



# Fourth R/Healthy Relationships Plus Program Training Feedback Summary

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## Overview

The Fourth R collectively refers to an array of universal, evidence-based programs that utilize a skills-focused, relationship based approach to preventing adolescent violence and related risk behaviours. The classroom-based Fourth R program is aligned to health education curriculum guidelines for grades 7 through 9, and are delivered by classroom teachers. The Fourth R covers four main units, each with built in knowledge, skills practice, and assessment and evaluation resources; Personal Safety and Injury Prevention, Substance Use, Addictions and Related Behaviours, Human Development and Sexual Health, and Healthy Eating. Evaluation of the Fourth R program suggests multiple benefits for youth, including decreased rates of physical violence perpetration and increased condom use, increased use of peer resistance skills, increases in knowledge of violence, and increased awareness of healthy coping strategies (Wolfe et al., 2009; Wolfe, Crooks, Chiodo, Hughes, & Ellis, 2012; Crooks, Scott, Broll, Zwarych, Hughes, & Wolfe, 2015).

The Healthy Relationships Plus Program (HRPP) is an evidence-informed small groups program that utilizes many of the core strategies of the Fourth R to equip students with the skills they need to build healthy relationships and help themselves and their peers reduce risky behaviours. The *HRP* consists of 14 one-hour sessions that can be delivered in a variety of community settings. It covers topics such as peer pressure, help-seeking, media literacy, healthy and unhealthy peer and dating relationships, healthy communication, mental health and wellbeing, suicide prevention, and the impacts of substance use and abuse. Preliminary evaluation of the HRPP has also suggested positive outcomes. A small randomized control trial evaluation of the HRPP found that participation in the program was associated with significantly lower odds of physical bullying victimization one year after participation, mediated by increased intention to seek help from a mental health professional (Exner-Cortens, Wolfe, Crooks, & Chiodo, submitted). Subsequent evaluation using a pre-post design found reductions in depression among youth who reported the highest levels of depression before participating in the HRP, and in anxiety for youth who reported moderate levels of anxiety post-program (Lapshina, Crooks, & Kerry, 2018).



## Fourth R/HRPP Training

Evidence suggests that the Fourth R/HRPP program have the potential to positively impact youth; however, successful program implementation requires more than evidence-based content. To deliver effective programs, facilitators must feel confident, comfortable, and prepared. Thus, high quality training is essential to adequately prepare facilitators for successful program implementation.

Prior to delivering a Fourth R/HRPP program, facilitators participate in either a full or half day face to face training or complete a comprehensive, interactive training module online. Program facilitators also receive all program resources and materials after completing the training. This report summarizes findings from facilitator training feedback surveys, to examine the knowledge and skills learned, their satisfaction with the training, and the extent to which they feel prepared to deliver a Fourth R program after completing the training.

## Measurement Approach

Facilitators were asked to complete a feedback survey at the completion of the Fourth R/HRPP training. The survey consisted of 32 items and included both Likert scale rankings and open ended questions. The survey included basic demographic questions, as well as retroactive pre and post questions asking facilitators to reflect on their knowledge (i.e. “I know how to promote healthy relationships among youth” and self-efficacy “I am confident I can engage youth in interactive learning about relationships and mental health” before and after receiving training.

## Participants

Two thousand and twelve facilitators from nine provinces and territories and the United States who were trained in the Fourth R/HRPP between 2015 and 2018 completed the training feedback survey at the end of the training.

Table 1 summarizes the demographic information of these facilitators, including gender, occupation and years of experience working with youth. As shown, facilitators had a wide range of experience with youth, with approximately 20% of facilitators having more than 20 years of experience working with youth. Participants were primarily educators (58%), followed by graduate students and other education-based professionals. However 14% of participants were from other fields, including public health nurses, corrections officers, community outreach workers, researchers, mental health professionals, volunteers, coaches and retired professionals.

**Table 1. Facilitator Demographics**

Demographic	<i>n</i>	%
Gender (N= 1936)		
Male	579	29
Female	1355	67
Other	2	0.1
Occupation (N= 1966)		
Teacher	1148	58
Graduate Student	240	12
Counsellor/Guidance Counsellor	111	6
Social worker/Child and Youth Worker	84	4
Program Coordinator	64	3
Other Educator	40	2
School Administration Staff	24	1
Other	246	14
Years Working With Youth (N= 1824)		
0-6	470	26
7-12	504	28
13-20	484	27
21+	366	20

Table 2 details the demographic information for the trainings themselves, included training medium, length, and location. The sample represents significant geographic diversity, and the majority of trainings were half-day in length, and were conducted in person.

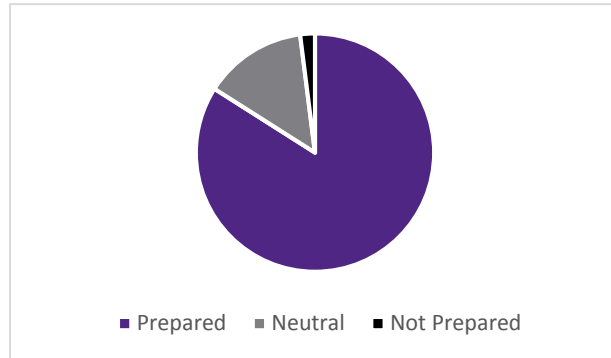
**Table 2. Training Demographics**

<b>Demographic</b>	<b><i>n</i></b>	<b>%</b>
<b>Training Medium (N= 2012)</b>		
In-Person	1938	94
Online	<b>74</b>	<b>4</b>
<b>Training Length (N= 1923)</b>		
Half-day	1130	59
Full-day	793	41
<b>Training Location (Province) (N= 2009)</b>		
Alberta	<b>544</b>	<b>27</b>
Northwest Territories	<b>123</b>	<b>6</b>
Ontario	<b>535</b>	<b>27</b>
Saskatchewan	<b>37</b>	<b>2</b>
British Columbia	<b>347</b>	<b>17</b>
Nova Scotia	<b>107</b>	<b>5</b>
Manitoba	<b>28</b>	<b>1</b>
PEI	<b>15</b>	<b>1</b>
Newfoundland	<b>35</b>	<b>2</b>
USA	<b>238</b>	<b>12</b>
<b>Year of Training (N=1993)</b>		
2015	<b>57</b>	<b>3</b>
2016	<b>561</b>	<b>28</b>
2017	<b>936</b>	<b>47</b>
2018	<b>439</b>	<b>22</b>

## Findings

According to training feedback surveys, 95% of facilitators reported being satisfied with the training and the topics covered. Importantly, 98% of facilitators believed that the training provided increased their capacity to promote positive relationships skills among youth. Upon completion of the training, 84% of facilitators reported feeling prepared to implement a Fourth R program. Of the remaining facilitators, 14% rated their preparation as neutral, and 2% reported feeling unprepared to deliver the Fourth R/HRPP.

**Figure 1. Majority of facilitators feel prepared to implement Fourth R/HRPP program following training**



We looked at differences before and after training on two scales.

First, was a knowledge scale, which included items such as:

- “I know what skills youth need to prevent violence,”
- “I am aware of the links between relationships and mental health.”

Second was a self-efficacy scale, which included items such as:

- “I am comfortable teaching communication skills to youth,”
- “I’m confident I can engage youth in interactive learning about relationships and mental health”

Paired samples t-tests were conducted to examine whether facilitators scores differed on these scales pre to post training. Results (summarized in Table 3) indicated higher scores on both the knowledge and self-efficacy scales post-training.

**Table 3. Descriptive statistics for pre and post training knowledge and self-efficacy scales (N= 1842).**

	<b>Pre-Training M(SD)</b>	<b>Post-Training M(SD)</b>
<b>Knowledge Scale</b>	3.10 (0.44)	3.55 (0.40)
<b>Self-Efficacy Scale</b>	2.90 (0.56)	3.52 (0.44)

### Valuable Aspects of Training

Open-ended questions on the training feedback survey asked facilitators to identify the most valuable aspects of the training. Analysis of these responses identified three main themes. These included practicing activities and teaching strategies from the program, reviewing resources and materials available to facilitators, and learning important foundational information related to the topics covered in the program.

#### **Strategy Practice**

*“[I valued] the careful, repetitive approach to teaching, modeling, practicing, and role playing important skills.”*

*“I feel this enhanced some of my skills, and definitely gave me some creative new ideas for facilitating.”*

*“[I learned] how easy implementation is and how this will make planning and relationship building so much easier!”*

#### **Reviewing Resources.**

*“I just think it is wonderful that we actually have a concrete document that we can follow. We are not asked to reinvent the wheel!”*

*“Going through the lessons together allowing the opportunity to teach this tomorrow if I wished.”*

### **Foundational Knowledge.**

*“How mental health can affect relationships. How we can promote healthy relationships.”*

*“I am very glad to realize that schools across the world are realizing the importance of giving these topics the time and attention they deserve.”*

## Concerns about Implementation

Facilitators were also asked to reflect upon concerns they may have with implementing a Fourth R program for the first time. Notably, many facilitators did not report any concerns about implementation following the training. Based on facilitators responses to these open-ended questions, three themes emerged, including time constraints, the amount of preparation required to successfully deliver the program, and the unique needs of the students and setting.

### **Time Constraints**

*“Fitting in high fidelity instruction into a tight high school schedule.”*

*“[I’m] concerned about the length of time it will take to get through all topics.”*

*“Finding time commitment in class to really delve into all of the great discussion.”*

### **Preparation Needed to Deliver Lessons Successfully**

*“Finding the appropriate amount of time to prepare prior to facilitating a session.”*

*“This brief overview was enough to get started. Still a lot for me to do.”*

*“Need to read through the material in more depth and become familiar with the lessons.”*

### **Youth Needs and Setting Characteristics**

*“Having students at different levels and experiences.”*

*“Not having enough time in class and not enough interest if after school or at lunch.”*

*“Mainly group size- on our end we will need to make some adaptations.”*

## Online vs. In-Person Training

Statistical comparisons between online and in-person trainings were made difficult due to the relatively small number of facilitators who completed a Fourth R/HRPP training online. However, similarly high rates of training satisfaction, and feeling prepared to implement the program (84% and 87%, respectively) were observed among the subset of facilitators (n= 74) who completed an online training for the Fourth R/HRPP as were found in the overall sample. In order to further explore facilitator’s views on the benefits of online vs. in-person training, all facilitators, regardless of training modality were asked to comment on the pros and cons of each delivery method.

### **Online Training**

*“Doing it online allows me flexibility within my busy schedule.”*

*“Training online would be more convenient, but I might feel less inclined to follow along closely and I wouldn't have the chance to practice.”*

*“The main “R” stands for Relationships and that would be difficult to convey online.”*

### **In Person Training**

*“In person allows for discussion and feedback from peers. I found it extremely helpful hearing other people's answers to certain situations.”*

*“Having a live facilitator to answer questions and have us walk through the strategies is very helpful. Can't imagine the same experience in front of a screen.”*

*“I like the in person training better so that you have the opportunity to practice, feel more confident when implementing.”*

## Summary

This report summarizes feedback data provided by facilitators who were trained in the Fourth R/HRPP program between 2015 and 2018. Findings indicated that facilitator knowledge and self-efficacy increased over the course of the training. Moreover, the majority of educators were highly satisfied with the training they received. Almost all facilitators reported that the training increased their capacity to promote positive relationships skills among youth, and upon completion of the program, most facilitators reported feeling well prepared to implement a Fourth R/HRPP program.

## References

- Crooks, C. V., Chiodo, D., Zwarych, S., Hughes, R., & Wolfe, D. A. (2013). Predicting implementation success of an evidence-based program to promote healthy relationships among students two to eight years after teacher training. *Canadian Journal of Community Mental Health, 32*, 125-138.
- Crooks, C. V., Scott, K. L., Broll, R., Zwarych, S., Hughes, R., & Wolfe, D. A. (2015). Does an evidence-based healthy relationships program for 9th graders show similar effects for 7th and 8th graders? Results from 57 schools randomized to intervention. *Health Education Research*. DOI: 10.1093/her/cyv014
- Crooks, C.V., Scott, K., Ellis, W., & Wolfe, D. (2011). Impact of a universal school-based violence prevention program on violent delinquency: Distinctive benefits for youth with maltreatment histories. *Child Abuse and Neglect, 35*, 393-400.
- Exner-Cortens, D., Wolfe, D., Crooks, C.V., & Chiodo, D. (2018). A randomized controlled evaluation of a universal health relationships promotion program for youth. Manuscript submitted for publication.
- Lapshina, N., Crooks, C. V., & Kerry, A. (2018). Changes in depression and anxiety among youth in a healthy relationships program: A latent class growth analysis. *Canadian Journal of School Psychology, 1-17*.
- Wolfe, D. A., Crooks, C. V., Chiodo, D., Hughes, R., & Ellis, W. (2012). Observations of adolescent peer resistance skills following a classroom-based health relationship program: A Post-intervention comparison. *Prevention Science, 13*, 196-205. DOI 10.1007/s11121-011-0256-z.
- Wolfe, D.A., Crooks, C.V., Jaffe, P.G., Chiodo, D., Hughes, R., Ellis, W., Stitt, L., & Donner, A. (2009). A universal school-based program to prevent adolescent dating violence: A cluster randomized trial. *Archives of Pediatric and Adolescent Medicine, 163*, 693-699.



