Final Research Report

An evaluation of the trial implementation of the Sexual Health and Relationships Education (share) program 2003-2005.

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Introduction

In South Australia, ‘sex education’ has been part of the formal curriculum of State schools since the 1970s. Historically, however, education authorities, both here and in other Australian states, have been reluctant to develop comprehensive curriculum materials and related support processes to help teachers teach it better (Gibson, 2006). In response to this lack of development, the Sexual Health information networking and information SA organisation (SHine SA) successfully pursued funding from the South Australian Department of Health to develop and implement a comprehensive sexual health and relationships program for students in Years 8, 9 and 10. It researched and wrote the Sexual Health and Relationships Education (share) program, beginning in 2000 and culminating with the production of a draft program in early 2003. The draft program was subsequently trialled in 15 secondary school in South Australia during 2003-5.

At the end of the trial period and after considerable controversy, SHine SA commissioned a retrospective evaluation of the trial implementation of the share project. This report presents a comprehensive description of the background to the development of the program, and a thorough qualitative analysis of the program and its implementation from the multiple perspectives of those closest to it.

Background

Rationale for the share program

The share program was developed for very simple but significant reasons. By 2000, two large national surveys of Australian secondary students had demonstrated ‘that young people are sexual beings, and that their sexuality ... inevitably find[s] expression, not only in how they act, but also in how they think and feel’ (Dyson, Mitchell, Dalton & Hillier, 2003, p. 3). A third survey in 2002 confirmed that by Year 10, the majority of secondary students were ‘sexually active in some way’.

Eighty percent participated in deep kissing, 67% had genital contact, 45.5% gave or received oral sex and 25% had experienced vaginal intercourse. By year 12, just over half had experienced vaginal intercourse (Smith, Agius et al., 2003). These studies also identified gaps in students’ knowledge of sexually transmitted diseases, low rates of consistent use of condoms, and relatively high rates of unwanted sex (28% of young women and 23% of young men). When combined with data on high teenage pregnancy, birth and abortion rates in Australia (compared with western European countries), a convincing case was mounted by the program’s developers for a more

¹ Dr Sue Howard also contributed to the evaluation before going on extended sick leave in early January 2006. Sue died on 22nd May, 2006, one day before this Report was completed.
There is strong international evidence from western European and Scandinavian countries that relationships and sexual health education throughout the schooling experience, commencing before young people become sexually active, has contributed to a very significant reduction in sexual health morbidity in their young people. (SHine SA, 2000, p. 2)

SHine SA argued that the ‘continuing heavy sexual health burden’ carried by young people was not inevitable but, importantly, ‘amenable to early intervention and education’. It cited extensive UK research that identified the factors that ‘significantly reduced rates of teenage pregnancy, teenage abortion, sexually transmitted infections and sexual assault’. One of the most powerful interventions was

High quality relationships and sexual health education throughout schooling. Programs which include the development of assertiveness, problem solving, decision making and negotiation skills as well as factual sexual health information and knowledge about services available to young people. Programs that are provided by trusted and respected teachers who can offer a value free non-judgmental environment. (SHine SA, 2000, p. 5)

In drawing on an established body of research evidence to justify its approach, SHine SA made a commitment to evidence-based practice that was to sustain it through difficult and challenging times when the share program was publicly criticised in 2003-04. As one of the leaders of the organisation said later,

Our approach was based in evidence, not in ideology. Not on a personal sort of belief about what the Bible says. It wasn’t about that. It was about evidence. In health these days, as in most disciplines, you do things because there’s good evidence for you to do it that way. And you don’t do it in a way where there’s no evidence that says you go in that direction. So we were really confident that we’d done our research well and that we knew what had worked in western Europe and Scandinavia. (SHine SA Leader A)

Community consultation
In late 2000, SHine SA undertook an extensive consultation process to provide opportunities for students, teachers and parents to have their say on relationships and sexual health education, and ways that SHine SA could support school communities to improve the sexual health and well being of young South Australians’ (SHine SA, 2000, p. 2). Teachers \( n = 171 \), students \( n = 415 \) and parents \( n = 184 \) from 8 country and 17 metropolitan sites took part in the consultation by attending discussion forums or by completing questionnaires. Key findings of the consultation were:
1. 85% of parents identified that all students should have relationships and sexual health education throughout their schooling years.
2. 71% of parents identified teachers who were specially trained as the most appropriate for delivering relationships and sexual health education programs.
3. 80% of parents stated that they would value SHine SA Parent Forums that would assist them to talk to their children and young people about relationships and sexual health.
4. 86% of parents identified that parents should have a role in determining what is taught in relationships and sexual health education.
5. Over 80% of parents, teachers and students identified the following as priority areas for relationships and sexual health education programs – a) Personal safety; b) Relationships and communication; c) Prevention of unplanned pregnancy, sexually transmitted infections, rape and sexual assault and other forms of violence including homophobic violence.
6. 86% of parents identified that health and physical education, including relationships and sexual health education was as important as other subjects in the school curriculum.
7. Teachers believed that undergraduate teacher education programs must include relationships and sexual health education knowledge and skills development.
8. Parents wanted teachers to have specialist training in relationships and sexual health education.
9. Students overwhelmingly identified the need for teachers to establish safe, supportive and friendly education environments for relationships and sexual health education.
10. Students wanted opportunities for single sex groups for some topics.

(SHine SA, 2000, p. 7)

The findings of the consultation clearly supported ‘a strengthened effort in relationships and sexual health education in schools; the support and professional development of teachers to deliver these programs and support for parents to talk to their children and young people about relationships and sexual health’ (SHine SA, 2000, p. 2). The consultation provided SHine SA with a public imprimatur to proceed with the development of the share curriculum, resources, and teacher support strategies.

Development of the share program
Consistent with its policy of using research to inform its practices, SHine SA also commissioned a review of relevant literature to address two fundamental questions underpinning the development of its approach to sexual health education:

1. What are the critical factors for success that have been identified for effective sexual health and
relationships education with young people in schools?

2. Is there any evidence that a whole schools approach to relationships and sexual health has a positive impact on issues such as teenage pregnancy, STIs, homophobic harassment and sexual coercion/assault?  

(Dyson et al, 2003, p. 2)

The review identified 5 key features of quality sexual health education programs in schools, based on the work of Debbie Ollis (1996) that were subsequently used to inform the development of the share project. These features were:

- Taking a whole school approach and developing partnerships;
- Acknowledging that young people are sexual beings;
- Acknowledging and catering for the diversity of all students;
- Providing an appropriate and comprehensive curriculum context;
- Acknowledging the professional development and training needs of the school community (Ollis, 1996).

In practical terms, the share project consists of 4 linked components. The most tangible components are a curriculum framework and curriculum resource document for teachers which are consistent with the South Australian Curriculum Standards and Accountability Framework (SACSA). The curriculum framework provides the scope and sequence of 15 lessons on sexual health per year for Years 8, 9, and 10. The curriculum resource document is entitled Teach it like it is and is intended to be used by teachers in conjunction with other sexual health education resources like the Talking Sexual Health program developed by the Australian Research Centre in Sex, Health & Society at La Trobe University.

The third component of the project is a structural requirement for schools to establish a Student Health and Well-being team to plan and manage the implementation of the program on a school-wide basis. The team is responsible for co-ordinating teacher professional development, curriculum planning, resources management, and communicating with and educating parents and the wider community about the project. The team is made up of school staff, students, parents and community health specialists.

The final component of the share project is a linkage or pathway to local sexual health information and service providers who can support students in areas beyond the responsibility and expertise of school-based staff. The linking-up of sexual health services is an internationally recognised key component of effective sexual health promotion initiatives (Swann, Bowe, McCormick, & Kosmin, 2003).

Key features of the materials
While the share project consists of more than just curriculum materials, past research suggests that the quality and usability of curriculum guides and related teaching and learning resources affects teachers’ actual implementation of curricula in classrooms (Johnson, 1996). As Fullan suggests, quality curriculum materials are a necessary but not sufficient condition for successful curriculum implementation (Fullan, 1991).
The main *share* resource document - *Teach it like it is* - has a number of features that, from a curriculum design and teaching and learning perspective, demonstrate its quality (Johnson, 1989). *Teach it like it is*:

- has a research base: both the content and 10 ‘guiding principles’ of *Teach it like it is* are based on extensive international research into sexual health education.
- is conceptually well organised and integrated within the overall school curriculum: there are explicit links to the SACSA framework.
- acknowledges diversity: ‘Education programs which affirm [student] diversity and take into account its implication on young people’s social worlds, have greater potential to reach a wider audience of students.’ (Australian Research Centre in Sex, Health and Society, 2001, p. 20).
- relies on teachers’ professional judgement: teachers are positioned as learning facilitators who are best placed to make decisions about the appropriateness of particular activities and resources, rather than ‘technicians’ who simply follow a syllabus set down by others.
- uses a variety of learning activities: there is an emphasis on engaging students in interactive and sociable learning tasks.
- is practical: it contains concrete teaching suggestions and practical step-by-step procedures to apply them.
- is well structured: each lesson has a familiar structure with the same elements (short topic statement, planning notes – suggested time; age group, preparation checklist, equipment; statement of purpose; teaching procedure; and a ‘take home message’).
- includes some essential teaching resources: rather than requiring teachers to prepare time consuming charts and information sheets, these are included in the body of the lesson plans or as appendices if they are large.

**Implementation of the project**

It was decided early in the development of the *share* project to trial the program in a limited number of secondary schools before modifying it and making it available to all secondary schools in South Australia. The reasons for trialling the project were:

- to ‘road test’ the scope, sequence and suitability of activities within the Yr 8, 9, 10 curriculum statement and the teacher resource *Teach it like it is*.
- to evaluate the feasibility of using a Student Health and Well-being team to mobilise school-wide support for the project.
- to formally research the impact of the project on students’ learning about sexual health and relationships.
- to gather feedback on the project from key stakeholders including teachers, students, parents, community groups, the Department of Education and Children’s Services (DECS) and Department of Health. This feedback was intended to inform subsequent revisions of the project.

A recruitment process was followed in late 2002 to select 15 secondary schools to trial the project. Selected schools satisfied the following criteria:

- they were able to teach the curriculum to all students in Yr 8, 9, and 10 over a 3 year period.
- they agreed to release teachers and counsellors for 15 hours of training.
- they had Governing Council approval for the trial that reflected general community support.
they were disadvantaged schools (i.e. had a high index of disadvantage).
• they were committed to researching the impact of the project.

Teachers who were responsible for teaching the program participated in 15 hours of formal training in Terms 1 and 2, 2003, which was planned and facilitated by the SHine SA’s Coordinator of Teacher Education and 3 share Regional Coordinators. In most cases, this training preceded parent information sessions in the schools.

Initially, parental consent for students to participate in the program was obtained by providing written information about share and asking parents to formally notify the school if they did not want their child to participate in the program. This process of providing ‘passive consent’ was widely accepted and used with other sex education programs in South Australian schools, even at Primary school level. However, due to extraordinary criticism of the program in early 2003, the Minister for Education intervened to change the process from ‘passive consent’ to ‘active consent’. Her reason for changing was to ensure that all parents signed consent forms indicating that they agreed that their child could participate in the program. Over 5,000 students received active parental consent to participate in the project in 2003, representing 95.5% of all students in the target population in the 15 schools (SHine SA, 2003, p. 6). A number of issues relating to parental consent are discussed in greater depth below, in the section headed Dilemmas and tensions associated with the ‘Moral Panic’ over share.

All 15 schools participated in the trial for the full 3 year trial period, despite initial opposition to the project by some elements within the community (see below), teacher movement, and changes in school leadership. All schools received ongoing support from SHine SA. A selection of 3 schools also participated in rigorous evaluation activities conducted by the Australian Research Centre in Sex, Health and Society at La Trobe University.

The evaluation

Purposes
At the end of the trial period in late 2005, SHine SA commissioned a retrospective qualitative study of the implementation of the share project to capture key participants’ insights into their experiences developing, supporting and trialling its significant, but controversial, sexual health and relationships program. In particular, SHine SA sought to identify the following:
• What features of the new program promoted the teaching of sexual health and relationships concepts and skills?
• What school, cluster, and Project level professional development initiatives and support services promoted the teaching of the program?
• What were the key dilemmas and tensions involved in implementing the new sexual health and relationships education program?

I was approached to conduct the evaluation because of my experience and expertise in evaluating socially sensitive school based programs like Protective Behaviours and the new personal safety curriculum developed and trialled by the Department of Education and Children’s Services (see Johnson, 1994; 1996; 1997; 2000; 2005)

Approach
To investigate the research questions posed in this study, I adopted a retrospective qualitative approach that assumed that participants’ multiple perspectives of ‘reality’ can be
constructed through dialogue and language and an analysis of the various ‘texts’ produced around a defined area of interest (Patton, 2002), in this case, the implementation of the share program.

My main sources of data were 22 in-depth interviews with 36 key people involved with the development and implementation of the share project. I also accessed various documents relevant to the project.

Specifically, Sue Howard and I conducted:

- two focus group interviews with key teachers ($n=14$) from the trial schools
- individual interviews with classroom teachers ($n=10$) and school leaders ($n=5$) in 4 of the trial schools
- individual interviews ($n=6$) with SHine SA personnel with responsibility for the share project - the CEO, Team Leader, Coordinator of Teacher Education, and 3 Regional Coordinators
- an individual interview with a senior official of DECS ($n=1$) who was responsible for share matters during 2003

I also accessed:

- share project curriculum documents and support materials
- SHine SA internal reports, memos and correspondence relating to the development and implementation of the share trial 2003-2005
- publicly available newspaper articles and advertisements, political pamphlets, press releases, and transcripts of radio interviews and ‘talkback’ relating to the share trial 2003-2005

I analysed these sets of data to identify what factors promoted the teaching of the share program and what factors inhibited its use in trial schools. I also drew on these sources to analyse the key issues, dilemmas and tensions that arose during the trial and how they were addressed by SHine SA personnel, teachers, school leaders and, to a lesser extent, DECS officials. The insights gained from this analysis form the basis of this report.

Factors which promoted the use of share

Quality of materials

Not surprisingly, teachers who used the draft share curriculum and support materials were overwhelmingly positive in their evaluations of their quality and utility. After all, their development was very well researched and their design consistent with well established quality criteria for curriculum materials.

Teachers commented favourably on the accessibility of the materials, their sequential structure, relevance, currency, and their ‘completeness’. The following comments are representative of the views of nearly all teachers and key teachers interviewed:

The way the course is actually presented is very, very, very, teacher friendly. You know, we’re all very busy and have minimal amounts of time to do X Y & Z, but the fact that the books were there, we knew what lessons to teach and what resources were needed. It was just so accessible. Having the aims and objectives of each lesson very clearly set out, so that you knew at the beginning of every single lesson what they were, was great. The little ‘take home messages’ I thought were superb because even if they didn’t take the message home,
there was this really succinct little summary at the end of every lesson in terms of what the outcomes for that student were supposed to be. So, I just think in terms of materials, they have been superbly presented.
(Teacher 1, School A)

It's a very well constructed curriculum as far as I'm concerned. It is very sequential - I like the sequence it goes through. I know that, because we're a project school, we have to stick quite closely to the sequence and it runs in good order and it's all just there. Do you know what I mean? It's just all there.
(Teacher 2, School A)

I think they're great. A lot of the things are very well written and are quite relevant, because kids look for relevancy otherwise they go 'well what's the use of that? I'm not going to find anything out about that', and so I think it's quite well put together.
(Teacher 4, School A)

We knew we were giving the kids the most up to date, latest most accurate information and it was all there. We weren't sort of hunting around trying to get it ourselves, it was all right there for us. The resources were good - they'd been well thought out and the lessons were good. The information kit kept coming at us and was, you know, was just all there, so it was much easier. Preparation time was cut right down. Yeah, it was just a matter of getting hold of the stuff and photocopying what you needed and collect together a few materials and you had it, so it reduced the work load tremendously.
(Teacher 3, School A)

The year 9 program, I think, is sensational. It targets their age group really well, and Tell it like it is, that's fantastic, they love that, it raises lots of questions, lots of discussion. So I think in year 9 they've got it right.
(Teacher 1, School B)

Having a course that's all laid out. The completeness of the kit impressed me.
(Key Teacher in focus group)

While most teachers acknowledged the positive features of the materials, several explained their need to modify and adapt activities and resources to suit the needs of particular classes or individual students. The willingness of teachers to exercise professional judgements about the curriculum is explained – matter-of-factly – by the Health and Physical Education Coordinator at school B:

I kind of give them the professional space to make changes and vary things that might not suit their kids. We talked about some bits and pieces that could be improved, and a lot depends on the makeup of the class as well. For example, you might have a class of twenty five, twenty might be boys and only five
might be girls so you’d do things differently. But another class that’s coming in after recess might be the other way around. Some things are going to work better with one class than the other class. My teachers found that after doing one semester, they sort of knew what went really well, whether it was the clientele or the way they delivered it. Come the second semester you have a look, you evaluate what went well, what didn’t go well and make some changes. Perhaps ask why, and yeah, discuss that with other people, and you make some changes, exactly right.

(Coordinator, School B)

Some teachers explicitly commented on the pedagogical approach suggested in Teach it like it is. They valued the practical, activity-based approach that was used to promote students’ engagement with key concepts, issues, or values in each lesson.

One of the good things about the project is that at every avenue, I think the work and the activities allow them to be involved so they’re finding out through scenarios and assignments and that type of thing. It takes account of where the kids might be coming from and provides them with activities like ‘so let’s have a look at this, this is how this works’, you know?

(Teacher 2, School A)

Finally, some teachers mentioned the value of further ‘packaging’ materials and resources at the local level by assembling class sets of activity cards, worksheets, brochures, novels, photos, diagrams and videos that are passed on to teachers as they prepare to teach particular topics. In several schools, this ‘packaging’ was undertaken and managed by school librarians.

In summary, the thorough planning and development of the share curriculum and support materials was rewarded with unusually positive evaluations of the materials by classroom teachers. The curriculum and support materials were thoroughly used by teachers because they constituted a ‘complete’ package that was easy to access and implement in time efficient ways. This high level of use is unusual in curriculum areas that are controversial, contested, sensitive, or complex (Johnson, 1996). The strategic mix of ‘structured program, great resources, fifteen hours of training and development, and back-up from the regional coordinator’ (Key Teacher in focus group) seems to have been instrumental in achieving widespread implementation of the program in trial schools. As another teacher said, ‘the curriculum itself was really fantastic, we were given up to date information, we were given resources, we were given training. What more could anyone want?’ (Teacher 2, School B).

**School support factors**

In answer to this rhetorical question, school change researchers would no doubt point to the importance of local, school-based initiatives that support teachers’ attempts to teach new curricula. For example, Hargreaves (1994) has written extensively about the importance of providing structures and opportunities that break down isolationism and promote connectedness between teachers and other school personnel when change initiatives are introduced to schools. He suggests that local collaboration:
• provides moral support—‘Collaboration strengthens resolve, permits vulnerabilities to be shared and aired, and carries people through those failures and frustrations that accompany change’
• increases efficiency—‘Collaboration eliminates duplication and removes redundancy’
• improves effectiveness—‘Collaboration improves the quality of student learning by improving the quality of teacher’s teaching’
• reduces overload—‘Collaboration permits sharing of the burdens and pressures that come from intensified work demands and accelerated change’
• establishes boundaries—‘Collaboration reduces uncertainty and limits excesses of guilt ... by setting commonly agreed boundaries around what can be reasonably achieved’
• promotes confidence—Collaboration strengthens teachers’ confidence ‘to adopt externally introduced innovations, the wisdom to delay them and the moral fortitude to resist them’
• promotes teacher reflection—‘Collaboration in dialogue and action provides sources of feedback and comparison that prompt teachers to reflect on their own practice’
• promotes teacher learning—‘Collaboration increases teachers’ opportunities to learn from each other’
• leads to continuous improvement—‘Collaboration encourages teachers to see change not as a task to be completed, but as an unending process of continuous improvement’


The main vehicle used to promote school-level collaboration in the share project was the Student Health and Well-being team. Drawing on research that suggests that ‘productive partnerships are an important ingredient in the whole school approach and in groups working together on sensitive and controversial issues’ (Beckett, Bode & Crewe, 1995), the share project team actively promoted local partnerships. As one teacher reported, the Well-being team often assumed wider responsibilities

Q: So if you had an issue or you had a problem, you knew that you could get support straight away from...?
A: From SHine, yeah, and our Student Health and Wellbeing Team that we set up. I think we thought that it was doing something very good.

Q: And that involves a lot of people doesn’t it?
A: Good feature, yeah, yeah we pulled together the teachers who had been teaching the program, our school counsellors, local health workers, the school chaplain, we had a deputy and the assistant principal.

Q: And what was their role?
A: Their role was to discuss any issues to do with student health. But it wasn’t just sexual health - that was part of it - it became an umbrella group that became part of the school structure as well....

(Teacher, School D)

Beyond the formal team, teachers also worked together in a variety of ways. These activities included:
• sharing preparation and planning tasks
• sharing resources and teaching materials
• debriefing after experiencing difficulties teaching particular classes (e.g. year 8 classes with high number of boys)
• team teaching
• attending parent information sessions together
• travelling to professional development together (especially in the country)
• seeking advice from senior staff about how to handle harassment (2 inexperienced female teachers at a country secondary school)

Ironically, one teacher highlighted some of the difficulties caused by NOT supporting one of the staff responsible for the share project. She commented that,

Yeah, I think part of the problem here was that it was left with Jeff [pseudonym], just on his own. He is the H & PE coordinator, who has a fairly broad range of responsibilities anyway. He didn't really have a team-like structure to rely on to spread the responsibility or a supportive type structure within the school. Like, the counsellors didn’t have a lot of input into it, or a lot of involvement, or if they did it was quite peripheral.
(Teacher, School B)

She went on to say that fairly rigidly segmented curriculum and leadership structures mitigated against the formation of more collaborative teams. In this school, the share project ‘belonged’ to ‘Health and Phys Ed’ under the leadership of a fairly isolated coordinator, rather than under the auspices of a dedicated representative team.

Supportive local leadership was also a key contributor to implementation success. Several teachers mentioned the importance of feeling ‘supported’:

Yep, leadership were very supportive always. Since the programme first started [the principal] has been excellent. They’ve all been right behind it and even at the meetings we’ve always had that support. It’s been a whole school thing. Tim [pseudonym], our coordinator, who you speak to next, has been excellent as well. So, it all works out if leadership is supportive.
(Teacher, School C)

Another teacher at the same school singled out the organisational work of the Health and Physical Education Coordinator.

Tim did an amazing job; he’s a highly, highly organised human being. He meticulously organised everything, whether it was the training and development for staff or the evenings. The offer to help was always there, and the communication was always there as well, to his absolute credit. He’s done a superb job and [the SHine Regional Coordinator] actually made that comment. She came down to present a certificate or whatever it was, and she just made the comment that Tim was probably
one of the more organised people in the state, so he’d done a great job.
(Teacher, School C)

School leaders also acted as the public defenders of the program when it was attacked by opponents. They ‘shielded’ their teachers from parents and community groups, they liaised with DECS senior officials over appropriate responses to criticism, and they dealt with local media enquiries about the program. One of the principals of a country secondary school spoke at length about his role as an advocate of share. He examined the program in detail, spoke to his teachers about any concerns they had, and met with church leaders on several occasions to counter their criticisms of parts of the program. His strategy was to become even more familiar with it, you know. I got out all the resources and went through them with, pretty well, a fine toothed comb so that I was ready to defend it if I needed to. I knew that I was defending it from a sound knowledge base. It wasn’t just a response, it was a considered response. I talked to the teachers more as well, so, yeah, I had a few anecdotal things that I could talk about if I needed to.
(Principal, School A)

School leaders also mobilised active support from their district superiors.

Our principal was very, very supportive and very encouraging and supported us totally all the way. He was also pretty good at getting support from our district director as well. We had lengthy discussions about our year sevens being involved in the project and our district director was involved in that conversation. He goes ‘look, from my perspective it’s a selling point for the school, that’s one of the positive things about the school’. So, with our leadership support, it’s just like, ‘no worries, we’ll make it happen now, easy’. We knew that if there were any issues, we could go to the district office because he supported it, so, that made it really quite easy for us, which was great.
(Key Teacher in focus group)

The final and possibly most influential factor at the school level was the extremely positive response of most students to the program.

I think the kids find it really interesting. They like participating. The activities are so involving that the kids are happy to take part and take on, you know, say the values walk, they love that one, and the little scenarios. The kids go ‘okay, what would I do if I was in this situation’ and it provides them with a way to think about it.
(Teacher, School C)

Female students, in particular, were enthusiastic participants in the program and provided their teachers with many positive responses. As one teacher notes,

This year has been an absolute breeze, it’s just been an absolute delight, ninety nine point nine percent, because of the fact we
made a decision to have single sex classes at year ten. I have the joy of teaching a group of girls sex education. It was just fantastic because they just lap it up, they love talking about relationships, they love talking about their responsibilities, so it was just brilliant.

(Teacher, School B)

The positive responses of students served to confirm teachers’ belief in the need for and value of the program and reinforced the essential rationale justifying the share project. They also confirm what other studies of teachers’ emotional responses to teaching have found – that teachers are willing to invest time and effort in endeavours that benefit students and provide an emotional ‘pay-off’ for their work. As Hargreaves writes,

Teachers largely enjoy the emotional labour of working with students because this meets their core classroom purposes in circumstances that they largely control. Here, when they mask and manage emotions around students, teachers say they do so for the students’ benefit.

(Hargreaves, 2000, p. 815)

In summary, school level support provided by school leaders and formally constituted Student Health and Well-being teams contributed to the successful implementation of the share project. Critical to this success was the focus on attending to the emotional and relational needs of teachers charged with teaching a new and challenging program in difficult circumstances. The combination of local level teaming, facilitative and ‘protective’ leadership, and positive teaching experiences contributed to the achievement of successful outcomes in the share project.

External support factors
An important part of the share project was a 15 hour training component provided by the SHine SA Coordinator of Teacher Education and three Regional Coordinators.

When the share project developed they appointed three Regional Coordinators who had the day-to-day ongoing management of the project. But as the Coordinator of Teacher Education I delivered all the professional development for all the teachers, because we wanted a consistency in all of the schools.

The other three Regional Coordinators came on board right at the start of the project but I’d already been here for two and a half years. I’d already written the teacher resource and developed a program of delivery of what we thought was ‘best practice’ in relationships and sexual health education for teachers. So I worked in partnership with each of the Regional Coordinators in tandem. I and one of the others delivered all the teacher training. So I was sort of a consistent person in that, and that’s been the main part of my work.

(SHine SA Leader C)

All teachers who had responsibility for teaching the program were expected to undertake this training. The most common arrangement was to provide teachers with several hours release time on a Friday afternoon to begin the training that then continued on the
following Saturday. At one school, the scheduling of training at the end of the school term had symbolic value as it demonstrated teachers’ commitment to the share project.

In the first year, we didn’t do it first term we did it second term, so training was actually held on the last Friday of first term. We normally knock off at 2 PM but we got permission to knock off earlier at twelve. Teachers actually stayed behind until about five or six on the last day of term and then did the Saturday as well, so there was a bit of commitment there I suppose from staff. They could have got in their cars and driven back to Adelaide, but they stayed on the last day of school, which is unheard of, to do the training.

(Key Teacher in focus group)

The training examined the scope and sequence of the program as outlined in the share curriculum framework and curriculum resource documents for teachers. Of equal importance was an emphasis on pedagogy, with trainers modelling ways to teach particular lessons. This highly intensive and practical approach was appreciated by teachers who enjoyed the ‘hands-on’ strategy. Teachers were also exposed to the evidence base on which the share project was founded. They also had fun together!

The nature of the training was good and positive. Just having fun being involved in the training as well. And with Kaye [pseudonym – Regional Coordinator] in particular for us, she was great with huge amounts of energy. And doing it with other people as well was good.

(Key Teacher in focus group)

The relationships developed between SHine SA personnel and school-based teachers were sustained throughout the life of the trial. The long term involvement of the Regional Coordinators was really appreciated by teachers as this exchange between Key Teachers demonstrates:

T: The regional coordinators have been fabulous.
Q: So what role did they play? What did they do? Did they give advice or what?
T: Fielded questions from parents.
T: Got them counselled.
T: They were also at the end of the phone if we needed them too.
Q: Terrific.
F: They came to lessons as well, if you asked them to.
T: And they made sure we had all the pamphlets and books and everything was there for you.
Q: That’s comforting isn’t it?
T: Yeah.
T: It’s good.
T: And they also kept you on track, doing it.
T: And there was some funding as well too.
T: Yes-
T: For things that you needed to do.
T: Photocopying!!
It is important to note that all four SHine SA personnel who worked closely with teachers and schools had been experienced and successful classroom teachers before they worked on the share project. Their pedagogic knowledge and skill was widely recognised by teachers; they had considerable credibility.

Relationships were reciprocal and respectful as one Regional Coordinator suggests:

When I was lucky enough to become the share coordinator I had already taught in the [region] for probably five and a half years so I already had a network of teachers. It was good to actually train teachers who I knew and work with staff that I had a lot of respect for, and they had for me. It was a real high for me, yeah, actually going out and working with excellent staff and learning off them too.
(Regional Coordinator C)

Regular meetings were held with Key Teachers from the 15 trialling schools to ensure that they were adequately supported to lead the implementation of the share program locally.

In summary, external support to implement the program was amply provided by SHine SA in the form of pre-implementation training and the on-going and long term provision of external advisors who were experts in the field of sexual health and relationships education. When combined with quality materials and effective in-school support, the resultant ‘package’ powerfully assisted teachers to operationalise the share program.

Factors which inhibited the teaching of share
While the implementation of the share project was generally very successful, there were a number of difficulties and problems in some schools that limited the teaching of the program. These included:

• *Reluctant teachers:* Not unexpectedly, some teachers who were assigned to teach the program did not feel comfortable teaching it. They were often non-Health and PE teachers who were given a ‘H-PE line’ to supplement their teaching responsibilities in other areas like English or Studies of Society and Environment.

• *‘Immature’ boys:* Some groups of Year 8 boys found discussing sexual relationships difficult. Others harassed female teachers and their female classmates. Teachers blamed these behaviours on boys’ immaturity.

The only issue that I had ever had with the course was related to gender and the fact that boys actually find talking seriously about sex quite difficult. I’m thinking in particular of a group of year eight boys. I taught them for English and S&E but as soon as we got onto sex education they became quite different creatures and the girls tended to step back. In this particular group they were very quiet girls anyway, so they didn’t actually tell the boys to shut up and listen. It was just the boys’ basic lack of maturity.
(Teacher 1, School B)

Single sex classes were often formed to allow Year 8 and 9 girls the space and time to discuss these issues in depth.
• **Cultural differences**: One teacher described the difficulties faced by newly arrived refugees from North African and Middle Eastern countries who found the public discussion of sexual matters very confronting.

• **Timetabling problems**: Some schools found it difficult to ensure that all students in Year 8 and 9 had opportunities to complete the **share** program as some specialist subjects (e.g. music) were timetabled at the same time as Health and Physical Education. As a consequence, some students ‘missed’ key parts of the program because they were doing other things.

• **Curriculum arrangements**: In many schools, Health and Physical Education is **not** a compulsory subject at Year 10. For many well researched reasons, girls’ participation in Health and Physical Education declines rapidly at this time. As a consequence, some Year 10 girls did not participate in the final series of Year 10 lessons.

• **Public opposition to the program**: The controversy surrounding the trial of the **share** program, and changes to parental consent processes (see below), resulted in 2-5% of students not undertaking the program.

On balance, these difficulties were not major obstacles that impeded teachers’ use of the **share** program. More pressing and fundamental issues and dilemmas emerged during the implementation of the program that had their genesis in contexts beyond the organisational frameworks of school. The wider social and political processes that overtook the trial will now be analysed.

**Dilemmas and tensions associated with the ‘Moral Panic’ over share**
An evaluation of the first year of the **share** project made the strong point that it was not possible to discuss the implementation of the project without analysing the nature and extent of ‘sustained community and political opposition’ to the project that occurred during 2003 (SHine SA, 2003, p. 8). At the conclusion of the three year trial of the project, it is even more important to identify and analyse the key components of what turned out to be a significant ‘moral panic’ (Cohen, 1973) about the **share** project within the South Australian community.

**Defining a ‘moral panic’**
Most analyses of contemporary ‘moral panics’ cite Cohen’s opening paragraph of *Folk Devils and Moral Panics*, the first and most influential depiction of collective alarm over perceived social problems.

Societies appear to be subject, every now and then, to periods of moral panic. A condition, episode, person or group of persons emerges to become defined as a threat to societal values and interests; its nature is presented in a stylised and stereotypical fashion by the mass media; the moral barricades are manned by editors, bishops, politicians and other right-thinking people; socially accredited experts pronounce their diagnoses and solutions; ways of coping are evolved or (more often) resorted to; the condition then disappears, submerges or deteriorates and becomes more visible. Sometimes the object of the panic is quite novel and at other times it is something
which has been in existence long enough, but suddenly appears in the limelight. Sometimes the panic passes over and is forgotten, except in folklore and collective memory; at other times it has more serious and long-lasting repercussions and might produce such changes as those in legal and social policy or even in the way society conceives itself.

(Cohen, 1973, p. 9)

The emergence of ‘the problem’

The share project was perceived to be a threat to societal values because its opponents claimed that it promoted homosexuality, was too explicit about human sexuality, and did not promote sexual abstinence or the institution of marriage. A proforma letter directed to the Premier of South Australia neatly summarises what was seen as the ‘problem’ with share:

Dear Premier

I find the new sex education program totally disgraceful. It is inappropriate for adults, let alone for our children. There is an over-emphasis on same-sex relationships and sexually explicit material. It also clearly undermines the values of the majority of parents.

Sincerely

(Australian Family Association, 2003)

The teachers’ ‘manual’ – Teach it like it is – in particular, was selectively quoted to show how the project threatened ‘traditional’ sexual values and regulatory processes.

Today Tonight showed manual pages which promote the homosexual lifestyle, including role-playing homosexual relationships. The manual does not mention marriage, or any reason why abstinence until marriage is a good idea.

(Festival of Light, 2003)

... the teachers’ resource manual, not only avoids discussing thoroughly at-risk sexual behaviour and life styles, but openly endorses, if not encourages, a number of these. And ... the resource deliberately avoids discussing marriage, fidelity, parenthood and abstinence.


By drawing attention to the features of the project that challenged the hegemonic position of ‘family values’ in society, opponents of the project explicitly targeted share as socially dangerous and as a source of moral threat. The ‘problem’ was named.

The form of ‘the problem’ – exaggeration and distortion

Critcher (2003) maintains that in the early (‘inventory’) stages of a moral panic, ‘exaggeration and distortion, of the seriousness of events, the numbers involved, the extent of violence and damage’ (p. 12) is common. This serves to alarm increased numbers of people and mobilise their support for actions directed against the moral threat.
In the case of the *share* project, alarmist claims were commonly made in the media in an organised and coordinated campaign to alert the parents of students undertaking the program of its moral dangers. Exaggeration was common. For example,

*share* is a program that centres on homosexuality, group masturbation and licking of body parts, use of sexual aids and mind/thought manipulation by telling students to ‘imagine’ themselves in these situations. Forget family values, forget cultural diversity, forget religious beliefs, forget moral and wholesome nurturing of young minds. In fact, forget parent’s rights to maintain any control over what their children are exposed to when not in their care.


Theft of children? Some Government Educators want to steal your children’s values and thinking away from you. How? The new ‘SHARE’ Sex Education course deliberately seeks to normalise and popularise homosexuality and bisexuality. Don’t let the Education Department steal your children’s innocence or your family’s values.

(Advertisement, *Port Lincoln Times*, 18th September, 2003)

Even politicians from ‘mainstream’ parties helped to construct elements of *share* as problematic and dangerous by repeating the highly selective and over-stated claims of opponents of the project.

Aspects of the curriculum which have generated the most concerns are so-called ‘intimacy cards’ which teachers are told to display on the floor for all students to see which canvass issues such as licking parts of the body, sucking breasts, and masturbating each other.

Concerns were also raised about a series of ‘safe practices’ cards which students are asked to organise into safe and unsafe practices including ‘using a sex toy’ and ‘using a devise for sexual arousal’.

(Chapman, 2003a, p. 2)

Draper, the Federal Liberal Member for Makin, repeated these ‘concerns’ in an anti-*share* flyer and added that,

Under the heading ‘Teaching it like it is’ [sic], the State Government has produced a blueprint for sex education in our schools that I believe devotes a disproportionate amount of time to homosexual activity and encourages promiscuity... I have a son, who is 14, and he would be immediately removed from any school with education classes like this.

(Draper, 2003)

Some of the teachers and school leaders who supported the program recognised the problem of over-generalising. As one Governing Council member said,
It was controversial because a lot of church groups were kicking up about it, and they were saying this and that. It took me back to the debate about the drugs strategy when they had a booklet of about, say a hundred pages and they picked out one paragraph and they went on about that, ‘this is bad’, you know. From this one paragraph, and I think this is what happened to this too.

(Chair, Governing Council, School A)

By extrapolating from a narrow range of activities, over-stating their significance, exploiting their ‘shock value’, and repeating their shared ‘concerns’ about them, opponents of *share* were able to increase community anxiety about the threat the program might cause, to levels ‘above and beyond that which a realistic appraisal could sustain’ (Goode and Ben-Yehuda, 1994, p. 36). From a moral panic perspective, the ‘problem’ posed by *share* was deliberately exaggerated and over-stated.

The ‘moral entrepreneurs’ who opposed *share*

Critcher (2003) calls the groups or organisations who ‘take it upon themselves to pronounce upon the nature of a problem and its best remedies’ (p. 17), the ‘moral entrepreneurs’ of moral panics. Cohen (1973) originally used a different metaphor when he identified those who manned the ‘moral barricades’ in moral panics – editors, politicians, religious leaders, and other ‘right thinking people’.

In the case of the *share* project, the identity of those who opposed it is a matter of public record as these groups and individuals quite openly published their objections to the project. In fact, most made no secret of their membership of a socially conservative, pro-family, fundamentalist Christian coalition that opposed the erosion of ‘traditional values’.

The key opponents were:

- Right to Life
- Australian Family Association
- Festival of Light
- Family First Party
- Assemblies of God Churches at Paradise and Modbury-Heights
- Advocates for Survivors of Child Sexual Abuse
- Hills Parent and Friends Group
- Liberal Opposition in State Parliament

One of the leaders of SHine SA maintains that the opposition to the program was part of a broader and longer standing campaign against its work by pro-life and pro-family groups.

I think they were extremely organised. And it wasn’t just a small minority that was organised, it was the small but very active group of people attached to organisations that historically have been very against SHine SA, even when it was the Family Planning Association. So it goes back to the late sixties when the organisation was first set up. The opposition came from the Right to Life group, and the Australian Family Association who, you know, have beliefs that are so widely different to ours.

(SHine SA Leader A)
She also makes the point that the unstable political climate in South Australia in early 2003 gave the opponents of the project more prominence than they would have had if the 2003 election result had been decisive. The minority Rann Labor Government was vulnerable to de-stabilisation and was reliant on the support of socially conservative independents to form government. She comments that,

The political situation in South Australia was relevant. We had a government that was newly in power, but didn’t have the balance of power in its own right. As a result of that political situation, the Opposition and also the minority voices, particularly Family First, had the opportunity to get stuck into us and to use sexual health as a political football, rather than it being the really deadly serious issue of young people’s health, wellbeing and education.

(SHine SA Leader A)

In summary, a unique combination of circumstances in South Australia in early 2003 provided opponents of the *s hare* project with opportunities to fuel anxieties about the program in the community. In response to the release of the program, key social and political groups mobilised an opposition campaign of unusual ferocity and rancour. What follows is an analysis of how they mounted and sustained that campaign.

**Opposition strategies and tactics**

There is considerable evidence to suggest that the opposition groups were well organised and used very similar strategies and tactics in different locations.

At the local school or community level, multiple ‘attacks’ were mounted against the program. This was done through letters to the editor of suburban or regional newspapers, paid advertisements in those papers, email campaigns, the distribution of pamphlets, and significantly, by conducting public meetings of ‘concerned parents’ in local areas. The strategies had a familiar ‘ring’ to them. As one teacher recounts,

they seemed to have a plan of attack that had been outlined by someone, you know. They sort of chipped number one off, then number two and then number three and it was this standard argument. When we sort of brought our stories back to SHine, they seemed to say the same thing. ... Kaye [pseudonym] at SHine, she said ‘Oh they did that at these other schools’, - it was the same - so it seemed to be quite generic.

(Teacher, School B)

One pamphlet produced by the Australian Family Association contained specific advice about how to initiate individual and group actions, including writing letters to MPs, local and state papers, forming delegations to visit schools, and calling talkback radio programs. Activists were encouraged to inform local ‘group coordinators’ of their plans (Australian Family Association, 2003).

Community meetings were held in most areas in which *s hare* trial schools were located. Posters, brochures and newspaper advertisements were used to announce the meetings and invite community members to attend. Most followed a similar form. However, SHine SA staff were instructed, on police advice, not to attend public meetings for safety reasons. This advice proved to be sound as one SHine SA staffer who attended a community
workers’ briefing session can attend. As she tried to position the **sbare** project as a positive and much needed initiative, she was unexpectedly ‘ambushed’ by opponents of the program. She recalls that

> It was so strategic, coordinated, and malicious, the whole works. I remember thinking ‘what’s going to happen now?’ ... There they were, in all their glory ... and there I was, for two hours being interrogated, this little, pretty naïve person there in good faith. I said, ‘I’ve come to present the program. I’m not going to debate it’. That was sort of my line, but boy, with all those politically savvy people there knowing what questions to fire at me ... you know, for two hours! I went out in the car park after and balled my eyes out.

(***sbare*** Regional Coordinator A)

Local community meetings were also challenging for school staff. One teacher describes how these were used by opponents:

> I can remember that there was a lot of controversy, mainly through religious groups, Family First probably, holding meetings in [a SA regional city]. There’d be a lot of people who’d arrive – anywhere between fifty and a hundred – a big turn-out considering you’d only get four or five parents to a parent information night.

> It was quite interesting. No one from our school would go. I don’t think anyone from SHine went, and then speakers would be out the front. They’d have a couple of spare chairs out the front as well, and on one of them would be a big placard or cut-out of the high school teacher involved who didn’t come, another placard or cut-out would be of the SHine representative who was invited but who didn’t come. And so that sort of message was a little bit negative for us.

(Key Teacher in focus group)

Similar accounts were provided by other teachers in country areas.

The series of public meetings culminated in a mass Rally on the steps of Parliament House in late 2003 to ‘Say “NO!!” to SHine SA Sex Education’ and to ‘Stand up for family values and the rights of parents and children!!!’ (Hills Parents and Friends Group, 2003). Interestingly, a Pre Rally Prayer Meeting was also held ‘to proclaim “…in the darkness (moral blindness) is clearing away and the True Light (the Revelation of God in Christ) is already shining” (1 John 2:8)’ (Lifestyle Solutions Resource Network, 2003).

While these local activities were occurring, higher profile initiatives at the state level were being pursued by the Liberal Opposition, and members of the loose coalition against **sbare**. The Shadow Minister for Education and Children’s Services, Vickie Chapman, distributed a series of press releases in early April 2003 that were critical of the program. She ‘called for a commitment from the government not to proceed with the introduction of its controversial sex education program until public meetings with parents have been held’ (Chapman, 2003b). The press release explained that, ‘Ms Chapman’s comments follow an outcry from many parents and others in the community about the explicit nature of
aspects of the program which parents were not fully informed about by the Government.’ Her other concerns were that:

- parents had not been properly informed about the program
- Teach it like it is had not been publicly distributed
- share could put young people at risk

(Chapman, 2003a; 2003b)

The Shadow Minister reiterated her concerns in a series of radio interviews during this time, the most telling being on 891 Adelaide ABC with Matthew Abraham and David Bevan on the morning of 4th April. During that interview, which also involved two SHine SA leaders, the Minister for Education, and two Independent Members of Parliament, Chapman repeated her criticism of the Government for not informing parents about the program. In the same interview, a besieged Minister for Education refused to endorse share as a ‘good’ sexual health and relationships program on seven occasions, preferring to highlight newly introduced ‘opt out’ procedures for gaining parental consent (891 ABC Adelaide transcript, 4/4/03).

Chapman continued her campaign against share during 2003, making two major speeches in the SA House of Assembly on 16th September, and again on 4th December 2003. On this occasion, she moved the following motion:

That the House urges the government to immediately withdraw the trial Sexual Health and Relationship Education Program developed by SHINE from all 15 participating schools pending professional assessment and endorsement.

There are more than 6,000 signatories to a petition to the Parliament opposing the government’s introduction of the trial program currently under way in 15 of our public schools. This matter has attracted controversy and concern. Disquiet and distress have been expressed amongst parents, grandparents, teachers, principals, education department staff, SHINE representatives, health professionals, and members of the church and the broader community.

(Chapman, 2003d, p. 1107)

Against this backdrop of political activity, ‘behind the scenes’ lobbying took place mostly through ‘form’ letters sent to DECS and the Minister for Education and Children’s Services. Literally hundreds of letters were delivered to these offices. As a senior DECS official comments,

We dealt systematically with letters of concern and complaint that came in from the community. Every letter. ... the vast majority of those letters were ‘form’ letters but we really tried not to have a ‘form’ response. One [DECS] officer wrote hundreds of letters, and nearly every letter was slightly different as people would send the ‘form’ letter in and then they would write something on it as well. We always tried to conscientiously address every concern.

A lot of the ‘form’ letters were tragically misinformed about the program. We really saw it as an opportunity to inform
people about what was actually happening, so we always responded in a respectful way.
(DECS senior official)

DECS’ approach was measured, careful and discriminating. It was aware that there was ‘a loose coalition of people with similar interests’ which was orchestrating a campaign of opposition but that not all of the ‘concerned groups’ were extremists or fundamentalists.

I thought that it was an important distinction, to work out who your friends are in this kind situation and not unnecessarily alienate people over small, relatively small points, when we’re in broad agreement with a whole range of other points. ... The Lutheran church as an organisation and the Catholic church as an organisation provided us with some feedback about the course and they were broadly supportive of it; in fact they were quite interested in using the materials themselves.
(DECS senior official)

The final tactic used by some opposition groups and individuals involved the personal intimidation of local teachers, SHine SA personnel, DECS senior officials, and in one case an Independent MP. These fear inducing methods were mentioned by several interviewees.

So the campaign wasn’t about people just going in the media. It was also about them trying to do something to scare us and so, very early on, there were the incidents of windows broken, eggs thrown at the windows here. I was followed home and then I had three young people with a gun outside my place at home. There was the abuse of clinic staff by women from a church, you know, down south. I mean it was awful. And people were abused in shopping centres and stuff like that.
(SHine SA Leader A)

I played local football and stuff and I’d sort of be pulled up at the bar by parents who’d had a couple of grogs, you know ‘What’s going on, what do I hear about this, you pushing homosexuality on my kids?’ or you know, ‘I don’t want them to be a poof’ and all that sort of stuff and it was all twisted. When you logically got back to it you could see where it was coming from, but even my partner was confronted down the street and so was I. I was walking down the front street with my two kids and someone yelled out ‘You poofter’ or something like that at me.

... I ended up taking three weeks of stress leave over it at a later time. It just got to me that I couldn’t walk down the street, I couldn’t go and have a beer at the football club. My partner is originally from [a nearby town] and there were people confronting her, you know, ‘What’s this I’ve heard?’ ‘What’s that I’ve heard?’
(Key Teacher, School B)
Perhaps the most vitriolic personal attack was made in a letter to the leaders of SHine SA. Among other things, the leaders were accused of being ‘enemies of God’. The letter contained the threat that, ‘You’ll be crushed and destroyed by God’s almighty power, you abhorrent Satanists, you evil doers’. The letter was addressed to SHINE SATAN’S DEN.

These extreme measures represent the worst manifestations of a litany of oppositional strategies and tactics designed to mobilise political and community opinion against the share project and to weaken the resolve of those who were promoting share at the policy and organisational level, and at the local school level in community secondary schools.

One of the reasons for analysing, in some detail, these aspects of the opposition campaign is to point to the sources of quite difficult and serious ‘tensions and dilemmas’ experienced by share teachers, school leaders, SHine SA staff, and DECS officials. How they responded to, coped with, and/or resolved these extraordinary demands is discussed in the remainder of this report.

Initial Responses
Surprisingly – in hind sight – the key actors in the share project had not anticipated the nature and extent of the opposition that emerged to their project. The SHine SA leaders, for example, placed great faith in the capacity of parents, teachers, and members of the wider community to ‘look at the evidence’ – both local and international – in support of comprehensive sexual health and relationships education. They admitted taking some time to understand the dynamics of an opposition campaign that seemed to defy the evidence-based strength of their position. As one leader recalls,

> It took us about three months really to start to realise what was going on. When we actually launched the program in March we had at that stage no reason and no concrete evidence to believe that there would be the level of opposition that we subsequently experienced.

In 2000 and 2001 we’d done quite a lot of work with parents and 86% of parents in two surveys indicated they actually wanted trained teachers to be teaching sexual health and relationships education and they gave us a list of areas that they thought were really important.

We started to understand quite early on that the opposition wasn’t grounded in fact, but that it was actually grounded in religious ideology and that it was [linked] to the anti-sex education movement in America that had been going on for about a decade before.

(SHine Leader A)

They weren’t alone in being surprised by the opposition – a key DECS official admitted that his organisation wasn’t prepared for what was to follow the release of the project. He describes trying to establish clear protocols with SHine SA about ‘responding to the media, about maintaining a flow of communication’ while ‘on the run’ and under ‘extreme pressure’. He candidly reflects that,

> We built all those structures on the run – the data base of participants, communication protocols and so on. ... I think
that if we ever ran another sex ed. implementation, that we would just assume that it was going to come under attack. 
(DECS senior official)

The Minister for Education and Children’s Services also responded quickly to her political opponents’ criticism of the program. She changed the parental consent process from ‘passive’ to ‘active’ and required DECS officials to monitor the number of students given permission to undertake the program. She said that,

It is a pilot program being trialled in 14 schools. I want to make clear one fundamental point and that is that parents should and do have the say in what is taught to their children about sexual health and relationships. It’s not a topic like maths or English where teachers come and just teach the students. For it to work it needs parental involvement and it needs teachers and parents working together about what is taught to children.

I’ve made it clear to the Chief Executive that schools are to be reminded that they are to make explicit to parents the fact that those parents can withdraw their children from these lessons at any time that they are uncomfortable with the program. 
(White, 891 ABC Adelaide transcript, 4/4/03)

School personnel bitterly complained about the Minister’s reversal of consent processes and the subsequent workload involved with providing DECS with weekly participation statistics. Common comments were that

we spent a lot of time on the phone chasing them, chasing, chasing, chasing, and that’s just an aggravation a teacher does not need.
(Key Teacher in focus group)

Consent forms, ahh!! They are very difficult to get back. We found that it was possible but we had to keep on pushing it. Eventually they came back - we just had to keep reminding the students. They put these forms in the bottom of their bags and forget them. Yeah, so some of the kids are very bad at bringing stuff back like that. But we got 95% back for the course, and that was the standard right through the three years - it didn’t change very much.
(Key Teacher in focus group)

At one particularly disadvantaged school the problems gaining consent were linked to more fundamental issues than just the reluctance of young adolescents to actively deliver school forms to their parents. In this case, teachers referred to the impact of on-going social problems and widespread parental alienation from the schooling system.

We had a large cohort [more than a hundred] that never brought the consent form back because their parents forgot, were drunk, not at home, too busy. You know, some would see an envelope from [local] High School and assume that it
was a suspension letter or a bill, and throw it in the bin, or that we had the wrong address, you know.

We constantly went to the Department and said, ‘Hey we can’t do this here’ but the Minister said in Parliament ‘it’s going to be an opt in and that’s the way it is for three years’.

(later in the interview)

But it all came back to the fact that, you know, if we had spoken to their parents, verbally, they would have said ‘Yeah, whatever’ and their kids would have been in the program and everything would have been okay. They would have enjoyed the sessions and would have probably learnt something.

(Coordinator, School B)

These initial reactions to the first wave of concerted opposition to the share program bare all the hallmarks of what Cohen calls ‘ways of coping’ that those under attack frequently ‘resort to’ because they are largely unprepared for the scope and intensity of the moral panic enveloping them. In other cases of moral panic (see Critcher, 2003), startled and worried politicians and community leaders have resorted to legislative action to address the perceived threat posed by so called ‘deviant’ groups and their behaviour. In the case of the share program, this didn’t happen; the program was successfully defended and promoted by a range of advocates who re-grouped after the initial onslaught of criticism. As a senior DECS official said at the conclusion of his interview, ‘this is a story about a significant triumph of good over the forces of social control’ (notes of interview, 3/2/06). It is also an example of significant groups – SHine SA, DECS senior managers, school leaders, and local school teachers – maintaining their focus on what they believed to be in the best interests of young adolescents in the community. What follows is an analysis of how these groups recovered from the early days of the moral panic to re-state their raison d’être for developing and implementing the program and how they used this to ‘pull together’ and develop local strategies to support the implementation of the program.

Re-stating share’s essential rationale

While the proponents of the share program were shaken and distracted by the campaign against them, they were not ‘broken’ by it. The leaders of SHine SA, for example, spoke of getting ‘back on track’ once they had worked out what was happening and what was still important to them. In fact, they articulated an unusually strong resolve to remain committed to the principles and values that had motivated their development of the share project in the first place.

They did try to derail the program but once we clicked on to what this was about, understanding what the few groups were actually playing at, we got that. We never lost the rails but we got things back on track and we kept going. We were very clear and very determined that this would happen and nobody, nobody would cause us to go off the rails. Because what we were trying to do here was what our core business was about in this organisation and that’s about improving sexual health and wellbeing.

(SHine SA Leader A)
Another SHine SA leader even invoked the sentiment behind the classic Latin dictum *ad adstra per aspera* (‘to the stars through difficulties’). She talked about her colleagues stoically gaining strength by not succumbing to pressure to change or dilute the *share* program.

But we managed. I think what was common was that everyone was really committed to what we were doing and so there was no one who wavered around that, you know. No one said, ‘oh maybe we need to pull back here or we need to do something around that’. And everyone, I mean out of it I think everyone was really committed to why we had to keep doing some things. That was really eye-opening for them because they had never seen what was out there. You know, because they had never come up against it. So if anything, that actually made people more supportive and more committed.

(SHine SA Leader B)

These leaders even resisted the framing of the *share* project as ‘controversial’, ‘marginal’ or ‘contested’ by the media and its opponents.

People talk about our program as being controversial but we’re saying, ‘no we’re not controversial, the program is not controversial’. But in order for us to feel comfortable, we all went through the teacher resource, which was the main thing that shit hit the fan about. Every time I look at it I get reinforced and reading it just last week I confirmed that what we’re doing is world wide best practice. It’s not controversial so I try to get away from that idea and the chaos around what happened. I just focus on the fact that we’re trying to deliver best practice relationships in sexual health in schools and not bring that stuff up again.

(SHine SA Leader C)

Not only did the leaders of SHine SA return to their essential reasons for developing the program to restore their sense of purpose and determination, school teachers and leaders also re-articulated their educational rationale for teaching the program to justify their continued commitment in the face of opposition.

It’s very important that they go through the program and understand all the different forms of contraception. When we talked about all the different things out there they loved that. They’re ‘Oh really?’ and they were looking at all of them, going ‘Oh wow, is this available and how much?’ No it is really good, because they aren’t really aware of the dangers. They hear about girls getting pregnant and they seem to know a little bit, but they don’t really have it in their head about how dangerous different things are so it’s an important programme to have at this school anyway. That’s why we teach it, despite some hassles from outsiders.

(Teacher, School A)

*Acting centrally – SHine SA mobilises its defence of share*

After the initial shock of opposition, SHine SA embarked on the spirited defence of its program. This involved:

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• re-prioritising the work of a newly appointed media officer to provide advice on how to engage the media in the defence of program.
• writing media releases rebutting erroneous and/or exaggerated criticisms of the program.
• writing letters to the editors of local and state newspapers. In some cases, the CEO of the Department for Education and Children’s Services co-authored these letters with the CEO of SHine SA.
• writing to Members of Parliament to counter misleading and exaggerated claims made by the coalition of opponents of share.
• participating in talk-back radio debates with opponents of the program.
• advising schools about how best to cope with focussed criticism.
• engaging other professional groups and encouraging them to publicly support the program. Some of these groups subsequently wrote letters of support to the Minister for Education and Children’s Services, Minister for Health, Minister for Social Justice, Housing, Status of Women, and the CEO of SHine SA (see Appendix A: A selection of letters of support for the share program).

The involvement of ‘experts’ or groups of experts in the defence of the share program is noteworthy, particularly from a moral panic perspective. As occurred in the moral panic over AIDS in the late 1980s, medical opinion was highly valued and considered in the debate over the worth of the share program. While a few medical arguments were cited in opposition to the program (see Grace, 2003), the weight of medical and health evidence was strongly in favour of comprehensive sexual and relationships education of the type promoted by the share program. As a consequence, the local support of organisations like the Royal College of Nursing Australia, the Australian Medical Association (SA), Council of General Practice, and Health Promotion SA, in particular, was critical in establishing the credibility of the defence of the program. To paraphrase Critcher (2003, p. 39), the program became a medical and health issue and eventually the views of health experts prevailed – ‘high in status and credibility, their expertise was not easy to dismiss... Expert opinion was clearly weighted against a moral panic’.

Acting locally
Not all responses to the moral panic over the share program were reactive, immediate, or driven by sexual health ‘expert opinion’. Several schools, for example, bided their time and waited for a strategic moment that advantaged their cause. They unobtrusively continued teaching the program, collected various forms of feedback from key stakeholders in the school, then carefully used the local media to craft a ‘good news story’ about share. A Key Teacher describes his school’s approach:

Well we thought we’d wait until a semester in and then get some responses back through feedback sheets, class discussions, parent feedback and all that sort of stuff, and see how positive it was. We waited for the first semester, got it all back, and it was all very positive. We have a good relationship with the local media up here so we collated it all, got them in, got permission from some students to be part of it, got our governing council involved in it as well, and then got an overwhelmingly positive front page story about the share course – what the students thought of it, what the Governing Council thought of it, some parental comments as well, good photos, all that sort of stuff, so it was ‘warm fuzzies’ all
around. That was great just getting something like that out there and responding to the letters and the negativity.
(Key Teacher in focus group)

Other schools reported similar examples of ‘using’ local media to counter negative criticism of the program. Rather than casting teachers and schools as passive ‘victims’ of a relentless, orchestrated campaign of opposition, these anecdotes of local action re-position them as quite ‘savvy’ community campaigners who knew how to passively resist outside criticism (‘we thought we would wait until a semester in’) and strategically use the media, at a time of their choice, to disseminate their story.

The strength of local action was also recognised by DECS. As the senior bureaucrat responsible for DECS’ role in the trial of the share program suggests, local school principals were considered to be in the best position to work with their local communities to address concerns.

Local schools were the most powerful and very courageous advocates for share. The people who implemented the program, and there were some people who did that under some very difficult circumstances, they were trusted local people…. [They] projected a much more powerful message than I think the chief executive or a minister could say.
(DECS senior official)

While some teachers, schools leaders and SHine SA leaders were critical of DECS’ very conciliatory and careful defence of the share program, pursuing a policy of ‘supporting local leaders’ to handle local concerns with the program recognised the ‘micropolitical’ skills of these professionals (Johnson, 2004).

The moral panic subsides
One of the mysteries of moral panics is how and why they seem to ‘fade away’ (Critcher, 2003), ‘disappear’, ‘submerge’ or ‘deteriorate’ (Cohen, 1973). One explanation is that the main purveyors of moral panics, the news media, apply ‘news values’ – ‘journalists’ rule of thumb about what does and doesn’t make a good story’ – to decide when to ‘tune into’, and ‘tune out’ of, the debates that provoke moral panics (Critcher, 2003, p. 132). In the case of the share program, there is considerable anecdotal evidence to suggest that, by the end of September 2003, key newsrooms in Adelaide (ABC radio and television, and The Advertiser newsrooms) had ‘tired’ of the ‘overload’ of press releases emanating from the opponents of share. Journalists also commented to several sources that they considered some press releases to be ‘unprofessional’ and lacking in credibility (confidential emails to the CEO of SHine SA, 28th September and 1st October, 2003). As the reporting of concerns over share declined after October 2003 (apart from a few short repeat salvos in December, 2003, July 2004, and March 2005), there is some credibility in the view that key media outlets in Adelaide lost interest in the share ‘story’ and moved on to more newsworthy topics.

However, perhaps more salient than the actions of the local media was the behaviour of the vast majority of parents (variously estimated to be 95-98% of parents) who gave their active and continuing consent for their adolescents to participate in the share program. The clear message these parents gave both supporters of the program and those who opposed it was that the moral panic over share had no base in public opinion. They clearly refused to share or contribute to the social anxiety about the program promoted by its critics.
Whatever triggered the subsidence of the moral panic over the \textit{share} program in late 2003, the participating schools, DECS and SHine SA felt somewhat relieved to be out of public scrutiny and less pressured entering the second year of the trial. Relatively minor disturbances re-emerged during the second and third years of the trial in response to La Trobe University’s evaluation activities and several surveys of adolescents’ sexual views. However, the moral panic had largely dissipated by the end of 2003.

\textit{The costs}

The emotional costs to people caught-up in the moral panic over \textit{share} were significant. Each participant had a ‘story’ to tell about how he or she was affected by critical incidents or events during the trial of the program. Some of these have already been recounted in earlier sections of this report. Emotions ranged from fear, anger, disappointment, despair, and apprehension. Some participants reported feeling stressed when major incidents challenged their sense of competence, sense of security, and their sense of purpose.

Perhaps because the stakes were perceived to be so high and so important, particularly by the leaders within DECS and SHine SA, strong emotional responses were experienced but rarely talked about. The emotional dimensions of leading these organisations were rarely discussed. There was an implicit self expectation that each leader would be ‘strong’, ‘focused’, ‘calm’, ‘logical’ and ‘stoic’ in the face of political and media scrutiny. This was reflected in their public statements and their performances in the media, particularly on talk-back radio. When asked how they coped with the pressure of responding to direct and sometimes hostile questioning on radio, several leaders within SHine SA mentioned ‘being prepared’, ‘staying focused’, and ‘saying what we had to say’; they simply couldn’t afford to ‘fall about’ or ‘crack-up’ in public.

One rare disclosure of the emotional dimensions of the situation was made by the DECS official responsible for \textit{share}. He said,

\begin{quote}
It became a political football. Officers within the department were subjected to personal attacks. Because it also coincided with a major upsurge in concern about paedophilia, it was just a very emotional environment...... I don’t think I can say much more than that. It was not just some kind of technical thing about reading or spelling, it really went to the heart of human identity, and to some extent I think also the role of public education and improving the wellbeing of young people.
\end{quote}

(DECS senior official)

Other leaders mentioned ‘personal’ attacks on their competence, and in several cases, their own sexual orientation. These assaults on individuals’ core identities prompted bouts of introspection and reflection about such things as human rights and standards of decency and fairness in society. As one \textit{share} Regional Coordinator disclosed,

\begin{quote}
It made me re-evaluate what my religious beliefs were, and what I really believed in. Even though it was pretty scary and stressful it was good in a way. It gave me that space to think about things on a personal level, because I’d been brought up as a Christian, yet a lot of the opposition was from religious factions. It was important that I felt that my family supported what I was doing as well... The whole timing of everything
\end{quote}
was interesting in that it affected my family as well as what was happening with the job.
*(share Regional Coordinator A)*

Another Regional Coordinator revealed making a ‘huge mistake’ at one of her schools. The ‘mistake’ was subsequently questioned in Parliament, with DECS and SHine SA being called upon to explain how and why such an error could have been made. She revealed being ‘so stressed’ that she had to take ‘two days off’ to recover her confidence *(share Regional Coordinator C)*.

School-based personnel also talked about being stressed by the impatient demands of the central bureaucracy for participation data.

In the early stages too, when there was a lot of the political stuff going on around the state, the Minister’s office would be ringing up and they’d say ‘We need this data and we need it now!’. You’ve got a full load for the day, you’ve got yard duty and they say, ‘we want it now!’ I mean for me that was a bit of stress that you don’t really need to have.
*(Key Teacher in focus group)*

Another Key Teacher was quite flippant about the prospect of parents sitting-in on some of her *(share)* lessons. Through the humour, though, there were underlying concerns about the consequences of increased parental surveillance of her work. She said,

A: I had parents come in and I spoke to a father, went through it with him. He said ‘OK’ and went home. I don’t know whether he spoke to his wife or not, but he said ‘my wife and I are sitting-in on your lessons’ (laughing)

(others laughing)

B: Did you say ‘yes, come along’? (laughing)

A: I did stress about it. I thought about it overnight and thought ‘I don’t think so’. Imagine what the kids would feel like, with parents here watching me say, ‘What’s another name for vagina?’ (all laughing). Or imagine them hearing ‘penis’ and all the different slang words for ‘penis’ (laughing).
*(Key Teachers in focus group)*

These examples of how participants were affected emotionally by various incidents during the moral panic over *(share)* highlight an often neglected dimension of ‘manufactured’ crises – the ‘human’ impact. While some participants talked about their immediate emotional reactions – crying, getting angry, worrying, and ‘stressing’ – few were able to talk about the long term or cumulative effects of being exposed to significant stressors over a number of years. It is interesting to note, however, that several of the key people within SHine SA who were at the centre of the *(share)* controversy, have recently decided to return to teaching *(share)* Regional Coordinator A), pursue a part time University teaching job (SHine SA Leader C), and undertake full time Doctoral study (SHine SA Leader B). While none of these people linked these changes to the stressful aspects of their work with *(share)*,
it is entirely possible that the ‘stresses and strains’ of dealing with these issues may have contributed to their premature departure from the organisation.

The benefits
Considering what happened during the campaign against share and the personal costs to some people of being caught-up in such a public controversy, it is incredulous that they could attribute any benefits to it. However, several participants quickly identified a major benefit – PUBLICITY! When asked a question about whether there had been any positive outcomes from the controversy, a leader of SHine SA replied:

A: The media attention that we got in 2003 and the early part of 2004. That kind of media you can’t even pay for. You couldn’t fund it, you could not fund it!! You could not fund a media campaign of that size. It would cost you millions of dollars.

Q: So really the media attention had unintended consequences?

A: Oh, what a fantastic benefit. We haven’t talked to people formally or surveyed what people know about the share program, ‘where did you hear about it?’ blah, blah, blah. But I do have an anecdotal sense though, everywhere I go, when I say ‘SHine’ people go, ‘oh the share program!’. And I don’t meet people who say to me ‘you’re evil’. They say, ‘oh fantastic, what a great program’. You know, I often say, ‘well geez it would have been real helpful if you’d been able to go on the bloody talkback [and say that]’.

(SHine SA Leader A)

Another SHine SA leader said similar, though less colourful, things about the benefits of being ‘known’.

I think the highs now that there’s been a shift in the uptake with schools thinking that they need to be trained and use some of the latest resources. I think that’s come about because of the extra publicity – more schools know about it.

(SHine SA Leader B)

Some schools, too, saw the benefits of being involved in the share project, despite the extra scrutiny. In an era in which ‘marketability’ and ‘community profile’ were important considerations for secondary schools in a quasi competitive market for enrolments, being identified as a ‘share school’ held its risks but also advantages. As one Key Teacher explains:

Actually our school really likes publicity. We’re very active. We have a good relationship with The Advertiser. I remember one time when I got phoned up, I had to speak about it [share]. I had the assistant principal sitting next to me as I was talking on the phone, and the questions they put to me – it was amazing!
Clearly, being portrayed in the media as a trail-blazing, innovative school which cared about the sexual health of its students had some appeal for some schools involved in the trial.

Other benefits were less tangible than raising the public profile of share and the schools which trialled it. Most groups mentioned ‘coming together’ or ‘working through it together’ in collegial ways as a beneficial consequence of being in the spotlight. There was also widespread but subdued self pride in ‘surviving’ the moral panic over the program. In the Key Teachers group, in particular, there was a strong sense of collective resilience which was celebrated through the telling of shared stories, many of which were quite humorous. In many ways, their stories of ‘getting through it’ resonate with stereotypical, laconic, ‘Ozzie’ ways of coping with adversity.

Conclusions

The trial of the share program in selected South Australian secondary schools revealed the difficulties of pursuing reforms in sexual health education. This is even more problematic when oppositional pressure groups and elites engage in the dubious politics of moral panics. Standing back from the furore that engulfed the project, a number of conclusions can be drawn about the quality of the share program and how key stakeholders ‘managed’ its implementation in unusually trying circumstances.

There is no doubt that the share project – with its four inter-related components – constitutes an exemplary ‘model’ of a comprehensive sexual health and relationships program. It is a thoroughly researched, theoretically rigorous, comprehensive, and ‘usable’ set of materials and guides that local teachers and health professionals can apply to teach adolescents about sex and sexual relationships.

A similar conclusion can be drawn about the training and support approach used by SHine SA to compliment its curriculum materials. By teaching and modelling effective pedagogic approaches to sex education during pre-implementation training and following this up with on-going support over an extended time, SHine SA effectively provided teachers with opportunities to learn the knowledge and skills they needed to implement the share program. While the evaluation identified a few minor attitudinal and structural impediments to program implementation, the overwhelming impression was that teachers and schools coped well with the demands of operationalising the new program.

However, the real test of the robustness of the share community came from ‘right-field’ when a coalition of pro-life, pro-family pressure groups orchestrated a moral panic over the share program. After initially being shocked by the ferocity of the opposition, key stakeholders in the share initiative regrouped and responded to the threat to the program. They strategically rebutted the exaggerated claims of the critics of the program by citing international and local research to justify share’s approach. ‘Evidence-based practice’ became the mantra of the campaign to defend share. Medical and health ‘experts’ and professional groups were enlisted to endorse the program as a worthwhile and much needed sexual health promotion initiative. Finally, local level action, invariably led by teachers and school leaders, was encouraged and celebrated as an effective strategy to counter the opposition to the program.

Being involved in such a public and strident opposition campaign had its consequences for some of the teachers and officials promoting the program. Some suffered trauma and were
damaged by the process. Others drew strength from their collective defiance and stoically reflected on how their actions contributed to the subsidence of the moral panic over share.

Finally, the collective wisdom and calmness of around 10,000 parents prevailed to end the uproar over the share program. By giving their active informed consent for their 13-15 year olds to participate in the program, 95% -98% of parents endorsed the quality and appropriateness of the program for their adolescent offspring. Public opinion clearly endorses share.

The wider dissemination of the share program should now proceed. This evaluation has established the quality of the program and the public’s acceptance of its importance as a central strategy to promote the sexual health of our young people.
References

891 ABC Adelaide (2003) Transcript of ‘891 Mornings with Matthew Abraham and David Bevan’, 4th April, 9:00-9:30 AM.


Draper, T. (2003) Warning! To all Parents from Trish Draper MP, Federal Member for Makin. Pamphlet authorised by Trish Draper MP, 959 North East Road, Modbury


SHine SA (2004) *Teach it like it is: A relationships and sexual health curriculum resource for teachers of middle school students*. Kensington, SA: Sexual Health information networking and education SA Inc.

### Appendix A: A selection of letters of support for the *share* program

<table>
<thead>
<tr>
<th>Date</th>
<th>Organisation</th>
<th>Form of support</th>
<th>Comment</th>
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<tbody>
<tr>
<td>14-4-03</td>
<td>Youth Affairs Council of SA (YACSA)</td>
<td>Letter to Minister for Health</td>
<td>‘YACSA believes that SHARE is an essential and positive move forward in the area of sexual health and relationship education and commends the State Government for working in partnership with SHine SA in delivering such a program in South Australian schools.’</td>
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<tr>
<td>16-4-03</td>
<td>Professor and Head of Department of Public Health, School of Medicine, Faculty of Health Sciences, Flinders University</td>
<td>Letter to Minister for Education and Children’s Services</td>
<td>‘I am writing in support of the SHARE project ... This project addresses some of the most serious health threats faced by young South Australians in the 21st century and as such represents an important public health strategy by your government.’</td>
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<td>7-5-03</td>
<td>South Australian Council of Social Service</td>
<td>Letter to Minister for Education and Children’s Services</td>
<td>‘The South Australian Council of Social Service strongly supports the Sexual Health and Relationships Education Program.’</td>
</tr>
<tr>
<td>29-5-03</td>
<td>Adelaide Central Community Health Service</td>
<td>Letter to Minister for Education and Children’s Services</td>
<td>‘I write on behalf of the Board of Directors of Adelaide Central Community Health Service in strong support of this program.’</td>
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<td>2-6-03</td>
<td>Royal College of Nursing Australia</td>
<td>Letter to CEO SHine SA</td>
<td>‘As the professional organisation for nurses in Australia, RCNA is pleased to be able to write in support of the SHARE program. The provision of health education can only strengthen the capacity of individuals to make choices which will positively impact on their ongoing health.’</td>
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<td>3-7-03</td>
<td>Health Promotion SA</td>
<td>Letter to CEO SHine SA</td>
<td>‘... I wish to convey my support and admiration to you and your staff through these tough times. I hope that the emerging groundswell of support from the communities continues to build and the Program has the opportunity to reach both teachers and students who will’</td>
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<td>21-7-03</td>
<td>Adolescent Psychologist, Albert Road Centre for Health, Melbourne</td>
<td>Email to Minister for Health (cc to CEO SHine SA)</td>
<td>‘I write to tell what a wonderful resource I think [share] is and how well it has been put together.’</td>
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<td>8-8-03</td>
<td>Australian Medical Association (SA), Council of General Practice</td>
<td>Letter to Minister for Education and Children’s Services</td>
<td>‘This program has been developed on a strong evidence base and has been very well researched... [W]e feel that this program will enhance the sexual health education that is currently being provided by schools...’</td>
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<td>1-9-03</td>
<td>Yarrow Place Rape and Sexual Assault Service</td>
<td>Letter to Minister for Social Justice, Housing, Status of Women</td>
<td>‘The topics focused upon in the SHine Share program include safer sex, STIs and contraception it also has a wider focus on relationships, decision making and communication skills. It is our belief that the provision of such broad sexual education contributes to young peoples being able to develop equitable sexual relationships.’</td>
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<tr>
<td>5-9-03</td>
<td>Southern Youth Mental Health Network</td>
<td>Letter to CEO SHine SA</td>
<td>‘We believe that such a program is a much needed and necessary step in educating South Australia’s young people, not only on the biology of sex but on the broader matters of sexual health and relationships... The Southern Youth Mental Health Network strongly supports the SHARE program, and we wish to voice our support to help counter unsubstantiated negative criticism of this valued education program.’</td>
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