

CONFERENCE SPEECH

The Dixon Method

Hilary Dixon

Hilary Dixon MEd - Independent Training Consultant and Writer: Hilary has been training teachers and health professionals to teach sex and relationships education for nearly 30 years. She has a particular interest in sexual health and relationships for young people and adults with learning disabilities. She has written and had published many practical books, manuals and articles on the subject and has undertaken numerous government-funded projects. Hilary is a Director of Me-and-Us Ltd, a specialist publishing company focusing on practical resources for sex and relationships education, and she is a Life Member of the national Sex Education Forum. Previously she has been a senior health authority manager, a training and development officer and a secondary school teacher.

Summary

Over many years I have trained a wide range of professionals and others to feel confident and competent to provide support and education around sexuality, sexual health and relationships for people with learning disabilities. This article describes the way I work, why I work in this way and the models and theories that underpin my method. It is based on a speech I gave at the

Università degli Studi di Verona, Italy, in May 2009 at an International Conference entitled 'Disability and Sexuality – Rights, Needs and Opportunities'.

Introduction

Training should be subversive

if it does not bring about change it has been a waste of time.

It was just over a year ago that Professor Lascioli, from the University of Verona, contacted me to learn more about what he called the Dixon Method. He was referring to the way that I work with professionals to prepare them to provide sexuality, sexual health and relationships education to young people with learning disabilities. As a result of that meeting I was invited in May this year to an International Conference in Verona to speak about my method and run two practical workshops to demonstrate the way I work. I have developed the method over many years and the Italian connection prompted me to analyse carefully what the method is, where it comes from and why I am committed to it. This article is based on the speech that I gave.

I will explain my method in three parts:

- I will describe some of the key formative experiences and opportunities in my life that have influenced the way I work.
- 2. I will say a little about my philosophy and values in relation to sexuality and relationships.
- 3. I will describe the three elements that underpin my method.

Personal experiences and opportunities

My own experience of formal education at school was less than positive. I generally found lessons boring, examinations hard and I struggled to see the relevance of much of what I was being invited to learn. Nevertheless, I became a teacher myself. I quickly found a niche focusing on personal, social and health issues and often working in creative ways with young people who had some learning difficulties because they were 'switched off' from formal learning, because they had emotional difficulties or because English was a new language. When I returned to formal study a few years later, I found, to my surprise, that learning could be exhilarating. It was not until much later that I understood why this was so.

I joined the Family Planning Association (now known as the fpa) in London as a Training and Development Officer, and fairly quickly became responsible for all training courses for teachers and for people working in the learning disability field. My own development and training came from two sources. I worked as an assistant alongside experienced trainers whose role was to model good practice and mentor me as I experienced groups in action and became familiar with the training materials. Alongside this, the fpa ran regular training courses on a wide range of themes for its Training Team, including intensive workshops on sexuality, sexual health, group skills, assertiveness and counselling. For me (and my colleagues) these were powerful formative influences not only on my training work, but also on my personal life.

Later, when HIV/AIDS became a major issue in the mid-1980s, I moved to Cambridge to manage an AIDS Education Unit, which was part of the groundbreaking Cambridge AIDS Programme set up by Cambridge Health Authority. This confronted me with a whole new range of concerns and challenges, not only relating to HIV and AIDS, but also in terms of managing people and programmes. I became increasingly interested in management theories that focused on people and the way they related to one another, in particular the work of Charles Handy (Handy, C. 1989 & 1990). I began to develop practical management training programmes that combined the approaches I had learnt at the fpa with people-management theories. For several years I developed this work with teachers and others at the Cambridge University Faculty of Education. My own experience of managing a sexual health team and the opportunity to work with managers in a training context on a range of difficult issues added to the development of my own particular philosophy and approach to training and teaching.

My philosophy and values

In order to understand where I am coming from and what my method is, let us consider my philosophy and values, both towards sexuality and relationships in general and, more specifically, in relation to people with learning disabilities.

In terms of sexuality and relationships I cannot do better than to quote the Values of *SHARE* (Wight, D. and Dixon H. 2004), a research-based secondary school sex and relationships programme. The values were agreed during the development phase of *SHARE*, and are made explicit in the materials and to students when they embark on this programme. These values not only represent my values; they have been agreed by a wide range of organisations, faith groups, political leaders and health and education professionals. The values are:

- 1. Our sexuality is a natural and healthy part of who we are.
- Each of us feels differently about our sexuality, and we may express it in different ways.
- 3. We should treat each other as we should like to be treated.
- 4. We should never have to do anything sexual we don't want to do.
- If we do choose to have sex, we should protect ourselves and sexual partners from unwanted pregnancy and from sexually transmitted infections.

There is often a great deal of fear and concern around sexuality and relationships for people with learning disabilities, especially (and understandably) from parents and carers. However, people with learning disabilities (generally speaking):

- develop the same sexual feelings as other people
- hold the same fears and prejudices as other people
- have the same rights to education as everyone else
- may have sexual relationships from the age of 16
- are more vulnerable to exploitation and abuse than others
- need good sex and relationships education to support them

My approach - The Dixon Method

The training method I have developed is based on the following three elements which I will then explore in turn:

- 1. A commitment to active learning
- 2. A commitment to recognition of different learning styles
- 3. A commitment to understanding and using group work

1. Active Learning

Active Learning (sometimes called *experiential learning*) is based on the work of David Kolb (Kolb, D.A. 1984) and others who recognised that people are all different, that we learn in different ways, and that, if learning is to be successful, it needs to take account of different learning styles. Active Learning is widely recognised (in the UK at least) as the most appropriate approach for sexuality, sexual health and relationships training and teaching. Let us consider the Active Learning Model:

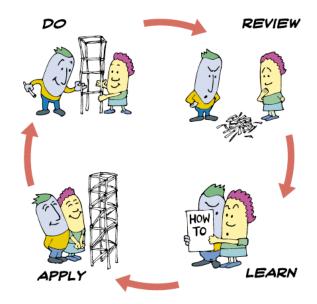


Diagram of the Active Learning / Learning Styles Model

The Active Learning cycle takes us through a four-stage process of learning – *Do, Review, Learn* and *Apply*.

Example 1:

- 1. An activity is provided for the group to participate in.
- 2. The group is encouraged to reflect on it, and sometimes to observe.
- 3. Thoughts and ideas are developed in discussion.
- 4. Implications are considered for familiar situations and, where appropriate, tested out in practice.

Example 2:

- A group of professionals reads and analyses a report of a training course using my method.
- 2. The group discusses the modifications that would need to be made for their own situation.
- 3. The group tries out the modified method with a staff team.
- 4. The group reflects on how the workshop was received.

An activity may start at any point in the cycle, but should lead participants through all four stages. The model aims to maximise learning by allowing individuals to contribute in the modes they feel most comfortable with.

2. Different learning styles

The active learning model takes account of different learning styles (Anderson, M. and De Silva, S. 2007). Each stage of the Active Learning cycle (*Do, Review, Learn* and *Apply*) represents a learning style, and each of us will have a favoured mode:

Do – represents people who favour a practical approach to learning and like to learn through relationships with others. They are happy to be involved in an activity and enjoy playing games. They tend not to ask 'Why are we doing this?'

E.g. In cooking, like to experiment with whatever ingredients are available.

Review – represents people who like to learn by reflecting on ideas and issues and observing other people. They may not be keen to join in activity or discussion, and will volunteer quickly for an observing role in an activity.

E.g. In cooking, like to watch, and learns by reflecting and observing.

Learn – represents people who like abstract theories, ideas and generalisations. They often want to know whose research is being quoted and what the experts say. They may also prefer to read a book or listen to a lecture than go on an active-learning course.

E.g. In cooking, like to follow a recipe very carefully.

Apply – represents people who enjoy testing things out, developing practical skills and knowing how things work. They commonly take a practical and methodical approach to learning.

E.g. In cooking, like to taste, to experiment and improve on a recipe.

You may remember that I mentioned earlier that my own experience of learning at school was not positive. Since discovering this model, I now realise that my schooling was almost entirely delivered in the *Learn* mode, whereas my learning style is the exact opposite and is in the *Do* mode. Having had practical experience of teaching, I was ready, when I returned to academic study, to use the theory to make sense of my teaching experience.

3. Understanding and using group work

An active learning approach almost inevitably involves group work. If learners are encouraged to participate in activities, reflect on them, develop thoughts and ideas and consider implications of their learning, they will do this most effectively by working in groups. The trainer or teacher will need to be familiar not only with the Active Learning Model, but also, if they want to get the best out of a group, be familiar with the key elements of group work (see Heron, J. 1999, and Johnson, D. W. and Johnson, F. P. 1987) which help or hinder both the process and the content.

One important element that distinguishes this approach from more conventional approaches to education is that the group leader is not so much the expert, but rather a *facilitator* of the group. In the context of sexuality and relationships training, the group leader has a responsibility to:

- create and maintain safety, give encouragement to participants and be confident to deal with difficulties or distress
- maintain the energy of the group and provide a variety of learning experiences, including opportunities for reflection

Group work also expects more than a passive response from group members. They are encouraged to take responsibility for their learning, whilst being respectful and supportive of others.

Rationale for using this approach

Traditional education attempts to teach young people facts and develop cognitive skills – increasingly difficult tasks in an ever more complex world where there is just too much to learn, knowledge changes fast and often

nobody knows the answer. Conventional education allows little space for affective learning – learning about ourselves, about relationships and about human dilemmas and problems. Affective learning is crucial in teaching, medicine, nursing, social and community work. It is equally important in learning about sexuality, sexual health and relationships.

Using active learning and group work can provide participants with opportunities to:

- reinforce their learning through experiences
- be supported whilst experimenting
- share concerns reducing feelings of isolation, inadequacy and anxiety
- hear, question and explore different viewpoints
- gain positive experiences leading to higher self-esteem, confidence and social skills
- acquire a deeper understanding of personal and inter-personal behaviour

My approach encourages individuals to work collaboratively and learn from their own and others' experiences. I have often said that training should be subversive – if it does not bring about change at an individual, team or organisational level, then it has been a waste of time.

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