. It aimed to build the capacity of these community-based services to include people with an intellectual disability, acknowledge the issues of violence and abuse in their lives, and to address these. Co-facilitators were local to each site and trained in a train-the-trainer program alongside peer educators. The long-term intention was to build a network of trainers in each community who could continue to run the education program and promote the LSSL: RR model in their communities. The rationale for this component stemmed from the historic “silo” approach, whereby each sector has worked in isolation, and the lack of appropriate training for mainstream professionals in delivery of sexuality and relationship programs for people with an intellectual disability (Chivers & Mathieson, 2000). Co-facilitators were not interviewed in the research about their role; however, anecdotally they reported throughout the program that this approach, although new to them, was fulfilling their responsibility to work with this particular marginalised group. Also, field notes from observations of the programs highlighted that while some struggled with sharing the facilitating role with peer educators in the beginning, they overcame this with more experience and because the peer educators began to take the lead.

Research and evaluation

This component included a formative evaluation of the model to ensure continuous feedback informed its implementation, an examination of the use of peer education, and a strong commitment to disseminate the findings as a resource for policy advocacy and to inform future program development. The inclusion of this research and evaluation component recognised the dearth of research about violence and abuse prevention, or sexuality and relationship programs for people with an intellectual disability, and the prevalent “do and hope” approach (Barger et al., 2009).

Summary of findings from the LSSL: RR model evaluation

The evaluation was undertaken by the Australian Research Centre in Sex, Health and Society at La Trobe University (Frawley et al., 2012). It was guided by an “empowerment evaluation” framework (Fetterman, 2001) and investigated program processes and outcomes from the perspectives of its key stakeholders. Three core enablers of implementation were identified: (1) cross-sector engagement of professionals from mainstream community services and disability services who came together to plan, promote, and implement the model, (2) belief in the capacity of people with an intellectual disability to be involved and the importance of their involvement in program planning and as educators, and (3) an understanding of the prevention framework that underpinned the model. “Gatekeeping” by professionals from mainstream community health, sexual health, and disability services was found to have initially undermined the implementation of the program in some sites; in one site, people with an intellectual disability were denied the opportunity to participate.

The evaluation did not report on the outcomes of the respectful relationships education program for the adults who participated. However, anecdotally, some participants reported that it had enabled them to reflect on their own relationship experiences and assisted them to understand some of the key ideas about having respectful relationships. Outcomes of the education program will be studied in a forthcoming research project (Frawley & Bigby, 2011).

Stakeholder views of peer education

People with an intellectual disability self-nominated to be peer educators; there were no set criteria apart from their understanding that the program

was for people with an intellectual disability and being a peer educator meant you would have things in common with those you were educating. In this case, this meant that a peer educator needed to see themselves as a person with an intellectual disability. There were no expectations they would have to “prove” they had respectful relationship experiences to become a peer educator, just as it would be very uncommon for a professional relationship educator to be asked if they were in a respectful relationship before being employed to run relationship programs. The evaluation found LSSL: RR stakeholders held mixed feelings about the peer education component of the respectful relationships education program. Early in its development some members of the local organising groups struggled with the idea that a person with an intellectual disability could safely and competently take on the role of peer educator:

Peer education was considered an unrealistic expectation because they [disability sector] believed people with intellectual disability were not in respectful relationships, did not have the cognitive capacity to act as educators, and because organisations did not have the capacity to support people as peer educators. (Frawley et al., 2012, p. 31)

Central to this belief was a view that it was necessary for peer educators to be in respectful relationships. For example, a community health worker reflected:

... They need to be people that are role modelling healthy relationships. Because it's difficult to be a peer educator about something that you are really not doing so well [yourself]. If you are not in respectful relationships and if you don't have experience of respectful relationships, is that something that you can do? ... The people that work in the disability sector know if you are in a respectful relationship or not. I think if we have got people that are facilitating a program and it's about respectful relationships you do need to be role modelling that to some extent ... I think that is a reasonable expectation. (Frawley et al., 2012, p. 31).

A disability advocate said:

So many of them have a history of abuse or other previous bad experiences, and most of them won't have had counselling. ... So what it seems to us for someone to be able to do this project and participate properly and do the training to become a peer mentor, they need to have had sexual experiences, but they also need to have some good ones. ... If they have had abuse or other bad experiences, they need to be able to get past that so that they can move on and be able to explain [to] and mentor other people. (Frawley et al., 2012, p. 31)

Some stakeholders were cynical or doubtful about the capacity of people with an intellectual disability to be peer educators, thinking it might lead to negative emotional outcomes and so might be better avoided. Others highlighted the opportunities presented by peer education. For example, one local planning group member had reflected:

The thing that disappointed me about the peer educator ... engagement was that I don't think many people saw it as the opportunity that it was. That for some people [with an intellectual disability] it was an opportunity to have some free training to perhaps do something different ... That they would essentially be employed or paid to do this work and have the experience of going around and talking to other people. ... I can't believe that people aren't seeing this as the opportunity that it is. (Frawley et al., 2012, p. 34)

As this quote suggests, some stakeholders saw the opportunity to be a peer educator as a chance to hone skills and broaden experience as well as being able to change the way people with an intellectual disability were perceived by the community. One project worker from a government department noted, for example:

Peer education is really about their ability to develop leadership skills and communication skills and they will learn in the program ... how to manage their own personal stories. ... I think that staff are worried that peer educators are not going to be able to get up and help other people (Frawley et al., 2012, p. 32)

Others needed to see peer educators in action before they accepted people with an intellectual disability could have such skills and could facilitate a program. One government worker noted:

Well, I'll tell you what. When [the program manager] came with a [a peer educator] ... just hearing [the peer educator] talk about her work, was sufficient for me to say what a benefit it would have been for [her]. ... She spoke about her work and how important her work is for other people ... to get other women empowered to stand up for themselves and [this is] what is achieved, not all the time, but most of the time. But her relaying of that ... was so good for her was what shone for me. You know, she told us that she now has the ability and the skills ... to do this. So I thought that was excellent ... unbelievable. (Frawley et al., 2012, p. 35)

The views of the peer educators themselves about their experiences of being involved in the program were not canvassed in the main evaluation but in a separate research project, which is reported in the following sections.

Peer educators' experiences

Aims and method. The study aimed to explore the experiences of the people with an intellectual disability who acted as peer educators and co-facilitated the respectful relationships education program. The study was approved by the La Trobe University Human Research Ethics Committee and all participants gave informed consent. Sixteen of the 23 people with an intellectual disability who had completed the train-the-trainer peer education workshop agreed to participate. They were mainly young adults aged in their early to late 20s; however, the oldest was in his late 40s. They were predominantly women (13), reflecting the fact that only four men were trained as peer educators across the five sites.

Participants were from three program sites in Victoria and one site in Tasmania. They all participated in a 4-day train-the-trainer workshop with the co-facilitators of the program who were staff from local mainstream or disability community services with an interest in, or responsibility for, sexuality and relationship education, or violence and abuse prevention. The co-facilitators and peer educators did not know each other prior to becoming involved, and the training aimed to build collaborative relationships between them, as well as to develop their knowledge and skills for delivering the program.

Two semistructured in-depth interviews were conducted with each peer educator by either the research assistant or the first author, once at the completion of peer education training, and again after they had delivered or participated in the education program. A life review method developed by Booth and Booth (1996) was used to guide the interviews, which aimed to enable the interviewees to reflect on their experiences of being a peer educator, what it had meant for them, and the benefits they perceived, both for themselves and the program participants.

Unstructured observations of the peer educators' participation in train-the-trainer workshops (five sites) and delivery of the education program (three sites) were also conducted. Field notes were written after each observation. The observations were completed by a research assistant and the first author. All interviews were digitally recorded and then transcribed; the field notes were written up by the researcher who undertook the observations. All data was entered into NVivo and analysed using a constant comparative approach (Glaser, 1965) by the two researchers who had gathered the data. Categories were developed and compared by the researchers. This iterative approach, drawing on a grounded theory approach to analysis (Charmaz,

2006), led to the development of four themes that described the expectations and experiences of peer educators. In reporting this research, pseudonyms have been used to protect the anonymity of the peer educators.

Findings

Peer educators talked about personal achievement and a sense of empowerment from their involvement, as well as having a role in empowering others and improving the credibility of the program. Four themes emerged from the way they talked about their experiences as peer educators: (1) helping others, (2) being seen as and feeling like credible sources of knowledge and experiences, (3) being role models for people who attended the education program and for people with an intellectual disability more broadly, and (4) developing their own knowledge and skills.

Helping others

Peer educators reported that their motivation to become a peer educator was primarily benevolent: to help other people with an intellectual disability so they could have good relationship experiences. They talked about how valuable it could be for the people with an intellectual disability in the education program to have someone who understood them, who shared some of their experiences, and who could talk to them about relationships. For example, in reply to questions about what they hoped to get out of being a peer educator, they said:

... it'd be good to help other people with their – um, young ladies with disabilities, to stand up for their rights and stuff like that... So if they needed someone to talk to, they can come talk to me or come and say, "Hey, let's catch up, you know, I need to talk." Which a couple of them do. So it's really good to know them and, um, I guess to know that if they need to talk we're always there. You know, our door's always open. (Annie)

... to make life better for people. ... I don't – I guess if we can help, or if I can help people, um, in their situations, um, it's good for them. You know. Yes it brings back bad memories but, um, if you sort of if you've gone through it and you know what it's like, you can help them. And that's it from my point of view, but yeah. (Barb)

These reflections suggest that through their own experiences they had become empowered and hoped that, through peer education, they would be

able to empower others. For some peer educators, self-advocacy had been an important foundation for learning to stand up for themselves:

[Being a self-advocate] It means to stand up for your own rights and stuff, and believe in yourself, and yeah. [Interviewer: So you're a self-advocate?] Yeah. (Esther)

Others reflected their experiences of standing up for themselves because there had been nobody else to help them:

Um, I reckon some women are too scared to sit up for themselves. ... I was, but now I've learnt not to do that anymore. I used to bottle stuff up inside and I got really sick. ... Yeah. And I had two breakdowns too ... [I learned] ... how to get over those hurdles and move on and yeah ... and [now] also help other people to do that. Cool. Yeah. (Cathy)

Being a peer educator enabled people to put these self-advocacy skills into practice, and for others, the peer education experience honed these skills.

Credibility through experiences

Peer educators talked about the way program participants made links between their own experiences, those of the peer educators, and the stories used in the program:

Like talking, like when we show stories to them [program participants] they think they're like Molly's story and that ... And they talk about – when we talk about Molly's story they talk something about really about their own self. (Delia)

Some peer educators felt they were more approachable than professionals and could more easily relate to participants because of their own disability and personal experiences:

They can relate. That's what I was trying to think of earlier ... Like, I go to [other peer educator], um, as a person with a disability to a person with a disability ... for help. ... I have trouble dealing with [support worker] because she doesn't have a disability and I feel uncomfortable. I'd prefer to talk to [peer educator] because I know she's got a disability and I know she knows where I'm coming from ... You, you get so much out of it. It's *so* worth it. ... There's no better way to get a message across from someone that you can relate to. And that's just putting it blunt. If you can relate to someone, you're gonna listen to them. There you go. Put it straight ... [laughs] (Annie)

Um, I got some experience in it. [Interviewer: In what?] ... In that kind of stuff. Like just – or sexual assault? Yeah. In that area? (Delia)

[I am] recently separated, about three months ago now ... got two children. I got a 18 year son called [X] and a almost like 6 and a half, almost 17-year-old daughter called [Y]. And we all live in [names town] except my ex is moving to [another state]. (Esther)

Got my husband ... He can be a pain in the backside now and then [laughs]. He has his days now and then ... But he's usually busy working ... He works there [supported employment] five days a week ... So I don't have him near me all the time. (Delia)

Some peer educators used self-disclosure during education sessions as a means to facilitate the participants' understanding of certain themes or key messages. In doing this, they acknowledged the similarities between their own experiences and those portrayed in the stories:

Well, some of my story could affect, like, go good with their stories as well sometimes ... Like, like certain bits in my story could help them. They might, they might think it – they're like what I've been through. ... Like if, like some, like if it's a woman it, they might think, like after they've had a kid or something, they might think how I feel, how they've, how I lost my daughter and I can only see her monthlies ... (Delia)

The closeness of their own experiences to the stories had strengthened the resolve of peer educators to run the program. Although the program evaluation found “gatekeepers” were concerned about the capacity of peer educators to manage self-disclosure (Frawley et al., 2012), their comments suggested that it was a strategy they were comfortable using. One peer educator reflected on the injustice she recognised as similar to her own experiences when she heard the story of Hannah and Kevin who were not allowed privacy in their own home:

They ripped it [private sign] down on them. Like these [people with an intellectual disability] are grown adults, consenting adults. They don't need to be treated like they're children. And yeah, that really got on my nerves. I had to go home and cool down after hearing that. Yeah, I was quite grrr. (Annie)

The importance of managing the very complex space between disclosure and protection of peer educators' own vulnerability was discussed in the train-the-trainer program. One peer educator reflected very clearly on the way she had dealt with this issue,

after reading Molly's story about her choice to have children. She had told the group of trainee peer educators that her own daughter had been removed from her care when she was a very young baby. After the session, the peer educator told her colleague that something "clicked," and she knew it would help the women in the group to know that for her, like Molly from the story, there had been little control over decisions about parenting. The women in the group belonged to a support group for mothers with an intellectual disability and, like the peer educator, had experienced either having their children removed from their care or their parenting skills and rights questioned. One by one, the women from the group spoke to the peer educator and shared photos of their children, many of whom were not in their care. This had been a "risky" time for the peer educator, but she had understood that her credibility as an educator could be strengthened by self-disclosure. She commented:

Then they know how I feel and then when I hear what, when I hear what they say it feels upsetting, and then when I say about me it feels like I'm the same as them, and it'll help them how I feel like. (Delia)

Being role models: "I'm in their shoes"

Peer educators reported that being a role model was one outcome of being a peer educator. For them, being a role model meant using their own experiences to reflect on those in the stories, encouraging others to do the same, and sharing what they had learned from their own experiences. In so doing, they further developed their own awareness of respect in relationships and developed this awareness in others. The peer educators saw this as an important part of their job:

"Hey, look at them! They can do it; we can do it too!" ... And that's what got me going. (Barb)

Seriously. Keep it going. And keep, keep it going with people with disabilities. Don't, don't make it like lecturers going, "This is how it goes, yep." I think personally it's better with people with disabilities. As I said, you can reflect. So you're going to listen, you're going to be interested because, "Hey! They're just like me." And I think that's a big draw card is, "Hey look, if they can do it, I can do it too." (Francesca)

New knowledge and skills

Just as some stakeholders saw peer education as a learning opportunity, the peer educators themselves reported that it had been an opportunity for them

too to learn new skills and acquire knowledge both about respectful relationships and in speaking to groups:

Yes, I think it does. Because I'm, I'm growing every day on, "Hey, don't look through this just on your eyes ... look through other people's eyes." And see – the way I see, the more I know, the more I can help people, and that – well, the more it opens my eyes up to see what people are really going through and how it differs from what I went through, and how they're thinking different to me. And I just, I just think knowledge is a good thing. [laughs] The more you know, the more you can help. (Annie)

So it's like I've gone back to school again. [laughs] ... but it's a bit different than school, but it – cos school is different. Or the normal school that you got teachers and that and they boss you around sometimes, and other students get mad at you and tease you and that. This is like at university or TAFE [Adult further education institution] or ... something like that ... Yeah, learning different things. (Annie)

Learning about supports and services, groups and resources was an important part of being a peer educator. Peer educators constantly remarked that they had not known that certain groups, resources, or services existed before hearing about them in the train-the-trainer program. Being a peer educator increased their access to sexuality and relationship knowledge and to people who provided community-based services, the co-facilitators.

Discussion

It is clear from the literature that a different approach is needed to address sexuality, sexual health, and relationship issues experienced by people with an intellectual disability (Fitzsimons, 2009; Gougen, 2009; Swango-Wilson, 2010) and that these approaches need to include people with an intellectual disability in their development and delivery. This paper has outlined an ecological abuse prevention model that was developed within local communities in partnership with people with an intellectual disability and sexuality and sexual health professionals, based on approaches used in mainstream violence prevention models. Overall, this model was successful (Frawley et al., 2012), but full implementation in some sites was hampered by gatekeeping by some disability and mainstream professionals who did not fully support the peer education approach, which was a key component of the model. The partnerships between the peer educators and community professionals that were established through this model and are reported in this paper forged a link

between the mainstream, people with an intellectual disability, and disability advocates and services in the pursuit of violence prevention. Current research that builds on the LSSL: RR model and is being undertaken by the authors will add to knowledge about approaches that can strengthen local partnerships between mainstream and targeted abuse prevention work involving people with an intellectual disability (Frawley & Bigby, 2011).

The peer education approach was a key focus of this model. Research on this approach found that being a peer educator did have benefits for the peer educators and suggests that they could be credible sources of information for their peers. In this study this peer education approach was referred to as being able to “stand in their shoes”; being closer to their experiences than professionals who normally run such programs.

People with an intellectual disability in this study who had been peer educators recognised that they could help others with an intellectual disability and could feel empowered themselves through sharing insights gained from their own experiences, as illustrated by one peer educator who had commented, “I did not think this would make me feel so powerful.” Addressing power and control in personal and social relationships lies at the heart of abuse prevention programs and is central to the development of respectful relationships. The feeling of empowerment reported by peer educators in the respectful relationships education program suggests a shift in that such feelings of power could be an outcome when peer education is used in sexuality and relationship programs. Although it is innovative to have people with an intellectual disability as educators in a sexuality and relationship program, it is not new for people with an intellectual disability to speak up for themselves and for each other; there is a long history of this through self-advocacy (Goodley, 2000). This “speaking up for and with” is central to the peer education approach discussed here.

The benefits of peer education reported in this paper are drawn from a small study and are, in the main, the views of those who were peer educators; therefore, these benefits are not generalisable. The effectiveness of peer education and the outcomes for those who participated in the program delivered by peer educators were not investigated in this study. However, outcomes of the respectful relationships program will be investigated as part of the current study of the impact of targeted abuse prevention such as LSSL: RR on broader prevention efforts in local communities (Frawley & Bigby, 2011). Nevertheless, the findings of the evaluation of the LSSL: RR model referred to in this paper and the

study reported here of peer educators suggest that peer education is both perceived and experienced as a beneficial approach. Furthermore, when this approach is integrated into an ecological model of primary abuse prevention that includes an experiential education program, it may help to transform attitudes about people with an intellectual disability; shifting ideas about their inherent vulnerability through recognising their capacity to lead education and learning about sexuality and relationships with their peers.

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