



Building Community Heart

**FORD FOUNDATION: PROGRAMME ON SEXUAL REPRODUCTIVE
HEALTH AND BUILDING MEANINGFUL RELATIONSHIPS
(2008-2010)**

**REPORT ON A CRITICAL REFLECTION
WORKSHOP**

April, 2012

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GLOSSARY OF ACRONYMS AND TERMS

Ambassadors	Facilitators selected through a process involving community leaders to set up Cabanga Clubs and facilitate the programme
ARVs	Antiretroviral drugs
Cabanga Clubs	Community based structures set up and facilitated by Ambassadors
CVs	Curriculum Vitae
ilobolo	This refers to a system in traditional Zulu marriages that brings the two families together. It requires agreement on a price be paid by the bridegroom for the right to marry a woman.
KZN	Eastern Seaboard Province of KwaZulu-Natal
PMB	Pietermaritzburg
STIs	Sexually transmitted infections

1. Background

Ford Foundation funded a programme through LifeLine (PMB) between 2008 and 2010 in three areas - the Madadeni area of Newcastle, the KwaDlangezwa area of Empangeni and the Sweetwaters area of Pietermaritzburg. The programme targeted young people - particularly women and had several objectives which combined to improve the meaningfulness of their relationships. This was to be achieved through improving their self esteem and increasing their knowledge of reproductive health, HIV and gender based violence. A further objective was to improve community support for behaviour change and promote awareness and knowledge of available services relating to gender based violence and abuse.

2. The programme methodology for “Building Community Heart”

The methodology used for the programme derives from an approach introduced by LifeLine (PMB) in 2008 when informal women’s groups called *Cabanga Clubs* were set up to serve as a platform to discuss reproductive health issues and provide mutual support and care for survivors of rape and violence. In 2009 LifeLine (SA) produced a comprehensive document outlining a model for promoting *emotional wellness* in communities as part of their own transformational process aimed at increasing responsiveness to divergent communities in South Africa. LifeLine (SA) branded the programme “*Building Community Heart*” and introduced it in several regions.

The new LifeLine (SA) model emphasises *communication for social change* focussing on the following shifts:

- A shift from facility based programmes to community based programmes
- A shift from teaching people about HIV and AIDS and gender to facilitating peer dialogue and the development of appropriate innovative actions
- A shift from dependence on formal knowledge to valuing interventions deriving from community experience and realities.
- A shift towards adapting western models of dialogue and intervention to the cultural and socio economic realities of African communities
- A shift from a problem orientation to a proactive preventative orientation.

All of these shifts had been a part of the internal debate within LifeLine (PMB) for some time and aspects of the model were integrated into the processes and activities of the Cabanga Clubs. The process aspects of this *social transformation*

approach adopted by LifeLine (National)) focuses on seven values¹ grouped into individual, group and societal values as follows:

Individual values

- *Consciousness of self* - being aware of values, emotions, attitudes that motivate behaviour and attitudes to other people.
- *Commitment* - the energy that becomes a driving force to give expression to values, emotions and attitudes etc.
- *Congruence* - the degree to which attitudes and behaviour are a genuine reflection of one's internalised views.

Group values

- *Common purpose* - the degree to which group members share and jointly embrace values in the activities they undertake.
- *Collaboration* - the bringing together of various stakeholders and their respective contributions to strengthen the overall achievement of goals.
- *Embracing diversity* - understanding that the realities of different members of the group may represent significant differences which need to be understood and respectfully acknowledged.

Societal value

- *Citizenship* - the process whereby self is responsibly connected to the environment and the community. It acknowledges the interdependence of all involved in the leadership effort. Citizenship thus recognizes that effective democracy involves individual responsibility as well as individual rights.

The process of selecting and training the *Ambassadors* and setting up the *Cabanga Clubs* provides localised structures through which *conversations* and *dialogue* take place. These activities form the *core of the process* which if well facilitated create opportunities for growing awareness and activities to address issues of concern.

The programme under discussion followed many of these processes but also included basic knowledge on relationships and sexual reproductive health, HIV and AIDS, gender based violence, and parenting.

3. Internal review of the Programme

Between October 2010 and November 2010 an internal review was undertaken to assess the overall progress of the programme. The findings suggested that the impact of the programme is very positive.

¹ LifeLine Southern Africa Secretariat. April 2009. *LifeLine Southern Africa Transformation Manual Transformation. Building Community Heart*

3.1. *Estimated number of beneficiaries*

The review revealed that 592 people had participated in the programme on a regular basis as indicated in the table that follows.

Table 1: Number of participants in LifeLine (PMB) Programme

	Sweetwaters	Newcastle (Madadeni)	Zululand (Kwa Dlangezwa)	Total
Number of ambassadors	16	13	18	47
Number of Cabanga Clubs	22	13	18	53
Number of group members	220	108	264	592

The average household size in KZN is approximately 4.6.² It is possible that three of those household members would have been influenced by the programme. Bearing in mind that the main focus of the programme was to reach peer groups – another five friends and relatives may also be influenced by the learning. Thus the estimated number of direct and indirect beneficiaries is in the region of 5112.

3.2. *Summary of programme outcomes*

Through participation in focus group discussions - a sample of participants reflected on the most *significant changes* in their relationships that could be attributed to the programme. The review suggested significant changes had occurred at the level of the individual participants, their families and the wider community. The summary that follows serves to capture what was reported on during the course of the focus group discussions in October/November 2010

3.2.1. **Outcomes for Individuals**

1) *Improved confidence, assertiveness and self esteem.*

A common response from participants was that they had gained “*gained independence, confidence and self knowledge.*” “*Enhanced self esteem*” was also cited as a valued change.

Given that the participants were mostly out of school and unemployed – it is clear that building their confidence and self esteem was critical to enabling them to fulfil a leadership role at neighbourhood level

2) *Improved capacity to plan for the future*

² Data from Health Systems Trust: Average household size per province: 2007.
<http://www.hst.org.za/healthstats/6/data>

Participants described changes in their ability to plan for their future such as *"I feel energised to take responsibility for myself"*

3) *Improved ability to handle interpersonal conflict and anger*

A number of participants commented on improved skills to handle conflict and manage anger as indicated by the following comments.

- *"I am more able to move out of an abusive relationship"*
- *"As a mother I know longer take my anger out on the child".*

4) *Improved decision making and judgement*

Participants identified improved decision making and judgment as indicated by the following comments.

- *"I am better able to make informed decisions"*
- *" I try to select faithful partners"*

5) *Importance of honesty*

A number of participants commented on how they now really valued the importance of honesty in relationships. Previously - not telling the truth and deliberately deceiving partners almost seemed to be viewed as part of the courtship *"game."* It was very encouraging to note how participants saw this attitude as very destructive.

- *"No more lies"*
- *"I learnt the importance of telling children the truth about reproductive health."*

6) *Importance of faithfulness in relationships*

During the course of the discussions it seemed that having multiple partners was common to the way both males and females conducted themselves. The learning around sexual reproductive health seemed to have equipped participants to seriously reconsider the wisdom of this behaviour. This is reflected in the following comment:

- *"I used to have many partners at once which caused lots of problems for me but I now have only one"*

7) *Improved communication skills*

Poor communication was often cited as an issue contributing to *poor parenting* or *gender based violence*. It emerged in the focus group discussion that people felt better able to express their feelings in more positive and constructive ways.

3.2.2. Outcomes for Families

The focus group discussions revealed that the training had effected important changes at family level. Participants had committed themselves

to taking greater responsibility for contributing to family well being. Areas reflecting a growth of skills and knowledge include the following.

1) *Improved communication within families*

Participants outlined how the training had helped them to have greater openness during discussions especially around relationship issues. They also felt that there was more scope for consultation and addressing difficult family issues more constructively. They attributed this improvement to acquiring improved communication skills

2) *Improved responsibility for family well being*

Two areas emerged as being significantly different following the participation in the *Cabanga Clubs*.

2.1. *Care of own children/siblings and other family members*

Participants felt that they were more able and committed to taking care of their own children, siblings and other family members. Some viewed this as an opportunity to shape the behaviour of siblings. There were several remarks alluding to taking on greater responsibility.

- *"I no longer beat or neglect my children - I try to take very good care of them"*
- *"I have learnt to listen to children".*
- *"My child must have trust and confidence in me."*

2.2. *Contributing to the economic well being of the family*

Some of the participants were making a greater contribution to the economic well being of the family as indicated below:

- *"The LifeLine stipend contributes to family needs"*
- *"I take more responsibility for helping at home with chores such as gardening"*

3) *Improved relationships within family setting*

Several members of the focus groups talked about the greater levels of trust within the family which they ascribed to some of the areas of learning within groups. In particular members talked about demonstrating greater *respect* and greater *family harmony* as indicated in the examples below:

- *"Relationships have improved in my family"*
- *" There is greater caring for one another among family members"*
- *"My family appreciates my improved behaviour"*
- *"There is increased respect for the family and its rules"*

3.2.3. Changes for the community

Focus group members were asked to outline how they felt their participation in the *Cabanga Clubs* changed their behaviour at community level. The responses indicated that there had been significant changes in both their personal behaviour which would have long term gains for the community. Some group members who had seemingly given up hope for themselves and behaved badly – took control of their lives again and rejoined groups they had previously participated in such as churches. Also important was the fact that they felt their relationship with the community had changed for the better as a result of their more respectful behaviour. Some of the responses are outlined below.

- *“I have gained the trust of the community”*
- *“Community members like and support programme”*
- (Reported by several girls) *“I previously had multiple partners but I have changed from that and now stick with one partner”*
- *“I have changed the way I communicate and community appreciates it.”*

4. Purpose and process of the Critical Reflection Workshop

In view of the fact that LifeLine (PMB) is now extending the programme to schools – it was felt it would be a valuable exercise to assess to what extent the behaviour change reported during the internal review in 2010 still served as a moral compass for the participants. It was also felt that in planning the new programme – lessons could be learnt from the beneficiaries of the previous programme. With this in mind a workshop was organised on 11 April, 2012 for a total of 14 Ambassadors from the districts of Pietermaritzburg, Empangeni and Newcastle. The overall purpose of the workshop was to explore with Ambassadors what, in their view, were the strengths and weaknesses of the programme to improve the meaningfulness of their relationships and overall understanding of adult reproductive health.

The questions for discussion stemmed from the main objectives of the programme and can be summarised as follows:

1. How did this programme change your relationships with your partners?
2. How did this programme help you to identify and change risky behaviours which might make you more vulnerable to gender based violence?
3. What important knowledge about reproductive health, HIV and gender based violence did you gain from the programme?
4. How did the programme increase knowledge on sexual reproductive health at community level? Were community services such as the social workers, clinics, the police and the hospital crisis centre better used?
5. (a) If the programme was to be undertaken again, what should be changed?

- (b) How would your life have been different if you had not participated in this programme?

5. Outcomes of the discussions

5.1. Question 1: How did this programme change your relationships with your partners?

5.1.1. Relationships with friends

1) *Healthy relationships.* Several participants pointed out how their relationships with friends have improved enormously. They explained how the training in listening skills had contributed to fewer arguments and improved ability to share their concerns with others. In this way their burdens were lessened and on occasions friends even accompany them to the group sessions.

2) *Informative discussions.* In the view of the participants - the quality of general conversation has improved. Discussions with friends now centre around issues discussed in the Cabanga programme. Most friends benefit from these discussions as they now have factual and practical information to share such as the importance of knowing one's HIV status, practicing safe sex, etc.

3) *Strained Relationships.* For some participants participation in the groups also caused some strains in relationships as summarised below:

- Some friends did not take kindly to the new knowledge gained by Ambassadors and accused them of being “*know-alls*”. However, later some of the friends become envious when they learnt that the Ambassadors have tested for HIV and know their status. In some cases friendships broke down around these issues.
- A member reported that one of his friends called him aside and asked him to refrain from talking about protected sex, the virtues of having one partner, etc, because such talks were going to discourage girls from *falling in love* with boys. Further discussions with this particular friend converted him and he realized that what the Ambassador was saying made sense.
- A born again Christian related that initially there were problems with her friends because she was now talking about love matters and sex – which as a “*child of God*” was not supposed to be talked about. They had thought it was a sin to talk about sex and relationships. Now they are open and face the realities of life rather than avoiding or denying them. Day to day issues like rape, all types of abuse are now included in their sermons because within the churches they minister to people who are going through a variety of problems.

Ambassadors maintain that the negative reaction they receive from some of their friends does not discourage them as the positive outcomes outweigh the criticisms. They are aware that there will always be people who disagree with them. In situations where they meet with negativity from their friends, they apply the newly gained skills of not imposing their point of view on other people. They simply state the facts as they know them and leave their friends to make their own choices.

4) Being non-judgmental and approachable: Friendships have been strengthened further by accepting their friends as they are and of respecting their points of view. This has reduced situations of conflict which damage friendships.

Some group members were even approached for advice in matters related to reproductive health by married people who are not friends or members of the group. The knowledge that the Ambassadors have acquired has earned them respect and friendship with members of the community regardless of age.

5.1.2. Relationship with partners :

1) More peaceful relationships: Participants felt that the training they had received again contributed to more peaceful and stable relationships with their partners. Previously their relationships were characterised by turmoil and arguments. They attributed the change to the skills learnt about various aspects of communication.

2) One sex partner: All group participants, both males and females, reported that they no longer have multiple sex partners. They also reported that they practice safe. They believe that as leaders in the communities, they should lead by example in order to be taken seriously. They acknowledge that as Ambassadors they should be disciplined. The motivation for this change is the love of the work they are doing and the desire to see it succeed.

3) HIV Status: They have all undergone testing for HIV and know their status. Some of them go for testing on a regular basis and often go together to give each other mutual support.

4) Enjoyment of the programme: The programme appears to be not only informative but is also enjoyed by members. They reported on how they look forward to the sessions and remind one another about them.

5) Independent thinking: The programme has built self-confidence and empowered participants to think independently and stand up to peer pressure. In the past women used to be very subservient with their boyfriends controlling many aspects of their lives. The power relations have changed between the partners and they now discuss issues together and give each other respect and space. They noticed that when the women changed, the male partners changed too. The respect is mutual.

6) Choosing not to be sexually active: Some of the participants are not in any relationships for various reasons. One male participant explained as follows *“Though I am not in any relationship, I now have an idea of what to look for in a healthy relationship – have right reasons for entering into a relationship. I have gathered a lot of information - what qualities to look for and emotions. I’ll negotiate with my to-be partner what I will offer in our relationship and also request her to make her offers what she’ll bring into our relationship”*

7) Changes in the relationships of Cabanga Club members. The facilitator asked whether Ambassadors have noticed any relationship changes in the teenagers they work with in the Cabanga program. The participants cited the following:

- Teenagers share their concerns and experiences freely with Ambassadors because generally they have difficulties communicating with their parents.
- In most cases the younger children enter into relationships because they want to prove a point that they are more advanced and more *“ahead”* in the dating game than their peers. The Ambassadors confront them with hard questions and point out that inevitably they will become pregnant and jeopardise their future. They are urged to take pride in their bodies and maintain their physical well being.
- Participants also believed it was important to give group members time to change and gauge from what they say whether there has been any change. Most teenagers enter into relationships because they are just copying what their sisters are doing without any understanding of the implications of their actions. When the Ambassadors engage the group members and start a conversation with them - those teenagers realize the dangers and change their behaviour.
- One teenager said she entered into a relationship because of poverty and the person with whom she was involved with provided her with everything. During the course of the group activities she was shown the dangers of *“sugar daddies”* and she terminated the relationship. She is now studying in a university.

5.2. *Question 2: How did this programme help you to identify and change risky behaviours which might make you more vulnerable to gender based violence?*

1) **Excessive intake of alcohol.** One male member related how he has changed his behaviour since being a member of the group:

- Since participating in the Cabanga Clubs he has realized how his own excessive drinking could affect his life negatively. He realized he might commit crime, act recklessly and contract STIs and HIV or develop illnesses related to alcoholism.
- His anger issues with his mother emanated from the fact that he grew up without his father and he resented his mother denying him the joy of having an adult male role model. Through the Cabanga programme he had contact with other children who were in worse situations and were coping. He learnt how to manage his anger, and is now at peace with himself and with his mother

2) **Multiple sex-partners, unprotected sex, knowing HIV status.** Many members had realized how risky and unacceptable their behaviour had been in a number of ways.

- Nearly all of them had previously had multiple sexual partners. Following their participation in the group - they all changed to having one partner.
- All the group members had been practicing unprotected sex. They now all practice safe sex making use of condoms.
- They all did not know their HIV status but they now test regularly together with their partners.

3) **Visiting boyfriend in his room at night.** Members shared their experiences of inadvertently putting themselves in risky situations.

- One teenage girl learnt her lesson bitterly when she visited a newly found boyfriend thinking it was just a friendly visit. He tried to coerce her into sex and when she refused she was made to walk alone home at night in the township.
- She shared her experience in the Cabanga Club session and this was a lesson for her and other girls to use safe public places such as parks for their meetings with boyfriends.

4) **Roaming the streets and walking alone at night**

This was a common habit for both males and females - especially those who used to drink alcohol in taverns. They have stopped the habit of walking alone at night because of the dangers they are exposing themselves to such as being raped and even murdered.

In the low cost housing settlement area at France it seemed that in the section where the groups were active - there was a remarkable decrease in the number of teenagers who currently roam the streets. The Ambassador who has observed this feels it is partly as a result of the discussions in the Cabanga Clubs.

5) Responding to telephone calls inviting you to social gatherings with people not known to you.

Group members shared how teenage girls often responded to invitations to social gatherings without having much information and have ended up nearly being raped. They now no longer accept invitations to social gatherings organized by people they do not really know.

6) Responding to sexual demands by boyfriends

Girls did not know that they have a right to say "No" to the demand for sex from a boyfriend. They had thought it was the boy who has a right to initiate sex whether the girl liked it or not. After exposure to Cabanga Group sessions - the girls changed and took control of their sex life.

7) Participation in traditional programmes for young people

The participants from the Empangeni area of Zululand viewed the traditional adolescent programmes in a positive light. This usually includes an area based approach to preparing young people for responsible adulthood and includes the controversial practice of "*virginity testing*." Participants from the area endorsed these traditional activities on the grounds that they are organised within their communities and for those who wanted to participate. They felt it enhanced a sense of belonging and created opportunities for public commitment to abstinence.

5.3. Question 3: *What important knowledge about reproductive health, HIV and gender based violence did you gain from the programme?*

Participants were asked about the significant areas of increased knowledge about the key focus areas of the programme. They identified several areas which they believed reflected the greatest shift in knowledge and information.

1) Sexual practices

Group members shared that there had been a great deal of learning around sexual practices and knowledge of human reproduction including:

- Sexual practices and myths that make women vulnerable to pregnancy.
- Sex without a condom can spread STIs
- They now understood contraception and family planning and have discarded all contraception myths such as drinking Coca Cola or jumping up and down after sex to prevent pregnancies.

- They had gained greater understanding about the process of ovulation
- They had learnt about the importance of circumcision and encouraged male teenagers in their groups and churches to get circumcised.
- In dealing with strong sexual feelings – they accepted that masturbation is a healthy and safe alternative.

2) **Improved knowledge of HIV and its spread.** Participants felt that they had gained a lot of factual information about HIV and its spread and treatment protocols. Key areas of learning included the following:

- How HIV is contracted through blood contact and sexual intercourse.
- One participant accompanied a friend to the treatment compliance training for ARVs. She wanted to understand better the treatment compliance protocols and what information is shared in the learning sessions
- The participants all endorsed the importance of knowing one's HIV status and got tested regularly with their partners.
- The participants encouraged the view that being HIV positive is not a death sentence; one can live a long time with HIV as long as one looks well after oneself.
- Prejudice against HIV positive people was addressed in the groups. HIV positive people should learn not to isolate themselves, and the HIV negative people should make a real effort to accept and support people who are HIV+.
- The groups had discussed how to prevent contracting HIV AIDS when taking care of a sick person.
- Participants also understood about Post Exposure Prophylaxis and its importance especially following rape.
- It was important for people to know that an HIV positive person can give birth to a HIV negative baby if they follow advice from the clinic.

3) **Rape.** Participants focused a great deal in their groups on rape and women's rights As a result of participation in the programme - they had a broader understanding of rape and learnt that men are also raped.

- They did not know that forced sex by a boyfriend is rape and that a woman has the right to say "No" if she does not want to have sex.
- The participants had previously held the view that once a man had paid *ilobola*, he had a right to have sex with his wife anytime. They now realized that if there is no consent from the wife and a woman is forced to have sex - it can be regarded as rape.
- It came as a surprise to the group that men are also raped. It was felt that they should follow the same procedures and report it to the police.

- If a person is raped - infection of HIV and STIs can be prevented if early treatment is undergone. Rape victims need immediate medical attention and also counselling following the treatment.

4) Gender violence and abuse. The participants shared their learning in relation to gender violence and abuse. Some of the issues discussed included the following:

- Women sometimes accused men of rape when sex was consensual - this is a form of gender abuse. It is not uncommon for teenage girls to accuse boyfriends of rape when their parents found out they have been sexually active and this can cause serious problems in the community.
- Touching a person inappropriately without permission is abuse - court case can be opened.
- Participation in the programme helped people to know where to get help when sexually and physically abused.
- They had learnt the importance of encouraging women to report abuse by men. They noted that there was a tendency to suffer in silence for fear that men will withhold financial support to them and their children.
- Participants admitted that they had previously harassed and ridiculed gay people but after participating in the group they were more accepting of people in same sex relationships.
- There is a lot of stress and abuse in same sex relationships and because of the taboos around homosexuality - it is not easy for them to seek help.

5.4. Question 4: How did the programme increase knowledge on sexual reproductive health at community level? Were community services such as the social workers, clinics, the police and the hospital crisis centre better used?

A key focus area of the programme was to strengthen access to support for people who were victims of rape and gender based violence. The participants commented on how they had been liaising with key service providers in their areas.

1) Reproductive Health

Participants identified areas where participants themselves had changed their behaviour and were making greater use of availability support facilities.

- People now understood the importance of knowing one's own HIV status and a high percentage of participants are going for testing at the local clinics and service providers.
- One Ambassador from Newcastle has observed that in his group all boys are very active sexually, but what is remarkable is that they all

practice safe sex. Thus they are making good use of contraception available from clinics.

2) Social Workers

Participants felt that the programme had brought social workers closer to the communities as they are now able to refer cases needing specialized services and support to them. When the groups organise awareness campaigns - the social workers always participate and address the community on various topics such as teenage pregnancy, rape, etc.

3) Crisis Centres

Ambassadors have played a pivotal role in promoting the use of Crisis Centres in hospitals. The Thuthuzela Crisis Centre at Edendale Hospital in Pietermaritzburg has been promoted very effectively. In Newcastle and Pietermaritzburg - Ambassadors find the Crisis Centres very efficient because referred victims of gender based violence have access to nurses, counselors, social workers and psychologists in one centre. The centres also have a good working relationship with the South African Police services which facilitates easy referral.

4) Clinics

Participants have been able to address a number of problems experienced by young people when attending clinics. They gave examples as follows:

- In an area of low cost housing (France) there was a big challenge with regard to the availability of contraceptives for school going youth on a regular basis. The clinic is far from schools and school going youth have difficulties with bus fares. Ambassadors are in the process of addressing this challenge.
- In Sweetwaters, Ambassadors have formed a forum which includes stakeholders like the police, nurses and teachers which meets regularly to discuss teenage pregnancy and other related issues
- In Empangeni, there were initially problems in the clinic because nurses used to chase young girls away who had come for contraceptives. Parents exacerbated the problem because once they discovered that their daughters were sexually active they would simply tell them to go to the clinic without explaining to them the purpose of the visit. The Ambassadors requested the help of LifeLine management in addressing the problem. The situation has changed - teenagers now get their contraceptives without any hassles.
- Concerns have also been raised about the quality of counseling provided by Counselors in some centres. It seems that either poor training or a lack of supervision results in inadequate counselling which causes difficulties for clients and their families.

- A mini informal survey of clinic records at Sweetwaters showed a decrease in the number of teenage pregnancies and an increase in the number of teenagers who come for contraceptives.

5) SA Police Services

There was a general view that the quality of the service provided by the SA Police Services is not consistent. If a female reports abuse the response is prompt, but when a male is a victim of rape or abuse - they tend to ridicule him and pass derogatory remarks which leave the victim feeling humiliated. Participants felt that the police still need to be educated in this respect. In another community, the Police work well with Ambassadors during awareness campaigns and provide much needed security when there are marches.

5.5. Question 5: *If the programme was to be undertaken again, what should be changed?*

Given that the programme had been implemented between 2008 and 2010 - it was felt it would be helpful to give participants the opportunity to reflect on what in their view should be changed in future programmes.

- 1) **Increase the number of participants in the Cabanga sessions.** Although the 15 or more participants in Cabanga Clubs are encouraged to share the information with their friends - there is no guarantee that this happens. There is also a view that this is second-hand information and is not as effective as the group experience. In order to increase participation, each Ambassador could have two groups of 15 each and meet each group twice a month, which would imply that sessions will be held weekly. (This move would have financial implications for the project). One Ambassador from Sweetwaters increased the number of sessions to four times a week without expecting any remuneration to meet the enthusiasm of the participants. Even now after the formal termination of Cabanga Clubs, he still meets his group regularly though the focus has shifted to the discussion of community issues.
- 2) **Awarding Certificates of Attendance to Cabanga participants.** Certificates would serve as an incentive for participants who would have something to show at the end of the course. Participants, anticipating some material benefit from the course often ask what the program offers such as meals and food parcels etc. They believe the Certificates will be of value to participants as they would enrich their CVs.
- 3) **Formalising venues for sessions:** Participants pointed out that finding a suitable venue for meetings is a big challenge. Groups have been meeting at

the homes of Ambassadors. This is not an ideal arrangement because sitting space and chairs are limited. It also can also be somewhat intrusive for the family. Some families might not like to see their children going to a particular Ambassadors' home etc. Some members meet at the soccer ground and sit on bricks – which creates difficulties on rainy and cold days. Efforts to use the school as a venue have not been successful because school principals cannot take risks for security purposes.

A suggestion was made that LifeLine should intervene and involve Ward Councilors to secure permission for the use of community centres. In France - Ambassadors pay R50 per month (from their own pocket) for use of a community facility.

- 4) **Involvement of parents of Cabanga members.** In Sweetwaters - Ambassadors have started sessions where they teach parental skills to parents of members. They are also planning to start a dialogue which will involve members and their parents where they will be addressing the challenges which make communication between children and parents difficult.

5) **Group concerns and recommendations**

The participants raised some generalized **observations and issues of concern:**

- There are strong gender related issues around sexual practice. Boys from rural areas are resistant to safe sex practice - they prefer “*skin to skin sex*”. Girls tend not to be informed about reproductive health issues because any discussion of sex related matters is taboo. Thus they are very vulnerable victims of the boys who practice unprotected sex.
- Women who stay around taverns close their ears to the subject of practicing safe sex – they dismiss it as an elite practice. Sadly they also share sexual partners without any protection – making them a highly vulnerable to STIs, HIV and unplanned pregnancy.
- Participants feel concerned about the performance of some of the Counselors at Crisis Centres - Empangeni in particular. A lengthy discussion followed as there is a concern about what happens to those clients who test positive without having received proper counseling. Out of ignorance families can recommend traditional concoctions and clients can become very depressed and even suicidal.

- Sometimes parents refuse permission for children to attend Cabanga Clubs because they fear the outcomes of the very open communication. They are afraid that participants may share both how they on occasions they abuse their parents and how their parents abuse them. The parents feel that the dignity of the family may be blemished in the eyes of the wider community.

The participants also made the following recommendations:

- It was felt that perhaps a more senior person could observe some of the processes at the Crisis Centres unannounced. In this way unsatisfactory processes could be addressed.
- The heavy work load on some Counsellors needs to be reviewed as this also contributes to poor performance.
- Ambassadors must take responsibility to make LifeLine management aware of their difficulties to ensure they are addressed.
- There must be some means of promoting talents displayed by participants, such as those who are gifted in music, art, poetry, drama etc. as this would help increase the enjoyment of the programme and help further boost confidence.

5b. How would your life have been different if you had not participated in this programme?

Impilo yakho yayingaba namhluko muni ukuba awuzange ube yingxenye yaloluhlelo?

Participants identified ways in which their lives have changed as a result of participation in this programme.

- 1) **Emotions:** Members believe that one of the most significant aspects of the learning relates to being better able to deal with strong emotions. The training in anger management has been particularly beneficial – some even suggesting that it helped them not to commit suicide. Some cited how they are able to control their aggressive behavior which made them unpopular, and they might have resulted in prison sentences.
 - *“I used to be ill-tempered, but now I have learnt self control. I no more roam the streets at night; I only walk at night when I attend evening church services. I used to have many girlfriends, now I have only one. I’m now a teetotaler. In the past I used to drink alcohol excessively. I was very disrespectful, and I have changed”*
 - *“My life could have been in tatters if I had not joined Cabanga because I was very emotional and irrational. I would have taken decisions which I would have regretted. Since I did not know how to control my anger, I would have committed suicide long ago. I had many girlfriends and did not practice safe sex;*

I led a very reckless life. I was a heavy alcohol drinker, I have stopped the habit since being on this program"

- *"I was carrying a burden of a very bad experience I had in my life when I was in Grade 11. This experience caused a lot of anger which made me very temperamental. This affected my relations with other people negatively."(experience was not divulged)*
- *I could not forgive easily. I had a belligerent manner of communicating with other people. I have learnt to forgive and to communicate in a friendly manner as a result I have more friends.*

2) Behaviour problems: Participants acknowledged that many aspects of their behaviour had been unacceptable and destructive. They had been disrespectful, rude and incorrigible. They might have ended up being thrown out of their homes and living as vagrants on the streets. Participation in the training and in the discussions had helped them develop more acceptable ways of handling themselves in their families and community.

3) Reproductive Health Issues: As a result of their ignorance around reproductive health - they had previously engaged with multiple sex partners and practiced unprotected sex. The knowledge and information gained from the programme had enabled them to change their lifestyles and take greater responsibility for their own well being. If they had not participated in the programme - they might have ended up with STIs, HIV-AIDS and *"a number of illegitimate children that they would not have been able to support."*

Other comments relating to the changes include:

- *"Through peer pressure I became sexually active to please my friends. I have stopped trying to please my friends since joining Cabanga."*
- *"I had a weakness with women, I had many girlfriends. I would be having many children I wouldn't be able to support financially. Presently I have one child, otherwise I would be having more children"*
- *"I come from a polygamous family with all the related challenges. I used to be very emotional and had a bad temper. I would sulk for days on end without talking and eating. In Cabanga I learnt to confront my demons. I confronted my father who discriminated against his own children- giving preferential attention to one spouse and children to the exclusion of other spouses and their children. After an open discussion with my father, he changed his behavior and tries to balance his attention. I have also learnt control my temper and have learnt to relate well to other people. I now know how to share my feelings and problems with other people I trust".*

- 4) **Parental skills:** Participants conceded they were bringing up their children in a haphazard manner without any direction and relevant knowledge and information. This would have resulted in their children being trapped in similar challenging situations that they found themselves in without any knowledge or tools to change the situation.
- *“As a victim of teenage pregnancy, I would not have been able to learn all the parental skills I learnt in the Cabanga Clubs, and my child would have suffered the same fate I experienced. Now I am able to give my child the love and attention she deserves.”*
- 5) **Personality building:** Participants felt the programme had helped them develop self-esteem, self-confidence, life goals and social skills. Without these attributes they would have not been able to develop themselves, they believed they would have ended either *“accepting an empty, directionless life or would have ended in the gutters.”*
- *“I was self-centred and selfish. Now I have learnt people-skills and can communicate well with other people”*
 - *“Had low self-esteem and always wanted to please other people first. I have since learnt to first love myself.”*
- 6) **Greater focus in life:** Participants believed that a very important result of the programme was the shift in how they viewed “their life” Most conceded that originally they were directionless and did not have any vision of a positive productive future. Participation in the programme had given them greater focus and direction.
- *“I gained direction in my life. I have defined my goals, I want to study further as a teacher or social worker”*
 - *“I used to have about 6 or 7 girlfriends, and have since reduced the number to one because I was made aware of the dangers of unprotected sex. I have only one child, had I not joined the Cabanga Club I would be having more and would be directionless.”*
 - *“I would also be having more illegitimate children. I used to have lots of girlfriends now I have one. I would be in jail. My friends used to assault people at night after drinking heavily. Since joining the Cabanga Club I cut off ties with them.”*
 - (Input from a female participant) *“I would long be dead. I used to keep bad company – we would drink heavily and cause trouble at night fighting people using broken bottles as our weapons. I might also have ended as a hobo.”*

6. Discussion

6.1. *What makes this programme work?*

Internal reviews in different areas relating to this programme have all suggested that it is having a significant impact on the lives of the participants and to some extent their families and communities. The findings have been very similar – the most striking being the participant’s newfound sense of self, purpose in life and ability to take control of one’s destiny. This critical reflection done two years after the formal ending of the funded aspects of the programme suggested that the energy and commitment of the key participants has not waned. The bigger challenge is to identify what factors or combination of factors is contributing to its success. The discussion below attempts to identify some of the factors that may contribute to the programme meeting prevailing pressing needs of the target group.

6.2. *Social transformation in action.*

Essentially this is much more than a “*reproductive health and gender based violence*” programme. This has become a programme that while focussing on reproductive health and gender based violence has actually contributed significantly to *social transformation* as envisioned by the LifeLine “*Building Community Heart*” strategy. From the discussions it is clear that the programme has created the space for the development of the seven key social transformation values:

Individual values including:

- *Consciousness of self* – many participants commented on their growth of confidence and self esteem.
- *Commitment* – there was evidence of a real commitment of energy and emotional will to changing personal lifestyles for the better.
- *Congruence* – the changes and the views reflected in the workshop had a very authentic ring to them. Participants expressed themselves with sincerity often sharing painful past experiences and expressing happiness that they had learnt to “*let go*” and “*move on*” to a more positive future.

Group values including

- *Common purpose* – the group clearly discussed issues deeply and embraced changed behaviour to lessen their vulnerability. There was a lot of evidence of group members helping each other out and supporting one another.
- *Collaboration* – the group worked together and built relationships with key service providers including social workers and clinics. They encountered difficult problems but tried to collaborate as a group to solve them.
- *Embracing diversity* – the participants through their Cabanga Clubs created a platform where the different members could speak of their situation without fear of criticism. Clearly issues around polygamy, traditional practices, same sex relationships, alcoholism etc all came up and appeared to be openly and

constructively discussed. The experience also seemed to have provided opportunities for men and women to address issues of concern openly.

Societal value

- *Citizenship* - the link between self and the environment and the community were strengthened by the programme. Better networks with service providers such as social workers, clinics and the police were created. The programme also made participants realise they are accountable for their actions which led to them demonstrating greater responsibility to creating a safer more dignified and respectful community.

It seems that the participants have transformed their own lives and empowered themselves to make a more positive contribution in their families and communities. Through participation in the Cabanga Clubs there has been a growing collective consciousness amongst them *that they can change their own lives for the better of themselves, their family and their community*. The fact that the programme goes beyond the individual and successfully links participants with local service providers and addresses such critical issues as gender based violence, HIV and AIDS, and parenting suggests it is an exceptionally successful programme.

6.3. Resonance with traditional approaches

The programme also demonstrates some parallels with traditional structures and processes. It has elements of a peer group programme which resonates with traditional “age sets” in African society which have the responsibility of taking care of one another and ensuring orderly transition through adolescence to adulthood. Although there have been many distortions and criticisms of the practice of “*virgin testing*” - it is only a part of a wider traditional programme to prepare adolescent girls for responsible adulthood. In the more traditional areas participants appear to participate in both the Cabanga Group and traditional programmes.

6.4. Participatory approaches

The programme seems to be built on participatory approaches at a number of levels:

- Local leadership structures get involved in the selection of Ambassadors
- The initial situation analysis is undertaken by the Ambassadors
- The Ambassadors are encouraged to allow Cabanga Group participants to suggest topics for discussion or further learning.
- The groups seem to plan their own community programme of awareness and making contacts with local service providers.
- The learning sessions are very interactive and build on people’s knowledge and experience.

This focus on participation seems to leave group members energised as the group discussions encourage reflection at a personal, family and community level. It has

also enabled the programme to follow an issue led focus where the topics will always be relevant to the needs of the groups.

6.5. Availability of participants

South Africa has an overall unemployment rate of 25.2% and the third highest youth unemployment rate in the world with 51% of people in the age group 15-24 years currently unemployed. This suggests that there are very significant numbers of young people not having anything constructive to do on a daily basis. This programme with its regular meetings and discussions has thus provided a very useful activity to identify with. In a perverted way the vast number of unemployed people trapped in their home communities with little to do have provided a captive audience for the programme.

6.6. Building networks

A particularly useful aspect of the programme is the manner in which it links the groups with relevant service providers in their communities. This seemed to have benefited both the service providers and the participants. They appear to communicate more effectively and collaborate with good results on activities such as awareness programmes and community meetings.

7. Final Comments and Recommendations

This programme essentially sets out to address gender based violence and reproductive health. However, from the reviews and the critical reflection workshop it has gone much further than that and has demonstrated very effectively what can be achieved by adopting a *social transformation approach*.

It has demonstrated that despite unemployment, poverty, and the fragmentation and abandonment of many societal values – a somewhat disparate group of young people (in three very different areas of KwaZulu-Natal) can over a significant period of time (2008-2012) stick together and work for the common good of themselves and the society they live in. It suggests that there are numbers of young people that yearn to be engaged and empowered to fulfil a meaningful role in strengthening emotional wellness, and bringing peace and happiness in their own communities. The key to this seems to be the following:

- Carefully choosing Ambassadors
- Creating and *modelling* a very meaningful learning experience which achieves the following:
 - Focuses on their own sense of self and “*who they are*”
 - Helps them improve communication and listening skills and empowers them with basic conflict resolution skills
 - Empowers them with sound information on women’s rights, reproductive health, gender based violence and abuse

- Creates a learning experience which is respectful and non judgemental but helps them explore their diverse situations and experiences.
- Equips them with good facilitation skills
- Setting up the groups as platforms for open dialogue and sharing of information which over time becomes a well integrated support group for testing and sharing new attitudes and behaviours.
- Creating a network of support of other service providers at local level who they can work with to raise awareness and seek assistance from.
- Having access to mentoring and supervision from LifeLine.

The challenge now is how to build on these learnings so that the approach gains momentum and is adopted in new areas while at the sometime finding ways of sustaining groups already in existence.

Recommendations

- 1) LifeLine should make a conscious effort to build the key elements of the *social transformation approach* into all the programmes they develop. Perhaps this could be acknowledged as a major intention of the programme by incorporating it into the title e.g. *Building healthy relationships – a social transformation approach to reproductive health and gender based violence.*
- 2) In the areas that are strong such as the training it would probably help to have some flyers and posters that could be used at local level.
- 3) The recommendation from the workshop that it would help them to have formal venues for the Cabanga Club meetings should be explored.
- 4) The recommendation from the Workshop that LifeLine should give participants who attend regularly a “Certificate” should be considered.
- 5) The recommendation from the Workshop that there should be an outreach programme for the parents should be considered.
- 6) The two internal reviews have suggested that this is a unique programme with very encouraging results. However, those reviews have had limitations in their scope. It is important to have a more comprehensive evaluation so that:
 - Families and clients could be visited and interviewed
 - Meetings of Cabanga Clubs could be observed
 - Other stakeholders including community leaders could be interviewed.
 Such a document may help motivate for additional funding and for the programme to be expanded to other areas.

The commitment of LifeLine to continually review programmes and follow up programmes with critical reflection workshops such as this is to be commended. It creates opportunities to review programmes from the perspective of the participants so that future programmes can build on the experience gained.