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Submitted in partial fulfillment of the requirements for the degree of Master of Arts in Applied Health Sciences (Community Health)

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Abstract

Youth are critical partners in health promotion, but the process of training young people to become meaningfully involved is challenging. This mixed-methods evaluation considered the impact of a leadership camp in preparing 42 grade seven students to become peer health leaders in a ‘heart health’ initiative. The experiences of participants and their sense of agency were explored. Data were collected from pre and post camp surveys, focus groups, student journals and researcher observations. Findings indicate that relationships with peers and adults were key to agency development, and participants appeared to broaden their perspectives on the meanings of ‘health’ and ‘leadership.’ Significant changes on two sub-scales of the Harter Perceived Competence Scale for Children were also found. Suggestions for practice and further research are provided.
Acknowledgements

I owe much gratitude to Dr. Terry Wade, for his ongoing support of this project. His unwavering trust was integral to my success, and his pragmatic feedback appreciated. His constant willingness to discuss theory, teach statistics and the numerous additional opportunities he provided contributed immensely both to this thesis and to my overall graduate experience. Dr. Erin Sharpe is also owed the upmost thanks for her contributions. She set high standards and pushed me to achieve them throughout the research and writing process. Her patience, detail-oriented thinking and true dedication to community-based research and experiential learning are inspiring.

I would like to acknowledge Dr. Nota Klentrou for her support as a committee member and Dr. Colleen Hood for her indispensable feedback throughout the initial process of this research, including her introduction to the field of positive psychology, which had a significant impact on this work and my own personal beliefs. The excellent feedback from my external examiner Dr. Jarold Crosby provided a critical perspective that helped shape the final document.

Emily Allan also deserves a great deal of thanks for her steadfast work ethic in organizing many of the logistics that made this study possible. Her constant positive attitude throughout the process was motivating, and her kindness appreciated. All the Brock students who made up the camp staff team are also acknowledged for their contributions. Thank-you and I hope this accurately reflects the experience you helped create.
Bev Minor is owed a multitude of thanks for her unwavering support, practical advice and kind words. Bev, your work and generosity of spirit are so greatly appreciated.

To all the graduate students from Brock and elsewhere who shared this journey with me, thank you for the opportunity to learn in such a supportive community. The engaging discussion, kind words, comfortable spaces, laughter and support have contributed so greatly to my experience. Your dedication to learn and your passion to make change happen remain inspiring. Thanks to Liz Kirk, Kelly Henderson, Sam Dear, Hilary Sayle, Kelsey Pinch, Dr. Leah Levac, Emily Root, Ana Popovic and all the others.

To all the colleagues, staff and supervisors I have worked with throughout my years on this journey as an educator and health promoter, with a special acknowledgment to Joanne for first installing in me the belief that every child is a valuable, capable person.

A very special thanks to my family for their support in this pursuit and for keeping me grounded, and to Chris for his patience throughout the process and unwavering belief in my abilities.

And finally, to all the young people I’ve had the pleasure to meet and work with, most importantly the participants in the HBeat Youth Leadership Camp, who inspired and shifted my perspectives, motivated me to be more critical, and made this process possible, thank-you.
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Introduction

Youth are crucial partners in health promotion. Health promotion aims to improve the health of individuals and communities through influencing and increasing control over the determinants of health (O’Neil, Dupere, Pederson, & Rootman, 2007; Wallerstein & Bernstein, 1988). Involving youth strengthens communities and improves the health status of young people as individuals. While involving young people in health promotion has been shown to be a promising strategy, it remains a difficult process. Currently, youth participation in health promotion lacks a unified framework and a generally accepted approach to implementation. The processes that make the participation process successful in building agency in young people have been studied, but direct applications in health promotion, especially across varying age groups and social contexts have been limited. A deficit of insights into the perspectives of young people involved in participatory health promotion projects also presents challenges for furthering the overall involvement of youth stakeholders, as most research has focused on content-driven outcomes, rather than capturing the voices of youth participants. This challenges the ability to design cost-effective, sustainable and pedagogically appropriate training processes that build the agency required for young people to be meaningful partners in health promotion.

This study investigated the experiences of young people becoming involved as peer leaders in a health promotion project. Specifically, using the HBeat (Heart
Behaviour Environmental Assessment Team) study, this project examined the process of agency development in a group of young people involved in a five-day leadership program. The dimensions of agency understood to contribute to the success of peer leaders in health promotion (‘peer health leaders’) according to the ‘Youth Agency for Social Change’ model (Suleiman, Soleimanpour & London, 2006) provided a theoretical grounding for the study. The dimensions examined were: self-efficacy, content knowledge, skills, a critical awareness of power, and supportive and challenging relationships and environments (See Figure 2).

The HBeat study was based, in part, on the principles of community based participatory research to involve young people in the intervention design phase of an ongoing research study on the social determinants of childhood hypertension. These principles included training young people (aged 12-13 years) to take active roles as health promoters and peer leaders (‘peer health leaders’) in five Niagara area elementary schools. The initial phase of this training occurred during a five-day overnight summer leadership camp at Brock University in July 2010. Forty-two young people, aged 12-14 years, who had finished grade seven in June 2010 attended the camp. The camp design incorporated promising practices in youth participation, youth empowerment, ‘social justice youth development’, and health promotion. This study used a pragmatic paradigm to conduct a mixed methods evaluation of the processes and impact of the HBeat leadership camp. Accordingly, it focused on the experiences of the youth and specifically considered what parts of the leadership camp were most significant in contributing to agency development for health promotion.
Youth Health and Youth Participation in Health Promotion

Youth health requires specific attention in health promotion for a number of reasons. As a large proportion of the world’s population is between 10-24 years of age, adolescents (10-20 years) and young people or youth (10-24 years), contribute significantly to population health status on a global, national, and local level (WHO, 2008). Health status during youth contributes significantly to health status as adults, and positive health status allows young people to make greater contributions to their communities (Minkler, 2005; Viner & Baker, 2005). Addressing the health needs of young people, in a way that appropriately addresses their unique developmental needs, helps to tackle ever-increasing health risks faced by young people, including those risks magnified in disenfranchised and under-serviced populations (World Youth Report, 2003). Literature suggests that health promotion approaches would be more effective if they put more focus on the social determinants of health, and used participatory strategies that involve young people in the processes and decisions affecting their health (Mikkonen & Rapheal, 2010; Suleiman et al., 2006; WHO, 2008).

The social context has a great influence on health at both the individual and community level. While changes in individual health behaviors are often seen as the desired outcome of health promotion, overwhelmingly, the evidence suggests that the most crucial factors in health status are not individual lifestyle choices or risky health behaviours, but rather the living conditions in which these choices exist (Mikkonen & Rapheal, 2010; Raphael, 2003). Strong evidence exists to show that health status is impacted by social context factors such as income and wealth, working conditions, access to health and social services, social networks, quality of education, and food and housing
These factors, which shape and influence the social context, can also be understood as ‘the social determinants of health’ as they have a determining influence on health status. Recognizing the social determinants of health, and subscribing to this perspective means accepting that the social context plays a significant role on health. Accordingly, health promotion for young people must focus on these contextual issues, which includes considering communities, and the roles that young people play in their communities.

**Benefits of Youth Participation in Health Promotion**

Young people have great potential to effect systematic social change. Participation of young people has been successfully adopted in various social action venues, including human rights work, education, the environment, and urban planning (Howard, Newman, Harris & Harcourt, 2002). Participation, defined in this study as, “the process of sharing decisions which affect one’s life and the life of the community in which one lives” (Hart, 1992, p. 5), is established as an approach that can develop the assets and capacities of young people, as well as aid in strengthening communities, improving organizations, and enhancing programs (Suleiman et al., 2006; Zeldin, 2004). When young people are given the opportunities to participate in health promotion, numerous benefits are established. These include more effective health promotion outcomes, more effective integration of the social determinants of health perspective, improved health for youth participants including improved agency, and a great capacity to contribute to communities as active citizens (Mellanby, Rees & Tripp, 2000; Suleiman et al., 2006; Wallerstein & Bernstein, 1988). The strength of these benefits has led to
support for youth participation in health promotion from the World Health Organization (WHO) and various levels of government at the national, provincial and regional levels. The clear benefits for youth participation in health promotion have led to a frequent call for more descriptions framing the approach (Turner & Shephard, 1999). Several frameworks for youth participation have been applied in health promotion work. These include the social justice youth development framework, which originates from a positive youth development framework, but takes a more explicit approach towards creating critical thinking and promoting social change through action (Ginwright & Cammarota, 2002). Participation has also been approached from an empowerment education framework. Originating in the work of Paulo Freire, empowerment education is seen as an effective way to effect the personal and social change required to promote health (Wallerstein & Bernstein, 1988; Wallerstein, Sanchez & Velarde, 2005). The similarities of these two approaches in application allow them to be combined and applied as a more general ‘social action’ framework (Suleiman, et al., 2006) which has also been applied to youth participation in health promotion.

**Agency – An Important Construct for Youth Participation in Health Promotion**

Agency is an important construct in the social action framework and across the various implementation approaches to youth participation in health promotion. Defined as “the capacity of individuals to act independently,” (James & James, 2008, p. 6) the construct of agency is rooted in Albert Bandura’s Social Cognitive Theory. This approach supports the belief that “individuals are proactively engaged in their own development, and can largely determine the outcomes of their actions” (Schunk & Pajares, 2009, p. 35).
According to Social Cognitive Theory, agency and socio-structural influences (context) operate with bidirectional influence (Bandura, 1999). This focus on the bi-directional influences of individual and environment makes Bandura’s Social Cognitive Theory a relevant fit for health promotion, especially health promotion framed within the social determinants of health perspective, as it acknowledges the interaction between health behaviours and the social environment.

Bandura’s work has been used to apply the constructs of social cognitive theory to agency development in young people who are participating in social change work, including health promotion. One approach that is a model described by Suleiman et al. (2006) that provides a simple way of understanding the nested “factors that can lead to increases in youth agency” (Suleiman et al., 2006, p. 139). The factors described in this model are: 1) Self-beliefs, mainly self-efficacy, 2) knowledge, 3) skills, 4) critical awareness of power, and 5) supportive and challenging relationships and environments (Suleiman et al., 2006). In this model, self-beliefs are the core that allows the other factors to “take hold” (Suleiman et al., 2006 p. 139). Knowledge is described as the specific content knowledge required to base actions on evidence-based information. Skills describe the typical tools needed to organize, implement and reflect on the health promotion work at hand, while a critical awareness of power is a specific ability to contextulize self-beliefs, knowledge and skills within the critical lens of the health promotion work. Finally, supportive and challenging relationships and environments acknowledge the importance of a supportive atmosphere for youth agency. This final factor also acknowledges the value of the relationships and group. While agency is often initially thought of as an individual process, most youth involved in health promotion
participate as members of a group of other youth or within a cross-generational team. For this reason, considering agency development within the group of young people is critical to understanding this complex social process. This model is depicted in Figure 2 (p. 44) and explained in further detail in Chapter Two. These dimensions of agency present a clear way to understand the competencies or capacities young people need in order to be successful contributors to health promotion. Each of the dimensions of agency required can also be considered as part of a training program, and specific programmatic decisions can be made to ensure all dimensions are being addressed in preparing peer leaders for work in health promotion. As these dimensions provide a comprehensive way to approach agency development within a social determinants of health perspective, they will be used to frame this research study.

**Facilitating Agency Development in Young People**

If the goal of a youth participation program that uses a social action framework is to facilitate the development of agency in young people, then knowing “how to do this” becomes a crucial consideration for researchers and practitioners. A limited insight into the perspectives of young people involved in participatory health promotion projects presents challenges to creating effective training programs. Most studies on peer-based health education are focused on emphasizing the outcomes of peer health leaders and peer health education programs, and thus limit emphasis on the processes specific to training peers in a broader sense related to agency development. The peer training processes that are outlined in health literature tend to focus on volunteers with similar medical conditions assisting peers, for example, diabetes self-management programs delivered by peer supporters who are currently successfully managing their own diabetes.
2011a; Tang, et al., 2011b) or on programs grounded in general leadership development (Libby, Sedonaen, & Bliss (2006). General leadership programs may not provide the specific components required for health promotion or agency development, nor provide detailed evaluation for how young people develop health promotion skills through the training programs. For example, training programs run by the Youth Advocacy Training Institution (YATI), a program of the Ontario Lung Association aim to provide interactive learning experiences “that help adults and youth work together to improve the health of their communities through advocacy, education and positive youth development” (Youth Advocacy Training Institute: About Us, 2012). These programs do explicitly aim to increase young people’s self-efficacy, but lack research on the specific processes of agency development during training. While the philosophy offers a promising approach, as with research on diabetes or health specific peer-education, evaluation is focused primarily on outcomes, (e.g. ‘programs showed significant increases in self-efficacy’) with very minimal information detailing the way in which a youth development approach is translated into action during training delivery (Tang et al., 2011a; Tang, et al., 2011b). A review by Tang et al. (2011b) identified that the approach, scope and type of training provided to peers varies considerably across programs. While several programs did provide training related to empowerment-based facilitation, many programs still focused primarily on providing peers with specific knowledge about diabetes or the content required to run a tightly scripted program, rather than integrating leadership skills and self-efficacy. From a social action framework, self-efficacy and the related skills are the overarching skills needed to learn ‘how’ to be a leader. Tang et al., feel that a greater
focus on such skills would improve implementation peer-led programs (Tang et al., 2011a).

Designing cost-effective, sustainable and pedagogically appropriate training processes is key to successfully implementing peer health education programs in young people. This research study will aim to address this gap by specifically examining how a training program contributes to agency, from the perspectives of the young people involved. This study used the HBeat Youth Leadership camp as a study site, as it employed a peer leadership program that was theoretically informed and developed with the specific purpose of facilitating agency development, drawing from promising practices and applicable theory in youth development, youth engagement, ‘social justice youth participation’ and empowerment education.

**Rationale for Study**

Preparing young people to undertake social action work in any area, including health promotion, is challenging (Lansdown, 2010). While the methods for the participation process are often outlined in the literature, there is a lack of description about the training processes that were followed in health promotion projects that aimed to foster youth participation. Numerous studies state ‘young people were recruited and trained’ but provide limited detail on the training process, especially detail that captures the perspectives and voices of participants themselves. Many authors argue that any outcome results presented involving participatory youth health promotion projects must be grounded in detailed descriptions of the training and implementation processes, as detailed descriptions allow for a better understanding of context and potential reasons why success or failure occurred (Harden, Oakley & Oliver, 2001). This study addressed
this limitation in the literature on youth participation in health promotion through the investigation of the process of training a group of young people to become ‘peer health leaders.’ Subsequently, as participants in this study were elementary-aged students (12-14 years), they represented a younger demographic than the secondary school demographic most commonly involved in health promotion in North America. This difference in age will also contribute an additional element to the extant literature.

A pragmatic paradigm approach was used for this evaluation study. Within this paradigm, this research used a mixed-methods design to evaluate the HBeat Youth Leadership Camp, specifically focusing on the impact of the camp on the dimensions of agency considered critical for youth participants in health promotion.

**Research Questions**

The research questions that guided this study are as follows:

(1) Did the HBeat Youth Leadership camp contribute to building agency in the group of youth participants as evidenced by increases in the key dimensions of agency: self-efficacy, skills, knowledge, and critical awareness?

(2) How did the group of youth participants experience the process of agency development during the HBeat Youth Leadership camp?

(3) In what ways did the specific processes and content of the HBeat Youth Leadership camp contribute to agency development in the group of youth participants?

To better understand question #3, the following sub-questions were considered:

(3a) What were the program elements of the HBeat Youth Leadership camp that were considered by the group of youth participants as being the most significant contributors to their development of agency?
(3b) What were the contributions of the environment and relationships at the HBeat Youth Leadership camp that were considered by the group of youth participants as being the most significant contributions to their development of agency?

**Methodology**

In order to address these research questions, a mixed-methods evaluation of the HBeat Youth Leadership camp was undertaken, driven by a pragmatic paradigm. Pragmatism focuses on complementary strengths and non-overlapping weaknesses of various approaches can be used together to answer the research questions (Teddle & Tashakkori, 2003). As pragmatism is driven by the research questions, this theoretical paradigm is considered congruent with mixed-methods evaluation. A simple triangulation mixed-methods design was used – both qualitative and quantitative data were collected during the same timeframe and analyzed separately using appropriate strategies for each type of data (Creswell & Plano-Clark, 2007). This approach allowed different types of data to be used for different research questions – including focus groups, researcher observations, journals, and evaluation questionnaires - while still maintaining the methodological integrity of each method. Qualitative data analysis used inductive analysis, including constant comparison and a focus on key experiences, while quantitative analysis included univariate analysis and repeated measures regression analysis. Mixed-methods is common in evaluation research, and when applied to research involving young people, it provides opportunities for integration rich descriptions of youth perspectives. Evaluation was considered appropriate for this research, as it allowed increased understanding of the effect of the HBeat Youth Leadership Camp, from the perspective of youth participants.
CHAPTER TWO: REVIEW OF LITERATURE

As outlined in chapter one, this study is about youth participation in health promotion, focusing specifically on agency development in the group of youth participants in the HBeat Youth Leadership Camp. This literature review is divided into five parts, beginning with a general understanding of issues surrounding youth and health and ending with a specific understanding of how agency development can be used to better understand issues of youth participation in health promotion. First, a review of the need for unique ways of addressing young people’s health is presented, including situating health promotion within the social determinants of health perspective. Second, an introduction to youth participation in health promotion is provided. The third section presents the benefits of youth participation in health promotion, including evidence of successful outcomes and how the process of participation supports the health of the youth participants themselves. Fourth, the major frameworks for youth participation in health promotion are introduced, drawing on the literature surrounding youth development, social justice and empowerment. Finally, the construct of agency is presented, including Bandura’s Social Cognitive Theory, the dimensions of agency, and the relevance of the group process for agency development in the HBeat Youth Leadership camp.

Young People’s Health

Youth health requires specific attention in health promotion for a number of reasons. Significantly, a large proportion of the world’s population, appropriately 30%, is between 10-24 years of age (WHO, 2010). People in this age range are typically referred to as youth or young people. The term adolescent is slightly narrower, referring to those
young people in the period of adolescence, typically between 10-20 years of age (Viner & Barker, 2005). In considering youth health, the intrinsic value of improving the health of such a large percentage of the population is a natural initial consideration. However, there are several additional reasons for valuing the specific health needs of young people. First, healthy young people can contribute as partners in social actions designed to improve communities, and can successfully respond to the shifting needs and circumstances of their local communities, countries, regions, and the world (Word Youth Report, 2003). If young people are truly healthy, being in a state of health, defined by the World Health Organization as, “a state of complete mental, physical and social well-being, and not merely the absence of disease or infirmity” (WHO, 1948, as cited in WHO, 2010), then their well-being will allow them to better participate in the activities that will contribute to their own well-being and the health of their communities (WHO, 1997). Participation is specifically relevant when considering the connections between social well-being and community. Most people’s experience of health and well-being are related to, among other things, good social relationships and a sense of connectedness to community (Labonte, 1996). Good health is an important factor allowing young people to contribute more to their communities as active, engaged citizens.

Secondly, it is well accepted that health status during adolescence is highly correlated to adult health status (Viner & Baker, 2005). Behaviours, attitudes and health conditions that begin in adolescence will strongly influence future health (Viner & Barker, 2005; WHO, 2008). This correlation is seen with positive, health promoting situations as well as with health conditions that contribute to premature death and disease (WHO, 2008). For example: most users of tobacco industry products start between the
ages of 10-24 years; the majority of new HIV infections worldwide are occurring in people under 24 years of age; and the eating and exercise habits shaped during adolescence influence the likelihood of chronic diseases in adulthood (WHO, 2008). Increasing evidence highlights obesity as a growing concern for youth health in North America. Obesity not only causes physical, psychological and social problems during adolescence, but also predisposes young people to ongoing physical and mental health problems as adults (Dietz, 1998). Similarly, high blood pressure (hypertension) in childhood is known to be a strong predictor of adult hypertension and other heart health problems such as atherosclerosis (Benson, 2002). More positively, evidence also indicates that youth who form health-promoting attitudes and behaviours within a healthy community context are more likely to continue into adulthood as healthy individuals. Accordingly, the WHO believes that “promoting healthy practices during adolescence, and efforts that better protect this age group from risks will ensure longer, more productive lives for many” (WHO, 2008; para 1).

Third, the developmental processes and shifting social roles occurring during this stage of life also have a significant influence on health. Adolescence is well established as a time of risk taking (both positive and negative), and adolescents have specific needs to gain competence, socialize with peers, and be recognized (McCall & Shannon, 1999; Tonkin, 2002). Peer influence also forms a significant part of the environment and results in new processes for decision-making, which is particularly significant in influencing health (Bandura, 1977; Bandura, 1998; Carter, 1999). Shifts in both socio-structural and personal determinants of health in adolescence result in new influences on health, requiring specific youth health needs. As health organizations consider youth health, they
are driven by an understanding that adolescents have unique and specific health needs, needs which are grounded both in lifespan development and in the corresponding health challenges currently faced by young people (WHO, 2008).

While these reasons for considering youth as a unique and critical part of health promotion efforts are important, perhaps the most significant reason for including young people is found in both shifting and ongoing health risks faced by young people. Despite the increasing emphasis placed on adolescent health over the past 30 years, evidence indicates that many youth are not achieving optimal health status (Bennett & Tonkin, 2003; World Youth Report, 2003). Considerable evidence suggests that globally, young people are still facing many health risks (McCall & Shannon, 1999; WHO, 1997; WHO 2008). For example, violence, HIV and AIDS, tuberculosis, and vaccine-preventable diseases have high impacts on young people in the majority of the world. In North America increasing numbers of overweight and obese youth have led to concern about a childhood obesity epidemic. Young people continue to face much higher risks for suicide and mental illness than other age groups – following motor vehicle collisions, suicide is the second leading cause of death for youth aged 10-24 (Center for Suicide Prevention, Youth At Risk for Suicide, 2013) and Canada’s youth suicide rate remains one of the highest in the world (Mind Your Mind, Suicide Facts and Symptoms, 2013).

Adolescence and early adulthood is generally the time of tobacco initiation leading to a lifelong addiction to nicotine and youth continue to account for the highest rates of death and injury from road and traffic accidents, drowning, and fires (Ontario Medical Association, 2008; WHO, 2008; World Youth Report, 2003; World Youth Report, 2005). Beyond the ‘known’ health risks, young people are also living in a rapidly
shifting world that presents new and growing health risks. In many countries, this includes the ever-increasing risk of HIV infection, a trend that is especially worrisome for young women who are among the highest risk group for infection (WHO, 2010). In Canada, like other Western nations, the incidence of obesity and overweight children is increasing at an alarming rate. The Canadian Community Health Survey indicates that 25% of Canadian children are either overweight or obese (CCHS, 2004). Moreover, this statistic is not evenly distributed across all Canadian youth. For example, the 2002/03 Assembly of First Nations regional longitudinal health survey indicated that 42% Aboriginal youth aged 12-17 years living in First Nations communities are overweight or obese (2002/03). As such, young Canadians who are considered under-serviced by the health system, including aboriginal youth, low-income youth, visible minority youth, lesbian, gay, bisexual, transgender, two-spirited, questioning and queer youth (LGBTTQQ), immigrant youth, and other disenfranchised groups, are even more likely to face health risks. The combination of being disenfranchised or under-serviced and being a young person can greatly magnify health risks to a greater level than when these factors are considered independently. The current health status of young people, especially those disenfranchised young people from under-serviced groups, provides evidence that current health promotion efforts are not sufficiently addressing the needs of young people (OMA, 2008; Suleiman et al., 2006; Viner & Baker, 2005).

**Addressing the Health Needs of Young People**

Despite ongoing efforts to improve the health status of young people, the traditional approaches to health with this population can arguably be considered
ineffective. Historically, health interventions for young people have focused on single health issues, mainly related to risky behaviours such as smoking, sexually transmitted infections or obesity (Viner & Baker, 2005). Historical approaches were also more closely connected to the approaches of a medical model, adopting what Roberston and Mikler (1994) called the “…twin pillars of earlier, more traditional health promotion efforts: individual responsibility and professionally based interventions” (p. 304).

Adopting newer approaches to health promotion means adopting two new ‘pillars’: firstly, accounting for the importance of the social determinants of health (Raphael, 2003; Mikkonen & Rapheal, 2010) and secondly, including young people themselves in the processes and decisions affecting their health (Suileman et al., 2006; WHO, 2008). This includes adopting approaches that embrace the complex interactions of health with participation, including empowerment, youth development and youth agency (Lansdown, 2010; Roberston & Minkler, 1994; Suileman et al., 2006; WHO, 2008). The following sections discuss the importance of the social context and the crucial role of participation (and related concepts) to effectively address the health of young people.

**Health and the Social Context**

The social context has a strong influence on health at both the individual and community level. While changes in individual health behaviors are often seen as the desired outcome of health promotion, overwhelmingly, the evidence suggests that the most crucial factors in health status are not individual lifestyle choices or risky health behaviours, but rather the living conditions in which these choices exist (Mikkonen & Rapheal, 2010; Raphael, 2003). Most Canadians, including many health promotion
professionals, are not aware of the extent to which a person’s health status is impacted by social context factors such as income and wealth, working conditions, access to health and social services, social networks, quality of education, and food and housing. These factors, which shape and influence the social context, are known as ‘the social determinants of health’ as they have a determining influence on health status.

Practically, the social determinants of health can be described using the analogy of river pollution. A polluted river might include such problems as unclean water, garbage, dead fish, etc., but solutions that aim to fix these problems directly (e.g. garbage clean up day) do not address the underlying cause of the problem. To address the fundamental causes responsible for the devastation, one must move “upstream” to a community or contextual level and address the reasons why pollutants are entering the river in the first place, and target changes at this level. When applied to health, it is easy to understand how programs and services that only address “downstream” or individual issues and choices are limited in their effectiveness, as often the issues occurring at a community level upstream, influence the ability to make downstream changes (Bierman & Dunn, 2006). For example, if a neighborhood has an unusually high rate of obesity, a downstream approach might be an education intervention / campaign related to healthy eating. In contrast, an upstream approach might focus on access to an affordable grocery store that serves fresh food and produce at a reasonable price. At the “head waters of the river” is income or socioeconomic position, as it is one of the most powerful predictors of health outcomes – to the extent that Link and Phelan (1995) refer to socioeconomic status as a “fundamental cause” of health (Biermen & Dunn, 2006; Williams, 2007).
Link and Phelan (1995) discuss how socio-economic status is a fundamental cause of health. The components of their theory of fundamental causes show that socio-economic status persists across time and operates through multiple risk factors and influences multiple diseases. Link and Phelan’s investigations suggest that the link between socio-economic status and health link through time and place is so strong that even as some downstream intervening mechanisms are addressed and eliminated (e.g. poor sanitation and overcrowding in less-advantaged areas in the 19th century), new intervening mechanisms evolve that continue to link socio-economic status to health (e.g. lack of health care benefits in minimum wage jobs, smoking [20th century], and obesity [21st Century]). Fundamentally, persons with higher socio-economic status have a greater breadth and depth of resources that can be used to gain and maintain health advantages. According to Link and Phelan, a person’s resources, including money, knowledge, prestige, power, and social connections, influence health in two ways. First, resources influence individual health choices and behaviours through “whether people know about, have access to, can afford, and are supported in their efforts to engage in health enhancing behaviours” (p. 74). Secondly, and perhaps more crucially, they influence the broader context in which individuals live, including neighborhoods, occupations, and social networks, all of which are known to have crucial influences on health, as both risk and protective associations. The resulting impact is that socio-economic status becomes a health influence operating at “both individual and contextual levels” (p.74). Comprehensive health promotion therefore needs to address the fundamental issues not simply at an individual level, but at a contextual one. Contextual health promotion interventions aim to change the environment, and provide equitable benefits for all,
irrespective of resources. As a result, effectual contextual health promotion is effective in improving health, and also contributes to reducing socio-economic disparities (Link & Phelan, 1995).

While the social determinants of health represent a relatively new perspective in health promotion, views are shifting. As an understanding of this concept permeates health promotion practitioners, the role of communities (and correspondingly individual community members) in health promotion becomes more obvious (Mikkonen & Rapheal, 2010, Minkler, 2005). Increasingly, the health sector is recognizing that health is not solely determined by personal choice, but by the quality of social environments, namely the communities in which individuals live and work (Mikkonen & Rapheal, 2010). Therefore, it follows that addressing the health needs of young people includes considering their communities and the roles young people hold as members of their community. While this task may seem daunting, it offers great potential to better address the underlying causes of youth health, to improve youth health promotion efforts, and to affect systematic social change.

**Youth Participation in Health Promotion**

Young people have great potential to affect systematic social change. Including young people as active participants is a crucial aspect of improved health promotion. The call for an increased participation of young people in the processes that affect their lives has become a recent refrain by policy makers, organizational leaders, professionals, practitioners and academics in many fields, including health promotion (Lansdown, 2010; Suileman et al., 2006, Woodgate & Leach, 2010). Before pursuing a discussion of youth participation within health promotion, it is prudent to define what is meant by
participation. While the term participation is commonly used, there does not seem to be a commonly agreed upon definition useful for the professional or academic (Lansdown, 2010). Participation means different things across different disciplines, and the subtleties of definition further increase the complexity of this concept. Roger Hart’s definition is the one most commonly used by global health organizations. Hart defines participation as “the process of sharing decisions which affect one’s life and the life of the community in which one lives” (1992, p. 5). Hart’s definition is situated in the UNICEF document on children’s participation, and accordingly he states that participation “is the means by which a democracy is built and…. is the fundamental right of citizenship” (p. 5).

Although youth participation is a process of involvement in decision-making, not all participation is the same. In an effort to capture this variance, Hart adapted a model of citizen participation developed by Arnstein (1969) and developed the well-known model “Hart’s ladder of youth participation.” Hart’s ladder details eight levels of young people’s participation in projects (Figure 1). The ladder classifies manipulation, decoration and tokenism as non-participation, and assigned but informed, consulted and informed, adult-initiated, shared decisions with children, child-initiated and directed, and child-initiated, shared decisions with adults, as forms of genuine participation (Hart, 1992).
Figure 1. Hart’s Ladder of Youth Participation. (Hart, 1992, p. 8)

Hart’s ladder is arguably the most well-known and well-used model of youth participation, and it has had a significant impact on sparking discussion and research related to youth participation. However, Hart’s original model has faced debate and critique, as work in youth participation has increased, Hart’s ladder is no longer considered the most comprehensive model of participation. In a 2008 publication, Hart himself detailed how the ladder model has weaknesses, including how the use of levels is misleading if it suggests a purely sequential progression. Hart clarified that while the ladder does not consider all rungs to be equal, (true participation is always preferable to non-participation), at the same time, within the true participation categories the higher rungs are not always superior in all cases. There is a need to consider the context of the
project, the interests of the youth, and numerous other factors to establish the goal for participation. Hart also raised concerns with how the ladder considers power, the danger of adopting a single comprehensive tool for evaluating projects, and the cultural limitations of western model being applied to non-western cultures. In a call for new ways of detailing participation, Hart stated creatively: “I see the ladder lying in the long grass of an orchard at the end of the season. It has served its purpose… I know there are so many different routes up through the branches…” (p. 29).

While no other model of young people’s participation has risen to the prominence of Hart’s ladder, numerous authors have described participation. Wilson (2000, as cited in Howard et al., 2002) discussed the differences between superficial and deep participation, and defines deep participation to include active, authentic and meaningful participation. Similarly, Simovska (2008) differentiated between token and genuine student participation as framing the way students participate in health promotion activities at schools. While token participation focuses on acquisition of curriculum content, accepting pre-existing healthy lifestyle choices, and individualist behaviour change, genuine participation is broader. Genuine participation focuses on knowledge building, and building critical consciousness to better understand how health influences a young person’s life. Genuine participation also targets individuals “in-context,” rather than providing generic information or choices. According to Simovska, health promotion based on genuine participation can better address the debate between individualistic and contextual health promotion. In encouraging clarity of definition, Lansdown (2010) illustrated how most uses of the term participation are connected to the rights outlined in
the United Nations Convention on the Rights of the Child, and thus understanding the term requires a complementary understanding of these rights.

While there are numerous definitions of participation, some commonalities can be found. Two of these commonalities are an action-orientation and a powerful optimism. Consistently, participation is viewed in theory and practice as supporting a new approach to problem solving, which encourages synergy between young people and adults (Pittman, 2000). The Centres of Excellence for Children’s Well-Being believes that meaningful youth-adult partnerships have benefits for both youth and adults at an individual level (e.g. increased problem-solving, strengthened sense of being connected to the community etc.), but that it also helps on the social and systems level (Khanna & McCart, 2007). Participation of youth at all levels of decision-making can offer numerous positive outcomes for all members of a community.

After considering these fundamentals of the term participation, Hart’s definition of participation, “the process of sharing decisions which affect one’s life and the life of the community in which one lives” (Hart, 1992, p. 5) will be used as a working definition for this research, providing a solid base of support on which to examine the application of the construct in health promotion.

**Support for Youth Participation from Health Organizations**

The call for involving youth in health promotion has become increasingly widespread over the last 15 years. In 1993, the World Health Organization (WHO) put forth a call for community participation in health that included the importance of including young people in various forms in policy and program development (WHO,
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A 1995 WHO Study Group on programming for adolescent health made several recommendations that further supported participation of young people in adolescent health through the 1995 World Programme of Action for Youth on Health. These recommendations included building capacity by training young people to become involved in adolescent health issues and highlighting programs that successfully demonstrate meaningful involvement of young people (WHO, 1995; WHO, 2005). This report also recognized that young people can accept the responsibility to participate and contribute and should therefore be involved in decisions that affect their lives. Since this original support for youth involvement in health, the WHO has continued to support the need for comprehensive health programs for youth and has funded a number of programs that use participatory and peer leadership models to achieve this goal (WHO, 2010). Health Canada’s 1995 “Turning Points” report also called for increased youth participation in health, calling for the health sector to “ensure that young people have opportunities to participate in decisions about health development” (pp.15-16). The 2005 United Nations World Youth Report expanded on previous work, and further supported the importance of including youth in health promotion. In this report, the United Nations declared that “encouraging the full participation of youth in the development and promotion of health-related programs and policies would enable them to become agents of change in their communities and positively affect their lives and those of their peers” (World Youth Report, 2005, para 33). This report supports the diverse benefits that encouraging youth to participate in health promotion activities offer to health promoters, communities and young people themselves.
Youth participation is also strongly supported within a health promotion agenda that has a focus on the social determinants of health. As a general strategy, the action-orientation and powerful optimism that grounds participation is effective in encouraging people to become active participants in the processes and concerns that shape their health (WHO, 2010). Participation can “…help lay the groundwork for healthier, more just communities” through strengthening communities, and simultaneously building capacities in young people (Suleiman et al., 2006, p. 126). The World Health Organization makes strong links between social participation and the social determinants of health, stating on their website that, “A crucial direction for policy to promote health equity concerns the participation of civil society and the empowerment of affected communities to become active protagonists in shaping their own health” (World Health Organization: School Health Promotion, 2010). The WHO also believes that participation can help build political will for the social determinants of health, which helps to advance this important agenda in health promotion (World Health Organization: School Health Promotion, 2010). Suleiman et al., (2006) believe that “elimination of health disparities for youth can be better achieved if young people are fully engaged as partners and leaders in addressing social inequities, researching health issues and planning and evaluating health programs” (p. 127). Most recent research from a Canadian perspective also echo’s this call. Woodgate and Leach (2010), provide an articulate expression of this need:

Policy makers and key government leaders need to be educated about youth’s perspectives and experiences with health promotion, and about the importance of involving youth in decisions that affect them directly. If youth are truly to have a meaningful voice in the process of addressing their health needs and concerns, there must be a genuine desire to see them empowered… (p.1180)
As participation is innately linked to the context of a community, it provides a solid grounding for addressing the social determinants of health.

**Benefits of Youth Participation in Health Promotion**

The research that has been conducted on youth participation in health promotion has also reported a number of benefits, to both the health promotion initiative and the youth participant. In terms of the benefits to health promotion initiatives, Turner and Shepard’s (1999) review of peer education discussed the rationale for using this approach to health promotion. Their work found ten frequently used justifications for this approach, including: cost effectiveness of peer education, peers as credible sources of information, peer education as empowering, peer education uses communication strategies that are already established, peers are powerful role models, and peers are easier for youth to identify with as compared to adults (Turner & Shepard). Peer education is also beneficial to those acting as peer leaders and peer education can be accepted in various circumstances, such as when typical education programs are not accepted, or when the target population is difficult to reach. Finally, peer education can reinforce messages through the ongoing contact between the peers and adults (Turner & Shephard, 1999).

Reviews of research studies on peer leadership have supported many of these claims. For example, Mellanby, Rees and Tripp (2000) reviewed thirteen studies of peer-led health education, (a specific form of youth participation in health) and found that overall peer-leaders were equal to or more effective than adults in influencing outcomes. While some cautions due to methodological difficulties and analytical problems are noted, overall, the authors are supportive of this type of participation by young people.
Similarly, Black, Tobler and Sciacca’s (1998) meta-analysis of 120 school-based drug prevention programs in middle schools revealed that interactive peer interventions were generally more effective - students in peer-led groups had significantly better results in cognitive (knowledge), attitude, and personality variables (e.g. locus of control), when compared to programs led by teachers / researchers. This study concluded that prioritizing implementation and evaluation of well-designed peer programs was an important priority for health promotion.

Involvement of youth in health initiatives has also had a proven positive impact on policy development. For example, from 2006-2010, over 500 young people were engaged in tobacco control efforts in Ontario’s “Smoke-Free Ontario” Strategy (Ontario Ministry of Health Promotion, 2010). In 2008-2009, a Canadian youth-initiated and youth-led campaign was a critical component of the passing of Bill C-32, ‘The Cracking Down on Tobacco Marketing Aimed at Youth Act.’ On May 31, 2010, the then Provincial Minister of Health Promotion Margarett Best pledged new funding opportunities “based on evidence that grassroots engagement of youth, by youth, is the most effective way to reduce smoking and encourage quitting at an early age” (Ontario Ministry of Health Promotion, 2010b, para.7).

The personal benefits to the young people who participate in health promotion have also been well documented. Ochieng (2003) used a grounded theory approach to explore the benefits of adolescent peer leaders in an HIV & AIDS peer education program and found that young people were able to identify specific areas of individual development from their work in the program. Specifically, the study showed that youth identified benefits in their changes in attitude towards HIV & AIDS, such as tolerance
towards others and empathy, as well as changes in their own health behaviours. Health-related behaviours were influenced at the affective, cognitive and social level. At an affective level, young people self-identified as having increased self-awareness, self-concept and empathy, which lead to a need to increase knowledge on health behaviour, and re-evaluate social roles and attitudes. This study’s use of qualitative interviews allows a strong understanding of how the young people themselves identified the benefits gained from the experience as health promoters. Cargo, Grams, Ottoson, Ward, and Green (2003) also used qualitative methods to explore the benefits of participation for the young people involved in the health projects focused on quality of life and found significant personal benefits for the young people involved in the projects. In Suleiman et.al’s 2006 study of youth-led research projects in school health centers, quantitative measures showed significant increases in personal skills, such as leadership; 92% of students reporting that they “felt more like leaders” (Suleiman et al., 2006, p. 139). This study also showed gains in specific skills such as creating a research tool (100%, n=26), and a research paper (95%, n=25), which are important transferable skills that “have great potential to help youth engage in social action both now and in the future” (p. 139). Other commonly cited benefits from literature in participation include: empathy, altruism, self-esteem, self-concept, confidence, cognitive gains, attitudes towards school, motivation, communication, tolerance, assertiveness skills, leadership skills, responsibility, critical awareness, empowerment, engagement, content knowledge acquisition, among many more listed (Becker, Randels & Theodore, 2005; Cargo et al., 2003; Minkler, 2005; Ochieng, 2003; Phillips, Linney & Pack, 2008; Shier, 2010; Suleiman et al., 2006; Wallerstein & Bernstien, 1988; Zeldin, 2004). In fact, the advantages of participation to
the individuals involved in the process are so well-established that many researchers and practitioners accept the value of this process as justification enough for youth participation, regardless of the ability of a project to measure changes in health attitudes, knowledge or behaviour in the population of young people (Cargo et al., 2003).

The benefits of participation for young people are clear. Benefits to health promotion include more effective health promotion programs, with messages and delivery that are better suited to the youth population, resulting in stronger outcomes, and more effective integration of the social determinants of health into health promotion efforts. Young people who participate directly in health promotion work as researchers, leaders, or consultants also receive unique benefits. Youth participants are better prepared to act as agents of social change, with the self-efficacy, skills and knowledge to continue to contribute to their communities as active, engaged citizens, and consequently, this development and empowerment improves their personal health status. These benefits all combine to contribute to improved health for young people, and thus successfully achieves the goals of health promotion (Mellanby, Rees & Tripp, 2000; Suleiman et al., 2006; Wallerstein & Bernstein, 1988).

**Frameworks for Youth Participation in Health Promotion**

Participation offers many benefits for improving the health status of communities, but to be meaningful, involvement requires the intersection of a number of complex factors, including supporting the democratic rights of youth to participate “at the table” and have their voices heard, a reframing of how young people’s capacities are viewed by decision-makers, as well as ensuring “young people and their communities have the skills necessary to address disparities in health…” (Suleiman et al., 2006, p. 127) (Raphael,
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2003; Lansdown, 2010). Meaningful participation of young people in health promotion requires working within a framework in which all of these critical considerations are addressed. This is not an easy process, and requires significant shifts in thinking within the traditional health and health promotion sectors.

While the call for youth participation is strong, exactly how to best implement the principles of youth participation to achieve these benefits is largely unknown. There is no single accepted framework for involving young people in health promotion, but rather a number of approaches that have been used in various ways, by researchers and practitioners in health promotion projects. Choosing the best approaches for participation of young people means finding a strong fit to the specific needs and goals of the health promotion project at hand (Jennings, Parra-Medina, Hilfinger-Messias & McLoughlin, 2006).

However, two prominent frameworks that have applications to the health promotion field are the “Social Justice Youth Development” (SJYD) framework developed by Ginwright and Cammarota (2002), and the “Empowerment Education” (EE) framework described by Wallerstein and Bernstein (1998). The SJYD framework presents a model that uniquely combines the principles of youth development, youth engagement and social justice. Given the strong focus on context, social justice youth development is a strong fit for young people’s participation in health promotion. SJYD has been developed from the positive youth development (PYD) framework, an earlier framework that was important for reframing young people as assets (as opposed to problems) with the ability to build capacity within a community (Ginright & James, 2002; Suleiman et al.,, 2006). PYD frameworks recognize that young people who
demonstrate certain developmental assets are more resilient, and thus programs built on this model often focus on developing these assets in young people (Benson, 2002; The Search Institute, 2010). With major tenets that include building developmental assets, valuing youth and discouraging blaming of youth, it is a strong foundational framework for most current work in youth development (The SEARCH Institute, 2010; Tonkin, 2002). However, the positive youth development framework is limited, as it does not fully consider context or fully credit the abilities of young people to transform their communities. According to Ginwright and Cammarota (2002), “the limits of current youth development models are bound by an inability to examine the complex social, economic, and political forces that bear of the lives of … youth” (p. 82). The social justice youth development framework addresses this concern, with a more explicit approach towards creating critical thinking and making change. This approach views young people “not only as assets but also as agents capable of transforming their toxic environments, not simply developing resiliency and resistance to them” (Ginwright & James, 2002, p. 40). As one of the major goals of health promotion is transformation, working within a social justice youth development framework is an appropriate fit for involving young people in health promotion.

The Empowerment Education framework grew out of the work of Brazilian educator Paulo Freire, as a way to affect the personal and social change required to promote health (Wallerstein & Bernstein, 1988). Friere saw liberation as a major goal of education, and promoted participation of all learners in a journey of critical reflection, referred to as conscientization (Wallerstein, Sanchez, Velarde, 2005). Based on these principles, empowerment education programs involve structured dialogue, with the goal
of praxis, defined as an ongoing interaction between reflection and action (Wallerstein et al., 2005). These principles are highly appropriate for health promotion, and Friere’s process of ‘listening – dialogue – action’, has been the basis for many successful health promotion projects with young people that take an empowerment education approach (Wallerstein et al., 2005; Altman & Feighery 2004). Empowerment education involves people in groups working together to identify problems, critically assess social and historical causes, develop goals, and work towards action. According to Jennings et al. (2006), empowerment education can successfully “bridge individual behavior change and group efforts for social change” by fostering youth development and “active participation in critical analysis of societal forces within a safe group context” (p. 38).

Empowerment education has strong links to efficacy, and can enhance personal growth, social support as well as community, policy and environmental changes, all of which are highly connected to health promotion, and specifically to the upstream approach supported by the social determinants of health (Bandura, 1998; Link & Phelan, 1995; Raphael, 2003; Wallerstein & Bernstein, 1988). Further, the EE framework has been successfully used in several youth health promotion programs. For example, the Alcohol and Substance Abuse Prevention Program based out of the University of New Mexico used this theoretical underpinning for its community and school based project for adolescents and showed statistically significant increases in intervention vs. control groups at an 8-month follow up measure of perception of riskiness of drinking, drugs and driving (Wallerstein & Bernstein, 1988).

Both empowerment education and social justice youth development find commonalities in principles of social action. While differences in the theoretical origins
of the two approaches exist, in application to youth participation in health promotion, programs applying one or the other approaches show more in common than in opposition. The principles of analyzing power, focusing on identity, promoting systemic social change, encouraging collective action, using active learning, embracing youth culture, encouraging participant-centered learning, using small groups for social support and dialogue, and promoting leadership apply to both approaches (Ginwright & James, 2002; Jennings et al., 2006; Wallerstein et al., 2005). This is why some youth participation projects, such as the Youth REP project, a youth-led action research, evaluation and planning program implemented in underrepresented communities in Northern California, have combined both approaches and simply titled the approach as a ‘social action’ framework (Suleiman, et al., 2006). Based on the appropriateness of the social action framework, the HBeat project has taken a similar approach to the Youth REP project in applying a framework, which blends social justice youth development and empowerment education into a more practical and easily applied ‘social action’ framework.

**Conceptualizing Social Action and Agency**

One major commonality in the various frameworks for involving youth in health promotion is the concept of agency. Agency is a central component of a social action framework, and, within this framework, increasing agency becomes a central goal of youth participation. Agency is defined concisely by James and James (2008) as “the capacity of individuals to act independently” and in the context of young people refers to their “capacities to make choices and express their own ideas” (p.6). Albert Bandura defined agency as “acts done intentionally” (2001 p. 6). He describes four core features of agency: intentionality, forethought, self-reactiveness, and self-reflectiveness (Bandura,
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2001). Intentionality refers to the commitment to bring about future actions; forethought extends this to consider how goal setting can help motivate people and provide direction and meaning within a constantly shifting environment. Self-reactiveness provides a way of monitoring and adjusting goals, and situating those goals in a value or moral framework, and self-reflectiveness is a mega-cognitive capability to examine oneself (Bandura, 2001). Bandura believed that these features define agency on personal, proxy or collective levels, and allow agency to be exercised within a broad network of socio-structural influences. Understanding how agency is grounded in Social Cognitive Theory clarifies how agency is connected to one’s role within a social system or community.

Bandura’s Social Cognitive Theory allows a link between the benefits of agency gained by participants in health promotion programs and improvements in health. This approach to human agency proposes, “individuals are proactively engaged in their own development, and can largely determine the outcomes of their actions” (Schunk & Pajares, 2009, p 35). Rooted in this theory, agency and socio-structural influences (context) operate with bidirectional influence (Bandura, 1999). According to Bandura, there is no dualism between personal agency and social structure, but each imposes constraints and provides resources that influence the other. Human behaviour is not dictated by passively accepting social influences, nor is it simply a matter of “the self” functioning independently of socio-structural context. Social cognitive theory is highly focused on the bi-directional influences of individual and environment, making it a relevant fit for health promotion, especially health promotion framed in a social determinants of health perspective, as it acknowledges the interaction between health habits and various social environments. Specifically, when considering the
‘environment’, Bandura proposes three types of environments: the imposed environment, the selected environment, and the constructed environment.

The imposed environment is the environment that one has forced upon them, wherein their only control is over their reactions; the selected environment is a further explanation of one’s reactions – it is the parts of the environment that one engages with (i.e. associates and activities) which become the experienced environment (Bandura, 1999). The concept of the constructed environment is an acknowledgement of the various ways that “people construct social environments and institutional systems” (Bandura, p. 23), essentially stating that the environment is not just something waiting to be ‘interacted with’, but something that is created and altered with each interaction, on individual and collective levels.

These environments provide a further understanding of how agency is exercised with different scope in different situations (Bandura, 2001). For example, highly imposed environments can limit one’s sense of independence. However, within the same environment, developing agency may allow a pro-social orientation that can lead to an interest in affecting political change. In this situation, using Ghandi as an example, Bandura describes how agency does not solely result in individualistic outcomes, but becomes the basis for action that influences social environments (2001).

Bandura expands on this interaction between the environment and agency, to detail the tenets (components) of agency, how each tenet is developed / constructed, and how the combination and interaction of these tenets form the basis of human agency (Bandura, 1999). The key tenets of agency described by Bandura: 1) knowledge and
competencies, 2) skill development and conceptions, 3) motivation and action and 4) self-efficacy are detailed below.

**Bandura’s Four Tenets of Agency**

The first tenet of agency, knowledge and competencies, is quite plainly, the knowledge and competencies that are developed as the cognitive guides for complex behaviour patterns. Bandura details how models, rules and strategies are acquired via a learning process that includes both direct experience and modeling (including direct, abstract, and media-based model ‘sources’) and through social diffusion (Bandura, 1999). Development of competencies must also include cognitive synthesis of acquired knowledge- essentially processing these diverse information sources and model sources into the cognitive “guides for reasoning and action” (Bandura, 1999, pp. 26).

The second tenet of agency is skill development and conceptions. This tenet details the importance of human ability to translate thought into action, recognizing that simply having acquired some knowledge does not guarantee performance or proper application of that knowledge. Such skills are acquired by constantly comparing conceptions to actions, a “conception-matching process” (p. 26). Conceptions, according to Bandura, contain the internal standards needed to apply knowledge proficiently, and thus conceptions guide the monitoring. Subsequently, mismatches allow behaviour to be modified until the skill and knowledge are aligned. Conceptions also guide generalization of skills into new situations (Bandura, 1999). Strong conceptions allow such adaption. It is critical to be able to adapt to each unique circumstance, as the environment (i.e. via the
constructed environment) is constantly shifting, and thus only applying knowledge in a fixed manner is not effective.

The third tenet of agency, motivation and action acknowledges people as self-reactors and self-regulators, with the ability to guide their actions. Within this regulation is skill to make meaning from experiences, through the use of symbols, to guide future actions. Successful use of symbols (symbolization) involves evaluating one’s environment, critically considering the influences and creating and regulating corresponding actions. Symbolization therefore becomes, “a powerful tool for comprehending [the] environment” (Bandura, 1999, p. 27). Symbolization, combined with anticipation and forethought, provides the basis for guiding actions based on positive and negative consequences, and encourages people to do things that provide satisfaction and self-worth, while avoiding things that do the opposite (Bandura).

Motivation also influences the ability to make goals for the future and take corresponding actions, both relevant constructs for health promotion (Bandura).

Finally, the fourth, and most important, tenet of agency is self-efficacy. Self-efficacy is understood as one’s perceived abilities to perform at a desired level, and thus their ability to exercise control over various components of their lives (Bandura, 1994; Bandura, 1999; Schunk & Parajes, 2009). Bandura considered self-efficacy as the most crucial foundation of human agency. He stated that:

Unless people believe that they can produce desired effects by their actions they have little incentive to act or to persevere in the face of difficulties. Whatever other factors serve as motivators, they are rooted in the core belief that one has the power to produce changes by one’s actions (Bandura, 1999, p. 28).

Self-efficacy is different from many other identity or self-belief concepts in the psychological literature (Maddux & Gosselin, 2003). It is not a competency, or a
predication of behaviour, or an intention to act as it is not what people believe they will do, but rather what one believes they can do. Self-efficacy is also situational, meaning that one can have high self-efficacy for certain circumstances (e.g. presenting a piece of writing), but low self-efficacy for others (e.g. presenting a vocal solo performance). This is also a way to appreciate how self-efficacy is separated from other self-beliefs, including self-esteem or self-concept. Self-concept (what people believe about themselves) and self-esteem (how they feel about those beliefs) are generally accepted as more universal, whereas self-efficacy is situational to a domain and various across domains. While they are connected, the differences are notable. Maddux and Gosselin explain this difference with an example comparing the author’s basketball skills and academic writing. Firstly, while Maddux’s self-efficacy for basketball is low, his self-efficacy for writing is high, and given that writing is more important to him, his overall self-esteem is strong. The effect of low self-efficacy for basketball is only related to his self-esteem to the extent that he prioritizes basketball. If, for example, he was asked to play in an important game, there is a chance that his self-esteem would decrease temporarily, but should recover easily (Maddux & Gosselin, 2003). While self-efficacy is not as universal as other self and identity constructs, self-efficacy still has wide reaching influences on one’s thoughts, feelings, motivation and behaviour (Maddux & Gosselin, 2003).

Research shows that self-efficacy plays a role in the learning process for students, and has direct implications for education, as higher self-efficacy is linked to activity choices, persistence in difficult learning situations, and overall achievement levels (Schunk & Pajares, 2009). Similarly, self-efficacy is linked in to behaviour change
(Bandura, 1977) and to health (Bandura, 1998). Personal self-efficacy plays an influential role in how effectively people deal with health stressors, as well as how they approach health change and mediate social influences on health (Bandura, 1998). Self-efficacy also provides grounding for individuals to join with others to engage in processes of socio-structural change, for example political action (Bandura, 2001). As Bandura describes individuals with high self-efficacy it is clear that youth participants with these characteristics would be more effective in influencing their own health, and the health of their peers. He describes the efficacious individuals: “…[They maintain] intrinsic interest and deep engrossment… they set themselves challenging goals and maintain strong commitment…they quickly recover…after failure or setback.” (1994, p. 71).

**Sources of Self-Efficacy**

As self-efficacy is an important component of learning, behaviour change and health, understanding the sources of self-efficacy development is critical. Bandura details four sources of influence on self-efficacy: actual performance accomplishments, vicarious experiences, social persuasion (also referred to as verbal persuasion) and physiological states or indexes (Bandura, 1977; Bandura, 1994). Actual performance or mastery experiences allow increasing efficacy. This must include experience in overcoming challenges (not simply achieving quick and easy success) to develop the belief that sustained effort in the face of adversity will produce the desired results (Bandura, 1994). While mastery is the most effective way of increasing self-efficacy, given that it is a direct indicator of performance, it is not the only way to acquire efficacy (Schunk & Pajares, 2009). A significant amount of learning and efficacy development
can occur through observing others. This ‘vicarious experience’ through social modeling has the potential to increase motivation. In order for vicarious experiences to be most effective, the model must be someone that the observer feels is similar to them in areas related to the observational task. As people tend to seek out models to which they aspire, a competent model has great potential to teach (Bandura, 1994; Schunk & Pajares, 2009). Vicarious experiences can be negated if the modeled peers fail, or if the individual has a subsequent performance failure. However, overall vicarious experiences are an effective source of self-efficacy. The third source of self-efficacy is social or verbal persuasion. This refers to verbal encouragement from others, (i.e. “you can do it”). While it is not as effective as the first two sources, it still offers a potential boost that can lead to increased effort, leading to people trying hard and succeeding at the task at hand, thus increasing efficacy via mastery experiences (Bandura, 1994). However, if the verbal persuasion is ‘empty praise’ or does not accompany an opportunity to succeed it will not be effective. Negative persuasion or poor performance following positive persuasion will weaken self-efficacy (Schunk & Pajares, 2009). The power of verbal persuasion in influencing efficacy is also influenced by how the individual perceives the source, for example, do they find the source to be trustworthy or offer a particular expertise that increases the saliency of the verbal comments (Maddux & Gosselin, 2003).

Finally, self-efficacy can be influenced by physiological and emotional states. When people are put in challenging situations, a stress reaction, tension or a feeling of anxiety is to be expected. How people respond to their reactions influences their self-efficacy. For example, judging a feeling of anxiety as a sign that one will perform poorly will lower efficacy, but judging it as an energizer or performance facilitator will increase
efficacy (Bandura, 1994). Similarly, emotional reactions can influence physiological reactions. For example, fears about one’s capacity to perform in a given situation, in addition to lowering efficacy directly, can also increase stress, and corresponding physiological reactions that will begin to influence performance, making the likelihood of a negative performance even greater (Schunk & Pajares, 2009). Bandura believes that in such situations mood is directly related to self-efficacy – a positive mood will increase efficacy and a negative mood will lead to decreases (Bandura, 1994). Learning to exercise control over the negative emotional beliefs and the physiological reactions, as well as correcting disbeliefs between physical reactions and performance (e.g. if I am nervous, I will fail) can increase efficacy (Bandura, 1994; Schunk & Pajares, 2009).

**Operationalizing the Dimensions of Agency – The Youth Agency for Social Change Model**

In applying the constructs of agency to youth participation in health promotion, Suleiman et al. (2006) highlight the value of the Youth Led Action, Research, Evaluation and Planning (REP) ‘Youth Agency for Social Change Model’ (Figure 1). This model was used to guide the social action framework projects of the study and clearly combines social cognitive theory with the tenets of a social action framework. The strength of this model is its simplicity and completeness, in using a “nested understanding of the factors that can lead to increases in youth agency” (Suleiman et al., p. 139).

Self-beliefs, specifically self-efficacy, form the core of the model, the grounding component that allows other dimensions to flourish. These are the central and most critical dimensions of the model. Forming its core, self-efficacy provides the basis for the
other nested levels of the model, in line with Bandura beliefs that self-efficacy is the most crucial component of agency development.

Knowledge about health and the topics at hand, inform decision-making and action, and skills “…provide the tools needed to gather, analyze and apply knowledge” (Suleiman et al., p. 139). Specifically, content knowledge refers to the concepts that inform the action (Suleiman, et al.). In the HBeat project, content knowledge was defined as an understanding of the basic concepts in health promotion framing the project - creating effective health promotion campaigns, the components of positive lifestyle (reduced distress and increased positive emotion) and the basic information about heart health presented during the week. Skills are considered the “tools that are needed to gather, analyze and apply knowledge” (Suleiman et al., 2006 p. 139). For this research, the skills being assessed relate to the ability of the youth to be effective peer health leaders. These skills are further conceptualized as ‘hard’ and ‘soft’ skills. Hard skills refer to technical competencies, including creating and making presentations, and delivering material to peers, and soft skills refer to the components of leadership that are crucial for functioning in a group, including working with others, judgment and decision making as a group, communication, and taking initiative (Gookin, Doran and Green, 2001).

A critical awareness of power emphasizes the central beliefs of social action, promoting critical thinking and allowing the young people to understand how their experiences are shaping and being shaped by major contextual influences, namely the “broader social, political, cultural and historical patterns” in their lives (Suleiman et al., 2006, p.140). This model also situates the dimensions of agency within the context of the program itself, stressing the need for supportive and challenging environments and
relationships. It is critical to include this environmental component as part of a complete understanding of agency, as Bandura’s concept of bi-directional influence notes the interactions between individual and context (Bandura, 1999). An expansion of the concept of bi-directional influence, Bandura’s discussion of triadic reciprocal causation states internal personal factors, behavioural patterns and the environment all interact and influence one another (Bandura, 1999). This dimension of the Social Action model refers to understanding how one’s experiences are shaped and in turn serve to shape, “broader social, political, cultural and historical patterns” (Suleiman et al., 2006, p. 140). The application of this part of the model in the HBeat Youth Leadership program included two distinct perspectives: first, a perspective directly related to health - the social determinants of health, and second, a perspective related to their role as peer health leaders and agents of social change, referring to the process of “acquiring greater self-awareness and knowledge of their potential to act on their own and as a group… and the role of youth in social change” (Cargo et al., 2003, p. S74).

The project environment is the social climate, largely a product of relationships, with peers, staff, facilitators, researchers and the organization. According to Cargo et al., (2003), a welcoming social climate includes adults providing opportunities for, believing in, respecting, encouraging, and caring for the young people with whom they work. These relationships form the basis of the empowering environment needed for experimenting and growing as an agent of social change (Cargo et al., 2003; Suleiman et al., 2006). The program elements of the HBeat Youth Leadership program are also considered as part of the environment. This refers to the formal and informal components that were deliberately included, encompassing all logistical components such as the overnight
camp, groupings of participants, scheduling, and all program activities as per the camp schedule (Appendix A).

The figure below shows the model presented by Suleiman et al., as the social action model framing the Youth REP program. It highlights the dimensions of agency that are considered most crucial for young people participating in health promotion projects.

![Diagram](image)

*Figure 2. Youth Agency for Social Change Model. (Suleiman et al., 2006, p. 140)*

**Summary of the Review of Literature**

In this chapter, the dimensions of agency were introduced and framed within Social Cognitive Theory in order to support the crucial capacities a young person
involved in health promotion needs to successfully participate. The derivation of the
general ‘social action’ framework adopted by the HBeat study was outlined, describing
how social justice youth empowerment, youth development, and empowerment education
all contribute important components to applying theory into the practice of training young
people to be active participants in health promotion. A review of the literature
surrounding youth health issues, the social determinants of health and health promotion,
highlighted the call for more innovative strategies for youth involvement in the processes
of their own health. Participation was introduced as a promising approach to health
promotion and youth participation in health promotion was outlined as a successful and
well-supported approach. This literature review supports the HBeat project’s adoption of
a participatory approach to design and implementation of a school-based health
promotion intervention surrounding the social determinants of childhood hypertension,
and the use of peer health leaders as part of the participatory process. It also addresses the
need to study the experiences of groups of young people involved in training to become
peer health leaders, by highlighting the limitations in extant literature surrounding the
process of training youth for involvement in health promotion. This literature review also
helps to support aspects of the data collection methods outlined in Chapter Three.
CHAPTER 3: METHODOLOGY

Theoretical Perspective: Pragmatism

A pragmatic framework framed this mixed-methods research project. Research addressed from a pragmatic perspective is driven by the research questions and focused on the consequences of the research in real-world practice (Creswell & Plano-Clark, 2007). Pragmatism is less focused on the links between methods and epistemology that define other paradigms, and instead uses a practical and applied research philosophy (Teddlie & Tashakkori, 2003). Pragmatism is considered the most common paradigm in mixed method research; it is well-documented and well-applied in business, health care, social service and education (Rallis & Rossman, 2003). As evaluation research is highly motivated by practical research questions and often uses a mixed-methods approach, a pragmatic perspective is appropriate (Rallis & Rossman, 2003). Pragmatism rejects the belief that qualitative and quantitative methods are incompatible, and instead focuses on how the complementary strengths and non-overlapping weaknesses of the two approaches can be used together to answer the research questions (Teddlie & Tashakkori, 2003).

Methodological Approach: Evaluation

This research aimed to understand if the HBeat Youth Leadership Camp contributed to the development of agency in a group of young people, how this process occurred, and how the youth participants experienced agency development. As one
purpose of evaluation is “to measure the effects of a program against the goals it set out to accomplish” this methodological approach is congruent with the purpose of this research (Weiss, 1972, p. 4). Like most research methods, numerous definitions and various approaches to evaluation exist in the literature. For the purpose of this research, Patton’s broad definition of evaluation was used:

The systematic collection of information about the activities, characteristics, and outcomes of the programs, personnel, and products for use by specific people to reduce uncertainties, improve effectiveness, and make decisions with regard to what those programs, personnel or products are doing and affecting” (Patton, 1982, p. 35).

Evaluation is common in health promotion research. According to Grembowski, health program evaluations aim to answer “two fundamental questions: Is the program working? and Why is this the case?” (2001, p. 3). Health promotion evaluations can be conducted using qualitative, quantitative and mixed method approaches (Pope & Mays, 2006). Given that mixed method approaches are often considered most appropriate for health promotion evaluations, as the complementary strengths of qualitative and quantitative approaches are particularly evident in health research, a mixed-method evaluation will be used for this study (Stewart et al., 2008). Finally, it must be acknowledged that a core aim of evaluation, especially within health and health promotion, is to promote social change (Grembowski, 2001). Because of this, evaluators must be aware of their own values and how their roles influence the evaluation process (Grembowski, 2001). Research reflexivity is a crucial element of evaluation, and will be considered comprehensively in a later section of this chapter.
Research Design: Mixed Methods Design

Mixed methods research collects diverse types of data to answer the research question. It provides answers to research problems that single methodologies cannot fully answer, for example answering confirmatory and exploratory questions within the same study (Teddlie & Takhakkori, 2003). This study used a simple triangulation mixed-methods design (Figure 3). The triangulation approach involves collecting both qualitative and quantitative data during the same timeframe, analyzing data separately using appropriate strategies for each type of data, and merging results together during the overall interpretation (Creswell & Plano-Clark, 2007). The triangulation design allows the researcher to compare and contrast “different but complementary” data (Creswell, 2003, p. 62). It also provides an ability to use different types of data for different research questions or levels of study within a single research question (multi-level triangulation), while still maintaining the methodological integrity of each method. Morse (2003) defined methodological integrity as “the rigor of the project, maintained by adherence to the assumptions, strategies, data appropriateness, adequacy, and so forth that are consistent with each particular method” (p.190). Using this approach to mixed methods allows convergent, complementary or divergent data to further the understanding of the research question (Creswell & Plano-Clark, 2007). Mixed methods are commonly used in health research and are considered appropriate for answering the complex questions addressed in research related to health determinants (Stewart, Makwarimba, Barnfather, Letourneau & Neufelda, 2008). When applied to research with young people, using mixed methods also ensures an opportunity to include data collection that provides rich descriptions of youth perspectives of their own experiences, providing them with a voice
in the research (Freeman & Mathison, 2009). In this same manner, mixed methods can allow the researcher to capture different values and opinions, which can transform the dialogue and alter ideological differences (Caracelli & Greene, 1997, in Rallis & Rossman, 2003). As this study aims to examine the experiences of forty-two participants of the HBeat youth leadership camp, a way of ensuring a voice for the differing opinions of all participants is critical for a comprehensive evaluation. It also intends to consider critical issues surrounding youth participation in health promotion, something that requires addressing the various influences on participation, from the perspective of the youth themselves. Finally, the pragmatic perspective advocates using all the possible information available to understand complex social phenomena (Rallis & Rossman, 2003). As this research project is part of the larger HBeat study, the researcher has access to significant amounts of relevant survey data and analysis tools, which allows for effective inclusion of quantitative data into the evaluation process. Including this quantitative data provides a more complete picture of HBeat youth leadership camp, and helps better understand the experiences of youth participants. For these reasons, a mixed-methods approach following a simple triangulation design was considered appropriate for this study.

![Figure 3. Triangulation Design: a common approach in mixed-methods research design (Creswell & Plano-Clark, 2007 p. 63).]
The Research Site – HBeat Youth Leadership Camp, Brock University

The HBeat Youth Leadership Camp was a component of a larger study called the HBeat study, an ongoing research study at Brock University funded by the Heart and Stroke Foundation of Ontario. The HBeat study proposes to identify social factors related to hypertension and to explore why these factors are linked to blood pressure in children, using this information to create and evaluate an intervention addressing these factors. Data collection and analysis prior to the start of this research included blood pressure screening, lab-based cardiovascular health assessments, child and parent questionnaires, focus groups and data management and analysis (HBeat School and Parent Report, 2009). The timeline for the implementation of the entire HBeat Project is detailed below in Figure 4.

![Figure 4. Timeline for Implementation of the HBeat Study (Wade, 2006).](image)

The initial phases of the HBeat research identified the link between perceived stress and cardiovascular health could be a valuable area for intervention. A commitment to
including youth in the process of the intervention led to the design of the HBeat Youth Leadership Camp as an opportunity to prepare young people for involvement in the implementation phase of the overall research project, specifically as the intervention to address perceived stress levels was designed. The HBeat youth leadership camp was considered the initial preparation for involvement with the HBeat intervention, as ‘peer health leaders.’ Following the leadership camp the student participants returned to their schools as grade eight peer health leaders to deliver the HBeat intervention in their schools (November 2010 – April 2011). A timeline of the Intervention (Phase II) of the HBeat project, including the HBeat Youth Leadership camp is detailed below in Figure 5.

Figure 5: HBeat Project Timeline - Phase II (Intervention)

Participants

The forty-two young people who participated in the five-day HBeat youth leadership program at Brock University were the study participants for this research project. Youth were recruited from the grade seven classes at five Niagara Region elementary schools that had been pre-selected as intervention schools. These schools represented a diverse sample of both urban and rural schools, both high and low income,
and varying student population sizes. This information is given in detail in Table 3 below. Only two selection criteria were applied for student participation in the HBeat youth leadership camp: 1) youth must have finished grade seven in June 2010, and be intending to return to grade eight in September 2010 at the same school, and 2) youth selected must have participated in the HBeat project to date, including completing the HBeat Parent and Child Questionnaires from March-April 2010. Beyond these two requirements, selection for participation was on a first come, first served basis with ten available spots per school, ideally balanced by gender. In June 2010, a letter of invitation was distributed to all qualified grade 7 students inviting them to phone the HBeat project coordinator to register for the HBeat Youth Leadership Camp. This registration process balanced the needs of the researchers (ethical considerations), with the needs of the schools (teacher and principal time commitments) and the project timeline. The HBeat project coordinator organized participant registration, first filling the five male and five female spots at each school. Additional students from larger schools were placed on a waiting list while recruiting continued at smaller schools. Two weeks prior to the camp start date, all spots were opened, and waiting list participants were contacted. A final breakdown of participants by school and gender is included in Table 3 below.
Table 1. School and participant demographics

<table>
<thead>
<tr>
<th>School*</th>
<th>School demographics</th>
<th>Total # of students in grades 5,6,7</th>
<th>Total # students registered in grade 7</th>
<th>Total # of participants at camp (% grade 7 population)</th>
<th># Male students at camp</th>
<th># Female students at camp</th>
</tr>
</thead>
<tbody>
<tr>
<td>St. Mark Elementary</td>
<td>Urban low</td>
<td>172</td>
<td>50</td>
<td>14 (28%)</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>C.R. Matthew Elementary</td>
<td>Urban low</td>
<td>38</td>
<td>13</td>
<td>4 (30%)</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Central Lake Elementary</td>
<td>Urban high</td>
<td>133</td>
<td>43</td>
<td>9 (21%)</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>St. Anne Elementary</td>
<td>Urban low</td>
<td>58</td>
<td>22</td>
<td>4 (18%)</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>John Kenlen Elementary</td>
<td>Rural</td>
<td>156</td>
<td>56</td>
<td>11 (20%)</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>TOTAL</td>
<td>-</td>
<td>557</td>
<td>184</td>
<td>42 (23%)</td>
<td>13 (30.9%)</td>
<td>29 (69.1%)</td>
</tr>
</tbody>
</table>

*pseudonyms have been used for all school names. School demographics based on average household income in the school area. All data from the 2009-2010 school year.

The intent behind inviting all students was to attract a more diverse group of participants, rather than only ‘known’ or ‘typical’ school leaders. Social learning theory and surrounding literature on peer education supports the importance of peer leaders having common characteristics with the target population (Milburn, 1995). Such research also suggests that recruitment by an adult-led selection process (e.g. asking principals) can have an influence on the youth involved and can distance the peer leaders from the majority of the peer group (Milburn, 1995). The HBeat process did not involve any direct selection by schools. However, it must be acknowledged that principals were asked to encourage students to consider becoming involved, and could have focused these efforts
on certain students, so it is not possible to rule out the effects of adult selection altogether.

Literature also stresses the importance of motivation as an important element of becoming a peer health leader (Cargo et al., 2003). The self-selection process also was intended to help ensure that students who attended had some personal interest or motivation towards becoming a peer health leader. Again, however, it is not possible to rule out the role of adult influence, as parents could have encouraged their children to attend a free overnight camp for a variety of reasons, and it was beyond the scope of this research to assess each participant’s personal motivations to attend camp.

Upon arrival to camp, students were assigned to one of four ‘camp groups’, comprised of students from all schools, and led by Brock University research assistants (camp counselors / leaders). For the clarity and interest of the reader, the students in each camp group, along with their schools are listed below in Table 4 using the pseudonyms that will be used throughout this thesis.
Table 2. Group assignments of participants in the HBeat Youth Leadership Camp

<table>
<thead>
<tr>
<th>Group</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Counselors</td>
<td>Students</td>
<td>Students</td>
<td>Students</td>
</tr>
<tr>
<td></td>
<td>Jerry, Tammy, Beth</td>
<td>-</td>
<td>Cathy &amp; Keith</td>
<td>Amy &amp; Cam</td>
</tr>
<tr>
<td></td>
<td></td>
<td>St. Mark Elementary</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ben</td>
<td>Ben</td>
<td>Brad</td>
<td>Ada</td>
</tr>
<tr>
<td></td>
<td>Gabrielle</td>
<td>Gabrielle</td>
<td>Grace</td>
<td>Gweyn</td>
</tr>
<tr>
<td></td>
<td>Hailey</td>
<td>Hailey</td>
<td>Hope</td>
<td>Allan</td>
</tr>
<tr>
<td></td>
<td>Adam</td>
<td>Adam</td>
<td></td>
<td>Maria</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Central Lake Elementary</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Isabella</td>
<td>Julie</td>
<td>Jaylene</td>
<td>Diana</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Justin</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Kelly</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>St. Anne Elementary</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Tessa</td>
<td>Owen</td>
<td>Tracey</td>
<td>Kathy</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Zoe</td>
<td></td>
<td>Rylie</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Edward</td>
<td>Stacey</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Dawn</td>
<td>Vince</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Mya</td>
<td>Joyce</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Eva</td>
</tr>
</tbody>
</table>

As stated earlier, all participants in the HBeat Youth Leadership camp had completed the initial HBeat Child Questionnaire in May 2009. From this information, it is possible to gain a more complete picture of the camp participants. Table 3 describes some basic demographics of camp participants.

**HBeat Youth Leadership Camp Staff**

The HBeat Youth Leadership Camp staff team can be divided into three subgroups, including 1) a core team of camp coordinators and camp counselors, 2) HBeat research team members, and 3) ‘guest presenters / guest instructors’ who taught specialty sessions. Each of these three groups is briefly described to help contextualize the findings of this evaluation.
The core team of camp coordinators and camp counselors spent the majority of the week in direct contact with the youth participants. Coordinating the week was a team comprised of the HBeat project coordinator (female, full-time employee), a male undergraduate student (2nd year Recreation and Leisure Studies) with significant camp experience (pseudonym Mark), and the researcher (female, Master’s candidate). Working together this team acted as ‘senior staff” for the week, coordinating logistics and supporting the camp counselors. All three coordinators stayed in residence throughout the week. The camp coordinator, Mark, spent the majority of his time working directly with the students, while the researcher and HBeat project coordinator tended to spend time both in and out of the program, as needed.

The camp counselor staff worked directly with students, living in residence, eating, instructing, and learning with the students. They were essentially present 24 hours a day with the student participants (with breaks as appropriate). This team consisted of a diverse group of eight (four male and four female) undergraduate students, and one (female) graduate student all from the Brock University community. These staff ranged in age from 19-25 years, studying Child and Youth studies, Recreation and Leisure Studies, Community Health Sciences, Public Health, and Kinesiology. Three of the staff members had just completed their 2nd year of study, three had completed their 3rd year of study, two had completed their 4th year, and one was in the process of completing her Master’s degree. All staff completed an application and interview process with the researcher and project coordinator. Staff represented diverse experiences working with youth, including Municipal day camps, ‘traditional’ overnight camp, camps for persons with disabilities, faith-based youth programs and overnight camps, coaching and sport programs,
culturally-based programming, arts and music instruction, and experiences with caring for siblings in large families. The camp staff also had a wide variety of interests and skills. During the interview process diversity of experiences, interests and areas of study was considered, in order to build a staff team that appealed to the diversity of student participants. All camp staff participated in a paid four-day intensive training, led by the camp coordinators, research team members and guest presenters. This training included orientation to the research project, content knowledge, safety and risk management training, and intensive sessions on creating a supportive camp environment, building effective relationships, effective teambuilding pedagogy, and an introduction to the theories that grounded the camp goals, (e.g. empowerment education, positive youth development, and health promotion). The training was delivered in an experiential, workshop style, and also included significant time for teambuilding activities within the staff team, opportunities for all staff to instruct their peers, and structured discussions (pairing talks) between the staff teams. All camp staff received a staff-training manual. As well, the camp staff was given the opportunity to participate as research assistants by journaling throughout the camp week. Staff members were given journals, instruction in journaling techniques, and a list of questions to consider for journaling during the training sessions. With nine counselors for a group of forty-two students, they represented a staff to student ratio of 1:4.6. When the three camp coordinators are considered, the ratio becomes 1:3.5, which is considered an excellent ratio for camp programs. All camp staff have been assigned pseudonyms for this study.

The HBeat research team also played a critical staff role throughout the camp week, with specific involvement from two Brock University professors, one who created
the curriculum modules for directly addressing perceived stress (‘positive living’ curriculum), and was present to instruct the first of several modules. The other professor, who was the lead coordinator on the overall HBeat study acted as an overall supervisor, gave an introductory welcome, was present to interact with parents as needed, and observed activities throughout the week. Neither of these researchers stayed overnight in residence, and both tried to stay in the background of the program as much as possible, observing but not interfering with the work of the camp staff.

Finally, a 3rd group of ‘guest presenters’ can be considered as part of the staff team for the HBeat Youth Leadership camp. This includes the instructors for ‘expert’ sessions; two undergraduate drama students who instructed the drama session, two health sciences graduate students who instructed the heart health sessions, and three professional videographers who instructed the video session (the graphic design session was instructed by two camp counselors with expertise in this area). As well, four expert instructors were hired to instruct drumming, yoga, tai chi, and nature walk (orienteering). All of these instructors were experts in their area of instruction, with certifications, significant experience and passion for their subject areas.

Camp Activities

During the week at camp, the youth participated in a series of curriculum activities based around the HBeat framework for increasing capacity and decreasing distress to build positive lifestyles. Content specific training prepared them to work alongside the research team as consultants to create, and subsequently as school leaders to implement a pilot health promotion intervention addressing the influence of perceived levels of stress
on childhood heart health. The overarching goals of the HBeat Youth Leadership camp were: (1) to build motivation for participation as peer health leaders in the 2010-2011 school year; (2) to provide the youth with the dimensions of agency (leadership skills, content knowledge, and self-efficacy, critical awareness of power) required to be effective peer leaders; (3) to raise awareness of how the social context influences health and encourage critical thinking related to the social determinants of health; (4) to create and develop material for the 2010-2011 school intervention; and (5) to provide a positive and enjoyable camp and leadership training experience with opportunities for all participants to build positive relationships and experience new activities (HBeat Youth Leadership Camp Documents, 2010).

**Data Collection**

In line with mixed-method evaluation strategies and the pragmatic perspective, the research questions are considered more important than the methods used to answer them. Teddlie and Tashakkori (2003, p. 21) referred to this as the “dictatorship of the research questions.” To this extent, data was collected using a variety of methods including both quantitative surveys, and qualitative observations, focus groups and journals, with the aim of best answering the research questions. Data collection was guided by the research questions with an understanding that the emergent properties of mixed-methods evaluation research require flexibility throughout the process (Creswell & Plano-Clark, 2007, DeLuca, Poth & Searle, 2009, Patton, 1982, Teddlie & Tashakkori, 2003). The research questions guiding this study were:
1. Did the HBeat Youth Leadership camp contribute to building agency in the group of youth participants as evidenced by self-reported increases in the key dimensions of agency: self-efficacy, skills, knowledge, and critical awareness?

2. How did the group of youth participants experience the processes of agency development during the HBeat Youth Leadership camp?

3. In what ways did the specific processes and content of the HBeat Youth Leadership camp contribute to agency development in the group of youth participants?
   a. What were the program elements of the Hbeat Youth Leadership camp that were considered by the group of youth participants as being the most significant contributors to their development of agency?
   b. What were the contributions of the environment and relationships at the HBeat Youth Leadership camp that were considered by the group of youth participants as being the most significant contributions to their development of agency?

The details of the data collection and analysis for both the qualitative and the quantitative components are detailed in the following sections. Figure 6 presents a detailed outline of the data collection timeline for this evaluation of the HBeat Youth Leadership Camp. As well, Appendix G provides details for all data collected for all components of the HBeat
Intervention.

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*Figure 6: Data Collection for HBeat Youth Leadership Camp Evaluation*

**Quantitative Component**

**Research Questions Addressed**

The quantitative aspect of this study describes and analyses self-reported student surveys measuring various self-beliefs. This was used to evaluate the dimensions of agency related to self-efficacy, addressing research question #1 and elements specific to the social context and relationships formed at camp are applicable to question #3a.

**Quantitative Data Collection**

Data was collected using two surveys: relevant components of the HBeat Child Questionnaire and the HBeat Youth Leadership Camp Evaluations. The HBeat Child
Questionnaire is an ongoing component of the HBeat project. The shortened version of the Child Questionnaire focuses specifically on perceived mastery, perceived competence, perceived stress levels. In this questionnaire, perceived mastery was measured using Pearlin and Schooler’s (1978) 7-item scale that refers to the extent in which individuals view themselves to be in control of their own lives ($\alpha=.88$) for child self-report (Wade, 2006). Self-esteem was measured by Rosenberg’s 10-item scale, which measures individual perception of self-worth ($\alpha=.85$) (Wade, 2006). Overall perceived competence, and perceived competence on various sub-scales including, physical, athletic, cognitive, social and general / overall was measured by the Self-Perception Profile for Children (SPCC) (Harter, 1982). Perceived stress was measured by a 14-item perceived stress scale (Wade, 2006).

The HBeat Child Questionnaire was previously administered to all participants in Spring 2010. The survey was distributed to all students in participating schools, to be completed at home and returned in a sealed envelope to school. Surveys were collected and research assistants entered data into a specially designed database. For this phase of collection, the shortened version of the HBeat Child Questionnaire was administered to camp participants immediately following lunch on the final day of the camp by the primary researcher, assisted by research assistants working at the camp. Students were asked to spread out throughout the cafeteria following lunch, and completed the questionnaire seated at tables. Students had as much time as they needed to complete the survey. As students finished, the surveys were returned to research staff and students were able to leave the cafeteria area. While these tools were chosen to provide a post camp assessment that could be linked to the pre-camp assessment of the HBeat study, it
must be noted that a limitation of this research included the choice that these tools were driven by the original HBeat study, rather than considering fully the best possible tools for this specific research and the research questions.

The HBeat research and program staff designed the HBeat Youth Leadership Camp Evaluation questionnaire for the specific purpose of this evaluation and related research. The questionnaire consisted of a knowledge assessment, a logistics / general impressions component, and a self-efficacy component. The knowledge component was a content-based assessment of the curriculum presented throughout the camp, relating to positive lifestyles and health promotion. The logistics / general impressions component was designed as a standard end-of-program evaluation, to assess how well the youth enjoyed the camp experience, and the self-efficacy component was a set of questions developed by the research team to assess agency related to specific aspects of the HBeat Youth Leadership camp. This questionnaire was administered only once, on the final day of camp (Friday afternoon) to capture data at the very end of the camp experience. This survey is included in Appendix B.

**Quantitative Data Analysis**

Quantitative data was analyzed using two computer software programs. Data from the HBeat child questionnaire were entered into the Microsoft Access HBeat database, and then extracted into a SAS 9.2 file for analysis. Data from the evaluation surveys were entered into Microsoft Excel and basic analysis was completed using Excel.

Univariate statistics were used in order to identify distribution of data, measures of central tendency, measures of dispersion and to check for missing data or any errors in data entry. Univariate analysis was also used for organizing demographic data. Following
univariate analysis, repeated measures regression analysis was used to compare the relevant items of the 2010 Spring HBeat Child Questionnaire results with the data collected from the HBeat Youth Leadership Camp shortened Child Questionnaire.

For the purposes of this Master’s thesis, only the best/worst activities of camp subsection of the HBeat Youth Leadership Camp Evaluation was analyzed, using basic univariate statistics to identify distribution of data, measures of central tendency and measures of dispersion. A complete analysis of how the students learned the content of the positive living curriculum is beyond the scope of this research, and is being completed by other researchers. The general impressions component was mainly related to camp logistics and was also determined to be beyond the scope of this research.

**Reliability, Validity and Generalizability of Quantitative Component**

Addressing limitations in the quantitative component of this study requires consideration of validity and reliability, as well as considering the psychometric tool that was used, and the sample size used for analyses.

Content validity considers if the measure represents all the aspects of the conceptual definition of a construct (Neuman & Robson, 2009). While this evaluation attempted to comprehensively capture important components of the HBeat camp, there still remains a possibility that the evaluation is missing an element the youth participants found significant, thus limiting content validity. Given the scope of the research questions, and the measures chosen, it is important to recognize the limitations in content validity.

As well, with a limited sample size (42 participants), analyses may have had limited statistical power to adequately assess significance of effect sizes. To address this concern,
a sample size estimation was calculated using the equation \( n = \left[ \left( z_\alpha + z_\beta \right) \sigma / \delta \right]^2 \).

*Posthoc* calculations indicated that the required sample size was 42. Given that the sample size used was quite close to this critical value, between \( n = 39 \) and \( n = 41 \), the sample size can be considered adequately powered.

In research that involves the use of surveys or psychometric instruments, the instrument used plays a significant role in the reliability of the results collected. The main instrument used in this research, Harter’s Self-Perception Profile for Children, is well documented in the literature and has been used by numerous researchers over the past three decades (Wichstrom, 1995). Harter’s scale uses a ‘structured alternative format,’ which provides two alternate descriptions, for example “some kids are good at school” “other kids are not good at school.” Accompanying each alternate are two options – ‘really true for me’ and ‘sort of true for me’. Harter argues that this format helps to reduce answer bias by allowing both responses to be positive choices and thus discourages a bias towards picking the desirable response (Harter, 1982). This approach also allows the student to provide some level of qualification to his/her answer (Wichstrom, 1995). To complete the Self-Perception Profile for Children, respondents rate 36 items that represent seven sub-scales. The Self-Perception Profile for Children achieves an acceptable measure of internal consistency (how closely related a group of items are to each other) with Cronbach’s alpha = 0.70-0.86, indicating that the items of the scale measure an underlying latent construct (Blum, 1998). Given the Cronbach’s alpha score, the Self-Perception Profile for Children can be considered a reliable instrument.

Finally, generalizability of the study is limited by the specificity of the study
context. As this evaluation is assessing a specific program during a specific time, it is very context specific. It is also difficult to use these data to understand how another group of young people would respond to a similar program. Furthermore, programs like the HBeat Youth Leadership training contain so many unique components that it is difficult to measure and assess the individual impact of each element. It is important to recognize that there may be significant dimensions of the training missing from this study, as they are unknown to the researcher.

**Qualitative Component**

**Research Questions Addressed**

The qualitative component of this study addressed all research questions, including increases in the dimensions of agency (question 1), the experience of the youth in developing agency (question 2) and the connections between the elements, relationships and environment of the HBeat Youth Leadership Camp and agency development (question 3a, 3b). These research questions were addressed using all the requirements of qualitative research in order to maintain the methodological integrity required of triangulation-design mixed-methods research.

**Qualitative Data Collection**

*Focus groups.*

The main qualitative data collection approach for this study was focus groups. Four focus groups were held on the final day of the HBeat Youth Leadership Camp. The
purpose of these focus groups was to understand the current perspectives of the young people on developing agency, including key moments, successes and challenges from the training week, as well as anticipated successes and challenges in transferring the learning from the camp week back to schools as Peer Health Leaders. The focus groups provided data for all three research questions, and were a key source of information for understanding how the group of youth experienced the process of agency development (question 2). Focus groups also provided rich descriptions of the elements of the HBeat camp the group of young people see as most significant question 3a and 3b.

Focus groups were conducted with students in their camp groups on the final day of camp. Focus groups lasted between 36 and 47 minutes in length, staying within the 1 hour time limit set by the researcher. Focus groups were recorded using a video camera, and in one case (due to camera error), a digital audio recording device. The researcher facilitated two focus groups, and a camp staff member who had used focus groups as part of her previous Master’s research facilitated two focus groups. This was because of scheduling constraints that prevented the researcher from being able to attend all four focus groups. Two other camp staff members were present in the focus group rooms to assist with the video camera. No camp staff member was present in the same focus group with students they had worked with in the capacity of group leader. The focus groups were considered a significant component of the data collection process. Besides providing data for the ongoing research, and helping to shape intervention implementation in Fall 2010, focus groups also acted as a formal opportunity for youth to participate in the research process and to debrief and share at the end of camp.

However, this approach to the focus group collection - specifically the timing of
completing all four focus groups on the final day of camp, meant that it was not possible
to ensure that saturation was achieved and no new or relevant information could emerge
from further data collection. However, as the purpose of this research was not to generate
a theory, but rather to investigate the process of the camp experience, saturation was not a
goal of this research.

Focus groups were chosen as a data collection method to allow the views of many
stakeholders to be assessed simultaneously, and promote group interaction and
discussion, which will provide distinctive data including shared knowledge (Pope &
Mays, 2006). Focus groups also provide participants the opportunity to generate their
own questions and work towards a better understanding of their own beliefs on the issues,
which resonates with the participatory principles of the HBeat project. Focus groups are a
popular method used in health and education, especially when aiming to understand
dominant cultural values held by a group, while still respecting the diversity of opinions
within a group (Pope & Mays, 2006). The focus group method is also an appropriate tool
for research focused on the group process. As the agency development throughout the
week occurred in a group process, with the goal of affecting future work as peer leaders
working in groups, it is logical to have used a data collection strategy that maintains a
group focus, and promotes group interaction. This group interaction can also allow the
facilitator to appreciate how participants make meaning of their experiences in a public
forum (Raby, 2010).

Research has also shown focus groups to be an effective method to be used with
adolescents, as it can be a way of shifting the power imbalances from the facilitator to the
participants (Raby, 2010). This respects the democratic values of youth participation that
were important for this study, and were also respected through an attempt to include as many youth voices as possible in data collection. Focus groups allowed this to occur very effectively within the time constraints of the camp, as all participants had an opportunity to participate in the focus groups. As well, the format for the focus group aimed to parallel the group activities that youth were engaged in throughout the camp (debriefing & circle work) and thus could be considered a less invasive form of data collection. The focus group guide detailing questions is included as Appendix C.

**Journals.**

Participants in the HBeat Youth Leadership camp kept journals throughout the week as part of the program activities. Journals were collected at the end of the week and photocopied and then returned to the students by mail. All ethical guidelines were followed and only the research team had access to the journals. Youth were informed at the beginning of the week that their journals would be collected at the end of camp if they allow it, but students had the option to opt-out if they so chose. If students wanted to keep certain parts of the journal private, they were informed that they could fold over and staple / sticker the pages so they cannot be copied, or they could remove certain pages from their journal. Many youth did decide to fold over pages, and these pages were not photocopied, and therefore were omitted from the research. Youth could also choose to not submit their journal, choosing to opt-out of this form of data collection. One youth choose not to submit her journal and therefore it was not collected for copying and excluded from the research. The total number of journals collected was therefore forty-one.
While the entire student journal was copied for use in various HBeat research projects, only two elements of the journal were included in analysis by the researcher for this thesis, using questions and elements of the journal that were specifically geared towards individual reactions to the group interaction. Use of the journals also provided a venue for youth to disagree privately with the group discussions from the focus groups, and ongoing group discussion, acting as a method of triangulation for the focus group data (Raby, 2010).

Firstly, a journal question related to critical awareness ("What was the biggest change in thinking that happened for you this week?") was used to help understand how the young people are developing the dimension of critical awareness of power through group interactions at the HBeat camp. This addressed question #1 and question #2, specific to the critical awareness of the power dimension of agency. Including a focus on critical awareness of power in the journals was intended to help the participants express their thoughts surrounding this area, which is known to be a difficult element for young people to articulate, especially in programs of short duration (Suleiman et al., 2006).

Secondly, a series of questions relating to group interactions, including asking students to describe how they got along with group members, and their thoughts on leadership, were later transcribed and analyzed to provide credibility via referential adequacy to the focus group discussions. This was used in conjunction with participants recordings of ‘The best activity of the day was… and why’ to examine significant events and how students made meaning of these events throughout the HBeat Youth Leadership camp, addressing research question 3a. An outline of the questions asked in the HBeat Youth Leadership camp journal is outlined in Appendix D.
Journal Photo Pages.

Finally, within the journals, students were given an opportunity to participate in a photography project throughout the camp. All students were given a disposable camera on Monday, and received a brief orientation to taking pictures. On Thursday, the cameras were collected and developed. On Friday afternoon the photos were returned to participants, acting primarily as a keepsake of the week. Students were then able to participate in an activity where they selected several photos to include in their journals ‘photo pages’ section. There were four journal photo pages that asked students to consider the pictures that showed their thoughts on the influence of people, becoming a leader, learning new things, and overall experiences at HBeat Youth Leadership camp. This included writing a short description of the meaning of the photo to them directly below it on the page. While most students did complete this activity, and seemed to enjoy the process of taking pictures, the quality of the photos, along with the lack of description made it very difficult for the researcher to analyze this data in a manner that respected the democratic values of youth participation. As it was determined that there was not enough data within the photos to fully appreciate or present the meanings the youth participants had intended with the photos, this section was not used in primary data analysis. Occasionally, when the photos provided triangulation to another form of data, and the researcher felt that the meaning was clearly expressed, these pages will be mentioned in the results section.

Field Observations.

A fourth form of qualitative data that was collected was field observations. Observational data was collected by the researcher, in the form of detailed field notes on
the process of agency development throughout the 5-day program. Entry to the training week was straightforward as the researcher was already a member of the HBeat team and highly involved in the program development. The researcher attempted to act as a participant observer who remained involved in the program design and ongoing activities of the camp. However, at the same time, the researcher was still a “friendly outsider,” specifically because age and role in the camp prevented full insider status with the youth participants. Attention was paid to the innate power imbalances that are known to exist between any adult doing research with young people, and were continually noted by the researcher throughout the observation process (Raby, 2010). The researcher aimed to remain reflexive of her dual role as an observer and camp coordinator, an ongoing struggle that provided significant opportunities for reflexivity throughout the study. This will be further discussed in the reflexivity section of this report.

Observation research was determined appropriate for this study for two main reasons. First, observation research is becoming more common in qualitative health research and is commonly used to triangulate information given in focus groups and interview (Pope & Mays, 2006). It is also very appropriate for program evaluation research, specifically when used to explore what participants are identifying and experiencing as the most significant aspects of the training in non-formal interactions (Patton, 2002). Patton (2002) discusses the importance of direct observations for program evaluation:

…to absorb the program’s language, understand the nuances of meaning, appreciate variations in participants’ experiences, capture the importance of what happened outside formal activities (during breaks, overall meals, in late-night gatherings and parties), and feel the intensity of the retreat environment – nothing could have substituted for direct experience with the program. (p. 262)
Secondly, the researcher was very involved in the process of the HBeat Youth Leadership camp, allowing the opportunity for rich data to be collected during the camp week. These data provided strong descriptions of the camp week, and failing to include these data and acknowledge the researchers presence throughout the week would have limited the trustworthiness of the data.

For the purpose of this study, observation research was broad and holistic in focus, and was used to create a thick description of the events of the HBeat camp, capturing the context of interactions, in order to better contextualize findings from other data (Patton, 2002). This contributed to interpretation of all research questions. Specific attention was paid to question 3b (the environment and relationships), which involved deliberate attempts to observe and describe the environment and group interactions, as well as informal discussions with participants to help clarify how they viewed or experience certain elements of the HBeat Youth Leadership camp. Such informal interactions help the researcher deepen understanding of the observations and helped prevent the researcher from making assumptions about meaning (Patton, 2002). In this research, these informal interactions often happened during transitions or informal meal times. For example, the researcher would walk with a group of students and ask them what they thought about a certain activity or presenter, or sit with a group of students at lunch, participating in the conversation normally, but following the meal, quickly make notes on participant reactions that correspond with observations from earlier in the day. It is considered an essential part of observation to check with the participants to confirm understanding (Patton, 2002). As this research aimed to understand how the young people experienced the HBeat Youth Leadership camp, use of these informal interactions, and
reflexivity were crucial parts of collecting field observations. Using Patton’s (2002) recommendations, an observation guide was developed to help the researcher focus observations for detailed field notes (Appendix E). In order to maintain a broad focus, while still allowing details and thick description on specific elements of the HBeat Youth Leadership camp, the observation guide helped the research target observations on certain elements during certain activities or interactions. While observation was a critical component of this research, one limitation of this study that should be acknowledged is the fact that only one person (the researcher) collected observation data. While this was appropriate for the scope of this research, it is still considered a study limitation because including only one researcher’s perspective limited the scope of the data collected. Only one researcher meant that not all aspects of the camp could be observed, and, importantly, only one researcher meant that all observation data was being collected with only one perspective. Some observations may have been viewed and recorded differently by another researcher. However, the inclusion of other forms of data into the study helped to provide triangulation that addressed this concern.

**Qualitative Data Analysis**

Inductive analysis formed the basis of all qualitative data analysis. Inductive analysis is a trademark of qualitative data analysis, where the researcher allows meaning to emerge from the data, rather than imposing pre-determined concepts onto the data (Willis, 2007). The constant comparative method is an inductive process that is well supported. The constant comparative method is typically, but not solely associated with grounded theory (Willis). Willis states that this method can be used even when the
purpose of the research is not theory development, a belief supported by Kvale and Brinkmann (2009). Combining inductive category coding and simultaneous comparison of all units of meaning, the constant comparative method provides a systematic approach to coding data (Kvale & Brinkmann). This approach to qualitative data analysis was developed by Glaser and Strauss (1967), and allows a focus on coding and categorizing, to allow meaning to be associated with text (Willis, 2007). This method was used throughout this research.

Coding using the constant comparative method was used to analysis focus groups transcripts. Focus groups were transcribed verbatim, with attention to tone, emphasis, and hesitations. Attention was also paid to conversational features such as disagreements and agreements among group members as such group interactions are considered a significant strength of focus group research with young people (Raby, 2010). Coding was done using both a traditional ‘hands-on’ method and using the computer software program Nvivo 9. Transcripts were prepared for import into Nvivo 9 by adding headings to each school, student pseudonym, and question. This allowed Nvivo9 to perform efficient searches in the data. Initially the transcripts were read, and then printed and re-read. During the second reading, ‘open codes’ or initial notes were written along the margins. These open codes were then typed, organized by focus group question, then printed, and sorted into rough ‘axial codes.’ This process was repeated and refined several times, until a series of codes was created for each question. These axial codes were then added into Nvivo 9, which allowed the transcripts to be easily sorted with the text associated with each code to be clearly visible to the researcher. Memos in Nvivo 9 and notes written by hand were both kept to allow an appropriate ‘data trail’ between raw transcripts and presentation of
results.

Observational data was not analyzed, but rather used to help create a thick description of the HBeat Youth Leadership camp. Field notes were read and re-read and used to create descriptions that illustrated the themes of other qualitative data, as well as with the findings from quantitative analysis. Vignettes based on observation data were created to help guide the reader through the data and to ‘tell the story’ of the HBeat Youth Leadership camp.

Analysis of student journals also used the constant comparative method as a basis, but incorporated specific methods appropriate for this data medium, and the context of the journals within the camp week. Initially the journal questions relevant to this research were transcribed, and printed. A series of codes were identified, and compared with the focus group codes. This process resulted in some changes to previously identified themes, but overall there were minimal differences, and thus the journal data became mainly a source of triangulation. Journal data also was used as a source of referential adequacy, to support the main findings from the focus groups and observation by providing clarity on several findings that were not well articulated in the focus groups, but notable to the researcher. This increased the depth of understanding of the researcher on several critical areas of the findings while providing credibility to the findings. One significant contribution of the journals is how the use of journals in analysis allowed more students to have their voice represented in the research. While participation in the focus groups was good overall, there were some students who choose not to contribute or contributed very little. It was noted during journal analysis, that many of the students who did not contribute orally, had made significant contributions with their journal entries. Likewise,
many of the very vocal students did not have in-depth journals. This finding highlights the variety of learning and communication styles found in this group, and likely any group of young people, clearly showing the importance of providing different ways of allowing young people to contribute their voice and opinions to this research project.

Along with the constant comparative method, key experience analysis was also used to analyze focus groups and journals. Key experiences are considered events that have a major impact on the experience of stakeholders (Stringer, 2007). Stringer suggests that key experiences typically provide clarity on some significant point and are marked by strong emotions, either positive or negative (2007). Often described by individuals as “light bulb” or “aha” moments, these moments can be turning points that hold special significance to individuals (Stringer, 2007). As the agency development process is very unique to each person, “unpacking” key experiences through this analysis process offered significant opportunities to understand how individuals experienced the HBeat Youth Leadership camp (Stringer, 2007 p. 103). Key experience analysis followed Stringer’s (2007) outline and included identifying key experiences, understanding the features and detailed aspects of experiences, looking for commonalities across individual identified events to identify key experiences that could be considered common to a group, and then using these descriptions to form and / or support theme development. Events were identified based on how the event was discussed in focus groups or written about in journals by the youth participants, as well as the researcher’s observations of the events throughout the week, and analysis and interpretation focused on identifying and understanding the features of these events. Given the focus on describing the features of key experiences, this was an appropriate method for answering the research questions of
this study. Specifically research questions 3a and 3b, that looked to understand the program elements (3a), and environment and relationships (3b) of the HBeat Youth Leadership camp that were considered by the group of youth participants as being the most significant contributors to their development of agency, were able to be more fully answered through the application of key experiences analysis.

**Trustworthiness in Qualitative Research**

Trustworthiness is a critical goal in qualitative research. This must be achieved through the most appropriate means for the study, as there is no one accepted method for achieving trustworthiness. Lincoln and Guba (1985) outline several elements that might be considered in the search for trustworthiness: credibility, dependability, confirmability, transferability and reflexivity. These provide an initial starting point for the novice researcher (Stringer, 2007). To address trustworthiness, this research aimed to approach the main components applicable to all qualitative research, as well as the specific issues related to evaluation research.

**Credibility.**

Persistent observation and triangulation were used as primary approaches to address credibility. As well, the use of student journals provided a source of referential adequacy (supporting, archived data) to support credibility. Persistent observation included the researcher spending as much time as possible involved with the youth during the HBeat Youth Leadership camp. This included participation and attendance for the entire program and living in residence with the youth participants. Triangulation was used to allow multiple sources of data to confirm any conclusion (Willis, 2007).
Methodological triangulation in qualitative research combines different data collection methods to balance the flaws of one method with the strengths of another (Denzin, 1970; in Willis, 2007). In the qualitative components of this study, field observation, focus groups and document analysis were all used to meet the requirements of a triangulated qualitative study. The mixed-methods component of the study further strengthens triangulation. Referential adequacy refers to the approach of having archived data that is available to support findings by allowing the researcher to return to some archived data that was not included in original analysis as a way to test findings (Lincoln & Guba, 1985). As not all questions in the student journals were included in original analysis, the journals provided a source of archived data that the researcher was able to return to for support.

**Dependability and Confirmability.**

Dependability and confirmability were addressed through achieving credibility and through the creation of an audit trail over the data collection and data analysis processes. This included keeping detailed observation notes, using a reflective journal, and keeping a proper record of codes and themes during analysis. Reflexivity throughout the process also increased the trustworthiness of results by enhancing self-reflection and continually acknowledging the researchers located-ness within the data.

**Transferability.**

Applicability of the results can refer to fittingness or transferability and requires the researcher to provide details of the study with enough “thick description” to allow others to make appropriate comparisons. Kvale and Brinkmann (2009) provide four
guidelines for thickening description: contextualize, narrativize, focus on the particular example, and consult the community of practice (p. 78). Specific attention was paid to providing enough detail about the HBeat study and the HBeat Youth Leadership Camp to allow future readers of the study to make appropriate decisions about its usefulness for their own purposes. As well, it is hoped that the vignettes included throughout the results section will both narrativize and highlight particular contexts. Finally, initial results from this study were presented to a conference of professionals working with young people, which allowed the researcher to gain such insight and feedback as to the relevance and transferability of certain elements of the research.

**Reflexivity**

Reflexivity is the process of reflecting critically on oneself as the researcher (Guba & Lincoln, 2005). In qualitative inquiry, the researcher is seen as the instrument, the only tool that is responsive enough to acquire the information needed to understand a complex human situation (Guba & Lincoln, 2005, p 210). As the researcher is highly connected to all stages of the qualitative process, qualitative researchers believe it is crucial to know oneself and the identities of self brought to the research. Guba and Lincoln describe multiple selves, including the research-based self, brought self, and situationally-created self, as influencing the research setting. They encourage the researcher to question how she/he influences the research (p 210). Patton (2002) encourages reflexive triangulation, where reflective screens such as culture, age, gender, etc. are applied to reflexivity relating to participants, audience and the researcher. “Coming clean” and acknowledging one’s own located-ness is a crucial element of reflexivity (Lather, 2007).
First, I must acknowledge that my entry into this research was with the strong belief that young people can make effective change and are capable of rising to high expectations. I believe that the potential of young people is often dismissed, and the diversity of talents that exist within youth culture is not acknowledged. Within a global context, I have seen the potential of youth to meet expectations that would not even be considered possible in Canada. When supported and engaged, young people are very powerful forces for social change, with significant capacity to make decisions and influence social cultures. My hope upon entry into this research was that the inclusion of young people in the HBeat study would provide evidence that would further support this perspective. This initial located-ness made me very aware of finding ways to ensure I was listening to the stories and data, and not to only look for the answers I hoped to find. Throughout the research and analysis process, I became more aware of the complexity of this process and the need to be open to many possibilities, including those that fundamentally varied from my own initial perspective. Reflexive writing during the data analysis process, ongoing discussion with colleagues, review of literature from outside the initial area of study, and taking the time to cautiously and thoroughly analyze the data helped me to ensure I was looking at the data with an open mind.

Secondly, as a member of the HBeat Youth Leadership camp program team, I was also influenced by my ongoing involvement and my personal interest in the success of the HBeat youth leadership camp. Again, this required me to be careful to focus my data collection and analysis on the true meanings and messages I received from the youth participants. I recognized the responsibility to ensure my perspectives were not preventing me from hearing the voices of my participants. Throughout the camp week, I
constantly struggled with ensuring my dual roles, as a camp coordinator and a researcher, were both being honoured appropriately.

The third area that required dedication to reflexivity was a need to appreciate the context in which I was conducting this research. While I entered the study as a researcher with a professional background in health promotion, youth leadership and education, I quickly realized that this study was quite different, and not all elements were applicable to this project. This included appreciating the differences in the age group I was working with, which was younger than most of my past experience. As well, I was not familiar with the Niagara region, and had a limited understanding of the social, political and other geographically based elements of context that had an influence on this project.

Finally, I was constantly attentive to my age; it was important that I was reflexive about how my adult perspective influenced my study. While I believe strongly in the value of youth participation, I completed this research as an adult ally, not as a youth myself. This was especially clear during my work with the camp staff prior to and during the camp week. Many of the staff were much younger than I, and therefore brought a more ‘youthful’ perspective to the research. Part of my work as an adult ally required me to be aware of the value and appropriateness of the opinions of my youth staff, even when they seemed to be in disagreement with my own initial thoughts.

**Mixed-methods Interpretation and Presentation**

The final step of mixed-method evaluation research is to provide an interpretation of results that draw on both qualitative and quantitative data. Mixed methods research promotes the use of a bricolage approach. Bricolage draws on appropriate strategies from
various methodologies, as well as specific methodologies unique to mixed-method research, and using all approaches to help support inferences answering the research questions (Creswell & Plano-Clark, 2007; Kvale & Brinkmann, 2009).

As evaluation research is strongly connected to a specific context, the details of the actual project, including setting, group processes, and the connections between elements are crucial to understanding the context and build transparency in the process (Patton, 2002). Thus a description of the context, using both qualitative and quantitative information, is included in both this chapter and the following chapter to form the first part of this mixed-methods interpretation.

In providing expanded interpretations of both qualitative and quantitative data, care was taken to maintain a clear and coherent focus on the research questions (Creswell & Plano-Clark, 2007). Following this, the qualitative and quantitative data were integrated together throughout the results, with as is considered appropriate for triangulation design, which encourages giving equal weight to each type of data (Creswell & Plano-Clark, 2007). As well, the formatting of a mixed-methods evaluation should also consider the best way to present the data to the readership audience, which is a decision that is made following data collection and analysis (Creswell & Plano-Clark, 2007). In this study, the data were best presented using an integrated results section, based around themes. This means that data will be presented with all forms of data that relate to each theme, rather than presenting qualitative and quantitative data in distinctly separate sections. While this is a more complex writing process, it does present integrated data and a more comprehensive overview for the reader (Andrew & Halcomb, 2009). This process attempted to follow recommendations that encourage the qualitative and quantitative
components to be ‘mutually illuminating’ in their presentation (Bryman, 2007 p 8, as cited in Andrew & Halcomb, 2009 p 86).

**Ethical Considerations**

Ethical considerations were at the forefront of decision-making throughout the research process and were considered at all stages of the research (Willis, 2007). All major ethical considerations of social research, including participants’ informed and voluntary consent, confidentiality, and reciprocity were considered in detail. As well, the unique ethical considerations connected to working with young people in a research process were addressed throughout the research.

**Informed and Voluntary consent**

Informed consent is a principal tool used to ensure that participants come to no harm as a result of their participation. Informed consent informs of the purpose, aims, use of results, and likely consequences of the research (Stringer, 2007). Ensuring informed consent of youth participants in this study involved two steps. First, a parent or guardian was required to give legal permission for the youth to attend the HBeat youth leadership camp and to participate in the formal aspects of the study. This permission form was developed by HBeat and included statements that informed participants that participation was voluntary, that there were no known ill effects of participation, that data will be stored safely with all information and responses being kept confidential, and that the youth would have the right to withdraw from any activity at any time (Stringer, 2007). To keep in line with youth rights, participants were also required to give their own consent /assent
to participate. This was done through signing the same consent forms as their parents, and through ongoing verbal agreements throughout the HBeat Youth Leadership training. All consent forms were approved by the Brock University Research Ethics review board, and are included in Appendix E.

**Confidentiality**

Participants and schools were assured of confidentiality through the use of pseudonyms. Photographs that were used were not associated with any youth names.

**Reciprocity**

Reciprocity is the exchange of something of value between two or more parties. Typically, participants offer value to the researcher, but the researcher struggles to find anything of reciprocal value to return (Pope & Mays, 2006). During this research, issues of reciprocity were addressed in the form of collaborative inquiry, where participants in the HBeat Youth Leadership Camp were encouraged to find meaningful value in the experiences and agency development they experienced at the HBeat Youth Leadership camp. However, it must be acknowledged that this may not have occurred for all participants, and therefore the ethical considerations of power and balance remain a challenge for this research, as for all research occurring with young people (Raby, 2010).

A significant ethical dilemma exists when researchers devalue the views and opinions of young people, and therefore do not allow them to participate authentically in the research process (Delgado, 2006, Hart, 1992). Delgado uses the seven areas identified by Ivan-Smith (1999) for Save the Children as areas that should be addressed in youth-
led research including participation and protection, conflicting agendas, informed consent, purposes of research, confidentiality and trust, clarity in process, and payment (Delgado, 2009, p. 208). While this research was not youth-led, these areas offered a strong foundation for ensuring appropriate ethical considerations in working with young people during the initial stages of the research. Other issues specific to research with young people including how to conduct appropriate focus groups, such as avoiding leading questions and age-appropriate questions were considered when planning the focus group schedule (Kvale & Brinkmann, 2009).

A final ethical consideration unique to evaluation research is presentation of project outcomes. The ethics of reporting must be considered with respect to participant and stakeholder voice (Kvale & Brinkmann, 2009). In order to address this ethical condition, creative solutions, including the use of vignettes to allowing the direct experiences of the camp were included. As well, attention was paid to include as much direct ‘youth voice’ in the research in the form of quotations.

**Research and Ethics Board Approval**

Brock University’s Research and Ethics Board (REB) approved this study as an additional component of the overall HBeat study. (REB 06-315 WADE). Ethics approval documents are detailed in Appendix G.
CHAPTER FOUR: RESULTS

SECTION 1 – WHAT WAS IT LIKE TO BE A PARTICIPANT IN THE HBEAT YOUTH LEADERSHIP CAMP? THE PROCESSES AND EXPERIENCES OF LEARNING AT THE HBEAT YOUTH LEADERSHIP CAMP

Section one presents a description of participant’s experiences at the HBeat Youth Leadership camp. Data from mixed-methods sources were considered to provide a description of the HBeat Youth Leadership camp. The data are organized into three main descriptive areas focused on peer relationships, staff relationships and camp activities. The descriptions of participants’ experiences provide insight into the process and impacts of the HBeat Youth Leadership camp, specifically considering how the camp achieved its goals of increasing participant’s agency for peer health education.

Theme 1: Learning as Part of a Supportive and Diverse Peer Group

“My team, holding the rope…”

There is thunder in the distance and an ominous gray sky when we wake up on Friday, and everyone is wondering anxiously if the high ropes experience scheduled for the full morning will happen. Luckily the weather passes and shortly after arriving to the high ropes course and the students circle up for the introductions and orientation by the trained ropes course staff. Quickly groups are organized and student climbers begin heading up into the course with voices and legs shaking. Gradually, the air becomes full of anticipation and enthusiasm. I’m amazed at how real this is - everyone is genuinely excited and nervous for his or her peers. Some of the louder students and staff are cheering enthusiastically with that ‘rah-rah’ tone you’d expect, but the difference is the subtle support, the ‘good job’ or ‘nice one’ comments, or the giggles or amazed story telling between peers, when they are taking off their helmets or harnesses, or during the walk back across campus to lunch, voices clear and excited despite the now downpouring rain. These are the comments and support that aren’t forced, the genuine interest in hearing and sharing stories with each other, that bring to life the new relationships
and friendships that have formed throughout this week. It strikes me how important these peer relationships have been for the success of the week and how they have contributed to the experience of each participant, from the group of boisterous girls who became allies for their evening antics, to the two quiet boys who found a new interest in orienteering, and all the many shared stories and memories that are racing through the excited lunch-bound crowd, brought to life through laughter and patches of “did you see...” or “remember when...” or “we still need to...” conversations. (Observation Notes, Friday, Day 5)

According to youth participants, peers played a significant role in their experiences at the HBeat Youth Leadership camp. ‘Meeting new people’ was identified as a central part of the student’s experiences, including becoming part of a new group of peers and making new friends. This process was not easy for many students. Initial fears about meeting and talking to new people and general pre-camp nervousness about the group experience were commonly discussed by the youth participants. However, most peers indicated that, despite these initial concerns, they were pleasantly surprised at how well everyone got along, they enjoyed meeting new people, and they felt it was easy to make new friends. Maria stated: “I personally get kind of nervous meeting new people, just coming here...but somehow we all kind of came together, to one big group, and it worked out fine, and I met great friends...” (Maria, Focus Group 2) and Gabrielle commented that she “realized how great everyone was, and getting to know them, in just one week made you feel so close to everyone” (Gabrielle, Focus Group 3). Whitney wrote in her journal that she got along well with others in her activity groups, writing, “they are all really nice to me and they made me feel comfortable...” (Whitney, Journal Entry).

Similar comments and depictions of developing friendships as a central part of the week were found in student journals. A number of students included pictures of new
friends with corresponding descriptions in the photo page section of their journals. Both Maria and Michelle indicated ‘making new friends’ (Maria, Journal Entry; Michelle, Journal Entry) in response to the journal question: “What was the biggest change in thinking that happened for you this week?” and a number of students made mention of making new friends in journal questions related to the best activity of the day, or the best part of the experience. Journals also included phone numbers, Facebook contact information and email addresses suggesting these friendships were significant enough that students were interested in keeping in touch with each other following the camp.

While the process of building relationships was unique for each participant, many students identified the importance of meeting people from other schools. The transition from spending most of their time with people from their schools to spending time with new peers was considered a significant part of the process of forming meaningful relationships at camp. Grace felt that this happened on Wednesday, “Wednesday, that’s when everyone started getting together... and we all started to get new friends” (Grace, Focus Group 1).

Students identified some specific activities, including the nature walk, leadership activities and expert group sessions as places where they got to know new people. Free time was also considered critical in the process of building new relationships. This included ‘hanging out’ in residence rooms at night, semi-structured evening activities organized by staff on the male and female floors, and also free time in the cafeteria during meals, as Hailey identified, “a place where everyone really met and sort of had a laugh was the cafeteria” (Hailey, Focus Group 3). Overall, free time, semi-structured recreational activities, and organized activities that included a strong inter-personal
component were identified by the participants as the most important for the process of group development.

**Sub-Theme 1: The Importance of a Supportive Peer Group for Learning**

Along with identifying the process of meeting new people as significant in itself, students also indicated that new relationships impacted their *learning* at the HBeat Youth Leadership Camp in three specific ways. First, these peer relationships provided a supportive environment during challenging components of the week. Supportive environments appeared to help the students feel more confident about taking on new challenges. In the focus group, Hope stated this clearly: “*I had confidence on [the high ropes] because everyone was helping get everyone else, like my team holding the rope*” (*Hope, Focus Group 1*).

Second, participants identified that undergoing the process of meeting new people was a transferable skill for peer leadership. They believed that meeting new people was critical in preparing themselves for their upcoming roles as peer health leaders where they would also be expected to meet, talk, connect, and teach people they did not know. Students made these strong, direct links between the interactions with new peers and increased confidence for future leadership roles. This was a clear example of how the relationships they formed at the HBeat Youth Leadership camp were helping participants to ‘practice’ new leadership skills, in ways that they themselves identified as important parts of their future successes as peer health leaders. Thus, having the opportunity to undergo this process in the camp setting provided a direct experience and gave them
more confidence that they could be successful at their home schools. This point was illustrated in this discussion that occurred in Focus Group 1:

Edward: … getting to meet all the new people and confidence talking with any of them.
Brad: Same thing.
Facilitator: Same thing? In what way?
Brad: Like, meeting new people, having the opportunity to talk to new people and get to know them.
Edward: and also talking to other people, it kind of took you out of your comfort zone, when you are a peer leader you are going got have to do that,
Facilitator: … great, Jaylene, you are nodding?
Jaylene: Well, um, same thing as Brad, meeting the new people.

Gabrielle makes similar connection to meeting new people and having greater confidence in her future role as a Peer Health Leader during Focus Group 3:

It kinda helped with confidence, ‘cause meeting new people here, having to reach out and talk to new people could kinda help, because when you went to school you know most of the people there, but having to talk to people there [as a Peer Health Leader] and talk to people here it just kinda connects, and it helps...

Sub-Theme 2: Learning from Diversity – Self-Identified Social Diversity in the Peer Group

“Different kinds of thinking”

The organized discussion section of the strengths and self-awareness lesson ends, and the students mill towards the tables in the center of the room. The task is to personalize their camp nametag, adding features that showcase their strengths. The tables are piled with stickers, markers, and foam craft pieces. Slowly the quiet of the room is replaced with the buzz of crafting and people getting to know each other. Watching the students complete this activity, the differences across the group begin to emerge. The physical differences are the most obvious, there is a lot variety in height and maturity, as to be expected for this age group, but it is still remarkable - one male student must be over 6 feet tall, while some others in the group are less than 5 feet. Some of the girls seem quite concerned with their pop-culture images, and there are plenty of lululemon headbands and some girls have used hair ties to transform the red camp t-shirts into more stylish looks. One of the boys is still wearing his mirrored, aviator sunglasses and backwards hat, as he keenly searches through the foam bits for the letters to spell his name. As they start to add elements to their nametags, it’s clear that there is diversity in their interests too. Some
students are quickly adding sports elements; soccer balls seem a particularly popular choice. Others are adding music notes, some are adding video game controllers and one boy is adding pictures of animals, maybe a cat? Some student’s don’t seem to know what to add, and others don’t seem interested in the activity at all, laughing and milling about the room or lounging on the couches as the staff encourages them to participate. (Observation Notes, Monday, Day 1).

The third way that new relationships impacted learning at the HBeat Youth Leadership Camp was how the social diversity within the camp group contributed to participants’ ability to self-identify as a leader. Although at first glance the camp participants seem to be quite homogenous according to traditional definitions of diversity (the students were all the same age, grade, and only three of the 42 students were from visual minority groups), to the participants themselves – and as the excerpt above illustrates – they were a diverse social group in terms of their varying experiences, interests and motivations. The students identified many differences in the group, in terms of perspectives or “kinds of thinking” (Stacey, Focus Group 2), interests, experiences and the traditional identities from self or peer labeled ‘cliques’.

As students began to recognize the similarities and differences between themselves and others, either as individuals or as school groups, they also began to identify the different strengths and abilities and ideas of peers with differing perspectives. Further, students appreciated this opportunity to work with people who were different from themselves for how it exposed them to ways of thinking about or approaching problems that were different from their own. As Diana discussed, “I think it was pretty cool how, all of us came from different schools and how all of us had different ideas, so we got different ways about thinking about stuff from people from different schools…” (Diana, Focus Group 2). Similarly, Brandy commented in her journal, “one thing I
learned from someone in my group is different ways they deal with the same problems I have” (Brandy, Journal Entry) in response to the question asked in the leadership section of the journal “What is one thing that you learned from someone in your group this week?”

Beyond the general learning that occurred through interactions with a socially diverse group, peers also described learning that was related to the more specific application of peer leadership. This learning included learning leadership strategies from more experienced peers, seeing different approaches to peer leadership from peers, as well as observing others from both leadership and followership positions. Both practice and observation within the group setting allowed the participants to expand their leadership skills.

Further, participating in and watching the diverse group of peers successfully take on leadership roles worked to shift the perspectives of youth in terms of what it means to be a leader, and to broaden their views of ‘who can be a leader’ and ‘how to be a good leader’ and ‘how someone becomes a good leader’. For example, Abby answered the journal question “What is one thing you learned from someone else in your group” in her journal with the answer “I learned that if you are shy or not you can still make killer ideas” (Abby, Journal Entry). Similarly, Regan wrote in her journal “this week, I realized that I do have strengths, and those strengths are important in a group” (Regan, Journal Entry) as her answer to the question “What was the biggest change in thinking that happened for you this week?” Similarly, Vince discussed how leadership develops in different ways for different people during Focus Group 2:
Vince: Yeah, and what I learned from leadership is that sometimes people can’t learn just by looking at a book and doing all that, sometimes you actually have to go out and do hands-on experience and stuff to learn…

In considering their own leadership roles, students also commented on their strengths, during both Monday’s writing, and in response to the ‘biggest change in thinking that happened for you this week’ journal question. For example, Isabella wrote, “I learned that I have a lot more strengths than I thought I did” (Isabella, Journal Entry). This perspective was also illustrated in how participants identified each other as ‘leaders’ throughout the week and in specific journal questions. Most participants identified a fellow group member in response to the “One person I know who is a good leader is…” question in their journals and answered the subsequent question, “I think they are a good leader because…” with diverse descriptions. For example, Brandy identified the importance of listening, not just taking control, when she described peers Julie and Eva as leaders in her journal. She wrote, “They both have the skill to take charge but at the same time still listen to everyone!” (Brandy, Journal Entry).

Another relevant activity was the “teamwork flip chart challenge activity”, where students worked in groups to come up with as many words as possible that described each of the letters in the word ‘teamwork’ (a leadership concept stressed throughout the week). For some students, listening to the ideas of their peers gave them an opportunity to expand their own concepts of teamwork. Regan mentioned this activity as contributing to her new leadership perspectives stating the following in Focus Group 4,

a lot of the stuff we did here raised our confidence and taught us new ways to do things, so maybe that would help too, because we know now that there is not only one way to do something…even when we wrote on the chart papers all the different words, so we all got to hear different words that we wouldn’t have thought of.
Seeing the multiple ways leadership can be explained and experiencing how different people can be leaders in different ways was a powerful lesson for these future leaders that could not have happened without the experience of learning in a socially diverse group. Noticing and considering the differences and similarities of the group was an important component of the process of relationship building for the participants, and correspondingly, an important part of the process of leadership identity development and the subsequent agency development.

**Summary of Theme 1**

Overall, it is clear that the peer experience perceived by the students was not just ‘fun’ and ‘friendship’ but rather as part of the learning process that occurred at the HBeat Youth Leadership camp. Peer relationships allowed students to feel more comfortable accepting new challenges and practicing leadership skills within a supportive group environment. As described in this theme, the social diversity of the peer group contributed to the participants shifting perspectives surrounding leadership – including an expanded definition of ‘leadership’ and subsequently may have influenced their ability to self-identify as a leader. Overall, the relationships that occurred within the supportive and diverse peer group had an impact on self-beliefs related to leadership identity, a component of agency development for peer leadership in participants.
Theme 2: Relatable and Respectful Staff – Youth-Adult Relationships as a Foundation for Learning

Sub-Theme 1: The Importance of Diverse, Relatable Staff Team for Building Staff-Student Relationships

Smilers and Skeptics – A diverse camp team

The hot, hazy weather of the afternoon of the 2nd day has slowed the pace, but we are still on track with another tightly scheduled day, gathering everyone back into the Fireside Room to transition from lunch to the “expert” sessions. It’s clear the counselors are getting tired, but the excitement surrounding the session was a good pick-me-up; the staff were pretty excited about getting the chance to learn too! Deciding who would attend which session during staff training included a lot of debate and bartering, and highlighted the differences in the group. Jerika won the contested battle for the Heart Health session with her passion for Public Health. She is also proving to be especially great with those girls who are more difficult to engage. It’s clear they look up to her (and maybe her stylish fashion sense?) and with her open-minded attitude she is respectful and non-judgmental. Keith, with his boundless energy, is a great choice for the drama session. He loves magic tricks, performing and always has a trick or riddle at the ready. Cathy is the opposite; her quiet, calm demeanor is her greatest strength, and she is willing to sit, talk and listen one-on-one with anyone. Tammy and Sean are leading the graphics design session as the tech-savvy team. Tammy is quiet, but hardworking and puts in the extra effort to achieve perfection. (For example, she volunteered to make the end-of-camp slideshow and was up until 2am every night working on it). Her work in cultural day camps, her ability to speak 5 languages, and her diverse international experiences all add to her unique skills. From the always-smiling Jerry, to the skeptical Cam, the group of staff is a mix of personalities, something that contributes to the camp experience for each student. (Observation Notes, Tuesday, Day 2).

As with the student group, there was significant social diversity within the camp staff, as this excerpt illustrates. Again, diversity is defined not by simple demographics such as age, gender or ethnicity, but through a more comprehensive look at the wide variety of experiences and perspectives of the staff team. For example, there was the ‘high energy’ approach of Jerry and Keith and the similar enthusiasm of the drumming leader, whereas other students preferred Cam’s calm approach to leadership, or the
deliberate approach of the tai chi instructor. The individual diversity of the counselor team, and the contributions of various expert guest staff both created an atmosphere where diverse perspectives and skill sets were valued, and was a living example of the themes and leadership messages of the week. Students identified these differences in the staff:

… like the girl who was doing the drumming…She was really excited and happy and she just kept on going like “owh!” and all that stuff, and she just made everyone happy, and then there was the tai chi guy, and he was the opposite, like ‘whooof’ {deep breath sounds, making tai chi motions} (Mya, Focus Group 1).

This diversity also allowed students to see similarities between themselves and members of the staff. Students felt the staff were like them, “Mark and I, we dance the same” (Edward, Focus Group 1), even going as far as suggesting the counselors “seemed to act our age” (Brad, Focus Group 1) and that the drumming leader “acted more like a kid than an adult” (Diana, Focus Group 2).

Such connections were also the building blocks for creating a positive learning environment, as ‘relatability’ opened the door for listening and learning. Participants easily made this connection. As Kathy mentioned “…if their personality wouldn’t relate to us, if they were opposites of us we wouldn’t have wanted to listen to them…” (Kathy, Focus Group 2) The ability of students to feel connected to the staff was a critical first step in building the supportive relationships that contribute to agency development.
**Sub-Theme 2: The Presence of Caring and Respectful Relationships Between Staff and Students**

*A sea of red and blue…*

It's lunchtime, and the task of rounding up everyone on time to walk to the cafeteria is in progress. It's hot, and everyone is tired, hungry and impatient, and a few students are still missing from the group assembled in the Fireside Room. I glance around and happily notice that the staff members, very visible in their bright blue shirts, are spread out, sitting among the students, talking, laughing and joking. Keith is doing magic tricks with a group of admiring students, and Jerika is sitting with some girls who are writing notes in their journals and giggling. Jerry is walking around trying to convince students to attend tomorrow's 7am yoga session; his enthusiasm is convincing even the most unimpressed to at least consider signing up. Beth, with remarkable patience, is explaining to a group of students about how the swipe access to their rooms work, having just returned from yet another trip to the service desk to pick up room key cards for the locked out group. Cam and Sean come down the elevator with a group of the boys, the few we have been waiting on. With a firm look, Cam sends them directly into the room and our big group heads out to lunch, the bright red student shirts and blue staff shirts mixed together as we wind through the halls to lunch. In the cafeteria, the staff are spread out again, sitting in groups with students, and I stop to consider that this is a bit different from other camps I've attended, where staff usually group together at meals. There is something great about seeing how happy the counselors are to sit with students, and more importantly, how welcoming the students are to have staff join them during these bits of informal time. (Observation Notes, Tuesday, Day 2).

Along with being relatable, staff also contributed to the learning through the ways that they engaged with participants throughout the week. In staff training, the importance of building caring and respectful relationships with campers was stressed, and staff was committed to this goal. Throughout training, respect and caring were discussed based on the ideas from Positive Youth Development theory showing a “genuine concern for youth holistically, as well as their ideas and opinions.” (Cargo, et al., 2003 p. S71). As illustrated in the vignette, staff demonstrated these respectful and caring attitudes throughout the week, for example in showing genuine interest in the topics of
conversation with the participants, to sitting with students at meals or seeking out respectful interactions during informal time, and by constantly looking to better understand the participants’ perspectives.

Comments in the participants’ journals affirm that the leaders were successful in forming positive relationships and further, that the positive feelings were reciprocated from students. Descriptions of staff as ‘nice’ and ‘fun’ were common, as shown in this student journal entry from the first night at camp, “I really like the group leaders, they’re always nice to us.” (Kathy, Focus Group 2). While demonstrating that the staff were generally liked by students – certainly an important point - these descriptors are very common and generic, and perhaps the more telling descriptions are those with stronger, less typical words like ‘amazing’ as in this journal entry by Eva from Monday night: “My first day at camp – This camp is definitely more than I thought it would be. My amazing counselors aka Sean and Jerika are super nice and love to have fun…” (Eva, Journal Entry, Monday).

Within the large quantity of accolades for the staff, students made it clear that these fun, playful positive attitudes of staff were contagious and contributed the week, by keeping them engaged positively in the camp environment, “they were always happy and having fun, and making us have a good time…” (Stacey, Focus Group 2), or by helping them feel better in difficult situations “...they were really just nice and all cute when you needed it” (Stacey, Focus Group 2). Mya also described specifically how the positive attitude of staff during times that were challenging, such as first thing in the morning, contributed to her week at camp:

Oh yeah, they were always smiling. Whenever they needed to knock on our door they were “hi, time to wake up, get out!” (Happy tone). It made me
happy, seeing like I was miserable every morning, and then someone knocking on the door I’d be GRRR, but then see a smiling face… it made my week a lot better (Mya, Focus Group 1).

Participants also discussed the leader’s generosity with compliments and positive comments as a contributor to building positive relationships, “Same with all the positive comments/” (Jaylene, Focus Group 1), and “The positive comment thing, I guess it was just when you were feeling down or something, they always had something nice to say, to cheer you up.” (Dawn, Focus Group 1). The sense that the staff “got” them, or appreciated their positive youthful energy, was illustrated when students discussed how staff approached their role in facilitating camp content. Ada discussed the drumming instructor “I thought [drum instructor] was really nice, she was always smiling and she wouldn’t frown and she wouldn’t yell and wouldn’t get frustrated with us…” (Ada, Focus Group 2) and Vince and Jory mentioned their counselor Cam: “He understood us/ (Vince, Focus Group 2) and worked with us, instead of against us/ (Jory, Focus Group 2).” Helping students to achieving the learning goals of the week, through both formal and informal instruction, was an important role of the staff, so it is important to note how the students believed the staff leaders were effective teachers of the camp material, not just good leaders. These caring and respectful attitudes not only contributed to building relationships and helping the students to feel engaged at camp but also to the effectiveness of the camp staff as teachers. The students connected with the staff and took what they said to heart. When asked how the counselors contributed to her week at camp, Tessa shared a story about an informal discussion at lunch with two counselors where she seemed to have made a connection between this camp and future work as a peer health leader:
…the one day we were sitting at lunch and Tammy and Jerry were telling us how we were the only ones who were going to be doing this project, and how since we were the only ones who get the chance to do this we should try to spread it as much in our schools to try to help them be their own leaders (Tessa, Focus Group 3).

Diana’s mention of how the staff taught - with a fun and playful approach - and how that affected her enjoyment of the journaling sessions at camp also shows how the relationships contributed to the ability of the students to participate in the material of the camp:

I just thought that all the counselors were really fun, it could have been really boring if we had a counselor that was like ‘ok, go do your journals noow’ (flat tone), that would have been really boring and nobody would be excited to do anything, so having a happy counselor is like being a happy camper (Diana, Focus Group 2).

This link between respectful relationships and learning camp curriculum also extended to learning connected to their own leadership development, Brandy felt her counselor “showed us how to be a leader” (Brandy, Focus Group 4) and Vince and Jory discussed how interactions with their counselor Cam, who “understood” them (Vince, Focus Group 2) helped them to realize the connections between leadership and how they learn best ‘hands on’ “Yeah, we really need something hands on to learn about, and we had him, he was really cool” (Jory, Focus Group 2).

Sub-Theme 3: The Inspirational Role of “Expert” Instructional Staff

The Rhythm of Inspiration

The students fill into the Fireside room, praising the air-conditioning. Eyes peak at the sight of all the drums, enough for everyone for sure, a huge one in the corner, and there are all sorts of bells, shakers and percussion toys in the center of the room. The drumming instructor has long hair tied behind her head, and a drum strapped onto her body. She immediately takes charge of the group in a way that relaxes everyone,
drumming and chanting the initial instructions in time to the rhythm; there isn’t going to be any space for misbehavior to ruin the experience, but her energy and enthusiasm and sense of fun are contagious. The first activity is with egg shakers, passing them around the circle to create a rhythm. It’s simple, but challenging, and once the group succeeds with the pattern, the simple instrument makes an impressive sound. The initial drum activities are just as impressive, and before you know it, the small group is banging out some amazing sounds under expert instruction. Even the musical skeptics seem to be enjoying things, and are joining in with some of the silly verbal sounds, the ooh’s! and ahh’s! involved in some of the activities. A change of pace has the instructor leading a drumming visualization exercise. When it finishes, some of the students are giggling, unsure how to react, and others are stoically silent. One of the girls has tears running down her cheeks. There are a few other drum activities and then the group learns their part of the three-part rhythm for the evening large group drum session. After the session ends, a few of the students ask the instructor if she will play the large drum in the corner for them. The sound from the metallic drum is eerie, haunting almost, and the small group gather around her in awe, some taking pictures. (Observation Notes, Wednesday, Day 3).

The respect between students and staff was also clear in the experiences the students had with their expert group leaders. However, for the students, these short-term instructor-student relationships seemed to be less about developing strong personal connections and more about being inspired and motivated by the expert staff. The presence of the expert staff allowed the students to learn from passionate and experienced instructors who had high expectations for the students. Through the activities and the methods of teaching used, these staff showed the students they were being taken seriously and could succeed in learning complex material or skills. The vignette above described the drumming session, illustrating a specific example of how the expert staff showed respect for students, and as a result received respect back from the students, again providing the conditions for learning to occur.

The various expert staff made powerful impressions on the students. The students felt expert staff were positive and inspirational, encouraging students to challenge themselves both intellectually and socially, “I thought the drum lady was awesome,
because she made us not embarrassed to express our feelings” (Grace, Focus Group 1). Some students mentioned the tai chi instructor was difficult to understand, but he was always discussed positively, with emphasis on his skills, and the moves he taught, such as ‘the horse’. Other students also mentioned positive impressions of the drama instructors, the nature walk / orienteering instructor, the heart health expert group leaders, and the graphics expert group leaders. For example, Kathy wrote in her journal on Wednesday night, “The drumming was so much fun, it wouldn’t be as fun if we didn’t have such a fun, outgoing leader teaching us” (Kathy, Wednesday journal entry, written in blank space). Some students also mentioned the specific material they learned in these sessions, such as learning how to measure their steps in orienteering or learning specific details about how their heart functions. The journals of students in the ‘heart health’ group had a number of comments and notes about the impact of this session. One journal included a meticulously traced diagram of a heart, and several journals contained comments about the experience of visiting the heart institute, meeting a cardiac rehabilitation patient, and feeling inspired by his story. Stacey noted in her journal that she learned “how to do a heart echo” (Stacey, Journal Entry, in response to “what was one thing you learned from someone in your group this week”) and Joyce wrote, “…and the heart echo was amazing I got to see my own heart beating!!!” (Joyce, Journal Entry) in response to the journal question “What was the best activity today.”

**Summary of Theme 2**

Overall, it is clear that the caring and respectful staff made an important contribution to the student learning throughout the HBeat Youth Leadership camp.
Students credited the ability of the staff to relate to them as encouraging their engagement in the program and activities, and the caring and respectful approach of staff meant that students were more open to listening and learning throughout the week. Further, the enthusiasm and passion of all staff, in particular the expert guest presenters, was inspiring to the students, which in turn fostered engagement in the learning sessions.

**Theme 3: Camp Activities and the Camp Environment - Diverse Experience and a Special Atmosphere**

*The ‘Brock Tower’*

It’s been hot and humid all day and the students are eager to get into the water at our scheduled swim time. The change rooms buzz with excitement and then following the required briefing from the lifeguards, the still water of the Olympic sized pool comes alive. There is a group of boys playing some version of dodge ball, which really seems like a chance to throw balls at each other. One of the male counselors is playing too, and seems to be having more fun than the students. The students in the middle of the pool alternate between floating on flutter boards and generally ‘hanging out’ on the sides, occasionally having races or diving off the sides. A few girls yell up to those who have chosen not to swim, who are sitting in the observation deck, playing cards, watching the swimmers and chatting with counselors. The diving pool is busy, as staff and students attempt Olympic-style moves on the Tarzan rope and diving boards. Some students are certainly more talented, but the line up is long, and everyone is trying. Rope swing strategy is discussed, and one counselor is giving tips on how to end the swing with a backwards flip. When the ‘Brock Tower’ opens, a new line forms, and students take turns climbing up to the top of the 3-meter or 10-meter diving tower. One student shows off his skills - his twists and flips have the staff a little nervous and the crowd cheering loudly. When nervous students get to the top of the tower, the crowd responds, cheering and encouraging him or her with cheers of ‘you can do it!’ and ‘don’t look down’ or ‘just jump!’ With countdowns, clapping and shrieks, the courageous swimmers jump as the crowd cheers, showing a level of support for their peer that is remarkable. It’s an amazing sight to see students try something new and challenging, and receive the genuine support of their peers. We are all enjoying the chance to cool off in the pool, but for some students, swimming is proving to be something more... (Observation Notes, Tuesday, Day 2).
Sub-Theme 1: Diverse Learning Experiences - Appealing to all Participants through a Broad Range of Activities.

The above excerpt, describing the Tuesday night swim period, was one of many activities that students participated in throughout their week at the HBeat Youth Leadership camp (see Appendix 4 and 5 for a detailed description of camp activities). The camp schedule was carefully designed to provide a broad range of activities that would help achieve the camp learning goals, but there was also deliberate consideration given to varying between structured activities (activities where there were specific goals for students to achieve), and more ‘free time’ activities (activities which were still included in the program, but provided students with more choice and volition, and had less specific learning goals). ‘Free time’ activities included meal times, rest time following meals where students could be in the residence rooms, the transition time between activities, including walking between activities or waiting in the Fireside Lounge for the group to gather and move together to another space on the Brock campus, as well as scheduled evening activities which included swimming, capture the flag, campfire and movie night. Structured activities included: health promotion training (Youth Advocacy Training Institute workshops, REACT high school peer leaders presentation), curriculum to address perceived stress levels through positive living (strengths, self-awareness, positive emotion, free time choices, coping with stress), expert session groups (video, graphic design, heart health, drama), leadership and self-awareness activities (initiative games, high ropes course, journaling, camp group time, evening circles), and new leisure activities (yoga, drumming, nature walk, tai chi).
It is important to note that the balance between structured and free time activities allowed participants to be both active learners where they were taking on a student role, and to be ‘campers’ – where they could build friendships and have fun. While free time as a dedicated part of the camp schedule could be criticized as ‘wasted time’, the participants themselves described how crucial the process of forming relationships was to their camp experience (Themes one and two, above).

When considering individual preferences for activities, focus group data is limited as no direct questions asked students for negative experiences. As discussed in chapter three, focus group discussions tended more towards what students enjoyed, student journals showed slightly more critique, but again the overall trend was to focus on the positive. However, the end of camp participant evaluation survey did ask which activities were liked and disliked. Table 4 presents the activity preferences of the student participants. As the table illustrates, there was notable individual variety in which activities were liked and disliked.

Table 3. Most favorite and least favorite camp activities, as reported in the HBeat Youth Leadership Camp participant end of camp evaluation survey.

<table>
<thead>
<tr>
<th>Most Favorite Camp Activities (Number of responses)</th>
<th>Least Favorite Camp Activities (Number of responses)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Swimming (9)</td>
<td>Nothing (7)</td>
</tr>
<tr>
<td>High Ropes (7)</td>
<td>Tai Chi (6)</td>
</tr>
<tr>
<td>Drumming (7)</td>
<td>Debrief/Discussions (4)</td>
</tr>
<tr>
<td>Nature Hike (6)</td>
<td>Journals (4)</td>
</tr>
<tr>
<td>Everything (4)</td>
<td>Leadership games, waking up, capture the flag, evaluation surveys, nature hike, yoga (2 each)</td>
</tr>
</tbody>
</table>
Eating, YATI, Expert groups, tai chi (2 each)
High ropes, drumming, campfire (1 each)
Games, movie night, capture the flag, meeting new people, journals, sleeping (1 each)

**Sub-Theme 2: The Camp Environment**

However, despite this variety, constantly reappearing in the data were references to the environment or atmosphere that was created during camp activities, suggesting that the “fun”, “non-stressful” atmosphere was a significant influence on how the participants experienced the camp activities. Descriptions of the learning as occurring within a positive and ‘fun’ environment were common, for example Isabella stated: “_and it wasn’t just all about learning how to make our school better, we actually had some fun here._” *(Isabella, Focus Group 3)* References to feeling comfortable within the camp activity groups compliment data related to positive peer and staff relationships (as described in theme one and theme two). Participants also commented on how the learning seemed to occur in a relaxed environment. Edward noted, “_We shoved more than 5 days worth of learning into a non-stressful environment..._” *(Edward, Focus Group 1)* Journals also included references to the jokes and stories from camp groups and specific camp activities, the ‘little things’ that contributed to making the camp experience positive and unique. These ranged from depictions of memorable moments that happened during the free time, such as the semi-organized pool noodle fight that happened on the male floor or learning to use the inter-room residence phone system to call friends or make calls to
the other floors, to funny things that happened during organized activities, like getting “lost” with a friend orienteering or someone passing gas loudly during tai chi. They also included quotes or depictions of conversations from counselors, drawings and doodles, and notes between friends in the journals. While it is difficult to qualify or quantify the learning atmosphere beyond the student’s own descriptions of ‘fun’ or ‘non-stressful’, these descriptions were an important part of the student’s self-described experiences at the HBeat Youth Leadership camp, and hence provide valuable information to frame the discussions and data surrounding the impact of the camp activities. As Dawn stated, “The only thing I can say is that it was really fun and I hope that I get another chance to do something like this again. I’ve never had a camp like this ever” (Dawn, Focus Group 1).

SECTION 2: THE IMPACT OF PARTICIPATION IN THE HBEAT YOUTH LEADERSHIP CAMP – WHAT DID PARTICIPANTS LEARN AND HOW DID THEY LEARN IT?

Despite the diversity of opinions on the activities that were most enjoyed by participants, the camp activities, along with peer and staff relationships, played specific and direct roles in the learning experiences of the participants at the HBeat Youth Leadership camp. Participants identified three types of learning during camp that they were able to attribute to camp activities. Two specific learning types related to leadership development: 1) challenge activities that contributed to self-beliefs and relationship building, and 2) group-based experiences which promoted leadership development. The third category of learning identified was health information and related health skills, which connected to the health curriculum on positive living, stress and cardiovascular
health. These three areas of learning are described below as per the research questions relating to the role of activities in developing agency in youth participants.

**Theme 1: Learning about Leadership through Challenge and Teamwork Activities**

**Sub-Theme 1: Changing self-perceptions through challenge and reflection**

Participants commonly described the value of challenging activities to their learning experiences at the HBeat Youth Leadership Camp. Two activities, the high ropes course and the opportunity to use the diving boards and diving towers during swimming were most commonly discussed in the context of ‘challenge.’ These two challenge activities were also very popular with students, combined they were the favorite activity of thirty-eight percent of the camp participants (see Table 4 above).

The opportunity to participate in a significant personal challenge activity provided participants an opportunity to develop new personal insights into their own capacities and expanded their sense of what they could accomplish in the future. For example, Tracey discussed what activities helped her feel confident about her future role as a peer health leader: “*the ropes, because at first I only went up the ladder... and then after... I did the course, so it taught me I can accomplish anything next year...*” (Tracey, Focus Group 1). For others the element of challenge also related to transitions, “*when we did the ropes course, it felt like crossing a bridge, in building our confidence and stuff...it’s like leaving grade 7 behind and going into grade 8 and having a new life, I guess*” (Brandy, Focus Group 4). Similarly, students also noted swimming, in particular jumping off of the Brock diving tower, as fostering new insights and self-confidence. For example, Eva stated,
I learned that you can be really confident in yourself, and be a leader and stuff, and by being confident you can face your fears, because I was afraid to go off the high dive and then I was just confident I could do it, and went off it. (Eva, Focus Group 4)

In her journal, Abby wrote how the swimming experience changed her perceptions of her peers, “I think that my biggest change in thinking was during the swimming because people who were afraid of heights still jumped off the Brock tower and that really surprised me” (Abby, Journal Entry). Joyce’s journal also contained a note on one of the blank pages about her success on the high tower at the swimming pool, “I went off the Brock tower- the tallest diving board at the pool- it was so fun!!” (Joyce, Journal Entry).

Whether this new and challenging experience was seen as fun, as a personal success or as a chance to support or learn about their peers, the swimming experience appeared to be as significant a challenge experience as the high ropes course for many participants.

**Sub-Theme 2: Learning about teamwork through planned and unplanned group activities**

The camp participants described the many types of group activities as important parts of the HBeat Youth Leadership camp, including planned and unplanned group activities. Planned group activities were considered activities included in the program where participants had to work together to achieve a common goal, such as the initiative activities. Unplanned group activities were considered any other group experience that the students felt were important for forming peer relationships. The role of unplanned group activities (e.g. free time) in developing relationships was considered in previous themes, so this theme focuses on how participants viewed planned group activities. Overall, the students considered planned group activities to be very important in
contributing to leadership skill development, including appreciating the importance of teamwork, building individual confidence, and expanding their perspectives of leadership.

Students clearly felt that the planned leadership initiative activities helped them appreciate the importance of teamwork as a part of leadership. The “shark game” (getting everyone on a tarp as quickly as possible) was repeatedly mentioned in this regard. Dawn stated:

When we were doing the games, like the shark game and stuff, you had to put your faith in your group that you all would be able to get onto the thing… the tarp… and so I guess you have to do that when you are in your groups at school and stuff, you have to be able to put your faith in somebody that they’ll do the right thing. (Dawn, Focus Group 1)

Darien also discussed the shark game, stating “…the shark game…it’s like you are only as strong as your weakest player, we all had to work together, and use all our strengths to succeed and keep going. So we all need to work together” (Darien, Focus Group 4). Other initiative activities, including ‘over the fence,’ ‘flip-a-tarp,’ and ‘human knot’, were also mentioned as contributors to teamwork. Isabella wrote in her journal on Tuesday, “I have learned that I appreciate team work in things like flip-a-tarp” (Isabella, Journal Entry) and continues discussing the initiatives when she answered ‘the best activity today’ question with “over the fence” because “we had to work as a team to eventually get our whole team from side of the rope to another” (Isabella, Journal Entry, Tuesday) The over the fence activity also helped participants build connections between teamwork and leadership, such as knowing and appreciating other peoples skills, “the getting over the fence one, that was my favorite, it hit me that you don’t only need to know your skills, you need to know your group’s skills” (Edward, Focus Group 1).
Students also described other various planned group experience activities that provided “hands-on” knowledge or skills that could help them as future leaders. Icebreaker and name games were thought to be useful if they were ever to lead a camp or activity session in the future, “all those little games we played, with the names... they kind of helped with being a leader because those are something you can do if you ever have to be the leader” (Kathy, Focus Group 2)

Theme 2: Learning about Health - Shifting Perspectives and Increasing Personal Control

According to the students, the prevalent outcome of many curriculum activities was learning new knowledge and skills related to health, specifically stress and heart health. Participants also credited these activities with shifting and broadening their perspectives on various fundamental constructs of health, including how health is defined and what factors influence an individual’s personal health, and how they can control their own health.

Sub-Theme 1: Broadening perspectives of health via new information and learning experiences

Vampires and Single Parents...

The dancing icebreaker activity is over, and surprisingly even the boys seemed to really like the opportunity to form their own groups and create their own dance moves. The next activity at this morning’s YATI (Youth Advocacy Training Institute) training is to draw a typical young person from their school, considering what makes them healthy and unhealthy. The energy level is high, and this room is probably not quite big enough, but everyone seems to be working, and the students seem to enjoy being in their school groups. The staff is spread out on the floor, everyone sitting around pieces of flipchart paper, with markers all over the place. The presentations of the flipchart people are
interesting and insightful, with a good dose of laughter at the various drawings or character names. Beyond the silliness, it becomes clear that students are highlighting issues that influence their health, and the health of their peers, like what they eat, how they spend their spare time, who they are friends with, what’s going on in their family, or at their school. Some of these issues are expanded upon with the next activity—skits! Each group draws a factor that influences health, like culture, money, friends, parents, health insurance, and a skit theme, from popular movies and TV shows, things like Shrek, Twilight, and Harry Potter, and the combining results are funny and effective, if not always well performed. Between the missed lines, and the ‘can we start again?’ moments, there are some good connections being made, and slowly, with each skit debrief, more students seem to be appreciating the different factors that influence health. The facilitator from YATI is pushing the students to think, not accepting every answer given, challenging them to think and consider the ‘so what’ and ‘now what’ of the issues being raised. Though the activities are simple, the concepts are complex, and it becomes clear that the trainers from YATI have a well thought out plan and a great set of skills that together seem to be working, slowly helping the students to consider health in a new way. (Observation Notes, Wednesday, Day 3).

In discussing their experiences of the health curriculum activities, such as the YATI session illustrated in the vignette above, participants described shifting perceptions and increased knowledge about health. This included both a broadening understanding of health to include stress and gaining an appreciation for the complexity of issues that influence health and health behaviors.

Considering stress as part of overall health was a commonly described impact of the health curriculum activities. Many students discussed learning about the impact of stress on health, “the stress things that [Professor] was talking about that can really mess up your life...” (Adam, Focus Group 3), “I knew stress wasn’t good for you, but I didn’t know all of the things that made it bad” (Julie, Focus Group 3), “…when you started mentioning how stress give you grey hair and your hair will fall out and stuff, I’m kinda like OK, I got to listen to what they say about stress…” (Mya, Focus Group 1). Many students also listed learning about stress in their journals (see below).
The health curriculum activities relating stress and health also appeared to result in participants viewing health with a broader lens. For example, Edward stated, “Health before used to seem kind of boring, but now I look at it and see it in a more insightful way” (Edward, Focus Group 1). This shift in attitude included coming to understand that a complete definition of health also included mental health, including stress and happiness. Owen suggested that before camp he felt that health was just “like physical stuff, like running, and all sorts of sports stuff, that was health, not like stress and stuff like positive emotion” (Owen, Focus Group 3). The following conversation from Focus Group 4 also highlights how students were expanding their definitions of health:

Judd: Health could be put two ways, one like how well you eat and how you exercise, and one about how you deal with stress and things going on with your life… (FG4)

Regan: I learned to make a healthy diet, it’s not just about eating healthy and exercising, but also how happy you are and all the stress you have coming at you. (FG4)

Brandy: I think I learned how to cope with stress so that it will help my health. Like he said, it’s split into two ways, healthy eating and exercise, but then stress and happiness… (FG4)

The participant’s abilities to begin to view health with a broader lens was an important impact of these activities, and allowed participants to then integrate more complex understandings of health, including the interrelationships between physical and mental health. With these expanded definitions, it also appeared that students were beginning to appreciate the complex relationships between various elements of health; students seem to be interpreting ‘old’ health information in new ways. Julie’s comment on the oppositional messages of junk food consumption highlights this finding. Julie indicated she knew that eating junk food a lot wasn’t healthy, but if you only eat it
sometimes it can have a positive impact on your mental health, “…because if that’s the thing you take the time to treat yourself with, it can help you to be more healthy” (Julie, Focus Group 3). Diana also highlighted the importance of balancing the physical and mental aspects of health and how they are connected, “how leadership and teamwork and stuff like that, it’s not always physically healthy for you, but it’s mentally [healthy] and sometimes even physically you can get something better from it then just running around…” (Diana, Focus Group 2). The complexities surrounding the problems of violence in (non-active) video games and yet how playing video games can be a way for some people to deal with stress were also discussed, illustrating how students were beginning to move towards seeing healthy choices as a complex spectrum of choices.

Changing perspectives on health also seemed to include an increased appreciation for the complexity and diversity of influences on health (the determinants of health) and health behaviors (including the difficulty of making changes). Oren discussed what he learned in the Youth Advocacy Training Institute (YATI) session on determinants of health, “…in the YATI session they were naming off different things and we had to stand if it affected [our] health, and I’m pretty sure that I stood up for most everything, so I was surprised, I wasn’t aware about that” (Oren, Focus Group 4). Tessa also talked about the YATI session, and how it taught her to appreciate the difficulty of making changes to health behaviors:

I learned that if someone always gets McDonalds, it might be harder for them to stop doing that. Like in the YATI session, we were talking about how that might be hard for them to give up that thing, and the steps they would have to do, to help them (Tessa, Focus Group 3).
Sub-Theme 2: Increasing Personal Control over Health: Skills for Coping with Stress

Beyond learning new knowledge and gaining new perspectives on health, students also developed skills that could be used to help improve their own health. For many students, learning about stress (and how to cope with it) was listed in their journals as the most significant learning of the week. For example, Tessa wrote she learned, “how to deal with stress and cope with it in healthy ways.” (Tessa, Journal Entry) and Heather and Kathy both answered this question with the response “how to cope with stress” (Heather, Journal Entry; Kathy, Journal Entry). In the focus group, Judd stated, “I found some strategies to deal with stress that would help me out a lot, to deal with problems with friends and school and family” (Judd, Focus Group 4).

Skills to help reduce stress included having happy habits, using free time more wisely, and participating in stress-reducing activities they had enjoyed at camp. The most commonly discussed stress-reducing activities were hiking, drumming and yoga. For example, Judd wrote in his journal that the best activity on Wednesday was, “Tai chi/nature walk because it took away all the stress and it was a new way to relax you...learning tai chi will help me relax under future pressures that I will experience in my life” (Judd, Journal Entry). Similarly, Oren stated in a focus group, “I would love to go on nature walks more often... I loved being in the trees and the wild and everything... and the snapping turtle was really cool...” (Oren, Focus Group 4). Like Oren, a number of students were quite impressed with the snapping turtle and with the opportunity to explore the natural area - pictures of the snapping turtle were very common in the journal photo pages, “…[we] went on a nature walk and saw a snapping turtle. I was so still I
took so many pictures and it never moved” (Stacey, Journal Entry, Wednesday, journal blank pages). Julie discussed her profound, almost meditative, experience in the drumming session: “I really liked drumming... it didn’t feel like we were here, it felt like we were somewhere else, and I knew what I was doing” (Julie, Focus Group 3). In their journals, many students noted drumming as an activity they enjoyed, felt they were good at, and would like to do again. Yoga was also commonly mentioned as an activity that participants could use to apply their new knowledge about the importance of stress reduction. Brad stated, “I learned I can do yoga, and I’m going to keep doing it” (Brad, Focus Group 1), and Brandy’s emphatic tone in this comment suggested that she appreciated increasing her yoga skills: “I knew that yoga could reduce your stress, but I just didn’t know how to do it, so now I really know” (Brandy, Focus Group 4). A number of journal responses also support this finding, mentioning increased skills and interest in yoga.

Beyond participating in stress-reducing activities, another significant strategy for reducing stress was learning about, and then using personal strengths to guide future choices in recreation or free-time use. Students highlighted the online survey activity (Signature strengths survey, child version online at www.authentichappiness.edu), as well as the strengths scavenger hunt. Heather stated, “I learned what my top strengths were, and something that helped that was just the activities throughout the week, and that survey that you had to get to the top 6 strengths” (Heather, Focus Group 4). Using this new knowledge about their own personal strengths, some students were then able to make a connection to how to use strengths to reduce stress, as evidenced by Darien’s direct link between strengths and stress in this comment, “to use your strengths, because when you
use your strengths you are probably going to be good at it, and people will tell you ‘good job’… that makes you feel better, which reduces your stress…” (Darien, Focus Group 4).

Also connected to this increasing sense of personal control over health were the consistently noted differences between the health information learned at camp and past experiences learning about health in school. As Dawn stated, “... at school we used to just kind of talk about how we should be healthy, they weren’t really doing anything about it, they just said ‘you should be healthy’... they never gave us actual reasons and taught us why…” (Dawn, Focus Group 1). The discussion between Grace and Hope in Focus Group 1, also highlighted how they felt the camp was different from their experiences at school:

Grace: “I think… when the girls did health from what I remember, we just learned about smoking and drugs, and when we did the healthy eating, we only did that in French and that didn’t really make sense…[this week] changed stress, I thought of stress in a different way” (FG1)

Hope: What Grace said, at school they don’t really tell us about health and all that stuff, they just talked about not to do drugs ‘cause its bad for your health, but when I came to this camp, I kinda found out more information about health. (FG1)

Summary of Theme 2

Health curriculum activities contributed to meeting the camp goals of preparing youth peer health leaders through increasing agency. The emphasis by students on the ability of the HBeat youth leadership camp to provide accurate information about health, as well as the strategies and details required to exercise personal control suggests that the knowledge and skills activities relating to health were important components of the HBeat youth leadership camp. Such knowledge and skills were also linked to the shifting
and broadening health perspectives of the youth participants, including appreciating the interrelationships between physical and mental health.

Overall, students seemed to value these activities because they included reflections on their own connections to the health concepts, and encouraged them to apply the information to their own lives. The experiential nature and active learning strategies used to deliver the material allowed students to experience for themselves the benefit and importance of the activity, which appeared to contribute to the overall value of the health curriculum activities.

**Theme 3: Increasing Levels of Perceived Social and Cognitive Competence**

All participants in the HBeat Youth Leadership camp completed the Spring 2010 HBeat child questionnaire, and then completed a shortened version of the questionnaire on the final morning of camp. As shown in Table 5, mean levels of most variables did show improvements in the directions hypothesized, for example, means of student levels of self-esteem, mastery, minimization and optimism increased post camp, and levels of perceived stress were decreased in the post camp surveys as compared to the pre camp surveys. However, repeated measures regression analysis indicated that these changes were not statistically significant. Similar results were found for the majority of the sub-scales of the Harter Scale of Perceived competence. However, two sub-scales did show significant changes from pre-camp to post-camp at the $p=.05$ level, the Harter social competence sub-scale ($p=.029$) and the Harter cognitive competence sub-scale ($p=.039$). Table 4 (below) illustrates the increased levels in these two domains and details the results of pre and post camp surveys across all measured variables.
Table 4. Repeated Measures Analysis of HBeat Child Questionnaire (Selected Variables)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Pre-Camp</th>
<th>Post-Camp</th>
<th>Repeated measures analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>N</td>
<td>SD</td>
</tr>
<tr>
<td>Self-Esteem scale</td>
<td>28.70</td>
<td>40</td>
<td>7.88</td>
</tr>
<tr>
<td>Mastery scale</td>
<td>18.15</td>
<td>40</td>
<td>4.33</td>
</tr>
<tr>
<td>Perceived Stress scale</td>
<td>36.13</td>
<td>40</td>
<td>7.01</td>
</tr>
<tr>
<td>Optimism scale</td>
<td>8.34</td>
<td>40</td>
<td>1.78</td>
</tr>
<tr>
<td>Minimization scale</td>
<td>5.20</td>
<td>40</td>
<td>2.15</td>
</tr>
<tr>
<td>Harter Perceived</td>
<td>111.83</td>
<td>38</td>
<td>12.81</td>
</tr>
<tr>
<td>Competence Scale</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>19.60</td>
<td>38</td>
<td>4.13</td>
</tr>
<tr>
<td>Social sub-scale</td>
<td>19.23</td>
<td>38</td>
<td>3.84</td>
</tr>
<tr>
<td>Cognitive sub-scale</td>
<td>20.42</td>
<td>38</td>
<td>3.20</td>
</tr>
<tr>
<td>General self-worth sub-scale</td>
<td>20.42</td>
<td>38</td>
<td>3.20</td>
</tr>
</tbody>
</table>
**Figure 7. Mean scores on the Harter perceived competence scale for children (Social and Cognitive domains) measure pre and post the HBeat youth leadership camp. Significant two-tailed differences at 95% confidence level (p<0.05) indicated by *.**

While data does not permit causal explanations between the qualitative and quantitative data, the congruency between the quantitative and qualitative data does suggest some interesting possible relationships. For example, the increase in social competence trends in a similar way as the participant’s descriptions of confidence in building new relationships with peers and staff, and the increase in cognitive competence parallels the increased knowledge and skills gained described by participants. Overall, the data from the qualitative and quantitative methods show similar trends and together provide a strong description of the impact of the HBeat Youth Leadership camp on the
participants. In combination with the qualitative data, the increased social and cognitive components of the HBeat Youth Leadership camp suggests that these components contributed to agency development in participants in the HBeat Youth Leadership camp.

SECTION 3: BECOMING PEER HEALTH LEADERS – PARTICIPANT’S ANTICIPATED READINESS FOR UNDERTAKING A NEW ROLE

At the end of the camp, students were asked about how ready they felt to take on the new role of peer health leader. In general, participants responded that they had a generalized sense of confidence about their abilities to take on the peer health leader role following their participation in the HBeat Youth Leadership camp. For example, Regan stated: “...yeah, I feel like I could do a much better job since I came here, because before I wasn’t too sure what it meant or how I would do it, but now I know” (Regan, Focus Group 4). However, results also revealed a number of areas where students felt unsure, or not yet ready to perform the peer leadership role. This section discusses the youth’s readiness to become peer health leaders, by examining readiness in context of the three main roles of ‘peer health leader’ as described in the title: peer – health - leader.

Theme 1: The Anticipated Challenges and Benefits of Being a ‘Peer’

The challenges of the role of peer health leader appear to originate through the complex role of being a ‘peer’. The participants viewed the role peer dynamics play in schools as an important consideration on the potential success of their own roles as peer health leaders, and the overall success of influencing their schools
Students recognized that they will be asked to take on leadership roles, leading their peers, and yet, they will still be peers themselves. This dual identity was seen as a potential challenge, and resulted in the participants considering how their peers will engage and listen to them, and how they will function as a group of peers at school.

Sub-Theme 1: Engaging Peers – Getting Others to Listen

Participants anticipated difficulties in getting others to listen, and the importance of making things relevant, interesting, and fun for peers who might not be interested in the material or see the benefits of the messages being presented. Students saw challenges in getting their peers involved and getting their peers to listen to the messages that they, as peer health leaders, would be presenting. As Dawn noted “the hard part will be getting everybody to listen” (Dawn, Focus Group 1). In discussing this challenge, some students gave examples from their own past experiences, as illustrated by Hailey’s comments in this conversation in Focus Group 3:

Ben: I think for our school next year, [the hardest part] will be getting people to listen about it.
Facilitator: what will be hard about that?
Ben: Well some people probably won’t just care, and they probably won’t just listen.
Gabrielle: like Isabella said, they listen, they [just] don’t always care… if you find something that they actually agree with then they will do it, but if it’s something that’s not bothering them, then they’ll just ignore it…I think if it is something that benefits them, then they’ll be OK with it…
Hailey: I agree with Gabrielle and Ben, because I know in grade six and seven I saw stuff I didn’t care about, so we will have to do something memorable to get everyone to care, or they just won’t listen.” (FG3)
Ada’s comment’s “…I hate it when people just come in and they just talk about things people couldn’t care less about… and wouldn’t stop…” (Ada, Focus Group 2) also connects to her own past experiences with school presenters. Other students echoed the challenge in engaging peers, motivating them to find meaning in the material “I think a hard part will be, some of the kids…they won’t want to do it, or they really won’t care about it” (Julie, Focus Group 3).

Although these challenges seemed difficult, the overall tone of the group was positive and proactive, with some students offering practical and creative solutions, “not just go up there and talk about it… but actually get them involved…” (Julie, Focus Group 3). Some solutions seemed to have origins from the camp week, such as Abby’s comment, “I agree… because you guys talked to us in a fun way and we could always do that…” (Abby, Focus Group 4) or Brandy’s belief that using games to teach would be effective, “playing the games…I think would be able to keep their attention, but still teach them stuff, while trying to make it fun…” (Brandy, Focus Group 4). Again and again, participants emphasized the importance of making things fun. Heather believed this was key for students to learn, “…I think you can make it fun, and just have a good time, because then kids would engage more and then just realize that this is a good idea, and maybe learn more from them” (Heather, Focus Group 4). Overall, while students saw engaging their peers as a challenge, they also, as a result of their roles as peers, were able to understand how to address these challenges, and offer beneficial peer-generated solutions.

One solution that was commonly discussed was recognizing that a different approach would be needed with younger students. Relying on their past experiences as
school leaders, participants discussed the differences across grade or age levels. For example, Oren related a personal experience saying that he had helped with an assembly where the reactions of the older and younger kids were very different, and considered how to apply this experience to potential presentations he would deliver in the future:

I helped put on an assembly for a charity and the people who were running it were very peppy...and the younger kids just loved it, and they did a rap and everything...but the older kids kept talking about how the one girl was really peppy and stuff. So I guess you’d have to target one group, so you could do lower grades and it would be a kinda different presentation, and then older grades, because they have different likes. (Oren, Focus Group 4).

Abby felt similar, mentioning she agreed with Heather and Oren’s previous comments, “focus on who to present it to and what types of material belong with the age groups...” (Abby, Focus Group 4). Like many of her peers, Abby showed a personal experience and a fairly finessed understanding of the differences between the ages, as she continued stating, “…because the kindergartens to about grade 4, they’ll take whatever you want them to do, they’ll sing along and play games, but as you move into the more intermediate grades they’ll just be like ‘whatever’...” (Abby, Focus Group 4). Judd also expressed an understanding of the different ages; he felt that “it would be a challenge to teach younger kids, because they don’t have the knowledge to actually [understand] what we are trying to teach them...they can’t really sit through [presentations]...and I think it would be hard to keep them focused” (Judd, Focus Group 4). In a similar way that students stated that engaging peers as difficult, yet not impossible, the challenges of adapting to different age groups were viewed as important, but not impossible to overcome. Differentiated content for the different age groups was seen as difficult to organize, but not an impossible obstacle.
Beyond the challenge of getting people to listen to the material, participants discussed how their social position in their peer group would influence their ability to engage their peers as a ‘peer’. As the group of participants at the HBeat youth leadership camp were socially diverse in terms of the roles they held in various cliques or social groups at their school, this was something that varied widely. Zoe bluntly stated, “I think it is going to be pretty hard because I’m not the most popular person in my school, so some of the younger grades might not listen” (Zoe, Focus Group 3). While Zoe was unique in her directness, the concern about being confident enough to stand out and be different from their peers was expressed by many students. Regan stated, “I think being afraid you are not going to do the right thing or maybe some people are going to be embarrassed of what their friends will think, if they think it’s not cool or something” (Regan, Focus Group 4) and Brandy agreed, “it’s really going to be hard to get people to listen to you and have the confidence to stand out” (Brandy, Focus Group 4). Ada also expressed concerns in this area, “…like you don’t want to be up there talking and no one is listening and look sort of like an idiot” (Ada, Focus Group 2).

Participants were quite concerned about how friends and peer influence would affect the way peers would respond to the messages they were trying to promote. Many students believed that how particular students responded would have greater influence across the school. Julie stated, “… and if someone cool says it’s a waste of time and stuff, all their friends are like ‘yeah, I’m not doing it’” (Julie, Focus Group 3), something that Brandy also echoed, “like she said... people at our school, they, like most of us are followers, so if their friends aren’t doing it, they don’t usually want to…” (Brandy, Focus Group 4). Similarly, the role of older students influencing younger students was
mentioned in this context, “I think the hardest things would [be] being scared that the oldest kids would stop listening and say things about it, and then the younger kids would start following, because they look up to the older grades” (Regan, Focus Group 4).

**Sub Theme 2: Working as a team of peers at school**

Another distinct area related to participant’s anticipated roles as peer health leaders was working as a team of trained peers at their school. Participants identified both the challenges of working together in a team of peers, and the benefits that this could offer. Interestingly, these two elements were often discussed in tandem, illustrating that the participants appreciated the complexities of teamwork, as Dawn states:

I think it’s going to be hard to get everybody’s opinion on stuff and try to do what they are asking for and stuff, but I think the easiest part will be because we have everybody standing behind us that’s going to be easier to get together and get stuff done. (Dawn, Focus Group 1)

Mya also commented on the challenges of working with a large group, “I think the hardest part probably will be acknowledging everyone’s opinions” and Stacey echoed this sentiment: “putting it all together, trying to get everything ready, and making sure everybody has a part or does something to help” (Mya, Focus Group 1). While these comments illustrated how this would be a challenge, students did seem to feel supported by the group, “I think ‘cause we are a group from my school it will be easier to talk with all of them” (Isabella, Focus Group 3).

**Theme 2: Participant’s Understanding of the Health Content**

The second major theme related to the participant’s forward reflections was their readiness to present the health content. Delivering the content to their peers in a
meaningful and effective manner was continually described throughout the camp as an important part of the future roles of peer health leaders, and was something that the students anticipated would be a challenge. Specifically, students saw two areas of challenge, one in choosing which content material to present, and a second challenge in accurately presenting the material, in a manner appropriate for the audience.

**Sub-Theme 1: Choosing what content to present**

Students expressed some concerns about choosing what content from the camp to prioritize and present to their peers. Data suggested that most students did not feel comfortable making such decisions. Brandy felt choosing what to teach would be hard, “because all the stuff we learned here was important and all the games were fun…it would be hard to choose, just choosing what to teach, like stress or what their strengths are” (Brandy, Focus Group 4). Diana appeared slightly more confident, but still struggled to sort out what she would choose as she stated, “It depends, I would like to teach them how important teamwork is…but if it was to the intermediates… then I would do the stress thing” (Diana, Focus Group 2). Rylie felt the hardest thing would be “picking an activity, deciding what to do” (Rylie, Focus Group 4). This common concern illustrated that while the students expressed an understanding of the material personally (as discussed previously), and felt excited and capable of presenting it to their peers (as will be discussed in theme eleven), they were concerned about how to make decisions on what content to prioritize for presentation to their peers.
Sub-Theme 2: Choosing how to present the content

Students also discussed the anticipated challenge of presenting the health content in an accurate and effective manner. These concerns included how they would ensure they could accurately present the material, and some anticipated logistical challenges.

Sorting out how to accurately present the material was seen as a significant challenge. Some students felt it would be “hard to make up what to say” (Grace, Focus Group 1). Diana felt that explaining the material could be difficult: “it would be difficult to put down everything we learned this week, and to explain how it worked, because some things just went by and some people totally forgot” (Diana, Focus Group 2). Students also seemed to recognize that it could be difficult to present the material in a similar format to what they had experienced at camp. This ranged from concerns about the size of the tarp required for playing the ‘shark game’ at school with a large group, to challenges in helping students see their strengths, “finding their strengths and teaching them how to use them…some people might not know what they are, they just think, ‘I’m no good at anything’…” (Darien, Focus Group 4). Similarly, Eva mentioned that replicating the experience of increasing confidence would be difficult, “I was kinda thinking that it would be kinda hard to teach them about confidence and being a peer leader and everything…because they haven’t been here and they haven’t done what we have done…” (Eva, Focus Group 4). This represents a powerful insight into both what she had learned at camp and the difficulty in re-creating the camp experience at school.

Finally, students anticipated encountering challenges in logistics at their schools. Again, drawing from their past experiences, students identified things like keeping track of the time without a watch, preparing a stage area (e.g. moving podiums, rolling down
flags), and considering the group size and scheduling. Students from larger schools also identified that it would be difficult to present to all students at the same time, especially if playing games were included.

**Theme 3: Reflections on Developing a Leader Identity**

The third major theme in considering the participants perceptions of their roles as peer health leaders was the way the students discussed their own identity as leaders. Specifically students discussed their roles as grade eights, the oldest students in their schools, and considered how their own leadership roles would be influenced by external influences, such as their teachers and principal. They also considered how their own skills would influence their roles as leaders, their interest in leading, and subsequently, began to consider how they perceived the concept of leadership as it related to their future roles as peer health leaders, and their ability to affect change in their schools. Most students reported feeling positive about taking on a leadership role, and expressed an interest in helping improve the health of their schools in the capacity of peer health leader.

**Sub-Theme 1: Role Models**

Students indicated that their leadership identity was influenced by their position as grade eight students. Being in grade eight meant that they would be natural role models to younger students, and that their actions and words would carry a larger influence. This identity came from both external influences, such as the perspectives of their teachers or families, and also from internal influences, like their own experiences as younger
students. Brandy and Heather discuss this in the following excerpt from a discussion in Focus Group 4:

Brandy: …we will be in grade eight, so we are kinda the top of our school, so the teachers always tell the younger grades that the grade eights are the leaders and to try and follow their actions if they are good actions, so I think if we try and teach them stuff to do right, that they will follow us.

Heather: Well, I can kinda relate to that, because when I was in grade four or five, I used to look up to this one girl, and she was in grade eight…it’s natural because of all the younger grades, like my sister, she is going into grade three…and all her friends look up to us. Even our principal says if you are not going to behave then the younger kids aren’t going to behave…

Despite recognizing their roles as grade eights, there was still some disagreement throughout the group about how much they would be listened to. Regan felt that the younger grades would be easier, “I’m just not afraid about the younger grades, cause they are, like Darien says, they are more active in the world, and I think the younger grades will be easier to teach” (Darien, Focus Group 4). Whereas other students weren’t as sure, for example some students felt that the grade sixes would be very difficult, and other students weren’t sure if their position as grade eights would automatically overcome the challenges of getting people to listen to them. Brad and Grace debate this point in Focus Group 1:

Brad: everybody likes what the grade eights say…the grade eights are the coolest grade, they get to talk to everybody so they are kinda used to it.
Grace: yeah but…I think it will be hard to get their attention and all that
Brad: no it won’t.
Grace: yes it will. (FG1)

While all students did not agree on the scope of their influence as grade eights, they did seem to believe that this position would have an overall influence in their work as peer health leaders. Participants also discussed how their role as grade eights would
include acting as leaders in other areas, for example, fundraising, school-wide play days and canned food drives. Comments in the focus group discussions suggested students had made some connections to how the learning at the HBeat youth leadership camp could be beneficial to other roles they would play as grade eight students. For many students, the position as grade eight role models was not limited only to their scope as peer health leaders, but to their overall identity as a ‘leader’.

**Sub-Theme 2- External Influences on Leadership Efficacy**

Another sub-theme that emerged from the data was the influence that external factors would have on the participant’s ability to be efficacious leaders. Specifically, students discussed the roles of teachers and principals at their schools. The results were very split, with some students expressing that their principals would be supportive and encouraging- “I find it will be really easy to get the teachers or principals to let us present it or do whatever it is that we are going to do to show the kids to cope with stress…” (Justin, Focus Group 3) -whereas other students were less sure if the principal and teachers would be supportive. Participants felt that lack of support from the principal or teachers could prevent them from doing effective work as peer health leaders, “…some ideas we have, the principal might not go along with, like with what we think... he will be mad if we try to do it without him, so then it would stop us from doing anything” (Kathy, Focus Group 2). Participants also acknowledged that the principal can control resources, like money, that would influence their success, “it will be hard...when we tell our principal about something and they won’t agree on it, it’s hard for us to actually get things together...like maybe with money, they might only have a certain amount or something” (Julie, Focus Group 3). Despite disagreeing about the direction of the
influence, which seemed to be specific to each school and likely was strongly influenced by past relationships or experiences, students clearly understood that the adults in their schools would have a significant influence on their role as peer health leaders.

**Sub-Theme 3- Personal and Collective Skills for Leadership**

Participants considered their own skills, and the collective skills of their school groups, when considering what they would be comfortable leading as peer health leaders. Students recognized the importance of using their own skills and strengths, for example, Dawn stated, “I feel really good about becoming a peer leader next year, because I figured out that you have to be confident in yourself before you can have your whole group confident in you, so you have to know everybody’s strengths, and you have to know your own strengths” (Dawn, Focus Group 1). Edward felt he had learned a lot about working with groups, “I feel good about being a peer leader, I feel that I learned a lot more by coming, and how to work with a group to its full potential” (Edward, Focus Group 1). In speaking about knowing her own strengths, Diana felt that she would struggle to lead something she herself was not good at, “trying to be a leader of something that you are not good at, say they want you to be like, umm... the captain of the basketball team in gym...I am really basketball dis-coordinated, so yeah, it would be hard to tell people...but not be good myself” (Diana, Focus Group 2).

Many students believed that communication was an important skill for being a peer health leader. Some students felt these skills were easy; “I’m pretty confident if they asked us to do a speech or have an assembly or all that, I think we could talk about it and they would understand it” (Dawn, Focus Group 4), “I think it would be fun, because I
like doing that kind of stuff (Grace, Focus Group 1), or as Jory and Vince discuss in Focus Group 2:

Jory: Talking to the people…because that’s what we have to do, and that would be very easy for us.
Vince: Yeah, it would, I’m sure at my school we could do that (FG2)

Tracey responded more apprehensively, “for me, I probably would fail at it, because I’m actually pretty bad at public speaking...” (Tracey, Focus Group 1). However, other students recognized these skills were a personal challenge, but felt they had improved since participation in the HBeat youth leadership camp, “I used to be shaky whenever I talk in front of people, but now I’m starting to get over that” (Kathy, Focus Group 2), and credited an increase in these skills with increased personal confidence “I’m more confident because I’m not as shy now, like more open to talking to other people” (Stacey, Focus Group 2). General confidence towards working as a peer health leader was discussed by many students: “I feel like I could do a much better job since I came here, because before I wasn’t too sure what it meant, or how I would do it, but now I know” (Regan, Focus Group 4), and “I’m way more confident than I was when I started the week, because I wasn’t sure if I would want to do it, but now I do” (Rylie, Focus Group 4), “…Me feeling as a peer leader for next year, I mean I think I’ll have more confidence and stuff” (Adam, Focus Group 3). This increase in general confidence towards the role of peer health leader was an important outcome of the HBeat youth leadership camp. Increased ability to assess and use their own skills, and increased confidence in their leadership efficacy both seem to play significant contributions to participants own leadership identities as peer health leaders.
Sub-Theme 4- Personal Interest in Leading

Many participants expressed interest and excitement about teaching and helping their schools, and felt that they would enjoy the process of teaching the material to their peers, “…it’s really fun to talk about and teach people different stuff that you learned individually, so I think that would be kinda cool” (Eva, Focus Group 4). However, not all students were as enthusiastic, and some expressed doubts as to their interest- “I’m not sure if I am going to do it…” (Darien, Focus Group 4), “I probably won’t do anything for our school next year… we are moving in a year, it’s not our problem” (Adam, Focus Group 3). That said, overall, the majority of students did seem interested in taking on a leader role. Interested students felt that their new knowledge increased their desire to lead, as they had a stronger incentive to help once they understood why the material was important. Julie stated, “I feel like now that I know more things I can change how people think because most people…don’t really care if they are stressed…I sort of thought the same thing until I actually knew it does help” (Julie, Focus Group 3). Similarly Owen mentioned wanting to “help out the kids with their stress, and help the kids who have bad marks get through it” (Owen, Focus Group 3) and Justin stated, “I hope as a peer leader next year I can change…how they deal with stress, and also teach people about teamwork” (Justin, Focus Group 3). While increased content knowledge seemed to drive this interest for some students, for others, an increased appreciation of their ability to affect change was also a great incentive, as expressed in Tessa’s statement in Focus Group 3:

I think that after we went to the YATI session actually learning that if you actually set your mind to changing things, then you can actually accomplish them. I learned a lot of different ways you can…do stuff to get my school helping…and
I think [that is what] I really like about being a peer leader so I can help the students in my school. (FG3)

Similarly, the presentation from the REACT group, a group of high school students hired by Niagara Public Health to be peer health leaders in the Niagara Community, influenced some students personal interests in leading. Ada talked specifically about how the REACT team members were inspirational, “...how they’re peer leaders and they are making a difference, I think that inspired me to keep going with our ideas” (Ada, Focus Group 2). The presenters from this group of high school peer health leaders had the HBeat students mesmerized during their 40-minute presentation. Following the presentation, students asked a number of questions, many relating to how to be hired or work with REACT in the future. Both the work of the REACT team, how much they were able to create change, educate others and be noticed in their community, and the idea of a paying job seemed to be impactful to students and contributed to their own sense of leader identity as peer health leaders.

Summary of Section Three

Section three presented the perspectives of the youth participants as they reflected on their own readiness to take on new roles as peer health leaders. While each student had a unique experience, and many anticipated challenges were highlighted, the overall results suggest a generally positive outcome - following the HBeat youth leadership camp, most students indicated a positive outlook on their ability to be effective peer health leaders.
These data, combined with descriptions of the experiences and impacts of the HBeat Youth Leadership camp provides a more detailed picture of the overall role of the HBeat youth leadership camp in achieving the goal of increasing agency for peer health leadership.
CHAPTER FIVE: DISCUSSION

This study investigated the experiences of young people becoming involved as peer leaders in a health promotion project. Specifically, using the HBeat research project, this project examined the process of agency development in a group of young people in a 5-day leadership program. The dimensions of agency understood to contribute to the success of peer leaders in health promotion according to the ‘Youth Agency for Social Change’ model (Suleiman et al., 2006) provided a theoretical grounding for the study. The dimensions examined in this study were: self-efficacy, content knowledge, skills, a critical awareness of power, and supportive and challenging environment / relationships. Specifically, the research questions guiding this study were:

(1) Did the HBeat Youth Leadership camp contribute to building agency in the group of youth participants as evidenced by increases in the key dimensions of agency: self-efficacy, skills, knowledge, and critical awareness?

(2) How did the group of youth participants experience the process of agency development during the HBeat Youth Leadership camp?

(3) In what ways did the specific processes and content of the HBeat Youth Leadership camp contribute to agency development in the group of youth participants?

To better understand question #3, the following sub-questions were considered:

(3a) What were the program elements of the HBeat Youth Leadership camp that were considered by the group of youth participants as being the most significant contributors to their development of agency?

(3b) What were the contributions of the environment and relationships at the HBeat Youth Leadership camp that were considered by the group of youth participants as being
the most significant contributions to their development of agency?

A mixed-methods evaluation utilizing data from surveys, focus groups, journals and observation, was used to explore these research questions via a pragmatic paradigm. Specifically, data were analyzed with the goal of understanding the processes and experiences of youth participants in the HBeat Youth Leadership camp (what was it like to be a participant?); the impact of participation (what did participants learn and how did they learn it?); and participants anticipated readiness for taking on a new leadership role (becoming peer health leaders).

A social action framework, specifically the ‘Youth Agency for Social Change Model’ was applied to the HBeat Youth Leadership camp in order to understand the process of agency development for youth participants. This focus was chosen deliberately, in specific recognition of the importance of agency for effective health promotion (O’Neil et al. 2007). Overall, this model was found to be an effective way to evaluate the process of developing agency in peer participants and the data collected in this evaluation supports the use of the social action framework for projects aiming to engage young people’s participation in health promotion.

The following sections of this chapter apply key findings from the evaluation study to the components of the Young Action for Social Change model in order to discuss the development of agency in HBeat Youth Leadership Camp participants. To answer the research questions, the structure of this chapter is based on the four key dimensions of agency - self-efficacy, skills, knowledge, and critical awareness (Question 1). Within each dimension of agency, specific links to the program elements (Question 3A) and relationships and environments (Question 3B) of the HBeat Youth Leadership
camp are referenced. Maintaining a focus on the participant perspective throughout the chapter provides ongoing answers as to how the participants themselves experienced agency development (Question 2). The intent of this format is to comprehensively answer the research questions by providing a structured, holistic and youth-driven perspective on the process of agency development in HBeat Youth Leadership camp participants.

First, the role of a supportive & challenging environment (relationships) will be examined, with specific focus on the role of peers and adults (camp staff) for youth participants. Secondly, the participants’ understanding’s related to health knowledge and skills will be discussed, integrating new insights about health in relation to the development of critical awareness of power. Thirdly, a summary of the findings pertaining to peer health leadership self-beliefs, primarily self-efficacy will be presented, focusing on how various elements of the HBeat Youth Leadership camp contributed to this critical construct of agency, including how youth participants felt prepared to transfer learning to new roles as Peer Health Leaders.

Following these three data-driven sections, an overall discussion of the effectiveness of this model for youth participation in health promotion projects is presented. To respect the core aim of evaluation studies to become practically applicable to future readers (Patton, 1982) and specifically the aim of health program evaluation to “…produc[e] information about a program that is relevant and useful for decision makers, program advocates, health professionals and other groups” (Grembowski, 2001, p. 15), an appendix with key learning suggestions that could be applied to future youth participation in health promotion projects are presented as part of this chapter. Finally, limitations to the study and suggestions for future research are given.
Increasing Agency Via a Supportive & Challenging Environment – the Key Role of Peer and Adult Relationships in the Creating a Positive Camp Environment

Participants in the HBeat Youth Leadership camp clearly indicated that relationships shaped the camp environment, and played an important role in their camp experience. According to Suleiman et al., the environment of a youth action project is a “product of the relationships with the facilitator, peers and surrounding organization” (2006, p.140). The Youth Action for Change model situates the role of the environment (and corresponding relationships) as the structure that ‘holds’ or supports the other model elements, thus recognizing its key role in agency development. The emphasis on the role of the social environment in the Social Action framework is congruent with Bandura’s theory of tridactic influence, which also emphasizes social influences in the process of agency development. Bandura situates social influences as one of the three elements influencing personal agency – in the theory of tridactic influence he discusses how the connections between social influences, personal factors and the environment interact to influence personal agency development (Bandura, 1999). Bandura explains that an individual young person can adapt to the environment, but the environment also has (positive or negative) impacts on individuals. At the same time, individuals influence their environments. Thus, it is important to recognize that development of an individual is not independent of the environment (Bandura, 1999; Blum, 1998). Blum (1998) applies Bandura’s work on youth development to changing paradigms in youth health promotion, and clarifies that positive youth development is a process that occurs “… over time in the context of supportive environments” (p. 369).
As with Blum’s review (1998), the importance of the environment is commonly noted throughout literature on youth engagement, youth empowerment and agency. Through applying the theory of tridactic influence to positive youth development and comprehensive health promotion, Flay (2002), asserts that intrapersonal factors are critical in how young people engage in a health-based experience. Similarly, Jennings et al., (2006) also identify “a welcoming, safe environment” as one of the four key dimensions of critical youth empowerment (p.32). Jennings et al. include an emphasis on the importance of the relationships in such a welcoming environment, stating that such an environment is “a social space in which young people have freedom to be themselves, express their own creativity, voice their opinions in the decision-making process, try out new skills and roles, rise to challenges and have fun in the process” (Jennings et al., 2006, p. 41). HBeat Youth Leadership Camp participants specifically highlighted the importance of relationships with peers and staff for creating an environment that was supportive and challenging. Both the influence of their peers and the influence of HBeat staff (adults) are discussed below.

**Peer-based social support**

Peers were generally viewed positively, with many participants commenting on how well they got along with each other, and how comfortable they felt in their camp and activity groups, “[my group members] are all really nice to me and they made me feel comfortable...” (Whitney). There were very limited negative comments about peers or other participants found in the data. However, with the camp being only five days in length, it is not surprising that the conflict was minimal. The short duration meant that the majority of the group was still in initial stages of group development, and had not yet
fully entered the more conflict-driven stage of group development, typically referred to as ‘storming.’

The positive peer relationships appeared to have been a bit of a surprise to some participants. Given the camp context, where participants came from five different schools, they did not appear to expect to build new relationships with others from different schools as quickly or easily. The benefits of learning from a diverse social group were described by Diana: “I think it was pretty cool how, all of us came from different schools and how all of us had different ideas, so we got different ways about thinking about stuff from people from different schools…”

Participants also experienced the positive relationships with peers as contributors to the supportive environment that allowed them to pursue new challenges with increased confidence. Camp challenges included attempting new activities, such as Hope’s experience on the high ropes course, “I had confidence on because everyone was helping everyone else, like my team holding the rope” and also social challenges of meeting and working with people they did not know, as per Gabrielle’s comment: “It kinda helped with confidence…meeting new people here, having to reach out and talk to new people…”

These relationships also appeared to be critical in allowing the HBeat Youth Leadership camp to meet the anticipated camp goals related to youth development and agency for the participants. Peer-based social support is commonly considered to be an important resource for youth development and a contributor to adolescent adaptation (DuBois, Burk-Braxton, Swenson, Tevendale, Lockerd, & Moran, 2002). Likewise, the importance of positive group interaction among social peers is notable in Freire’s
empowerment education model through its emphasis on participating in, and learning from, dialogue with peers (Wallersetien & Bernstein, 1988). Positive peer relationships are also noted throughout various applications of youth participation in health promotion or social action. Specifically, positive peer relationships are linked to motivation to stay engaged with a social action project (Cargo et al., 2003), providing the peer support needed to reform the fundamentals of ‘participation’ (Matthew, Martelli, Betozzi & De Luigi, 2010) and, most notably for this study’s focus on agency development, increased levels of self-esteem (Blum, 1998; DuBois et al., 2003).

While most work in positive youth development reinforces the links between social environments and self-esteem, and clearly connects social learning to self-efficacy (Blum, 1998), newer work, such as a longitudinal study by Dubois et al., suggests that the relationship between peer-based social support and self-esteem is not as straightforward (2002). DuBois et al., determined that the positive impacts of social support from peers on emotional and behavioral adjustments is mediated through self-esteem (e.g. a certain level of self-esteem is required for social support to contribute to positive adjustments) (2002). They suggested that interventions for young adolescents should aim to enhance both social support and self-esteem in tandem (DuBois et al., 2002). Dubois et al.’s recommendation is supported by the experiences of participants in the HBeat Youth Leadership camp. Many key camp activities described by camp participants were activities that included both personal accomplishment and strong social support components. Two specific examples were physical support during the high ropes course and the group social support during the Brock tower swimming experience.
Similarly, DuBois, Lockerd, Reach & Parra (2003) discussed the pedagogy of peer-based support ideal for sustained increases in self-concept and self-esteem. They highlighted that programs that aim to increase self-esteem within didactic or lecture-based environments are not as effective as those focused on a social learning model, offering further explanation of the value of the HBeat camp experience. Using data from focus groups designed to elicit a direct youth perspective on effective strategies for self-esteem enhancement, DuBois et al. (2003) discussed the necessity of ensuring that learning occurs within a social context and with a hands-on approach for maximum impact. Drawing on past empirical work, they state: “…programs that offer experiential opportunities for personal learning and growth within a group context are among the few existing interventions with a demonstrated ability to produce lasting gains in self-concept and self-esteem” (DuBois et al., 2003, p 426). Such research suggests that the contributions of a supportive environment to agency development in the HBeat Youth Leadership Camp was not solely due to positive peer relationships, but also related to how these positive peer relationships were experienced as part of experiential learning activities - activities that were designed with the parallel goal of supporting development of individual self-beliefs, including self-esteem (HBeat Youth Leadership Camp Program, 2010).

**Increased Levels of Perceived Social Competence**

Along with qualitative data assessing participant experiences at the HBeat Youth Leadership camp, this evaluation study also included a pre-post analysis of the various sub-scales of the Perceived Competence Scale for Children (Harter, 1982). Repeated measures regression analysis showed a significant increase in the social competence sub-
scale (p=.029). Harter described this sub-scale domain as functioning via peer relationships (notably, it does not measure social relationships with adults), and addresses areas including “having a lot of friends, being easy to like, and being an important member of one’s class” (Harter, 1982, p. 88). The significant increase in the social sub-scale component of the Perceived Competence Scale for Children appears to align with the participant’s comments and writing related to the role of the social environment in building their experiences at the HBeat Youth Leadership Camp. The significant increase in social competence parallels the participant’s personal descriptions of confidence in building new relationships with peers. In combination with the qualitative data, the increased social competence on the Harter sub-scale suggests that the HBeat Youth Leadership Camp contained supportive social relationships.

**Relationships with Adults ‘Who Get It’**

The relationships between participants and adult staff were also commonly noted as an important part of the camp experience. The diverse staff team, including counselors, senior staff, researchers and expert staff, helped to facilitate the development of a supportive environment at the HBeat Youth Leadership camp. Youth-adult relationships are considered a fundamental element of successful youth participation projects (Hart, 1992) and meaningful adult-youth partnerships benefit all parties engaged in a social action project (Khanna & McCart, 2007). Cargo et al. used a longitudinal qualitative study to examine a participatory community health promotion intervention and concluded that youth-adult partnerships created an empowering environment via 1) creating a welcoming social climate and 2) enabling youth (2003). Similar trends can be found in
the data from the HBeat Youth Leadership Camp supporting and confirming both Cargo et al.’s findings, and the general long-standing emphasis on youth-adult partnerships for youth participation and agency development.

Cargo et al.’s concepts related to a welcoming social climate included adults providing opportunities for, believing in, respecting, encouraging, and caring for the young people with whom they worked. Many of these concepts were found in the data of this study. As outlined in Chapter 4, participants emphasized caring and respectful relationships with counselors as a critical part of their camp experience, and discussed how staff were encouraging – defined by Cargo et al. (2003) to include staff being positive, motivating and enthusiastic. Similarly, participants discussed how they felt the staff believed in them, for example feeling motivated and excited to engage as a peer health leader following conversations with staff.

Two of Cargo et al.’s findings related to Enabling Youth including: 1) teaching and 2) facilitating were confirmed through this data. The other two concepts – mentoring and providing feedback – were not found in the data, perhaps because of the short, 5-day duration of the experience. Being more complex, these elements of a youth-adult relationship are more likely to occur over a longer time frame. The teaching concept discussed by Cargo et al. encompasses both informal and formal instruction, including modeling. Formal teaching was mentioned in many places, for example learning skills like how to do yoga or tai chi, through specific activities, and through the learning that occurred surrounding the stress and the positive living and leadership curriculums which will be discussed in further detail below. Modeling (a component of teaching) was also commonly mentioned by youth participants, supporting the literature on youth-driven
recommendations for positive adult behaviour while working with young people in social action projects such as “shared participation in activities” (DuBois et al., 2003, p. 420), “providing support without domination” (Jennings et al., 2006 p. 45) and “adults who get it” (Zeldin, 2004 p. 81).

Alongside research examining peer influence on self-esteem presented earlier in this section, DuBois et al. (2003) have also found that self-esteem development is influenced by the balance of social support received from peers vs. adults. The applied implications of their findings suggest that interventions aiming to increase self-esteem should ensure “a healthy balance across peer- and adult-oriented domains of activity” (DuBois et al., 2002 p. 837) something that appears to have occurred in the HBeat Youth Leadership camp. Recognizing that adult leaders in youth participation projects must be valued for the contribution they make to youth agency development was a key finding from this data.

Participant’s indications that the HBeat Youth Leadership camp was a positive social space with many successful peer and adult relationships including significant increases in perceived social competence, the approach of the HBeat Youth Leadership camp appeared to be successful in facilitating the positive relationships that contribute to a supportive and challenging camp environment and hence contribute to agency development. These foundational relationships suggest that the basic foundational environment of the HBeat Youth Leadership camp was sufficient to provide the ‘structure’ required to allow other elements of the Youth Action for Change model to be developed.
Learning About Health: Knowledge, Skills, Critical Awareness and Cognitive Competence Gained from Participation in the HBeat Youth Leadership Camp

According to participants, one key outcome of participation in the HBeat Youth Leadership Camp was learning new knowledge and skills about health, specifically related to stress and heart health. Participants credited learning about health with shifting and broadening their perspectives on various fundamental constructs of health including how health is defined, what factors influence an individual’s personal health, how one can control their own health, and the concept of the social determinants of health. Shifts in these areas can be considered as first steps in developing a critical awareness of power as defined by Suleiman et al. (2006) allowing young people to better appreciate their own connections to the broader context and the various forms of power that influence health (Suleiman et al., 2006).

Participants indicated that they learned new information about health and generally felt that the HBeat Youth Leadership camp had increased their level of health knowledge. The most commonly described learning was considering stress as a part of overall health and realizing the significance of stress as a factor influencing overall health. The link made by participants between stress and health is particularly noteworthy, as past research has found that young people may not always make this direct link. In a study on young people’s perspectives on health, Woodgate and Leach noted “certain conditions that caused youth increased stress, such as experiences with bullying, were also not always linked [by the youth themselves] to poor health.” (2010, p. 1178). Given the importance of understanding the health implications of stress (including connections between stress and heart health) for their future roles as peer health
educators, it was important for the overall HBeat intervention that youth participants understood the concepts related to stress presented at camp. As well, understanding key knowledge components of a project is considered to be an important first step towards moving toward informed social action - the work peers would be asked to do as Peer Health Leaders in their schools the following year (Suleiman et al., 2006).

Interestingly, the quantitative data most closed connected to knowledge and learning, also shows positive increases. Data from the cognitive sub-scale of the Harter Perceived Competence Scale for Children (PCSC) showed a statistically significant increase in the participant’s post-camp measures of perceived levels of cognitive competence (p=0.039). This sub-scale emphasizes academic performance, including “doing well at school, being smart, feeling good about one’s classroom performance” (Harter, 1982 p. 88). Increases on this sub-scale indicate that the HBeat Youth Leadership camp may have affected participants’ perceived competence of their cognitive capacity. However, Harter’s original work restricts the cognitive competence scale to school-based competence (Harter, 1982). This means that this scale cannot be used to directly measure the feelings of cognitive competence during the HBeat Youth Leadership camp, but rather it provides insight into participant’s perceptions of their success in an academic setting and is more useful to assess if that particular area of competence has changed following participation in the HBeat Youth Leadership Camp. Use of the perceived cognitive competence scale in research based outside a traditional school setting is somewhat common in the health and community development literature. For example, studies on positive youth development and participation in community youth development programs and studies of adolescents living in public housing have used the
Harter Perceived Competence Scale as a measure (Lerner et al., 2005; Sullivan & Evans, 2006). Given that this scale remains a well-used and well-accepted scale of perceived competence, the significant difference between the pre-camp and post-camp measures contribute an important finding to this research and suggests that the HBeat Youth Leadership camp did contribute to increased agency in youth participants.

Given that the majority of the explicit curriculum was related to health concepts, is worth further discussion on how this health curriculum could have influenced the increased levels of perceived cognitive capacity and the participant’s increased knowledge and skills related to health. The qualitative data provides further explanations of how participation in the HBeat Youth Leadership Camp related to learning about health.

Despite the research showing that the Harter Perceived Competence Scale can be used effectively outside of a traditional setting, there could still be some limitations to this form of use, as the cognitive competence sub-section was designed for use in the traditional academic settings. The alternative format of the camp program could also have contributed to the non-significant findings of the other sub-scales measured (physical, athletic, general self-worth and overall). Based on the curriculum and goals of the HBeat Youth Leadership camp, it is quite plausible that the camp experience did not influence the physical and athletic domains. There was minimal focus on physical and athletic components during the camp week, so the lack of change in these areas is not surprising, and this would have contributed to the non-significant finding on the overall measure. As well, the length of the camp must be considered. Given that the camp was only five days in length, it may not have been long enough in duration, or provided a strong enough
experience to have significant impacts on the more global indicators measured (self-esteem, perceived mastery, minimization and optimism).

**A New Way to Learn About Health – Participant experiences with the HBeat Youth Leadership Camp Health Curriculum Content**

A compelling, and well-supported finding from the qualitative data is that the curricular/content health learning that occurred at the HBeat Youth Leadership camp was notably different from participants’ past experiences learning about health. Specifically, four areas of difference are highlighted below: 1) a focus on critical understanding, 2) a positive, strengths-based approach, 3) the integration of leisure activities, and 4) a commitment to having fun.

Firstly, the pedagogical approach of the HBeat Youth Leadership camp - a commitment to promote ‘higher level’ critical understanding of complex concepts using experiential education, skill development and group learning, appears to have been a different approach than past experiences with health, specifically in how health was taught in school. In discussing how this experience was different from learning about health at school, participants emphasized differences. Increased context and background, the ‘actual reasons’ or the ‘why’ all may have provided participants with a more complete understanding of the health material, more confidence in their comprehension of the content, and an increased feeling of control over their own health. As described in chapter four, participants expressed frustration at just being told what ‘not to do’ at school rather than being provided with information or skills that they could connect to and apply directly to their own lives.
As this study has limited data related to the specific health education curriculum or pedagogy students experienced during grade seven health, conclusions related to curriculum must be drawn cautiously. However, a general overview of the Ontario Health and Physical Education Curriculum does offer some explanation. Most obviously, this curriculum does not contain information on heart health, stress, or positive living. In addition, while, the 1998 version of the Ontario Health and Physical Education Curriculum, does contain language that includes building skills and applying material to one’s life:

Students should begin early on to acquire basic knowledge about a wide variety of health-related topics and to develop relevant skills. They need to understand how their actions and decisions affect their health, fitness, and personal well-being, and how to apply their learning to make positive, healthy decisions in all areas of life and personal development. (The Ontario Curriculum, Health and Physical Education, 1998, p. 2),

this curriculum is quite dated and appears to lack a critical thinking approach. This curriculum takes a very segmented approach to health education, covering one health topic at a time, with very limited integration between topics indicated in the curriculum document. According to Ophea, a not-for-profit advocacy organization that works in partnership to “develop groundbreaking programs and services that support healthy active schools and communities” (Ophea, 2013, About Us), the 1998 curriculum lacks a holistic approach, and was written prior to the increased concerns on child and youth mental health (Ophea, 2012). Unfortunately, the latest updates to the Ontario Health and Physical Education curriculum (2010) were not implemented prior to the HBeat Youth Leadership camp, and have not yet been implemented in full.
Secondly, the strong positive approach used to present the health information was a difference between participants past education experiences and the HBeat Youth Leadership camp. The HBeat Youth Leadership camp used a strengths-based approach supported by positive psychology, a rapidly growing sub-field of psychology that focuses on “the belief that people want to lead meaningful and fulfilling lives, to cultivate what is best within themselves, and to enhance their experiences of love, work, and play” (International Positive Psychology Association, 2012). Presenting information about stress from a strengths-based perspective may have contributed to the process of empowering the youth participants to consider their ability to both understand their health and make changes. According to Hood and Carruthers (2007), a strengths-based approach emphasizes the assets and capacities of individuals, and has the additional potential to influence an individual’s sense of self. The positive strengths-based approach applied at the HBeat Youth Leadership Camp meant that the focus of the content was on the capacities of students, not their deficits. These capacities became the basis for the teaching specific skills that young people needed to control their own health. Rather than a ‘doom and gloom’ scare-tactic approach that could produce guilt or fear, a positive skill-based approach “equip[s] them with self-regulatory skills to manage their health habits” (Bandura, 1998 p. 623), providing participants with an enhanced sense of their own capacities and abilities to control their own health. As described in chapter four, participants’ comments about yoga were particularly notable in this regard, as they described specific skills that could be applied to their own health, and they felt enabled to “keep doing it.”
This appears congruent with findings from the literature on young people’s perceptions of health. Specifically, Wills, Appleton, Magnusson and Brooks (2008) described that when young people participate in activities with a focus on inclusion and empowerment, their interest in physical activity tends to increase (p. 250). Additionally, Wills et al. (2008), highlighted research that attempted to shift curriculum from a more typical adult-driven physical education program where activities are pre-determined, to activities chosen by the young people. They found this produced a more “inclusive, friendly and rewarding” atmosphere (Wills, et al., 2008, p. 249). In one example provided by Wills et al., this meant including a dance component upon the request of the students, and moving away from the more traditional badminton, trampoline and weights in the curriculum (2008). Similarly, students interviewed in a study by O’Higgins, Sixsmith and Nic Gabhainn (2010) that explored adolescents’ perceptions of the words “health” and “happy” also made links between choosing activities that they liked and feeling happy and positive about your health; one student quote provided by O’Higgins et al. emphasizes this point, “if you don’t like swimming and you are forced to do it, you won’t be happy… you won’t do it and will get unfit (C8 Boy)” (2010, p. 371).

Data from this study suggests that the knowledge and skills learned by participants through a positive strengths-based approach was influential in their overall learning at the HBeat Youth Leadership camp.

Thirdly, the focus on the HBeat Youth Leadership camp on integration of leisure-based skills to help improve their health seemed important for the youth participants. By learning how to cope with stress via effective and enjoyable leisure-based skills, participants appeared to have increased efficacy over their own health. This seemed to
relate to both school settings and also to other areas of life. The skills that were most memorable to youth participants included using free time more wisely, specifically participating in stress-reducing activities they had enjoyed at camp. The most commonly discussed stress-reducing activities were hiking, drumming and yoga – all very obviously leisure-based. Participation in leisure activities is positively linked to well-being and self-concept among adolescents (Freire, 2006) and has also been used to promote healthy use of free time (Caldwell, Baldwin, Walls & Smith, 2004). The link between leisure and well-being is also well described by Hood and Carruthers in the Leisure and Well-Being Model. This model outlines a number of resources, including physical, cognitive, social and psychological resources impacted by leisure activities (Hood & Carruthers, 2007). It is possible that participation in these leisure activities not only provided increases in tangible stress-reduction skills and skills that participants could anticipate using in future stressful situations, but also helped in increasing positive self-beliefs through introducing the participants to new activities that they enjoyed, were successful at, and began to incorporate into their sense of self. An influence on self-beliefs is an impact of leisure that is often linked to well-being (Hood & Carruthers, 2007). Some participant comments described in Chapter 4 (e.g. Owen) that specifically linked to the nature walk activity suggested this was a possible outcome of that particularly activity. Similarly, some students indicated that they experienced competency, complete engagement, and self-awareness during leisure activities- factors that support the use of leisure activities for developing self-beliefs, a benefit in conjunction to providing skills for stress relief (Hood & Carruthers, 2007). Julie’s description of her experience in the drumming
session exemplifies these connections: “...it didn’t feel like we were here, it felt like we were somewhere else, and I knew what I was doing.”

Finally, a fourth difference in how learning occurred was centered in the center of the camp program – having fun. This overarching approach to all learning that occurred was a commitment of the HBeat Youth Leadership camp. Participants continually commented on ‘having fun’ during the camp week. This included specific mention of a relaxed environment and to experiencing a significant amount of learning in a fun, short experience. This connection to having ‘fun’ as an important part of learning was noted in DuBois et al.’s research on youth development programs - youth participants characterized fun programs as “being activity oriented, incorporating substantial opportunities for peer interaction, providing choice… and including outdoor activities” (2003, p. 419-420). Thus the fact that participants felt the learning was ‘fun’ could have contributed to the desire to learn, confidence with learning, the noted increased health knowledge, and the skills and significant increases in perceived cognitive competence gained from the HBeat Youth Leadership camp.

A summary of the findings related to how learning about health was experienced by participants in the HBeat Youth Leadership camp is summarized in the figure below.
As Figure 8 outlines, the experiences at the HBeat Youth Leadership camp affected participant’s personal understanding of health concepts and the related self-beliefs connected to their sense of control over their health. This increased sense of control (personal empowerment) is considered a critical component, even “the raison d’etre” of effective health promotion programs (Rissel, 1994, p.40). The accepted World Health Organization definition of health promotion emphasizes the need to enable, identify, realize and satisfy one’s own needs:

The process of enabling people to increase control over, and to improve, their health. To reach a state of complete physical, mental and social well-being, an individual or group must be able to identify and to realize aspirations, to satisfy needs, and to change or cope with the environment... (WHO, 2001, p. 21).

From this perspective, another outcome of the HBeat Youth Leadership camp was that it served as an effective health promotion initiative for the participants themselves.
Extending beyond the goal of only preparing the participants for future roles in peer health leadership, the camp appears to have acted as a health promotion initiative in itself. Future research on the health behaviours of the participants in the HBeat Youth Leadership camp is required to further assess this finding.

**Critical Awareness – Broadening Perspectives on Health**

Beyond knowledge and skills, there is also specific data that suggests that the HBeat Youth Leadership camp provided the participants with experiences that caused them to think critically about the construct of health. The Youth Agency for Social Change model emphasizes the importance of a critical awareness of power for increasing agency. According to Suleiman, et al., “an awareness of power sets these self-beliefs, knowledge and skills in a critical context, allowing youth to understand their own experience as shaping and shaped by broader social, political, cultural and historical patterns” (2006, p. 140). This dimension was considered an important, albeit challenging component of the HBeat Youth Leadership camp. While one goal of the camp experience was to provide an opportunity for young people to consider health from the social determinants of health perspective, (as per the approach of the overall HBeat Social Determinants of Childhood Hypertension research study), effectively conveying this information in a 5-day program was predicted to be difficult, especially given how little was known about past education or the ‘base level’ of knowledge of the youth participants attending the Youth Leadership Camp (HBeat Camp Staff Training Manual, 2010; Observation notes). Woodgate and Leach (2010) note that how young people understand health is not well studied: “youth’s perspectives on what constitutes health and what factors influence health are relatively unknown” (p.1173). Similarly, Percy-
Smith (2007) acknowledged the gap between how health professionals view youth health issues and how young people understand and experience health. Increased opportunities for dialogue between young people and the health professional community is considered by Percy-Smith to be an effective way of addressing this gap, to allow youth to participate in decisions and policy related to health. Thus, beyond contributing to the overall evaluation of the HBeat Youth Leadership camp, the results of this study can offer perspectives to literature surrounding young people’s perspectives on health.

The data from the evaluation of the HBeat Youth Leadership camp indicated that participants were broadening their definition of health, expanding beyond only traditional forms of improving physical health – like physical activity or healthy eating - to consider other ways to improve their health, like managing stress via positive emotion and happiness. The integration of broader concepts in their self-created definitions of health is notable. As described in detail in Chapter Four, participants discussed a change in their personal definitions of health, and specifically highlighted a duality: “Health could be put two ways, one like how well you eat and how you exercise, and one about how you deal with stress and things going on with your life... (Judd).” The fact that participants expanded their definition of health beyond just traditional physical health indicators is an important finding from this research. However, it is still unclear if participants were defining health as one state with many attributes (as per the currently accepted definitions) or if they were expressing their perception of “more than one type of health, each with its own definition” (p.1175) as Woodgate and Leach found in their study of young people’s perspectives of health (2010). Without further data, this distinction is not possible. More importantly though, it is clear that young people were making new links
between stress and health and recognized that managing their stress could have an impact on their health.

Using interviews and photovoice discussions with 71 young people in a major city in western Canada, Woodgate & Leach also examined youth’s perspectives on the determinants of health (2010). Results from their work expanded beyond how young people defined health, as discussed above, to also consider youth’s opinions on the influencers of health. They found that young people focused on personal lifestyle factors, commonly mentioning physical activity and healthy eating, as the main determinants of their health and commonly overlooked connections to the broader determinants of health. The researchers note that this was not overly surprising, as the individualistic approach remains the dominant discourse in health communication. It fits that most youth would retain the lifestyle-based perspectives of health perpetuated through media and traditional health messages (Raphael, 2003b; Woodgate & Leach, 2010).

Woodgate and Leach (2010) called for changes in the direction of health promotion for youth, towards work “that helps youth to recognize and focus on the broader determinants of health” (p. 1180). The HBeat Youth Leadership camp aimed to do just that through increasing participant’s awareness of the social determinants of health, via program activities developed by the Youth Advocacy Training Institute (YATI) and the overall philosophy guiding the development of the HBeat research project. The objectives of these activities included promoting a broad, holistic understanding of health, and introducing the concept of the social determinants of health (HBeat Camp documents, 2010). Data suggests that, for some participants, these activities were successful – some mentioned learning from the Youth Advocacy Training
Institute (YATI) session on determinants of health. However, data in this area was limited, so it is difficult to know how widespread this shift in perspective was across the youth participants in the HBeat Youth Leadership Camp. Further research would be required to strengthen and confirm that the HBeat Youth Leadership camp resulted in all participants adopting broader, social determinants of health perspectives. Although youth may not currently identify with the broader definitions of health held by major health policy and health promotion bodies, it remains important to provide youth participants with these perspectives if they are to be engaged as full members of a team and continue to strive towards programs and opportunities that empower young people, and provide them with the opportunity to participate in “the process of sharing decisions which affect one’s life and the life of the community in which one lives” (Hart, 1992, p. 5) as well as “a meaningful voice in addressing their own health needs and concerns” (Woodgate & Leach, 2010, p. 1180).

Despite limited data surrounding youth’s perspectives on the social determinants of health, it is clear that the HBeat Youth Leadership camp was able to successfully provide participants with the knowledge and skills that led to a more general broadening of their perspective on health. As with Woodgate & Leach’s (2010) study, HBeat camp participants gave complex, thoughtful and intelligent perspectives on health and clearly showed that, when presented with appropriate opportunities to learn, they were capable of adopting broader perspectives of health. As youth are critical partners in health promotion, continuing to nurture and develop such new perspectives, as well as finding increasingly effective ways to help increase young people’s awareness of the
determinants of health, should be an enduring priority for researchers and practitioners in health promotion.

Learning About Myself: The Impact of Participation in the HBeat Youth Leadership Camp on Participant’s Leader Identity and Self-Efficacy for Becoming Peer Health Leaders

This section discusses findings pertaining to self-beliefs, primarily self-efficacy, for peer health leadership. It examines in further detail the central element of the Youth Action for Social Change model (Suleiman et al., 2006). The aim of this section is to outline how various elements of the HBeat Youth Leadership camp contributed to development of self-efficacy, including how youth participants felt about transferring their learning to new roles as Peer Health Leaders. As the social action framework clearly articulates self-efficacy as the foundational tenant of agency (Bandura, 1997, Suleiman et al., 2006), an examination of the process of self-efficacy for peer health leadership development experienced by youth participants is required to answer the research questions guiding this study.

Key findings from the evaluation data indicate that participants expanded their own peer health leadership identity via two main areas. First, this section explores how increased self-awareness, derived from reflection and challenge activities, including further understanding of personal strengths, contributed to increased self-efficacy in participants. Second, this section considers how a diversified view of ‘leadership’ derived from exposure to role models and to working with peers helped camp participants to see themselves as leaders. Following these two areas, the third section will discuss the
concerns and challenges discussed by participants by considering the link between leader identity and leadership efficacy. While participants did appear to successfully expand their own leader identities, they also appeared aware of the challenges they would face as peer health leaders, suggesting that leadership efficacy, defined by Hannah et al. (2008) as a process of reciprocal interaction between leader efficacy, follower efficacy and collective efficacy was not fully developed through participation in the HBeat Youth Leadership Camp.

**Developing Personal Identity Via Increased Self-Awareness – Social Persuasion and Mastery Experiences as Contributors to Increased Self-Efficacy for Peer Health Leadership**

Increased self-awareness derived from challenge and reflection activities, including further understanding of personal strengths contributed to increased self-efficacy in HBeat Youth Leadership camp participants. How opportunities to better understand personal strengths and participate in activities that included significant personal challenge contributed to self-awareness will be discussed in the context of two of the four sources of self-efficacy influence described by Bandura - mastery experiences and social persuasion.

An asset development, or strengths-based approach to positive youth development emphasizes strengths and creates an empowering environment that fosters positive youth development (Cargo et al., 2003; Ginwright & Cammarto, 2002). Strengths-focused programs also shift away from the traditional biomedical approach that dominates youth
health perpetuating definitions of adolescence as a time of life burdened with risk-taking behaviours, social problems, and distress (Cargo et al., 2003; Tonkin, 2002; Viner & Barker, 2005). Instead, strengths-focused programs emphasize recognizing and highlighting the positive attributes of young people. At the HBeat Youth Leadership camp, the ‘signature strengths’ activity, and the strengths scavenger hunt activities both gave participants a chance to learn about their own strengths - providing a direct and effective opportunity for participants to expand their sense of self. For some youth, this was a chance to learn more about themselves and for others the strengths activities were particularly empowering – as they shifted to viewing themselves as more capable than they originally believed, with strong statements of increased positive self-awareness. The process of completing, sharing, and discussing the signature strengths activity appears to have provided participants with the opportunity to experience a form of social persuasion. According to Bandura, “people who are persuaded verbally that they possess the capabilities to master given activities are likely to mobilize greater effort and sustain it than if they harbor self-doubts and dwell on personal deficiencies when problems arise” (Bandura, 1994, p. 72). Bandura also posits that increasing self-efficacy through social persuasion is most effective when success is measured by self-improvement, not comparison to others. This would suggest the requirement of a base level of self-awareness, and again emphasizes the importance promoting opportunities to learn and appreciate personal capacities as part of the process of building self-efficacy.

Beyond social persuasion, some of the data indicates that participants had some type of a mastery experiences (e.g. the opportunity to contribute a ‘killer idea.’) Bandura’s work on self-efficacy development highlights that “the most effective way of
creating a strong sense of efficacy is through mastery experiences” (Bandura, 1994, p. 72). Mastery experiences can generally be described as the experience of successfully controlling some outcome via something attributed to one’s own efforts (Maddux & Gosselin, 2003). Notably the ability to overcome obstacles via “perseverant effort” is considered critical to the development of self-efficacy via a mastery experience (Bandura, 1994, p. 72). Repeated ‘quick and easy’ successes make failure discouraging and difficult to overcome – Bandura strongly believes that a resilient sense of self-efficacy requires the ability to stick with challenging situations (Bandura, 1994; Bandura, 2001). Alongside the self-awareness focus of the strengths-based approach, the HBeat Youth Leadership camp provided participants with opportunities to participate in personal challenge activities. Both the high ropes course and the ‘Brock Tower’ during recreational swimming time provided mastery experiences that required overcoming an obstacle or difficulty. Challenge activities appeared to have a high impact on the participants at the HBeat Youth Leadership camp - the value of these activities are evident in participant’s own linkage of the challenge activities to their future roles as leaders. Participation in challenge activities also helped to shift how the camp participants viewed their peers. It appears that those that did not participant in the challenge activities were still impacted by seeing others successfully face a challenge. Bandura discusses this type of social modeling as effective in building self-efficacy, and he terms this as ‘vicarious experiences’ (Bandura, 1994). Vicarious impacts through peer observation were specifically described with connections to challenge activities (e.g. the Brock Tower).

Challenge activities have been used across a variety of youth development programs to help provide a mastery experience. Challenge activities, if well facilitated,
also provide a form of social persuasion, through the support and encouragement provided by other participants.

**Diversifying “Leadership” – Vicarious Experiences as a Support for Broader Perspectives on Being a Leader**

A diversified view of ‘leadership’ allowed camp participants to change their self-perceptions, and contributed to their increased self-efficacy for peer health leadership. Both planned and unplanned activities, as well as their interaction with staff and peers, contributed to this expanded view of leadership. This section details how promoting a non-dominate leadership model, as well as opportunities for vicarious experiences, contributed to participants shifting views on leadership during the HBeat Youth Leadership camp.

When considering the process of youth leadership development, it is important to note that young people who have been exposed primarily to traditional and dominate leadership perspectives may have difficulty identifying themselves as ‘leaders,’ but that intentional programs can influence and alter this perspective (Hoyt & Kennedy, 2008). Hoyt & Kennedy’s study of a youth leadership program for adolescent girls revealed three key details – “having examples of women leaders, adopting multiple concepts of leadership and participating in an environment of mutual respect and trust” - as effective strategies for expanding participant’s concept of leadership (2008, p. 203).

Providing participants in the HBeat Youth Leadership camp with appropriate role models for peer health leadership – supporting Bandura’s belief that vicarious experiences are a source of self-efficacy - was of particular importance to building self-efficacy, as mastery experiences leading directly to health outreach would have been
difficult to achieve in the 5-day duration of the camp (HBeat Youth Leadership Camp documents, 2010). Peer health leadership is challenged not only by difficulties that young people may have seeing themselves as potential leaders within the dominant cultural norms of leadership which are more likely to allocate power to adults (Hoyt & Kennedy, 2008; Lansdown, 2010), but also complicated by the reality that health leadership still remains squarely within the hands of the expert health professionals (Rissel, 1994). Some HBeat camp participants alluded to their previous uncertainty about peer health leadership, which was not surprising given the lack of experience most participants had with participation in health promotion programs in a leadership position. To counteract this expected dominant discourse, participants in the HBeat Youth Leadership camp were deliberately exposed to role models for peer health leadership, providing opportunities for unique role models, as well as providing a vicarious experience with successful peer health leadership. One specific activity – a presentation by “REACT” - a group of high school students currently employed by the local Public Health Department as community peer health leaders (HBeat Youth Leadership Camp Documents, 2010) was particularly memorable to camp participants, specifically making connections to how this group was inspirational. These high school students provided a new perspective on who could be a peer health leader, which helped participants re-define what they could accomplish as future peer health leaders. As Bandura describes, “seeing people similar to oneself succeed by sustained effort raises observers’ beliefs that they too possess the capabilities to master comparable activities required to succeed” (Bandura, 1994, p.72).

However, since the HBeat camp participants were several years younger than the high school presenters, it could have limited the effectiveness of vicarious experiences.
According to Bandura, the closer the similarities between the two groups, the more effective the vicarious experience in producing increased self-efficacy (1994). Yet there still appeared to be a sufficient level of connectedness between the two groups to support the classification of this presentation as a vicarious experience capable of increasing participant self-efficacy (Bandura, 2001). When considering how the HBeat Youth Leadership camp participants identified themselves as role models, the age difference between the two groups may have actually been an advantage. Young people are often particularly attuned to those who are slightly older than themselves – something that the HBeat Youth Leadership camp participants discussed with confidence when considering their own potential impact as role models to the younger grades in the school.

Multiple concepts of leadership were also derived through camp activities and direct experiences with peers. Participants did spend some time directly considering how they defined leadership and teamwork. One particular activity - the ‘flip chart activity,’ seemed to hold particular resonance for camp participants’ self-efficacy for leadership as it literally provided multiple perspectives for defining leadership.

Of particular note was how some participants were able to identify diversity in what makes a good leader, specifically highlighting skills that are not considered dominate leadership traits in others, for example, the importance of listening, not just taking control, or the transactional approach of their counselor as part of what made him a successful leader.

A supportive environment that provided the chance to re-consider what it meant to be leader helped to expand the vision that the participants held of ‘leadership’. This is consistent with the findings from Hoyt & Kennedy’s study, where exposure to diverse
forms of leadership was noted as a significant element of helping participants feel empowered to take on leadership roles in one’s community (Hoyt & Kennedy, 2008).

**Leader Identity vs. Leadership Efficacy – Preparedness to Transfer Learning**

**As Peer Health Leaders**

To conclude, this section will discuss the concerns and challenges discussed by participants by considering the link between leader identity and leadership efficacy. While participants did appear to successfully expand their own leader identities, they also appeared aware of the challenges they would face in this new role, suggesting that highly developed leadership efficacy, defined by Hannah et al. (2008) as including leader efficacy, follower efficacy and collective efficacy all acting with reciprocal influence, was not fully developed through participation in the HBeat Youth Leadership Camp, and may have impacted the effectiveness of the peer leadership model adopted by the larger HBeat research study.

The social action framework focuses on self-efficacy as the base for developing the required agency for youth participation in health promotion. Yet other research describes how effective leadership for health promotion requires more than just self-efficacy, a more specific type of efficacy known as ‘leadership efficacy.’ Leadership efficacy is defined by Hannah, Avolio, Luthans & Harms (2008) as: “a specific form of efficacy associated with the level of confidence in the knowledge, skills, and abilities with leading others” (p. 1). Hannah et al. argue that leadership efficacy requires both a level of personal agency and the ability to motivate and create agency in the groups they are leading (2008). They also distinguish leadership efficacy from ‘leader efficacy,’ an important, but less comprehensive approach to understanding how leadership develops.
and what makes people successful in positions of leadership (Hannah et al., 2008). Leader efficacy is essentially one’s own self-efficacy for leadership, or the ability to perceive oneself as “more adaptable to meet a diverse array of leadership challenges” (Hannah et al., 2008, p. 7). Leadership efficacy broadens the concept of leader efficacy to integrate both follower efficacy and collective efficacy with leader efficacy. The need for sufficient levels of all three forms of efficacy illustrate how leadership outcomes are influenced across multiple domains - regardless of how efficacious leaders feel, because they are leading others and functioning within a social environment, there are factors outside of their own leader efficacy that influence the outcomes of their leadership. Hannah et al. (2008) argue that without sufficient efficacy from followers (others working with the leader), it is not possible to achieve a sufficient level of collective efficacy (across the group). This lack of collective efficacy will impede performance regardless of the leaders own personal efficacy level (Hannah et al., 2008). Hannah et al.’s (2008) work provides a way of understanding the other factors that influence leadership that may be more difficult for an individual leader to influence.

Applied to the findings of the HBeat Youth Leadership camp, this research provides a framework for understanding some of the concerns participants expressed about transferring the experiences from the HBeat Youth Leadership camp to their schools as future peer health leaders. While participants considered their own skills, they also considered the collective skills of their school groups, and how they would be viewed as a ‘peer.’ While participants were quite optimistic overall about their own abilities, and some specifically indicated that they felt more confident in their leadership skills after attending the camp, there were numerous areas where participants were unsure
of how effective they would be as peer health leaders. These areas included how others would participate, or if they could get others to listen or engage with the material (as described in Chapter Four, “the hard part will be getting everybody to listen”) as well as if the other students would be able to fully understand and internalize the material without the supportive environment provided via the camp environment, specifically replicating the experience of increasing confidence in peers. This represents a powerful insight into both what was learned at camp and the difficulty in re-creating the camp experience at school or later in life, and is consistent with Hannah et al.’s model that specifies the role of followers. Hannah et al.’s model requires that followers also have some form of efficacy for the success of a collective outcome (Hannah et al., 2008).

While the HBeat Youth Leadership camp appeared to provide participants with opportunities to build their own personal self-efficacy, hence contributing to their own agency and ability to act as a peer health leader, the program did not include opportunities for the participants to consider how they would build efficacy and motivation in followers. Given the concerns expressed by participants, such material and concepts would have been appropriate and useful to include, and may have helped participants in their future roles as peer health leaders.

The Youth Agency for Social Change Model – Applying Findings to a Social Action Framework

The HBeat Youth Leadership camp was situated in a social action framework, increasing agency was a central goal for the young people who participated. This goal was based on the importance of agency for effective health promotion.
According to O’Neil et al. (2007), one of the primary goals of health promotion is to increase the control of individuals and communities over the determinants of their health. While traditionally this suggested a need for health promotion to direct and drive to create such control, more recent thinking by Rissel (1994), Wallerstein and Bernstein (1988) and many others, argue that health promotion should instead be focused on facilitating and supporting. Health promotion should be driven by the challenge of finding contextually appropriate and effective ways of facilitating the process of people building this control for themselves. Understanding how an individual or community comes to believe that they can “intentionally make things happen by one’s actions”, or, as explained by Bandura’s Social Cognitive Theory, becomes an agent, (develop agency) is therefore a consistent challenge for good health promotion work (Bandura, 2001, p 2).

The social action framework, and specifically the Youth Agency for Social Change model was applied to the HBeat Youth Leadership camp in order to understand the process of agency development for youth participants. Overall, this study indicated that the Youth Agency for Social Change Model provided a useful mechanism for understanding the complex process of agency development involved with training young people to participate in a health promotion project as peer health leaders. The ability of the model to illuminate the major concepts necessary to build agency was a useful structure for evaluation of the complex process of training young people to be leaders in a health promotion project. The Youth Action for Social Change model provided a comprehensive structure for organizing this evaluation, both practically, in terms of the necessary components to consider in data collection and analysis, as well as philosophically, in terms of understanding how the myriad of related theoretical concepts
framing youth participation in health promotion can be integrated. The ability of the model to provide a concise frame for integration of the major theoretical concepts related to this research: health promotion, the social determinants of health, participation, youth development, experiential education pedagogy, leisure and well-being, group development, empowerment education, agency, and leadership, was particularly helpful in this study.

Results from this study also indicate that the process of agency development is more complex and less ‘linear,’ with more interaction between the various elements of agency. Agency underlies both abilities and beliefs in the power of one’s actions to produce change (Bandura, 1999). According to Bandura, agency also drives adaption to geographical, climatic and social environments- not only by circumventing constraints, or challenges, but also via the ability to “redesign and construct environments” (Bandura, 2001, p. 22). This goal is especially significant for any health promotion work with under-serviced groups, including young people, where specific environmental or political factors may challenge or undermine the development of this control over their health (Ginwright & Cammarota, 2002; Wallerstein & Bernstein, 1988). Helping young people develop the agency required to take on the role of Peer Health Leaders was the goal of the HBeat Youth Leadership camp, and overall, the approach of the social action framework was an effective way to plan, organize and describe the process of agency development in a youth participation in health promotion project.
Study Limitations and Suggestions for Future Research

Youth agency development and the participation of young people in health promotion projects could include various areas of future research. Results from this study suggest that young people can successfully be engaged in a process designed to develop personal agency and develop the skills and tools required to meaningfully participate in health social action projects, making future research in this field useful to furthering the results of this study and addressing study limitations. Using the Youth Action for Social Change model, this study also suggested that agency development is complex and multifaceted, and a full understanding of the process requires an acknowledgment of the dynamic interactions between self-efficacy, knowledge, skills and critical awareness of power, as well as the complexities of the relationships and environments of any social action project or training experience. Future research that specifically looks at potential interactions between the dimensions of agency would offer an expanded understanding of youth agency development.

Future research could continue to use the pragmatic, mixed-methods approach, deemed effective by this evaluation study, but could also consider the strengths of either qualitative or quantitative research. This would address several limitations of this study and potentially answer specific questions not able to be addressed due to this study’s methodologies. While the mixed-method approach provided strong, integrated data in some areas, the use of both qualitative and quantitative data also presented new questions that could not be completely answered by the data available. For example, further in-depth qualitative research that considered the perception of youth participants on how a training experience impacted their perceived social and cognitive competence could
complement the quantitative findings from this study. As well, other qualitative data methods, such as increasing the number of researcher observers could be considered. One limitation of this study was observations were made by only one researcher thus limiting the perspective and depth of research able to be extracted from this qualitative data source.

Follow-up interviews with individual participants could be used to help address the limited level of saturation – namely that the finite research population and scope of this study limited the ability to fully saturate the data. As well, follow-up interviews could provide further scope to how young people felt in future phases of the project, and provide increased understanding of the outcomes of the training process.

As well, increased quantitative measures that were chosen more specifically to measure agency development could be useful. One limitation of this study was that the quantitative tools used were chosen based on the availability of pre-camp data (e.g. repeated use of tools which were used in prior parts of the HBeat study), and therefore such tools may not have been the most effective choices for the purposes of this study. Specifically examining self-efficacy with increased quantitative tools would be an interesting addition to a future mixed-methods understanding of agency development for peer health leadership. This could help increase the strength of findings related to self-efficacy, as this study looked only at participant’s perceived self-efficacy and had limited ability to measure changes in the participant’s self-efficacy using the most effective quantitative tools.

More in-depth research specific to the self-efficacy dimension of agency could also include an expansion of the research questions to consider how pre-camp levels of
self-efficacy impacted youth experiences in a training process designed to increase agency. Further research could also include an examination of how particular social determinants of health, such as socio-economic status, culture or self-identification as part of a marginalized group impacted the experience of efficacy and agency development. Increased acknowledgment of the role of related social determinants of health in the experiences of youth participants would address a limitation of this study, wherein such factors were not considered as part of this evaluation.

Reflexivity must be considered and personal bias must be noted as a limitation of this research. As was discussed in detail in chapter three, issues of reflexivity are critical when conducting research using qualitative methods. While every attempt was made to be reflexive throughout the research process, noting and being aware of personal bias, there is still the potential that the researcher was unable to maintain a reflexive stance at all times, and this could have influenced the results of this research.

Furthermore, increased attention to the negative experiences of youth participants in such projects could be a useful area of future study. This study was limited in findings related to negative experiences, including problems, complaints, concerns, or fears of the participants. Given that the curriculum of the camp was framed by positive psychology, it is difficult to assess if young people were so focused on the positive that they were truly not experiencing anything negative, or rather the negative experiences of participants were not captured in the data collection process. Adjusting the data collection to ensure more attention to this area might be a consideration for future research, as negative experiences could be quite valuable to understanding participant experiences. It must also be noted that this limitation in findings could be a result of the observer effect.
(Hawthorne effect), wherein the fact that the young people were being observed or asked questions influenced their willingness to discuss any negative experiences. As this was occurring in an environment that specifically emphasized positive approaches, the impact of this limitation is notable.

This study determined that the process of participating in the HBeat Youth Leadership camp provided the youth participants with a broader perspective on health. It also increased the participant’s knowledge, skills and feeling of efficacy on controlling their own health. Expanded research in how young people define health, and specifically in how they include typically non-traditional components of health, such as stress, would be useful to the research body considering how to best involve young people as participants in health promotion projects.

The areas of leadership efficacy and collective efficacy require future research. Firstly, the concept of leadership efficacy as considering external influences to leader effectiveness does not appear to have been applied directly to young people in leadership positions. This is relevant, as youth leadership roles are challenged by both the complexities of being asked to lead peers, and the challenges encountered as a result of the traditional, adult-dominated models of leadership found in the spaces where social action projects are typically implemented. A longitudinal approach that followed the group of peers trained through the experience of implementing their projects that included how youth navigated the leadership challenges posed by their social environments would be extremely useful to the field of youth participation in health promotion. A longitudinal study would also allow for further exploration of the conceptualization agency development in youth health promotion work.
Additionally, as this study only considered one specific program – the HBeat Youth Leadership camp – the findings of this study are not generalizable to other youth development or youth participation projects. Repeated studies using the Youth Agency for Social Action model would be useful to consider how the findings from this study related to those found in different situations with different groups of young people. This could include considering if the evaluation recommendations from this study are applicable for future work with young people, from both a research and a practitioner perspective.
References


Becoming Peer Health Leaders


and Social Support as Resources During Early Adolescence. *Developmental Psychology*, 38 (5) 822-839.


BECOMING PEER HEALTH LEADERS


BECOMING PEER HEALTH LEADERS


## Appendices

### Appendix A – HBeat Youth Leadership Camp Schedule

HBeat Youth Leadership Camp- Schedule as of June 22, 2010 - Monday, July 5 to Friday, July 9, 2010, Locations TBD

<table>
<thead>
<tr>
<th>Time</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wake up 7:00am</td>
<td></td>
<td></td>
<td>Yoga 7:00-7:40 *optional</td>
<td>Yoga 7:00-7:40 *optional</td>
<td>**packing!!</td>
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<tr>
<td>7:30 - 8:30am</td>
<td>B R E A K F A S T (plus prep and travel time)</td>
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<tr>
<td>Morning 1 8:45 - 10:30am</td>
<td>(8-9am drop-off &amp; sign-in) <strong>Earp Residence</strong> Welcome to Camp</td>
<td>8:30-9am Intro to Positive Emotion</td>
<td>Niagra Public Health, Youth Group - REACT presentation 8:30-9am</td>
<td>Expert Sessions – 2 hours</td>
<td>CATI High Ropes Course</td>
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<tr>
<td></td>
<td>-9:15am - rules, pre-test</td>
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<tr>
<td></td>
<td>-9:30-10:00 am – move in to rooms, etc.</td>
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<tr>
<td></td>
<td>-10am-11am-Games, Icebreakers, etc.</td>
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<tr>
<td>Morning 2 10:30 - 12:00pm</td>
<td>11-12 <strong>Strengths</strong> brainstorm &amp; Scavenger hunt</td>
<td>9-12 YATI (Youth Advocacy Training Institute, Ontario Lung Association) Health Promotion 101</td>
<td>YATI continued 9-12</td>
<td>Leadership &amp; Transfer– (thinking about what to do next year...)</td>
<td></td>
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<tr>
<td>Afternoon 1 1:00 - 3:00pm</td>
<td><strong>Strengths &amp; Self Awareness Activities:</strong> Survey (on-line) <strong>Fireplace Lounge, Earp Residence</strong></td>
<td>Expert Sessions <del>Guest Speakers</del> -video (Create Media) -heart health (Dan/Nicole) -graphic design (2 counsellors) -drama (DART?)</td>
<td>Expert Sessions Homework time – working with RA</td>
<td>*Coping Activities -Stress -How do you cope? -Strategies</td>
<td>Focus Groups &amp; Photo Pages / Journaling (1 hr rotations) * evaluations</td>
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<td></td>
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<td></td>
<td></td>
<td>Group Presentations Slideshow *Celebration</td>
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<tr>
<td>Afternoon 2 3:00-</td>
<td>Campus tour, group contract,</td>
<td>Leadership &amp; Active Games - <strong>Outdoors</strong></td>
<td>Final presentation Preparation</td>
<td>Pick up 4-5pm</td>
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<tr>
<td>Time</td>
<td>Activities</td>
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<td>-------</td>
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<tr>
<td>5:00pm</td>
<td>group time, sign up for expert sessions</td>
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<td></td>
<td>50 min. sessions (rotate x3) Debrief</td>
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<tr>
<td>5:00-6:00pm</td>
<td>DINNER</td>
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<tr>
<td>6:00-6:30pm</td>
<td>* * J O U R N A L S * *</td>
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<tr>
<td>Evening 6:30-10:00pm</td>
<td>Positive Emotion -Tigger &amp; Eeyore skits -Public awareness group work -Happy Habits</td>
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<td></td>
<td>I've got a feeling, positive emotion introduction</td>
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<tr>
<td></td>
<td>7:30-9:30pm Movie night</td>
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<td></td>
<td>8pm – 9pm Swim!</td>
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<td></td>
<td>Full group drumming session with Living Rhythm –TBC Pond Inlet?</td>
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<tr>
<td></td>
<td>Recreation Time (Gym time, crafts, etc)</td>
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<td></td>
<td>Post-test knowledge</td>
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<tr>
<td></td>
<td><strong>C A M P F I R E</strong>**</td>
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<tr>
<td></td>
<td>+debrief</td>
<td></td>
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<tr>
<td></td>
<td>*collect cameras to develop &amp; journals to copy</td>
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<tr>
<td>10:00-10:30pm</td>
<td>LIGHTS OUT (asleep by 11:00pm)</td>
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</table>
Appendix B – Evaluation Survey

**HBEAT Youth Leadership Training Program – Participant Evaluation**

Thank you for your feedback. Your help is very important to us. There are no right or wrong answers. Your answers will help us understand how you liked the camp.

Age: _______ School: ___________________________ Gender: M F

<table>
<thead>
<tr>
<th>1. Please tell us how you felt about the <strong>activities</strong> you did this week</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The activities at camp were interesting</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>The activities at camp were fun</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>The activities at camp were useful in helping me understand what I will do as a peer health leader at my school</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I learned new information that I never knew before from the activities at camp</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>There was plenty of time for discussion and questions during the camp activities</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I did something new that I had never done before during the activities at camp</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>The camp activities made me think about some things in a new way</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I felt I had the opportunity to contribute during the camp activities and discussions</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>The camp activities taught me things about my own health</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Please tell us how you felt about the <strong>people</strong> you worked with this week</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>My group leader was a good listener</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>My group leader was helpful and answered my questions</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>My group leader created a comfortable environment where I felt I could share</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
my opinions openly with the group  
I got a chance to meet and work with youth from other schools 1  2  3  4  
I got to know someone better during the week 1  2  3  4  

<table>
<thead>
<tr>
<th>3. Please tell us how you felt about Brock University</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>My room was comfortable</td>
<td>1  2  3  4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The food was tasty and good</td>
<td>1  2  3  4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There was enough food at every meal</td>
<td>1  2  3  4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The buildings and spaces worked well for the camp</td>
<td>1  2  3  4</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Please circle the number that best describes you!</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel confident in my ability to:</td>
</tr>
<tr>
<td>Strongly Disagree</td>
</tr>
<tr>
<td>------------------------------------------------------</td>
</tr>
<tr>
<td>Develop health messages</td>
</tr>
<tr>
<td>Create and design health promotion campaigns</td>
</tr>
<tr>
<td>Communicate health messages to other youth</td>
</tr>
<tr>
<td>Successfully reach an audience with health messages</td>
</tr>
<tr>
<td>Apply health promotion strategies in my school</td>
</tr>
<tr>
<td>Be an advocate for health at my school</td>
</tr>
<tr>
<td>Make a presentation to other youth</td>
</tr>
<tr>
<td>Contribute positively to the health of my school</td>
</tr>
<tr>
<td>Be a team player</td>
</tr>
<tr>
<td>Be a leader at my school</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Please tell us how you feel OVERALL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
</tr>
<tr>
<td>------------------------------------------------------</td>
</tr>
<tr>
<td>I had a good time at HBeat Camp</td>
</tr>
<tr>
<td>I feel prepared to be a peer leader next year</td>
</tr>
</tbody>
</table>
6. Please tell us:
What was your overall favourite activity at camp?
________________________________
What was your least favourite activity at camp?
________________________________
What activity was brand-new to you?

What part of the camp do you think was the most helpful in preparing you to be a peer leader?

Anything else you’d like to tell us?
Appendix C: Focus Group Guide

HBEAT Youth Leadership Training Program
July 2010
Focus Group Guide

Opening Reminders: Before you sit down as a group: explain that this final debrief circle will be recorded as a “focus group”. Show the group the video camera / audio recorder and explain that the information is being recorded for the research on the camp, to help us understand what they learned during the week. Explain that it isn’t really much different from what you’ve been doing in evening circles, just that it is about the whole week, so they can think about everything that has happened all week. Go over the consent form that they signed at the beginning of camp and remind them that they do not need to participate. Tell them that people who do not want to be recorded can go to (space & location) and work on their journals or read. Remind the youth about your group contract (everything said here, stay’s here) and about being respectful of each other (just like they have been doing all week). Review any other elements of group discussion you think might be relevant. Ask if there are any questions, answer the questions, and then sit down / travel to the space you have and start the recorder.

Tips: Remember that this focus group is “semi-structured” which means that you don’t need to follow all the questions in order. Focus groups are just discussions, so facilitate this just like you have been doing all week with your evening meetings. Be sure everyone has a chance to talk, use probing / follow up questions, and encourage the students to think and learn from the discussion. As we discussed in training, be very careful that you do not “lead” students to answers.

Time: You have 1 hour TOTAL, so please use the time wisely. Be sure that you cover question 6. If you finish early, that’s OK, use the rest of the time to prepare for the presentations. Please don’t go over 1 hour. If your group is having trouble staying focused, it’s OK to take a break. Just be respectful of the other groups around you if you are playing games etc.

Facilitation Guide

1. Ask for overall reactions from the training / camp week. (OVERALL)
   -Did they have a good time? Describe favorite memories? -Use this time to remember all the different things they got to do during the week.

2. Ask for reaction to the activities and what they learned during the week. (SKILLS AND KNOWLEDGE)
   What activities did students like / dislike? What activities were harder/easier? What activities surprised them the most? What was new? What taught them the most?
TIP: Facilitate description of “higher level reflection” (as per ongoing debriefing) – try to get answers that describe “why” and “how”

TIP: Ensure there is discussion on different types of activities (journals, reflection, training sessions, etc) not just on the “big” activities like the ropes course. Have them think back throughout the whole week, go back to the activities they talked about in question 1.

3. Expand on “new / surprising” activities and ask if they were surprised to learn how important the social environment is to health? (CRITICAL AWARENESS)
-Will they think about health differently now?
-How is this information relevant to their lives?
-How will this information help them to be peer health leaders?

4. Ask for reactions about the group and other youth that they worked with, focus on group dynamics and learning from the others in their groups. (SUPPORTIVE ENVIRONMENTS & RELATIONSHIPS)
-Do you think your group got along? Did you have any difficult experiences as a group? Did you meet new people? Did you enjoy working with others in the expert groups? Did you learn anything from other students? Do you think you’ll stay in touch with people from other schools?

5. Ask for reactions about the adults that were around (not about yourself!). (SUPPORTIVE ENVIRONMENTS & RELATIONSHIPS)
-What did adults do that helped them learn? What did adults do that helped them feel comfortable?

6. Ask how they feel about being a peer leader in the fall? (EFFICACY / TRANSFER)
a. Do you have any ideas for how you will share things you learned this week at school? What good ideas do you have?
b. Do you feel confident that you will be able to do a good job as a peer leader? What do you think will be the hardest? What are you most excited about? What do you think the others at your school will like the best?

7. Ask them to describe their experience in one, two or three words. Be sure to write these words down as they say them. We will be using them in the final circle.

8. If you have extra time you can do another creative debriefing activity that you did not get a chance to do during the week. Use the debriefing sheet from your staff training manual or the resource books.

Thanks for your amazing work!
Appendix D: HBeat Youth Leadership Camp Journal Questions

What do you think about your top 5 strengths?
My strengths: List your top 5 strengths + free time activities
What do you think the connection is between your strengths and your activity choices?
Are you a Tigger or an Eeyore?
What are 3 happy habits you currently practice?
Pie of life: How I feel during the day. In your typical weekday during the school year, identify your daily activities in the pie below.
Which part of the day generates the most positive emotion?
What part of the day do you use your strengths?
When can you use your time more wisely?
Create a definition with your group for each of the different coping strategies.
Emotional focused coping, Problem focused coping, Relaxation coping.
In the space below, think of a stressful situation and come up with some coping strategies that could help you.
Which part of the day generates the most positive emotion?
What part of the day do you use your strengths?
When can you use your time more wisely?

The best activity today was? Because?
What are you most excited about?
What are the three things you’d life to try, learn, or do this week?
Use your name as an alpha poem.
What did you learn about yourself today that you did not know before?
The best activity today was? Because?
List 5 things that you are grateful for in your life.
What is something new that you learned about yourself today?
Write down the names of the people in your group.
How do you get along with others in the group so far?

The best activity today was? Because?
How do you think what you have learned today will influence your future choices (free time, positive outlook, etc.)?
What have you learned so far that will help you as a peer leader next year?

The best activity today was? Because?
What is your coping style? Draw a picture of write about your coping style.
What have you learned today that will increase your ability to cope and deal with stressors?
Did you enjoy working with your group this week at Hbeat camp? Why or why not?
What is one thing that you learned from someone in your group this week?
Did you think about anything differently or change your mind about anything because of something that you heard from someone in your group?
What was the biggest change in thinking that happened for you this week?
To me, leadership means.
One person I know who is a good leader is.
I think they are a good leader because.
Top leadership skills. Rate these skills in order of importance to you. Explain your choice for number one.
One leadership skill that I’m good at is.
One leadership skill that I’d like to improve is.
The hardest thing about being a peer leader next year will be.
What are some of the things you’d like to do in the fall as a peer health leader at your school?
Photo pages-Taking on the challenge: Include a picture of an activity that taught you something or that you found new, or challenging. This activity taught me.
### Appendix E: Observation Guide

<table>
<thead>
<tr>
<th>Date / Time:</th>
<th>Number of observations:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group:</td>
<td>Names of all present</td>
</tr>
<tr>
<td>Group Leader:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Element / Activity Name:</th>
<th>Basic goals of activity/element, links to any topics or HBeat Youth Leadership Camp overall goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setting</td>
<td>Take 5-10 minutes (as appropriate) to describe and draw the physical environment</td>
</tr>
<tr>
<td>Describe the content of the activity</td>
<td>Document the time when the youth are participating in an activity, assess how engaged they are in the activity. Disruptive behaviour? Participation level? Fun? Excitement?</td>
</tr>
<tr>
<td>Document the interactions</td>
<td>Interactions between people, including youth to youth and youth to adult</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Human &amp; Social Environment</th>
<th>The ways in which the youth behave towards each other, focus on group dynamics, conflict resolution, supportive environments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency development – self-efficacy</td>
<td>Document any indicators of efficacy development, individual or as a group, look for voice, social learning, empathy</td>
</tr>
<tr>
<td>Agency development - skills</td>
<td>What skill is the main focus in this activity? What other skills are being developed? Formal and informal learning?</td>
</tr>
<tr>
<td>Agency development - knowledge</td>
<td>What knowledge content is being covered during this activity? What other knowledge is emerging?</td>
</tr>
<tr>
<td>Agency development – critical awareness</td>
<td>Does the activity promote critical thinking? Are the staff facilitating critical thinking? Are the youth showing any indications of challenging their thoughts? Capture any questions being asked by the youth?</td>
</tr>
<tr>
<td>Language</td>
<td>Capture any unique or precise language usage, language is an important way to record how the youth are understanding their experience, ‘buzzwords’, connection to group through language</td>
</tr>
<tr>
<td>Non Verbal Communication</td>
<td>Non verbal cues about what is happening, dress, express opinions, physical spacing of people.</td>
</tr>
<tr>
<td>Notable Non-occurrences</td>
<td>Determine what is not happening that should be happening according to the activity goals or the HBeat goals</td>
</tr>
<tr>
<td>Role of adults</td>
<td>How are the adults acting towards the youth, using any characteristics of supportive adults? How does this build or hinder supportive relationships, how does it affect youth experience</td>
</tr>
<tr>
<td>Other – Observations relevant to this activity / element</td>
<td></td>
</tr>
</tbody>
</table>


Appendix F: HBeat Consent Form

REGISTRATION, INFORMATION AND WAIVERS
For the HBEAT Youth Leadership Camp

IT IS CRUCIAL THAT YOU READ IN DETAIL ALL THIS INFORMATION AND SIGN AT EVERY PLACE REQUESTING A SIGNATURE. IF ANY FORMS ARE UNSIGNED, THE STUDENT WILL NOT BE ALLOWED TO ATTEND THE CAMP OR PARTICIPATE IN ANY PART THEREOF.

All information that will be collected on these various forms will be kept confidential and are for registration purposes only.

INFORMATION ABOUT THE HBeat Youth Leadership Camp

HBeat Youth Leadership Camp will be held at Brock University from Monday, July 5 until Friday, July 9, 2010. Youth participants will arrive between 8am and 9am on Monday, July 5 and depart between 4pm and 5pm on Friday, July 9, 2010. The youth will stay at Earp residence on the university campus from their arrival at Brock University until their departure from Brock University. Any detours or additional travel before or after the camp dates or travel not associated with the camp will be the full responsibility of the young person, his/her parents/guardians and his/her chaperone. During their stay at Brock University, the youth will be participating in camp sessions and a number of recreational activities. This package includes waivers directly associated with those activities. Please read through it carefully.

As the HBeat Youth Leadership Camp is part of a large research study, methods will be put in place to evaluate the effectiveness and success of the camp. Students will be observed while participating in group activities, and materials created during these activities, such as flip charts and posters, may be kept for evaluation. These observations and evaluations will be used to determine the overall success of the camp, the activities and the students’ level of enjoyment. Observation of this nature is a common research practice, and no student will be singled out, but observed as part of the group.

Participation:
Participation in this camp is voluntary. If you wish, you may decline to answer any questions or participate in any component of the camp. Further, you may decide to withdraw from this study at any time and may do so without penalty. This camp will be structured in a ‘challenge by choice’ format meaning you can participate to a level that you feel comfortable with, and choose your level of challenge. You may opt out of any
discussions, activities, etc. If you choose to opt out, you will remain with your group, and
observe, or take part in a different activity. If you choose to opt out of multiple
activities, a counselor will discuss whether staying at the camp or going home would be
more advantageous for you. When opting out, staying in your room is not an option. If
you believe that no longer participating in the camp is the best choice for you,
arrangements will be made to go home, without penalty.

Signed this ____________ day of ____________________________, 20________
Signature of Participant ____________________________________________
Signature of Parent/Guardian_________________________________________________________________

Focus Groups:
Participation in focus groups involves a discussion format in which participants are able
to voice their thoughts and opinions in a guided discussion. Participation is voluntary. If
you wish, you may decline to answer any questions or participate in any component of
the camp. Further, you may decide to withdraw from the focus group at any time and
may do so without penalty. Focus groups will be recorded and taped for research
purposes – no identifiers will be used. Participants who do not want to be recorded can
work on other activities instead. Youth will be reminded to be respectful of each other
in this group setting.

Signed this ____________ day of ____________________________, 20________
Signature of Participant ____________________________________________
Signature of Parent/Guardian_________________________________________________________________

Journals:
Students will be keeping journals throughout the week as part of the program activities.
Student journals will be collected and photocopied and then returned to the students.
All ethical guidelines will be followed – no identifiers will be used, and only the research
team will have access to the journals. Students will be informed at the beginning of the
week that their journals will be collected at the end if they allow it, but students will
have the option to opt-out if they choose. If students want to keep certain parts of the
journal private, they can fold over and staple the pages so they cannot be copied, or
they can remove certain pages from the journal before giving it to the researcher, or
they can choose to opt-out of the entire process. Students can decide on their level of
participation at the time of collection.

Signed this ____________ day of ____________________________, 20________
Signature of Participant ____________________________________________
Signature of Parent/Guardian_________________________________________________________________
Risk Management:
Through its risk management procedures, Brock University seeks to minimize the level of risk while still offering quality events for students. These procedures are established to create an awareness of the planning/safety issues and protect both the students who attend an event and the organizers of the event.

The youth agrees that (s)he will not consume or provide access to any alcohol, drugs or other illegal substance during the program. If this pledge is broken, the youth will immediately be sent home and the parent/guardian will be responsible for picking up the youth from Brock University.

If you choose to participate in the high ropes course, please ensure that you have completed the attached Youth University consent form and waiver for participation.

Signed this __________ day of __________________________, 20________
Signature of Participant ________________________________
Signature of Parent/Guardian ______________________________

Accommodations and Meals:
While at Brock University, the youth will stay in Earp Residence. Males will be housed on one floor and females on another floor. Each floor can only be accessed by a swipe card; girl’s cards will access only their one floor and boy’s cards will access only their one floor. A stairwell adjoins the two floors but monitors will be on both floors and Brock University will provide Security at the stairwell during the night to keep anyone out who should not be there. The rooms will be single rooms, with two rooms sharing one bathroom.

Breakfast, lunch and dinner will be served buffet-style in the residence dining halls. Meals will be available to fit all dietary requirements provided in advance as listed below on this form. The nutritional care staff will prepare the amount of food based on dietary requirements listed, so please be accurate with any and all details. The dining hall will be open each morning, afternoon and evening for a set period of time, during which time no other activities will be scheduled.

It is expected that all participants will be respectful of themselves and others. As such:
⇒ All rooms and facilities used must be returned to the status found prior to the event. The youth will also be responsible not to disturb the other residences in the surrounding area.
⇒ Participants will be respectful of others in their dress, behaviour and language.
⇒ Candles, incense and lamps requiring combustible fuel are not permitted in any residence
⇒ Participants agree to arrive at the dining hall on time to eat all meals provided there
The following will not be tolerated in any form: Discrimination, Physical aggression, Pranks and Raids, Pets, Firearms will not be permitted. If a participant is engaging in such, the child will be sent home with their parent/guardian. Ignorance and anger will not be accepted as an excuse, reason, or rationale for unacceptable behaviour.

I agree to abide by these regulations and all others that are presented to me regarding residence life.

Signed this __________ day of _____________________________, 20________
Signature of Participant ____________________________________________
Signature of Parent/Guardian __________________________________________

Photography:
Each student will be given a disposable camera for the week at camp. At the end of the week, the pictures will be developed and returned to the students in print form as a keepsake of the week. Digital copies of the pictures will be kept for research purposes and for presentations to stakeholders. Students will have the option to opt-out of allowing to have their picture taken, allowing their pictures to be used for research purposes, and/or having their pictures used in public as part of presentations.

Signed this __________ day of _____________________________, 20________
Signature of Participant ____________________________________________
Signature of Parent/Guardian __________________________________________

Video:
Video recordings will be taken at the camp. A professional video company will be hired to work with students to produce a video that will be used for the fall interventions. This company, as well as camp staff, will be video recording and taking pictures during the week. Data from the video may be used for research purposes and presentations to stakeholders. Decisions to opt-out of this part of the research will be dealt with on an individual basis. Due to the nature of the activities and video recording, students who choose to opt-out of all photo/video components completely may not be able to fully participate in all activities, or may not be able to attend the camp.

Signed this __________ day of _____________________________, 20________
Signature of Participant ____________________________________________
Signature of Parent/Guardian __________________________________________

Guardianship Waiver:
I (name of parent/guardian) ____________________________ agree that (name of guardian for length of conference) __Dr. Terrance Wade and his delegates__ will act as guardian to my son/daughter (please circle one) while (s)he is participating in activities in association with “HBeat Youth Leadership Camp” at Brock University from July 5th to July 9th, 2010. The camp will include participation in camp activities and may include activities such as the High Ropes Course (separate consent form attached, for more information see www.brocku.ca/communityservices/cati/course.html), swimming, and a camp-fire.

I understand that __Dr. Terrance Wade and his delegates__ will be responsible for my son/daughter’s day-to-day care and supervision and will also act on our behalf in case of sickness or medical emergency or in such cases when permission of a supervising individual who is over the age of eighteen is required for my son/daughter to take part in an activity.

Signed this ___________ day of _______________________, 20__________
Signature of Participant ____________________________________________
Signature of Parent/Guardian __________________________________________

**Acting Guardian Waiver:**
Please ensure that this form is filled out for each student who will be attending the camp.

I, __Dr. Terrance Wade__ agree to assume responsibility and act as guardian for ____________________________ while (s)he is participating in activities in association with “HBeat Youth Leadership Camp” at Brock University from July 5th to July 9th, 2010.

The camp will include participation in camp activities and may include activities such as the High Ropes Course (separate consent form attached, for more information see www.brocku.ca/communityservices/cati/course.html), swimming, and a camp-fire.

I understand that I will be responsible for ____________________________’s day-to-day care and supervision and will also act on behalf of his/her parents/guardians in case of sickness or medical emergency.

Signed this ___________ day of _______________________, 20__________
Signature of Acting Guardian __________________________________________
Signature of Witness __________________________________________________
HBeat Youth Leadership Camp
PARTICIPANT REGISTRATION FORM

Full Name of Student_______________________________________________________

Date of Birth (mm/dd/yyyy) _______________________

NCDSB Elementary School attended________________________________________

Home Address______________________________________________________________

Home Phone #____________________________

Email Address______________________________________________________________

Emergency Contact Name & Relationship_______________________________________
Emergency Contact Phone # _________________________________________________
Emergency Alternate phone & email___________________________________________

Name you would like on your badge___________________________________________

Special Dietary Needs_______________________________________________________

Special Physical Needs_______________________________________________________

Accessibility/Mobility Needs__________________________________________________

List of all Allergies___________________________________________________________

Any Health Concerns that we should be aware of________________________________

List of all Medications________________________________________________________

If youth takes medication or has a health care regime, please inform us of any role the chaperone should take (i.e. holding and administering medication) ___________________________

Is there anyone you would like to share a bathroom with if sharing is necessary? ______

__________________________________
Appendix G: Ethics Approval

DATE:  6/4/2010
FROM: Michelle McGinn, Chair Research Ethics Board (REB)
TO: Terrance Wade, CHSC

FILE:  09-271 WADE
       Masters Thesis/Project

TITLE: Social Determinants of Child Hypertension

The Brock University Research Ethics Board has reviewed the above research proposal.

DECISION: Accepted as clarified

This project has received ethics clearance for the period of June 4, 2010 to June 30, 2012 subject to full REB ratification at the Research Ethics Board's next scheduled meeting. The clearance period may be extended upon request. The study may now proceed.

Please note that the Research Ethics Board (REB) requires that you adhere to the protocol as last reviewed and cleared by the REB. During the course of research no deviations from, or changes to, the protocol, recruitment, or consent form may be initiated without prior written clearance from the REB. The Board must provide clearance for any modifications before they can be implemented. If you wish to modify your research project, please refer to http://www.brocku.ca/research/policies-and-forms/forms to complete the appropriate form Revision or Modification to an Ongoing Application.

Adverse or unexpected events must be reported to the REB as soon as possible with an indication of how these events affect, in the view of the Principal Investigator, the safety of the participants and the continuation of the protocol.

If research participants are in the care of a health facility, at a school, or other institution or community organization, it is the responsibility of the Principal Investigator to ensure that the ethical guidelines and clearance of those facilities or institutions are obtained and filed with the REB prior to the initiation of any research protocols.

The Tri-Council Policy Statement requires that ongoing research be monitored. A Final Report is required for all projects upon completion of the project. Researchers with projects lasting more than one year are required to submit a Continuing Review Report annually. The Office of Research Services will contact you when this form Continuing Review/Final Report is required.

Please quote your REB file number on all future correspondence.
## Appendix H: Data collected during Phase I & Phase II of the HBeat Project.

<table>
<thead>
<tr>
<th>Data Collected</th>
<th>'07</th>
<th>'08</th>
<th>'09</th>
<th>Spring</th>
<th>Jul '10</th>
<th>Aug '10</th>
<th>Sept '10</th>
<th>Oct '10</th>
<th>Nov '10</th>
<th>Dec '10</th>
<th>Jan '11</th>
<th>Feb '11</th>
<th>Mar '11</th>
<th>Apr '11</th>
<th>May '11</th>
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<td>BP</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
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</tr>
<tr>
<td>What's Most Like Me?</td>
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<td>x</td>
<td>x</td>
<td>x</td>
<td></td>
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<td>PHQ</td>
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Appendix I: Suggestions for Practice from the HBeat Youth Leadership Camp

Evaluation of Youth Participation in Health Promotion

Suggestions for practice derived from this study, linked directly to discussion presented in Chapter Five, are presented below as a comprehensive list. Including recommendations in an easily accessible format is recommended to support practical application of evaluation data (Patton, 1982).

1. Enhance both social support and self-beliefs of participants in tandem, ideally using a combination of individual and group activities that are interactive and offer experiential learning opportunities. Do this with the aim to facilitate the positive peer relationships that will create a supportive and challenging environment for learning and self-discovery.

2. Support and value the adults involved in youth social action projects. Ensure that they are authentically involved throughout the project, they are trained appropriately, and they recognize their key role in a successful project. Recognize that the relationships formed with adults will play a significant role (equal to or greater than curriculum content) in the success of any goals relating to youth empowerment or agency development and set training and program priorities accordingly.

3. Recognize the value of a positive, strengths-based approach to building knowledge and skills in youth participants, and incorporate specific activities that make this approach explicit to participants.
4. Consider including a variety of unique leisure-based activities to promote positive self-beliefs via participation in new activities.

5. Keep it fun! Remember that learning that is considered fun by youth participants can contribute to the desire and confidence to learn new material.

6. Challenge young people through providing opportunities for them to broaden their perspectives and consider the broader constructs that motivate any particular area of social action. Find age-appropriate ways to introduce key material. Do not underestimate the potential of young people to understand complex concepts.

7. Adopt a strengths-based approach to youth participation programs, and include specific activities that allow participants the opportunity to learn more about themselves, and reflect on this learning. Recognize the value of challenge activities (in various formats) for developing self-efficacy.

8. Provide strong age-appropriate role models that allow participants to experience non-dominate forms of leadership.

9. Realize that being a leader will always include working with followers. Provide opportunities for the development of complex leadership efficacy by helping participants build skills specific to motivating followers or participants in future social action projects.