



Health Economics and HIV/AIDS Research Division

**HIV/AIDS as a development challenge in South Africa:
*The responses of youth organizations
in KwaZulu-Natal province***

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Abbreviations

| | |
|----------|-------------------------------------------------------|
| AIDS | : Acquired Immune Deficiency Syndrome |
| AMYC/MYM | : African Muslim Youth Congress/Muslim Youth Movement |
| AZASCO | : Azanian Student Convention |
| ANCYL | : African National Congress Youth League |
| ARVs | : Anti – retroviral drugs |
| CPP | : Centre for Public Participation |
| COSAS | : Congress of South African Students |
| DoH | : Department of Health |
| DIT | : Durban Institute of Technology |
| HIV | : Human Immunodeficiency Virus |
| HEARD | : Health Economics and HIV/AIDS Research Division |
| IYB | : Inkatha Youth Brigade |
| KZN | : KwaZulu-Natal |
| NYC | : National Youth Commission |
| NNPY | : New National Party Youth |
| PMTCT | : Prevention of mother – to – child transmission |
| PPSA | : Planned Parenthood of South Africa |
| SAYC | : South African Youth Council |
| SUN | : Sustainability United |
| SRC | : Student Representative Council |
| STIs | : Sexually Transmitted Infections |
| UNAIDS | : The Joint United Nations Programme on HIV/AIDS |
| UNICEF | : United Nations Children Fund |
| UDMY | : United Democratic Movement Youth |
| VT | : Valley Trust |
| WHO | : World Health Organisation |
| YMCA | : Young Men Christian Association |

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Executive Summary

Like any developing country in the world, South Africa is heavily confronted with the HIV/AIDS pandemic. With the legacies of both the colonial and apartheid regimes, mainly economic and political oriented, today HIV/AIDS present itself as a new battle that the South Africans ought to tackle heads on. Debates on government policies have never ceased to exist. To a larger extent these debates seem not to be in the government's liking, specifically the issue of anti – retroviral drugs for all infected persons. This issue has not been appropriately endorsed or considered by the government to such an extent that confrontation between the state and civil society continues. With young people getting infected and affected by HIV, hopes for the future seem very bleak.

With the above background in mind, a study on youth organisation's responses was conducted to locate the extent to which youth organisations and their leadership have responded to the challenges posed by the HIV/AIDS epidemic. Special reference was paid to youth organisations in the province of KwaZulu-Natal.

The study investigates HIV/AIDS as a development challenge in South Africa. The aims of this study were to:

- a) Identify the strength and weaknesses of the youth organisations' HIV/AIDS interventions
- b) To assess the link that exists between youth organisations and developmental initiatives by government in KwaZulu-Natal.
- c) To assist KwaZulu-Natal youth organisations to develop coherent interventionist strategies to deal with the pandemic.
- d) To identify appropriate links to be made between youth organisations and civil society organisations on, specifically on HIV/AIDS related issues.

The key questions asked of these organisations were:

- a) Is there a discernable approach underlying the different interventions?
- b) What are youth organisations doing to combat the spread of the pandemic?
- c) How effective are the intervention strategies of youth organisations?

- d) What support are youth organisations receiving from other organs of civil society?

Interviews were conducted with representatives from youth organisations sampled for the study. The study was qualitative and exploratory in nature. A sample of 25 youth organisations participated in the study.

Key findings

- Youth wings of national parties (website analysis) showed that HIV/AIDS interventions were limited to general policy statements and speeches on HIV/AIDS.
- The majority of youth organisations (21) had links to provincial and national structures.
- 6 (26%) of youth organisations cited HIV/AIDS as a major challenge they are faced with.
- HIV/AIDS was the direct focus of programmes and projects of 4 (18%) of the organisations.
- Condom use the focus of programmes and projects of 1(2%) of the organisations.
- 2 (8%) organisations did not have HIV/AIDS programmes
- HIV/AIDS was on the agenda of vast majority 23 out of 25 organisations, but only 9 (36%) organisations stated that they had HIV/AIDS policies and strategies; programmes and monitoring and evaluation mechanisms. The other 14 organisations had an ad hoc approach to the way they addressed impacts of HIV/AIDS on their constituencies.
- 9 organisations had coherent approach to tackling HIV/AIDS in a sense of well articulated position of a need to adopt a multi-pronged approach, and policy strategies and programmes that reflected this approach
- Education campaigns in different forms were the main activities of youth organisation programmes.
- 6 of the 9 organisations that stated they had monitoring and evaluation mechanisms to assess their programmes could substantiate their claim.

The findings affirmed my central argument that youth organisations' responses to the challenges posed by HIV/AIDS are inadequate.

CHAPTER ONE

Introduction

This study focuses on youth organisation responses to the HIV/AIDS pandemic in South Africa. It examines the responses of 25 youth organisations, primarily those located in KwaZulu-Natal but including some that are national and umbrella organisations. The general categories were:

- a) National coordinating organisations
- b) Religious organisations
- c) Rural and urban organisations
- d) Political organisations

The focus on youth organisations in KwaZulu-Natal because this was an exploratory study. The aims were to:

- a) Identify the strength and weaknesses of the youth organisations on HIV/AIDS strategies
- b) To assess the link that exists between youth organisations and developmental initiatives by government in KwaZulu – Natal.
- c) To assist KwaZulu-Natal youth organisations to develop coherent interventionist strategies to deal with the pandemic.
- d) To identify appropriate links to be made between youth organisations and civil society organisations on, specifically on HIV/AIDS related issues

The key questions asked of these organisations were:

- a) Is there a discernable approach underlying the different interventions?
- b) What are youth organisations doing to combat the spread of the pandemic
- c) How effective are the intervention strategies of youth organisations?
- d) What support are youth organisations receiving from other organs of civil society?

The general purpose was to use the research to provide basis for broader discussion and action amongst youth organisations on how they can improve their interventions on HIV/AIDS.

Rationale of the study

The assumption was that youth organisations and other organs of civil society have a critical role to play in the fight against the HIV/AIDS pandemic. The concern is that South African youth organisations' HIV/AIDS interventions do not appear to be effective. This situation is in contrast with concerted actions taken by youth leaders elsewhere on the continent, notably Uganda. Uganda is widely credited with being successful in responding to the HIV/AIDS pandemic. The report by the Cable News Network (1999:1), for example, noted:

“Uganda has one of the most aggressive, and some say most effective, AIDS control programmes in the world. Uganda's effort has produced a decline in the rate of AIDS in the country at large, and at one major hospital, from 24.5 percent of its patients in 1989 to 13.4 percent in 1998. The focus is specifically on young people, who have the fastest- spreading rates of HIV infections and AIDS in the world. The Ugandans say what they've learned about educating young people about safe sex is you have to speak their language, using music, videos, radio and newspapers to spread the message.”

The general argument is that South African youth organisations are conscious of the significance of the HIV/AIDS pandemic, but lack coherent interventions. This however, does not discredit all interventions by South African youth organisations to arrest the spread of this pandemic. Organisations such as Soul City¹ and Love Life² have made a significant mark on youth and HIV/AIDS. This however, does not seem to be adequate. One of the objectives of this project, therefore, was to find out why youth organisations seem to play a limited role in combating HIV/AIDS.

I began this project from the premise that youth organisations in KwaZulu-Natal have not adequately addressed the HIV/AIDS epidemic. To assess this premise I found it appropriate to establish what youth organisations have been doing and are currently doing with regard to addressing HIV/AIDS. Following that was an attempt to

¹ A South Africa NGO that was established in 1992 to harness the power of mass media. More information can also be obtained at: <http://www.soulcity.org.za/>

² Love life looks into issues that affecting the South African youth today. These issues include; HIV/AIDS, STIs, relationship and general educational campaigns and awareness. For more information go to: <http://www.lovelife.org.za/kids/index.html>

investigate the role of the youth organisations in HIV/AIDS related programmes; specifically in this province and generally, to provide a basis for designing programmes for youth organisations elsewhere in this country.

The study was motivated by the idea that youth organisations have a significant role to play on HIV/AIDS related matters. The concern is that much 'education' on HIV/AIDS to date has been to shock people by broadcasting statistics and figures on rates of infection, rather than to carry out systematic and coherent programmes that assist to reduce rates of infection. Little is gained from showing that the youth is the most affected and infected group in our society if there are no means to involve and empower them, particularly to deal with the impacts that this pandemic can have in their daily lives. The study was also motivated by the message that was communicated by the African National Congress Youth League (ANCYL) president, Malusi Gigaba (2001:1) who noted that,

“We are the first generation to live in a free society. We still have the challenges of building non-racialism; non-sexism, democracy and a better life for all but new tasks have emerged... Now we must fight against preventable diseases... like HIV/AIDS and poverty linked to the disease. Our next phase is to support and care for those affected or infected by HIV/AIDS using young people as volunteers”

Similar sentiments were shared by the Chairperson of the National Youth Commission (NYC), Jabu Mbalala through the Daily News (12/01/2000),

“As youth we have a responsibility to educate ourselves about HIV/AIDS. AIDS is not a myth or a rumour but a reality that will affect us all in some way in our lifetime. We may not be able to see HIV/AIDS with the naked eye but unless we join the fight we will be affected by it in some way.”

Mbalala's and Gigaba's sentiments highlighted the need for strategic intervention on HIV/AIDS pandemic in South Africa.

CHAPTER TWO

Research Methods

This study adopted qualitative research and exploratory methods. 35 youth organisations were sampled and consulted for the purpose of the study. Not all organisations sampled for the study responded in time. Only 25 organisations managed to respond to the questionnaire (see appendix 1). The categories of participants were as follows;

- a) Out of 2 National co-coordinating organisations only 1 participated and that was the South African Youth Council National. The National Youth Commission was invited but never participated.
- b) 5 Religious organisations were represented
- c) Out of 25 organisations, 19 were from rural and urban areas
- d) There were no political organisations or youth wings because all those that I approached declined to participate.

There are a number of reasons as to why these organisations never participated (See limitations of the study).

Interviews and group discussions were conducted with organisations' representatives.

A questionnaire (Appendix 2) was developed to cover the following:

- a) History or background of the youth organisation
- b) Links with other provincial and national organisations/institutions
- c) Main challenges facing these organisations
- d) Programmes or activities for youth development
- e) Purpose of projects
- f) Programmes addressing the HIV/AIDS epidemic (general strategy)
- g) Content of HIV/AIDS - related programmes and or projects
- h) The duration of projects
- i) Effectiveness of these programmes
- j) Feedback from constituencies

Data sources

In addition, to interviews and use of existing literature, a ‘consultative’ workshop was also conducted (see Appendix 3). The aim was to allow youth organisations to comment on the preliminary research findings. This workshop was attended by 26 youth organisation representatives (see Appendix 4).

Limitations of the study

The general process of this research project was not a smooth one. Difficulties encountered included:

- a) Time constraints
- b) Limited scope for generalising the results of this study to the rest of South Africa
- c) Out of 35 youth organisations earmarked for the project few responded promptly to the questionnaire.
- d) Difficulty in arranging meetings with youth organisation representatives, since they have a lot to do on behalf of their organisations.
- e) Sampling difficulties. With the assistance from South African Youth Council³ I managed to get a database of youth organisations. When phoning youth organisations, using that list I discovered that some numbers had changed or no longer existed.
- f) Some organisations do not have faxes and phones which made establishing contact difficult.
- g) I also had a problem with organisations which were registered under SAYC, yet when approached in the research they declined to participate because they did not consider themselves to be youth organisations.
- h) The lack of co-operation by the National Youth Commission and political party youth organisations despite repeated attempts to include them.

As an exploratory study, it was limited in scope, and in sources of data. Notably, it could not measure empirically the scope and the effectiveness of youth organisation’s interventions. However, it was able to provide preliminary assessment (via interviews

³ The South African Youth Council is a national umbrella organisation to which most youth organisations in South Africa are affiliated.

and discussions) and to check the results (via the consultative workshop). Accordingly, the study should be seen as providing a basis for youth organisations to reflect on what they are doing and how they might contribute further to combating HIV/AIDS. Furthermore, it provides a basis for future empirical research.

Youth and HIV/AIDS

"I will never forget my first trip to Uganda in 1988, to find out about AIDS in Africa. Coffin makers lined the road from the airport to Kampala. AIDS in Africa is wiping out tens of millions of men, women and children. I have seen the pain, grief and suffering - in the poorest slum areas and in the wealthiest districts. AIDS in Africa hurts everyone, but children are always the most vulnerable. Born with HIV from their mothers, infected through breast milk, or in the past through unsafe medical destitute, having to build their own homes, grow their own food, and care for younger brothers and if we all pull together."

Dr Patrick Dixon Founder ACET International Alliance

Research has shown that Africa is devastated by the HIV/AIDS pandemic. The truth is, not only that this pandemic is a serious public health problem, but it also poses a threat to Africa's development. The recent report by Avert (2004) suggests that:

"Sub-Saharan Africa is the region of the world that is most affected by HIV/AIDS. An estimated 26.6 million people are living with HIV/AIDS and approximately 3.2 million new infections occurred in Sub-Saharan Africa in 2003. In just the past year, the epidemic has claimed the lives of an estimated 2.3 million Africans. Ten million young people (aged 15-24) and almost 3 million children under 15 are living with HIV. An estimated eleven million children have been orphaned by AIDS in Sub-Saharan Africa."⁴

Similar sentiments have been raised by UNICEF (2001):

"The world's young people are threatened by HIV/AIDS. Of the 40 million people living with HIV/AIDS, more than a quarter are aged 15 to 24. Half of all new infections now occur in young people. Young people are a vital factor in halting the spread of HIV/AIDS, and many of them are playing a significant role in the fight against it. But they, and children on the brink of adolescence, urgently need the skills, knowledge and services to protect themselves against becoming infected with HIV."

⁴ For more information on updated statistics see, <http://www.avert.org/worldstats.htm>, and <http://www.unaids.org.za>

According to the report by Kiragu, (2001):

“Of the over 60 million people who have been infected with HIV in the past 20 years, about half became infected between the ages of 15 and 24. Today, nearly 12 million young people are living with HIV/AIDS. Young women are several times more likely than young men to be infected with HIV. In nearly 20 African countries 5% or more of women ages 15 to 24 are infected. Such statistics underscore the urgent need to address HIV/AIDS among youth.”

What seems to be a major concern is that the youth, particularly young women, still remains a deeply affected group (UNICEF, 2002). There are a number of reasons as to why they are most vulnerable. The World Health Organisation (2003:1) has recently documented some these factors:

- Women are more susceptible than men to infection from HIV in any, due to biological factors – the greater area of mucous membrane exposed during sex in women than in men; the greater quantity of fluids transferred from men to women; the higher viral content of male sexual fluids; and the micro tears that can occur in vaginal (or rectal) tissue from sexual penetration. Young women can be especially susceptible to infection.
- Gender norms, for example, in many places, it is acceptable for men to have more sexual partners than women, and for older men to have sexual relations with much younger women. In combination with the biological factors cited above, this means that, where heterosexual sex is the main mode of HIV transmission, infection rates are much higher among young women than among young men.
- Forced sex which many women (and some men) experience at some point in their lives, can make HIV transmission more likely since it can result in more trauma and tissue tearing.
- Women may remain ignorant of the facts of sexuality and HIV/AIDS because they are not ‘supposed’ to be sexually knowledgeable, while men may remain ignorant because they are ‘supposed’ to be sexually all-knowing.
- Women may want their partners to use condoms (or to abstain from sex altogether), but often lack the power to make them do so.
- Women may be unwilling to learn and/or share their HIV status for fear of violence and/or abandonment if the results turn out positive.

- Healthcare systems (perhaps especially those undergoing reforms to lower costs) may add to this burden by depending more and more on such unremunerated caretaking, on the assumption that this is a role that women ‘naturally’ fill.
- Prevention of mother-to-child-transmission (PMTCT) efforts may fail if they focus narrowly on women and their biological role in passing along the illness. Beyond their roles as fathers, many men control both family finances and their wives' ability to use health care. Failure to engage men can thus leave women unable to participate in PMTCT programmes even if they, themselves, are convinced. Furthermore, PMTCT programmes that treat women only as the bearers of children, and not as individuals who are themselves deserving of treatment, risk both violating women's human rights and failing to attract as many participants as possible.

The general result reported by UNAIDS (2004:93) is,

“Young people between the ages 15-24 are both the most threatened – globally. Accounting for half of the new cases of HIV – and greatest hope for turning the tide against AIDS. The future of the pandemic will be shaped by their action...Experience proves this indifferent ways...”

Concerns raised by international agencies highlight two issues:

- a) Youth as the most vulnerable and affected group
- b) Youth’s vital or central role in combating the spread of HIV

It was in view of the above concerns that this study was conducted. While the focus of the study was on youth organisation responses, focus was also placed on HIV/AIDS as a developmental challenge.

When the first AIDS case was recorded two decades ago, very few foresaw the impact this pandemic would have on people’s lives. Today, young people seem to be the primary victims of this pandemic (USAID, 2003). For instance, in his observation, Kiragu (2001:1) noted that:

“Today's young people are the AIDS generation. They have never known a world without HIV. Millions already have died. Yet the HIV/AIDS epidemic among youth remains largely invisible to adults and to young people themselves. Stopping HIV/AIDS requires comprehensive strategies that focus on youth. Of the over 60 million people who have been infected with HIV in

the past 20 years, about half became infected between the ages of 15 and 24. Today, nearly 12 million young people are living with HIV/AIDS. Young women are several times more likely than young men to be infected with HIV. In nearly 20 African countries 5% or more of women ages 15 to 24 are infected. Such statistics underscore the urgent need to address HIV/AIDS among youth.”

Recent data on South Africa reveals that young people continue to die of AIDS. The Reproductive Health Research Unit (2004:1) reported:

“...Among HIV positive 15 – 24 year olds (roughly 10% of all young South Africans in this age group), 77% were female. Seventy five percent of HIV positive individuals were age 20 – 24 years and 95% were African. By location, 59% of HIV positive youth live in urban areas (urban formal and informal) and 41% live in rural areas (rural informal and farms). Among those age 20 – 24, HIV positive youth were significantly less likely to have completed high school compare to HIV negative youth (23% vs. 41%...”

The point worth emphasising is that HIV/AIDS presents itself as a major challenge to South Africa, (Dorrington et al, 2002) and, specifically, youth must confront that challenge.

CHAPTER THREE

South African Youth Organisations responses to HIV/AIDS

This section presents the results of the research. Generally speaking, the findings suggest an inadequate commitment amongst youth organisations to confronting the HIV/AIDS pandemic. Systematic intervention against the pandemic could be expected from political youth organisations who are aligned to national political organisations which have highlighted the threat of the epidemic to the nation. I refer to youth organisations such as Azanian Student Convention (AZASCO), African National Congress Youth League (ANCYL), Inkatha Youth Brigade (IYB), New National Party Youth (NNPY), Democratic Alliance Youth (DAY), United Democratic Movement Youth (UDMY), Student Representative Councils (SRCs), Umzinyathi District Youth Movement, Valley Trust (VT)⁵ and the National Youth Commission (NYC). They were all consulted and furnished with the questionnaire for the purpose of the study, but none of them responded to this research. Whatever the reasons for their non – participation, they are all organisations that are, in principle, well informed about the threat and impacts of the epidemic on youth. Indeed, they were mobilised in the early 1990s to view the threat seriously by the liberation movement. I refer to the Maputo (1990) and the Lusaka (1991) Conferences where HIV/AIDS was raised as a singular threat to political liberation by party leaders in exile, and to initiatives they took to stimulate civil organisations country to take action (Stein and Zwi 1990; Schneider, 1998).

However, their websites reveal very little evidence of strategies and programmes. I discovered one thing common amongst these organisations. They all seem to be very concerned about HIV/AIDS, but they all tend to voice this through policy speeches, unlike organisations like Soul City and Love Life who have comprehensive HIV/AIDS programmes. There seem to be a common trend or pattern amongst youth organisations, when looking on HIV/AIDS related matters. Their websites do not provide adequate information as to how they tackling this problem. What is apparent is that HIV/AIDS is always mentioned in passing in their speeches.

⁵ Valley Trust represents a huge proportion of youth organisations in rural areas of KwaZulu-Natal.

For instance, in the recent ANCYL Congress (2004) noted that:

“HIV/AIDS remains a serious challenge to South Africa's youth. We need to increase the support for NGOs that work in combating the spread of this pandemic among the youth. The Youth League should continue its efforts for voluntary testing, awareness, providing support and care for those infected and affected in order to halve the number of new infections by 2010.”

Likewise, the recent address by the Inkatha Freedom Party – Youth Brigade, Provincial Secretary, noted that:

“We believe that it is important to encourage strong families and communities, positive role models, individual and communal self-reliance and the promotion of social justice. Government must encourage and promote healthy lifestyles and high moral values among the youth, and focus on the immediate and long-term dangers of alcoholism, unwanted pregnancies, HIV/AIDS, prostitution, drug and other substance abuses.”

The point worth emphasizing is that though HIV/AIDS is mostly noted in these organisations' addresses and briefs, their homepages do not feature HIV/AIDS prominently. When mentioned in their speeches, HIV/AIDS is always cited amidst other items such as poverty and unemployment.

This does not downplay positive effort made by organisations that do not have any links with national organisations. Ironically, there were under-resourced organisations that had managed to develop have concrete programmes (e.g. Masiphile Siphilise Youth Drama and Life Skills, Youth Centre (Inanda and Youth for Success).

Links with other structures

21 organisations stated that they had working relations with national and provincial structures. The relationships involved having common policies, obtaining financial assistance and general support. Those with links are listed below:

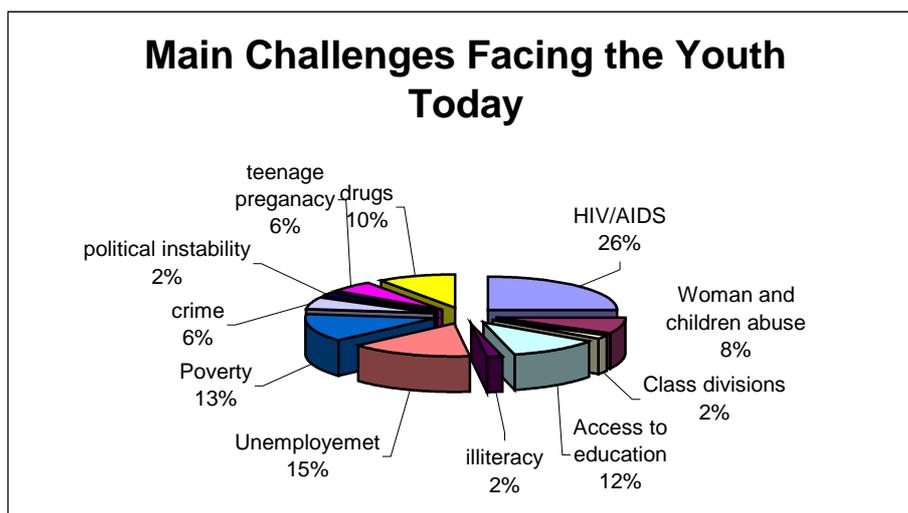
- Student Representative Councils; University of KwaZulu (UDW and Durban), Mangosuthu Technikon and Durban Institute of Technology are affiliated to a national structure called the South African University Student Representative Council (SAU – SRC) .

- Religious organisations; Youth for Christ, Jewish Youth Movement, Muslim Youth Movement, Bakti Yoga Student Movement and Young Men Christian Association who stated that they had relationship with national and international organisations whose primary focus were community development work.
- Finally, the remaining organisations such as Love Life, Soul City Masiphile Siphilise Youth Drama & Life Skills, Sustainability United, Society for Family Health, Student Movement, South African Youth Council, Youth AIDS Organisation, Youth for Success and Siyakhula Youth Development Initiative stated that they have relationships with national and provincial structures such the Department of Health and Social Development (DoH and Soc. Dev)

Stated Challenges

The interviews with the youth organisation representatives’ elicited an array of responses to the challenges facing their organisations. Figure 1 below shows what youth organisations believe are a central concern to their activities.

Figure 1: Main Challenges cited by the organisations



The general result was that HIV/AIDS featured predominantly as the most important single factor, but this was amidst a host of other identified challenges or issues of

direct concern to the youth organisations. The point to make is that the result is actually not surprising, for national opinion polls regularly record that crime, poverty, unemployment, women and child abuse are primary concerns to the public. Nonetheless, the result was surprising in the sense that HIV/AIDS was viewed as a major challenge by so few of the respondents.

HIV-related programmes

There was no pattern in responses to the question on whether organisations had HIV/AIDS programmes. For instance, 8 of 25 of respondents stated that they had programmes to combat the spread of the HIV/AIDS.⁶ These programmes are carefully crafted, monitored and evaluated to ensure sustainability. The majority 17 noted having had an array of HIV/AIDS-related programmes and projects, such as information dissemination, drug abuse campaigns, peer counselling, life skills, workshops, concerts, street campaigns, pamphleteering, civic education, skills development, mainstreaming, youth empowerment or capacity building exercise. However, the scope and content of programmes of the 17 organisations were not as comprehensive as the other 8. I discuss this in more detail below.

Criterion for intervention

This section assesses youth organisations' HIV interventions. I assess their various interventions on the basis of six criteria:

1. General approach
2. Existence of policies and strategies
3. Purpose
4. Content
5. Duration and coherence
6. Effectiveness

⁶ Love life, Soul City, Young Men Christian Association (YMCA), New Foundation Youth Organization, Sustainability United, Society for Family Health, Muslim Youth Movement and Planned Parenthood Association of South Africa.

General Approach

Only eight organisations had defined approaches to planning and implementing their interventions; (Soul City, Love Life, Sustainability United, YMCA, PPSA, Muslim Movement, (YMCA) and Youth Centre-Inanda). Six of these organisations had interventions focused directly on combating HIV/AIDS. Two organisations integrated HIV/AIDS into their programmes and projects. For instance, for Soul City,

“HIV and AIDS seem to be central to all our material. Soul City works from the understanding that HIV and AIDS cannot be addressed in isolation and that it needs to be addressed within a broader context of development.”

Likewise, PPSA respondent noted,

“We have comprehensive policy interventions on the following aspects; HIV/AIDS, peer education programme, life skills, health sexuality, STD’s and creative decision making”

HIV/AIDS policies and strategies

When asked about policies and strategies, only 8 out of 25 youth organisations reported that they had policies and strategies to inform HIV/AIDS programmes.⁷ For instance, YMCA representative noted that:

“We are having a huge range of policy intervention programmes at YMCA. Our policy evolves around the following aspects; youth development training, adolescent reproductive health, prevention, stigmatisation, counselling, support groups, arts and culture.”

Likewise, with Soul City, their respondent noted that:

“Our television and radio drama always include HIV and AIDS stories. We have several policy booklets dealing with issues of HIV/AIDS. We participate in outreach activities of other organisations, which targets youth (e.g. school gathering and fun days.”

On the other hand, Student Representative Councils did not have coherent policies to combat the spread of HIV/AIDS. For example, when asked about policy documents related to HIV/AIDS, the University of KwaZulu-Natal (Durban campus) SRC representative stated that, *“at the moment we have none.”*

⁷ Soul City, Love Life, Sustainability United, Youth for Christ, YMCA, Society for Family Health, Youth Centre (Inanda) and PPSA

Programmes and projects

23 respondents stated that their organisations conducted HIV/AIDS-related programmes and projects. However, very few of them were conducting projects that focused specifically on HIV/AIDS. 9 organisations (those who had strategies and policies) reported that they were running projects focused on HIV/AIDS. 2 organisations reported that they did not have HIV/AIDS programmes and these included SRC Durban campus and Durban Institute of Technology (DIT)).

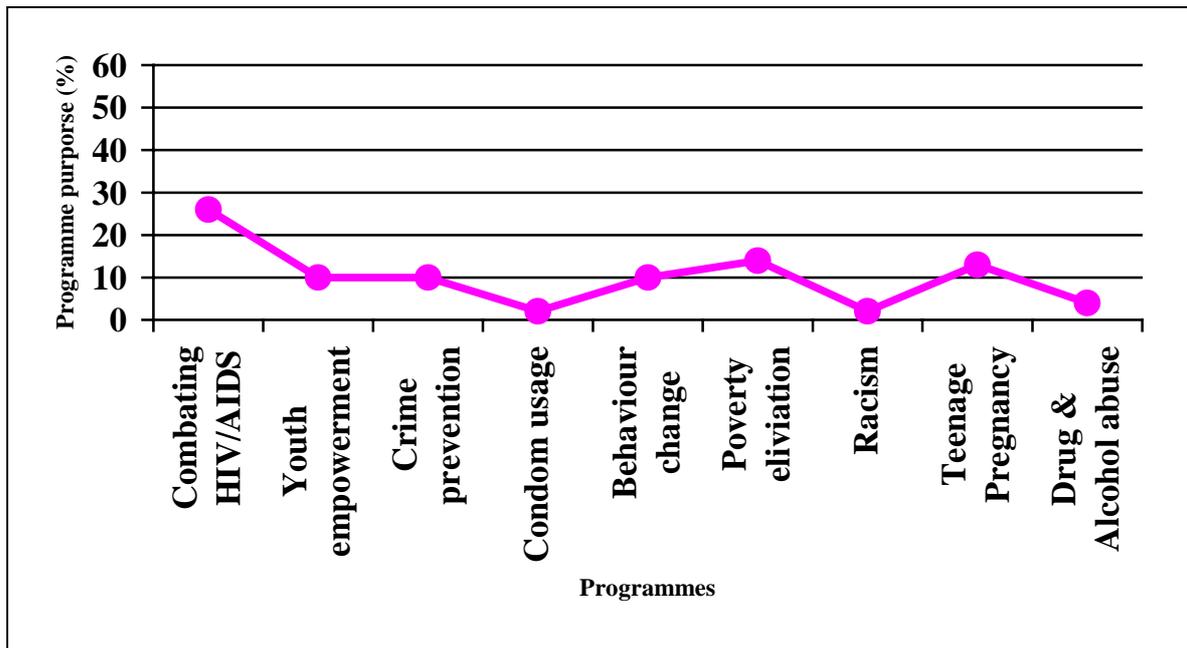
Purpose of programmes

The general finding was that HIV/AIDS was one component of programmes. For instance, tackling poverty was the single most important purpose cited by respondents, followed by HIV/AIDS, but other agenda were also incorporated into many organisations' programmes. Figure 2 illustrates the focus of all programmes reported by respondents; 26% combating the spread of the HIV/AIDS pandemic, teenage pregnancy 13%, 12% poverty alleviation 14%, behaviour change 10%, crime prevention 10%, 10% youth empowerment, 2 % of the respondents viewed racism and discrimination as still a major threat to South Africa's economic development, 2%, drug abuse 1% and condom usage 2%.

Tackling HIV indirectly was clearly on the agenda of many organisations, but indirectly in programmes to change behaviour, reduce poverty and teenage pregnancies and to encourage the use of condoms. However, these responses affirm the result discussed earlier, that HIV/AIDS was not the primary concern of many youth organisations. Furthermore, the very low weighting given to use of condoms suggests that the organisations do not agree with the national government programme to encourage condom usage.⁸ In other words, that result suggests that government policy is not actually reaching or being taken on by many youth organisations.

⁸ The low weighting may be due, however, to 'condom use' being seen as inappropriate to the broader aims of some (e.g. religious). youth organisations

Figure 2



However, it must be noted that respondents generally asserted that their programmes could and should serve several aims. For instance, the Sustainable United chairperson noted that:

Poverty and environment, and health are very closely related. By improving environmental conditions, it is likely that poverty and health care will be enhanced. To facilitate information exchange between grassroots environmental groups and national and international environmental events and groups, and vice-versa; a conduit for information exchange between international processes and local groups. To empower young people to undertake environmental projects to make people, especially young aware of their environmental rights as contained in the S.A. Constitution to increase the awareness of young people on sustainability issues, especially the link between social, environment and economic issues to increase the number of young people taking action on environmental issues.”

Similarly, for the Masiphile Siphilise Youth Drama and Life Skills,

“Our specific purpose lies with developing sustainable development programmes, that in essence will equip the youth with knowledge and skills that will enable them to be self – reliant and self supportive. Our programmes also focus on the impact that HIV/AIDS have in our society and try to develop sound intervention strategies.”

For the Society for Family Health, the purpose of their programmes evolves around

- a) Promoting safe sex
- b) Changing negative attitude against condoms
- c) Encouraging healthy dialogues amongst peers
- d) Changing risky behaviours of young South Africans

The key result was that HIV/AIDS was a direct focus of a minority of the organisations.

Content of HIV/AIDS related programmes

When asked about the content of their HIV/AIDS-related programmes, 22 of the organisations reported the general content of their programmes. A variety of activities were cited, including; ‘talk shows’; ‘HIV/AIDS day’; ‘AIDS’; ‘gospel bash’; ‘door to door campaigns’; peer education; puberty; pre- and post-counselling; communication skills; support groups, education condom usage, ‘living positive campaigns’; care givers training programmes; decision making skills education; anti-retroviral drugs education sex and sexuality education and general stories on HIV/AIDS. Generally, the programmes were directed at educating youth. However, though education was the practical purpose of the programmes, those organisations that had clear policies and strategies (8) deliberately ran a variety of education programmes, whereas for the others the programmes appeared to be ad hoc.

Duration and coherence of HIV/AIDS interventions

All the organisations have operated in the context of the epidemic. Therefore it is reasonable to expect that most would be knowledgeable of HIV/AIDS and be concerned about the epidemic’s effects on youth. Accordingly, I expected more evidence of concerted policies and programmes to confront the epidemic. However, a surprising result was that the younger organisations rather than the older organisations tended to be more organised..

Effectiveness of programmes

Most (22) organisations stated that their programmes were effective⁹. However, only 8 organisations stated that they had monitoring and evaluation mechanisms.¹⁰ In other words, the research revealed that very few organisations had developed their interventions to the point of being able to regularly assess what they were doing. This study could not measure effectiveness of programmes independently. However, in interviews I explored the issue of how organisations measure their own performance.

Generally respondents stated that they relied on feedback from their respective constituencies. When pressed further, only 6 out of the 9 respondents cited that they had monitoring and evaluation procedures. Three were particularly vague in their responses. For example, one respondent stated;

“They appreciate what we are doing and say that it has changed their lives and have armed them with more information, advices and counselling skills. They say it has helped addressing the rate of pregnancy, crime.”

Similarly the respondent of the second organisation noted that, *“the youth is no longer ignorant about HIV/AIDS”*

The other suggestion by a respondent was that;

“They appreciate what we doing for them and say that it has changed their lives, behaviour and have armed them with information, advices and counselling. They say have assisted in addressing crime, HIV/AIDS, STIs, and support groups formation.”

Conclusion

In summary, the research revealed the following:

- Youth wings of national parties (website analysis) showed that HIV/AIDS interventions were limited to general policy statements and speeches on HIV/AID.

⁹ Two organisations did not have HIV programmes and did not respond to the question relating to this issue

¹⁰ Africa Muslim Youth, Soul City, Love Life, Sustainability United, Youth for Christ, YMCA, Society for Family Health, Youth Centre (Inanda) and PPSA

- The majority of youth organisations (21) had links to provincial and national structures.
- 6 (26%) of youth organisations cited HIV/AIDS as a major challenge they are faced with.
- HIV/AIDS was the direct focus of programmes and projects of 4 of the organisations.
- Condom use the focus of programmes and projects of 1(2%) of the organisations.
- 2 (8%) organisations did not have HIV/AIDS programmes
- HIV/AIDS was on the agenda of vast majority 23 out of 25 organisations, but only 9 (36%) organisations stated that they had HIV/AIDS policies and strategies; programmes and monitoring and evaluation mechanisms. The other 14 organisations had an ad hoc approach to the way they addressed impacts of HIV/AIDS on their constituencies.
- 9 organisations had coherent approach to tackling HIV/AIDS in a sense of well articulated position of a need to adopt a multi-pronged approach, and policy strategies and programmes that reflected this approach
- Education campaigns in different forms were the main activities of youth organisation programmes.
- 6 of the 9 organisations that stated they had monitoring and evaluation mechanisms to assess their programmes could substantiate their claim.

The conclusion that can be reached at this stage is that;

- The results affirm my argument that youth organisations in South Africa are not doing enough to address the affects of the HIV/AIDS on the youth
- While the majority stated that HIV/AIDS was on their on their agenda, closer inspection revealed that a minority actually confronted the issue in a systematic manner
- The youth wings of political parties appear not to be providing appropriate leadership
- The majority of organisations had links to provincial and national structure, but did not seem to influence the extent to which organisations addressed HIV/AIDS

- Likewise, whether organisations were rural or urban did not affect or influence the extent to which these organisations addressed HIV/AIDS. Only in the case of religious organisations did there seem to be influence of religious codes on aspects of HIV intervention (e.g. condom usage)

CHAPTER FOUR

Workshop Data

The results of the research affirmed my general argument that responses of youth organisations in South Africa have been inadequate. Recognising that this was a contentious argument, part of the research involved arranging a workshop to assess the validity of the results. Respondents to the interviews and other organisations were invited to this workshop. 32 youth organisations were invited to participate; 25 being those that participated in the study, other being interested individuals from other youth organisations. The workshop was on 27th July 2004 and 26 number representatives attended. (See Appendix 5)

The intentions of the workshop were spelt out to organisations through a package (sent earlier) of resource material that included; a preliminary report, aims and objectives of the research project, project description and the workshop programme. At the workshop I made a brief presentation of interim findings (Appendix 6). The findings presented were not as detailed as is recorded in this report, but provided an overview of how the results affirmed my central argument. Organisations' representatives were then asked to comment on the presentation and the report itself. It is very interesting to note that they did not contest the results in general, but focused on the challenges that they faced. The sections below record the key issues raised by the participants (for a detailed account to the workshop proceeding (see appendix 5)

HIV/AIDS and literacy

HIV/AIDS information does not reach all members of civil society due to the methods used by organisations and educators. Participants reached consensus on the need for youth organisations to bear this in mind and generally (amongst those present) for their own organisations to redefine their strategies. It became apparent that the majority of organisations felt strongly against the current conventional ways of educating public on HIV/AIDS. For them organisations ought to do the following:

- Simplify HIV/AIDS-related information, for the benefit of all citizens in the settlements where they work in order to reach illiterate individuals

- Relate HIV/AIDS issues to broader sexual and reproductive health issues. A need to consider all forms of knowledge, specifically the indigenous knowledge systems.

Lack of coordination amongst organisations

Participants acknowledged that organisations' interventions fail, or not as effective as intended, because they often, do not have structures or mechanism to co-ordinate activities. Difficulties with developing capacity to co-ordinate programmes included:

- A general lack of a networking framework. Organisations tend to work independently – and in competition with other organisations. Notably, they often see themselves as competing for funds and for attention of the youth.
- Duplication of programmes by organisations was noted as another problem. Organisation often conduct the same or similar activities amongst their constituencies

Political factors

Participants voiced their concern (in lively debate) that their organisations' efforts were overly politicised, particularly with regard to HIV/AIDS. For instance, meetings and plans can be and, often, are derailed or delayed if some attendees arrive wearing political party T - shirts. Participants agreed that there was a compelling need for organisations to de – link party and organisational politics from HIV/AIDS interventions.

Financial constraints

Participants also raised the issue of a general lack of financial resources amongst youth organizations. For some of the organisation the primary focus lies with continually having have access to financial resources. Some organisations noted that financial insecurity and need to focus attention on obtaining funds and/or working with very limited funds, directed their attention and energies away from designing and implementing HIV/AIDS intervention.

Lack of Programmes

Finally, there was a general acknowledgement that the programmes of many youth organisations were not very effective. Their primary argument was that most youth organisations lack proper monitoring and evaluation therefore it is very difficult to conclude that they are effective.

Conclusion

While it was useful to have the results affirmed, the workshop discussions drew attention to the realities of running organisations and implementing programmes. Notably, many organisations were not well funded and faced practical difficulties in reaching their constituencies.

In noting the challenges they faced, the participants actually revealed further limitations of the South African youth organisations responses to HIV/AIDS. While I appreciate the practical difficulties, they noted that one cannot discount other problems such as lack of co-ordination, competitive ethos between organisations, and the lack of networking.

Furthermore, the workshop highlighted the role of youth organisations as interlocutors between youth and national (and international) HIV/AIDS education and awareness campaigns and, the problems this poses. Notably, the participants drew attention to the problem that seemingly well designed and useful resource material does not necessarily work when applied to a locality or particular communities.

CHAPTER FIVE

Conclusion

The principal aim was to investigate the extent to which youth organisations have responded to the challenges posed by the HIV/AIDS pandemic. Youth organisation representatives were used as principal informants for the study and, as an exploratory study, the focus was on KZN youth organisations. Out of 35 youth organisations that were contacted to participate, 25 agreed. In addition, one national organisation, the National Youth Commission and a range of other organisations were consulted. To gather data, I used both group discussions and interviews and finally, the consultative workshop.

The research was guided by the following key research questions:

- a) Is there a discernable approach underlying the different interventions?
- b) What are youth organisations doing to combat the spread of the epidemic in South Africa?
- c) How effective are the interventions of youth organisations?
- d) What support are youth organisations receiving from other organs of civil society?

With regard to whether there was a discernable approach underlying the different interventions, the research showed there was not. Not only did HIV/AIDS not feature as a principal focus of many youth organisation activities, the majority in the sample did not have coherent strategies and programmes. The research showed that youth organisations were aware of the challenges posed by HIV/AIDS, but their interventions were largely ad hoc. Furthermore, very few of the organisations developed their programmes to the point of being able to assess them properly though the inclusion of monitoring and evaluation procedures.

The majority of the organisations stated that their programmes were effective. However, only 8 organisations stated that they had monitoring and evaluation mechanisms. Furthermore, participants at the consultative workshop agreed that many interventions were not effective.

Most organisations stated having relationships with national and provincial structures. These range from policy to financial assistance. There was also an additional question, what policy frameworks do youth reflect or base their activities. Unfortunately this question was not fully addressed by respondents. While the research related youth organisations' activities to general HIV/AIDS policy of the government, there was not enough time to explore in detail issues such as the extent to which organisations with links to national and provincial organisations followed or used policies of the latter, and where and how local-level actions reflected or departed from policies of national level organisations. In addition, lack of response from national bodies such as NYC and youth wings of political parties restricted capacity of this study to answer this question

With regard to the other key questions, the research revealed:

- a) There was no sustained, definitive focus of youth organisations on HIV/AIDS.
- b) There were many forms of interventions, but there was little coordination between and within organisations.
- c) There was not much evidence of effective support and guidance for organisations that have parent bodies (e.g. political organisations).
- d) Many programmes by youth organisations are possibly not very effective.
- e) Finally, it seems as if there are a lot of good intentions by youth organisations that are not realised in practice.

In light of the above, the conclusion is that South Africa youth organisations' responses to HIV/AIDS are inadequate. With regard to the aims of the study, it has revealed strength and weaknesses of youth organisations. Some organisations are actively confronting the epidemic, but few appear to have effective programmes.

Lessons learned

The primary lesson learned for the study is that South Africa youth organisations should be doing more than they are doing to combat the epidemic. In considering what could be done, South African organisations would do well to take a cue from Uganda, as I outline below.

The collaborative effort of the Ugandan civil society can be seen as the key to the decline of the HIV infections in that country. When commenting about the significance of the HIV/AIDS pandemic, the Ugandan AIDS Commission Secretariat (1993:1) noted:

“HIV/AIDS is the most serious health problem in Uganda today and the leading cause of death for adults: about 1.5 million people (10% of the total population and 20% of sexual active men and women) are estimated to be infected with the HIV/AIDS virus... Nearly 80% of those affected with HIV are between the ages 15 and 45...”

However, the Ugandans managed to combat their national epidemic. Susan Kopp (2003:1) has noted that,

In 1991, 15% of pregnant women in Uganda tested positive for HIV, but by 2001 that number had fallen to 5%. The African Medical and Research Foundation reported that in one urban area of Uganda, sexual activity among 13-16 year olds plunged from a level of almost 60% in 1994 to less than 5% in 2001...”

Part of the reasons for Uganda’s success in rolling back the epidemic is to be found in the way the youth were mobilised. As a practical co-coordinating step to deal with the HIV/AIDS, the Uganda Cabinet passed the National Youth Policy. The idea was twofold; to prepare the youth to practically deal with AIDS scourge and to structure systematic HIV/AIDS intervention. Subsequently, a National Youth Council was established in 1993 with a principal aim of mobilising the youth against AIDS (The Monitor, 2003).

The council developed and applied practical life skills campaigns to 15 districts in Uganda. Furthermore, purposeful youth organisations were formed. One was the Straight Talk Foundation, whose HIV/AIDS programmes and campaigns were properly coordinated and administered. To ensure the sustainability and intensity of their programmes this organisation further developed the following programmes; Straight Talk and Young Talk, out reach programmes including school visits, Straight Talk Clubs and Primary Teachers sensitisation workshops and the radio programmes. The general method to achieve these included; the use of person to person interviews, observation, focus group discussions, mail questionnaires, group administered questionnaires, health centre tracking and tracking of the letter database (Straight Talk Foundation, 2004).

The parallels in South Africa are Love Life and Soul City. They are good initiatives, but they are not centrally directed. They are supported by the Department of Health, but not

by a National AIDS agency as is the case in Uganda. Similarly, in South Africa, the National Youth Commission¹¹ (NYC) which was formed in 1996 is not the same as in Uganda. It was established to address issues pertaining to youth development. Unfortunately this structure has never lived up to expectations. For the past 8 years NYC has been criticised by organs of civil society for failing to tackle youth issues head on. This concern has been raised recently in the ANCYL Congress (2004) that;

“The National Youth Commission has played a leading role in formulating a national youth policy to guide and direct government in addressing issues that affect young people. However, 8 years on, serious questions need to be asked about the effectiveness of this institution including its role in relation to other bodies like the South African Youth Council and Umsobomvu Youth Fund. Young people must therefore engage and answer the question, "Is the National Youth Commission in its current configuration an adequate mechanism to respond to the challenges facing young people in the current context?"

Clearly the above quote suggests that there is a level of discontent to some organisations about the general operations of the NYC. The concern is that it is failing to tackle youth issues head on or to provide an effective leadership role on youth-related matters.

In contrast, the Ugandan experience reveals the value of youth organisations being given clear direction as well as developing a clear focus themselves. In other words, youth organisations linked to national or umbrella bodies need to be guided by the latter. Hence, in South Africa it is vital that organisations such as the NYC and SAYC provide direction as much as voice criticism. Likewise, it is vital that youth wings of political parties provide more substantive inputs. The same imperative can also be required of other civil umbrella organisations (e.g. national structure of Jewish, SRCs and Muslim Youth Movement).

Furthermore, the research has indicated that South African youth organisations have had limited success in mobilising the country's youth. Part of the problem lies in the activities of youth organisations themselves. There seems to be a general lack of focus; for instance, few organisations see HIV/AIDS as a major challenge.

¹¹ National Youth Commission. 1997. National Youth Policy. Government of the Republic of South Africa. Pretoria. Available at: <http://www.nyc.gov.za/>

CHAPTER SIX

Recommendations

The study is aimed at providing guidance for youth organisations. Its purpose is to stimulate debate within youth organisations. The recommendations below are a starting point.

- Youth organisations linked to political parties have made policy speeches encouraging youth to combat HIV/AIDS, but in addition to not doing much themselves, their messages do not seem to be having a great effect on youth organisations. Accordingly there is a need for youth leadership to reassess their roles and responsibilities.
- This research has suggested that youth organisations' HIV/AIDS interventions are not very effective. Furthermore, few organisations monitor and evaluate their interventions. Therefore, these organisations should consider asking their constituencies about what projects are and are not useful and, if possible, set up monitoring and evaluation mechanisms.
- The research revealed that many organisations have links to government and provincial organisations, but it did not manage to draw out information on the actual content and nature of these links. This may be a limitation of the study itself, but also the lack of information provided by organisations coupled with the evidence of organisations not really hearing or acting upon government and national youth representatives messages, suggests that substantive and effective links have yet to be made.
- The research showed that many organisations do not see HIV/AIDS as the major challenge, but as one issue amongst others. Furthermore, there is indication that youth organisations believe that HIV/AIDS should not be addressed in isolation and/or address the challenge indirectly (e.g. through various forms of education campaigns). The problem is that the interventions are generally ad hoc as a result. However, in line with the recommendation above on monitoring and evaluation, organisations could improve their efforts by simply developing clearly thought out strategies and policies with their constituencies.

- The workshop highlighted the lack of co-ordination and networking between youth organisations on HIV/AIDS-related issues. In addition, national umbrella organisations such as the national SRC for university students and the National Youth Commission do not appear to be providing the leadership in this matter. And yet, the experience from Uganda suggests that this is a key activity of and for youth organisations, if they are to contribute effectively to combating HIV/AIDS amongst their constituencies. Therefore, as noted earlier, there is place for South African youth leadership to re-assess their roles and responsibilities. On the ground, there is scope for youth organisations to avoid duplication of their work.
- At root, the study recommends that youth organisations acknowledge the evidence of international, national and local organisations that youth are the most HIV/AIDS infected and affected group of the population. That is the starting point for them to find ways to improve their contributions to the struggle against the epidemic in South Africa.

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APPENDIX 1

List of participating organisations

1. Africa Muslim Youth
2. Soul City
3. Youth in Action
4. Westville Youth Centre
5. New Foundation Youth Organisation
6. Muslim Youth Movement
7. Congress of South African Students
8. SRC-Mangosuthu Tecknikon
9. SRC-UDW Campus
10. SRC-Durban Campus
11. SRC-DTI
12. Youth for Christ
13. Youth Centre (Inanda)
14. Planned Parenthood of South Africa
15. Asiphephe Youth Development
16. Young Men Christian Association
17. Love Life
18. Masiphile Siphilise Youth Drama & Life Skills
19. Sustainability United
20. Society for Family Health
21. Bakti Yoga Student Movement
22. South African Youth Council
23. Youth AIDS Organisation
24. Youth for Success
25. Siyakhula Youth Development Initiative

APPENDIX 2: Questionnaire –posted and used in interviews

1. When was this organisation formed? (If possible please provide a short history)

2. Do you have any formal links with national organisations/government? (Please outline)

3. If there are no formal links with these organisations, has your organisation considered or tried to establish links in the past; if no why not?

4. As a youth organisation what do you perceive are the main challenges in South Africa?

5. What are your programmes or activities for youth development?

6. What is the specific purpose of programmes/project/activity?

7. Do any of your programmes address HIV/AIDS? (Outline general strategy)

8. Describe the actual content of HIV/AIDS related activities.

9. For how long have these activities been conducted? (Month/year start dates)

10. Have you been able to access the effectiveness of your HIV/AIDS related activities in organisation membership? (If so, how? if not –please identify constraints to do so).

11. What feedback have you had from youth recipient on these interventions?

12. Are there any other organisations that work with your organisation on HIV/AIDS related issues?

APPENDIX 3: Programme for the Consultative workshop

Health Economics and HIV/AIDS Research Division (HEARD)



Invitation to Workshop

| |
|------------------------------------------------------------------------------------------------------------------------------|
| <p>HIV/AIDS as a development challenge in South Africa: The responses of youth organisations in KwaZulu-Natal</p> |
|------------------------------------------------------------------------------------------------------------------------------|

OBJECTIVES: *The purpose of this workshop is:*

- a) To familiarise youth organisations with the nature of this research
- b) To get a feedback from youth organisations on interim results of the research
- c) Identify gaps in the current project and areas for future research
- d) Establish firm contacts for future youth research projects in the province.
- e) Assess the research report, in order to:
 - Identify its strength and weaknesses of youth organisations on HIV/AIDS strategies
 - Assess the link that exists between youth organisations and developmental initiatives by government in KwaZulu-Natal.

To enable youth organisations to share experiences on interventions to contain the HIV/AIDS endemic.

OUTCOMES: *As a result of participating in the workshop delegates will be better able to:*

- Understand the significance of the HIV/AIDS pandemic within their organizations and communities
- Identify leadership roles and responsibilities to actively combat the spread of the HIV/AIDS pandemic
- Obtain information of the HIV/AIDS and its impact on society.
- Take steps to share knowledge with other institutions and community organisations in their community so as to assist in the struggle to combat the pandemic
- Take innovative and practical steps to respond to some aspect of the challenges posed by this pandemic, and sustain their commitment to responding proactively.

| WORKSHOP DETAILS | |
|--------------------------|-----------------------------------------------------------------------------------------------------------------------|
| Date: | 27 July 2004 @ 09h00 (half day workshop and lunch will be served) |
| Venue: | Diakonia Centre, 20 St Andrew's Street, Durban, 4001 |
| Closing Date: | Please RSVP by 19th July 2004 |
| To apply contact: | Velma Bedderson at email: bedderson@ukzn.ac.za or tel (031) 260-2980 |

Prior to the workshop, preliminary findings of the project will be disseminated to all the organisations sampled for the project. This is to allow organisations to make significant and informed input during the workshop and will enable us to jointly develop youth organisation's responses to the HIV/AIDS pandemic. For further information contact Nkosinathi Ngcobo(Researcher) on tel(031)260-3083 or email: ngcobon14@ukzn.ac.za

| A P P L I C A T I O N F O R M | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------|--|
| Name: | | | |
| Organisation: | | | |
| Position/Title: | | | |
| Postal Address: | | | |
| Tel: | | Fax: | |
| Email: | | | |
| Vegetarian: | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| Please return completed application form to: Velma Bedderson @ HEARD Tel.: (+27 31)260-2980, Fax: (+27 31) 260-2587, e-mail: bedderson@ukzn.ac.za | | | |

Youth Workshop Agenda

Tuesday 27 July 2004

8:00 – 9:00 am

Registration

Chair

Samuel Braimah, Senior Researcher

(HEARD)

9:00 – 9:15 am

Welcome and Introduction

Prof. Timothy Quinlan, Research Director

(HEARD)

Session 1

9:15 – 9:45 am

HIV/AIDS as a development challenge in South Africa: The responses of youth organizations in the KwaZulu-Natal Province

Presenter: Nkosinathi Ngcobo (HEARD)

9:45 – 10:15 am

Discussions

10:15 – 10:30 am

Tea Break

Session 2

10:30 – 11:15 am

Report discussions (in designated groups)

11:15 – 12:00 pm

Feedback from group discussions

12:00 – 1:00 pm

Lunch

1:00 -1:15 pm

Wrap-up and synthesis

1:15 – 1:45 pm

Closing Remarks

Appendix 4: Workshop Review

1. Were you satisfied with the communications and logistics for the course?

| | | |
|---------------|------------------|----------------|
| Not satisfied | Fairly satisfied | Very satisfied |
| | | |

2. Were you satisfied with the accommodation, meals and teas?

| | | |
|---------------|------------------|----------------|
| Not satisfied | Fairly satisfied | Very satisfied |
| | | |

3. Were you satisfied with the workshop venue?

| | | |
|---------------|------------------|----------------|
| Not satisfied | Fairly satisfied | Very satisfied |
| | | |

4. How detailed were the workshop objectives?

| | | |
|---------------|------------------|----------------|
| Not satisfied | Fairly satisfied | Very satisfied |
| | | |

5. How detailed were the resource materials provided on the workshop package?

| | | |
|--------------|-----------------|---------------|
| Not detailed | Fairly detailed | Very detailed |
| | | |

6. Do you have a clear understanding of the results pathway - inputs, outputs, outcomes and impacts?

| | | |
|-----------|--------------|------------|
| Not clear | Fairly clear | Very clear |
| | | |

7. Do you have some insight into the role of youth on HIV/AIDS awareness initiatives within the context of KZN?

| | | |
|----------------|--------------|--------------|
| Little insight | Some insight | Good insight |
| | | |

8. Do you have a clear understanding of socio - economic development and HIV/AIDS?

| | | |
|-----------|--------------|------------|
| Not clear | Fairly clear | Very clear |
| | | |

9. Do you feel equipped with the practical skills to develop sound responses against the HIV/AIDS impact?

| | | |
|--------------|-------------------|---------------|
| Not equipped | Somewhat equipped | Well equipped |
| | | |

10. Do you feel equipped with the information and examples to develop a program activity on youth and HIV/AIDS?

| | | |
|--------------|-------------------|---------------|
| Not equipped | Somewhat equipped | Well equipped |
| | | |

11. What things did you like most about the workshop?

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12. What things did you like least about the workshop?

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| |

13. What suggestions do you have for future research on HIV/AIDS and youth?



**Health Economics and HIV/AIDS Research
Division
University of KwaZulu-Natal, Durban**

**Workshop Report:
Youth Organisations' Responses to
HIV/AIDS**

August 2004

By Ms. Kimendhri Pillay

INTRODUCTION

The “Youth Organisations’ Responses to HIV/AIDS” workshop organised by Health Economics and HIV/AIDS Research Division (HEARD) took place on Tuesday, 27 July 2004. Thirty-two organisations were invited to participate whilst twenty five representatives actually attended (see appendix 1). The workshop was aimed for the participant youth organisation representatives to provide feedback to research findings from HEARD researcher Nkosinathi Ngcobo. This research was conducted prior to the workshop on the above topic. Outlined below is the feedback received from the workshop.

The workshop was divided into three sections (see appendix 2). The first session began with a presentation by Nkosinathi Ngcobo (see appendix 3), which was followed by questions addressed to him that were raised by the floor. It was noted that there was no criticism of the research results but rather a response to the findings. Here the participants shared other co-existing debates they ardently supported. Many of these debates dealt with issues of HIV/AIDS. The first problem the youth organisations mentioned was that HIV/AIDS literacy neglects the layperson and the illiterate. Secondly, the co-ordination of the various organisations working together on issues, for example, to curb the AIDS pandemic is almost non-existent. Thirdly, general comments regarding obstacles in youth organisation initiatives such as politics, an age criterion in leadership, over enthusiasm and avoidance of the topic HIV/AIDS were raised.

There was then a tea break that was followed by the second session where participants were divided into three groups. They were allowed forty-five minutes for discussion whilst assisted by one HEARD facilitator per group. The discussion entailed matters arising from the previous session or they could elaborate on other challenges their youth organisations are faced with. A volunteer from each group then presented the discussion from their respective groups. Thereafter participants broke for lunch and returned for the third session where issues already raised were reinforced.

HIV/AIDS LITERACY AND ITS APPLICATION CHALLENGES

Literacy for the Layperson

Firstly, information on HIV/AIDS is often too complicated for the layperson to access it easily and secondly illiteracy makes it difficult to disseminate such information. This results in HIV/AIDS literacy not reaching everyone, but instead reaches a portion of the targeted group. A suggestion was that youth organisations should therefore rethink their strategies and simplify HIV/AIDS information for the communities they serve including the illiterate.

Non-User Friendly Information

HIV/AIDS literacy programmes are designed with the assumption that resources and funds are readily available. Another participant added that condom distribution and AIDS education are essential community tools that organisations are expected to employ in curbing the pandemic. However, the relevant information is not “simplified” from the top to be passed onto the communities. Thus community organisations are responding to genuine community needs but in a fragmented manner as most of the information is not making its way down to the grassroots level.

Indigenous Knowledge

Indigenous knowledge often exists in predominantly oral form. In this workshop indigenous knowledge was viewed as a vital means of disseminating HIV/AIDS literacy. The methods used to conduct HIV/AIDS literacy by the youth organisations to curb the AIDS pandemic is not fully effective and needs to be revisited to incorporate indigenous knowledge.

THE OBSTACLES OF CO-ORDINATING YOUTH ORGANISATIONS

Introduction

A problem was aired that there is a lack of co-ordination between the different organisations offering HIV/AIDS literacy. So what were the actual problems in not being able to get a co-ordinated action?

Competition for Funding and Power

There is plenty of funding for AIDS initiatives, which creates competition amongst organisations that wish to secure funding. Professional, well resourced organisations deliberately form barriers between themselves and other less resourced organisations. This is due to the former having “trade secrets” and who wish to prevent the other organisations from finding out their secrets and copying them. They fear the loss of funds that may then be channelled away from them and towards their competitors. One participant viewed networking as absent because popularity and power is sought after so some organisations/individuals do not wish to share information with other organisations.

The solution: Firstly the strategy of youth organisations ought to be to perform AIDS awareness and prevention methods etc. for the intention of serving the community rather than being funds, popularity or power driven. Secondly, through networking, organisations can help one another and not compete as they share the same challenges.

Political Affiliations

Political affiliations pose as another obstacle for co-ordinating youth organisations. One participant felt that AIDS is not without politics as detected in his experience of working with HIV/AIDS support groups. Certain support group members are politicised as they attend support group meetings wearing Treatment Action Campaign (TAC) t-shirts etc. Some support groups ban members from wearing ‘political’ shirts.

The answer was that political affiliations must be put aside and real issues need to be dealt with. Besides, people should not use HIV/AIDS to play political games. Organisations should especially not allow parties to favour one over the other like TAC, NAPWA etc. Youth groups should attempt to stay neutral and not blindly follow their party leaders.

The Way Forward

Firstly, it was suggested that organisations need to separately address social issues such as poverty, teenage pregnancy and AIDS etc. Instead of haphazardly addressing these issues, organisations need to develop a co-ordinated approach to dealing with these related issues. Secondly another participant viewed the linking up with other organisations to be the responsibility of the people and youth organisations that state they want links. Thirdly, a challenge was further posed for institutions such as HIVAN and HEARD to co-ordinate organisations and facilitate or initiate the process of organisations helping one another. It was believed that institutions focus little on youth organisations and should look at coordinating their initiatives and problems.

OTHER GENERAL COMMENTS

Other comments or brief discussions dealt with youth organisations leaders not being taken very seriously, politics interrupting their initiatives, organisations biting off more than they could chew as well as religious codes refusing HIV/AIDS interventions.

Not Old Enough

Some community members blatantly interrogate the status and knowledge of a youth leader. Moreover there are certain people who are granted a high status in a community and therefore have authority in that particular community, but are often not part of the youth but much older. Young individuals are considered not as knowledgeable as their older leaders on matters including HIV/AIDS. The result is

that youth leaders are less favoured by their communities than the older leaders, making the youth interventions less effective than expected.

Politics

It was asserted that politics featured strongly in certain youth organisation initiatives with negative results. One participant stated that some development councillors do not necessarily understand the meaning of “development”. References are sought from these councillors prior to initiating a development project, but when the funding is secured, politics arise which hinders the projects success rate.

Curbing Over Enthusiasm

Many organisations tend to readily accept the challenge of having many interests but not specialising in any. These organisations should perhaps focus on one HIV/AIDS issue such as “advocacy” or “prevention methods” etc. This focus must become their speciality and then they would be better equipped to judge the effectiveness of their initiatives. They are over enthusiastic and take on too many AIDS related issues and thereafter cannot cope with the load. Rather specialise on one AIDS related issue and do not duplicate what other organisations do. Societies and provinces vary from one to another and what works for one community may not necessarily work for the other.

Religion Assists or Hinders in Curbing the Pandemic?

It was noted that Uganda brought back religious values as a tool to curb HIV/AIDS and was a success. However it was a concern that some religious sects preach against condoms, so religion may not be the absolute answer in our society and era. Radical promotion of condoms was viewed as a solution by one participant. AIDS was also viewed as the irresponsibility of individuals so it was the attitudes of individuals that needed to shift.

FEEDBACK FROM GROUP DISCUSSIONS:

Listed below are the discussions of the three groups in their report back to the other participants in the workshop.

Group one-

Limitations of Research:

- The opinions of individuals from the communities whom the youth organisations serve should have been sought after. Reason being that the youth organisation members may have been selective as to how they respond to the research questions so as to not be viewed in a negative light.
- It appeared as though mainly prominent youth organisations featured and less prominent organisations were absent.

Youth Organisations Research Issues:

- Often feedback of research does not go back to the community who are unclear as to why they were researched in the first place
- Research fatigue is faced by the over researched communities who eventually become reserved and withhold vital information from the researcher.

Funding Problems:

- There is sometimes an influence of sponsors who dictate policy regulations so sponsors may not allow the researcher free reign of the research.
- Some sponsors have expectations such as a requisite number of beneficiaries of initiatives conducted. If the target number of people is not reached, sponsors then withdraw funds from the organisation.

Lack of Commitment:

- There is a lack of commitment of youth in organisations who tend to seek benefits first prior to actually working. These youth pose as a challenge to work with.

AIDS Literacy:

- Simplify the information on HIV/AIDS related issues for the layperson.
- Sexual and reproductive health is often excluded in AIDS education which is problematic as they cannot be separated.

- Indigenous knowledge is often excluded. Such local mediums could be used to disseminate information to communities. Organisations should encourage indigenous knowledge in creative AIDS literacy.

Capacity Building:

- Organisations should provide capacity building to its members.

Religion Verses Real Social Problems:

- Some religious organisations focus predominantly on religion and exclude issues that really affect the youth like AIDS, teenage pregnancy etc

Misrepresentation of Communities' Needs:

- Some organisations do not listen to the needs of the communities they are researching or working with but think on their behalf which results in misrepresentation of needs.

Group two-

Lack of Resources such as:

- Funds
- Cars for outreach programmes
- Skills for instance proposal writing to secure funds.
- Human resources or expertise

Redundancy/ Duplication of Strategies in the Various Organisations is Created Through:

- Competition between organisations
- A lack of communication between the organisations
- Donors dictating the focus of organisations' initiatives

Trade Secrets are the Result of:

- Organisations being more business orientated than serving the community.
- Fear of shared funding.

Politicisation is Evident:

- When there is manipulation of HIV/AIDS for political reasons
- Where there are power struggles and gate-keeping by elites.

Lack of Co-ordination Occurs When there is:

- Undefined roles of central co-ordinating body
- A lack of umbrella bodies to help new/ up and coming organisations
- Weak central structures

The Way Forward-

There is a Need For:

- Depoliticising HIV/AIDS
- A strong umbrella body
- A strong grassroots organisation to monitor and hold organisations accountable for their actions
- A forum to bring together organisations to chart a way forward

Group three-

Role of Donors Assisting Youth Organisations Should be to:

- Provide reasonable limitations
- Provide clear but non-limiting directions for initiatives

Lack of Youth Organisation Programmes Due to:

- The youth needing new innovative ideas that captivates their target constituencies.
- Programmes lacking effectiveness

- Organisations being directed to use their training manuals that become dependent on manuals which could hinder one's creative thought processes.
- The youth lacking support and continuous assessment

Organisations have a Need:

- For sustainable programmes
- To encourage voluntary work
- To work beyond the finance issues
- For youth to have an interest in youth organisations

How do Youth Organisations Keep Youth Interested?

- Encourage more outreach programmes as donors need to see an active organisation
- Raise the profile of youth organisations in the community they serve.
- Link up with social workers
- Change mindset in organisation so as to not think of the money first
- Change the method of learning within the organisation
- Have the organisation employees and/or volunteers to adhere and listen to what the people want.
- Have an HIV/AIDS Youth Camp where youth interact, communicate and learn from one another. However Youth camps can prove to be problematic. For example sleepovers expose youth to irresponsible sexual behaviour and are an uncontrollable situation.

Organisations Should Ensure that they:

- Execute programmes that benefit all people
- Identify places that are affected the most
- Communicate with other organisations
- Encourage the Department of Health to have a database of all organisations
- Produce reports of how funds are being used and the programme should be a success

- Promote creativity with youth which does not mean being fancy but saying, “My group is stuck, what can I do to move out of this?”
- Encourage ongoing debates amongst the youth

CONCLUSION

The participants input for this workshop was vital in creating relevant, innovative debates around Nkosinathi Ngcobo’s research on Youth Organisations’ Responses to HIV/AIDS. It is hoped that the participants continue such debates and challenge their respective youth organisations and even others to meet the standards they suggested in the workshop discussions such as linking with organisations instead of competing with them, resort to creativity rather than only book knowledge in HIV/AIDS literacy etc. HEARD greatly appreciated the youth organisation participants valuable contribution.

APPENDIX 6: List of participants at the workshop
LIST OF WORKSHOP PARTICIPANTS AND CONTACT DETAILS

| First Name | Surname | Title | Organization | Tel | Fax | E-mail |
|-------------------|-----------------------|----------------------------------------------------------------------------|------------------------------------------|---------------------------------|----------------------------------|----------------------------|
| Ibrahim | Bofelo | Secretary General | Africa Muslim Youth Congress | (031) 306-2427 | (031) 304-6375/ (031) 3046335 | amyc@mandla.co.za |
| Donique | de Figueiredo | Soul Buddyz Club Coordinator | Soul City | 011 643-5852 | (011) 6436253 | doniquedf@soulcity.org.za |
| Lucky | Dubazane | Vice-Chairperson | New Foundation Youth Organisation | (031) 703-2359 | (031) 704-1275 | |
| Khumbulani | Hlongwana | Junior Social Science Researcher | HIVAN | (031)2685815 (031) 2098883 | (031) 209-8883 | khumbulanih3@hivan.org.za |
| Xolani | Khehlo Mdadane | Chairperson | New Foundation Youth Organisation | (031) 7032359/ (073) 1967875 | (031) 7032358/ (031) 7041275 | |
| Munira | Memela | Gender Desk Co- ordinators | Muslim Youth Movement | (031) 3062011 | (031) 3062013 | mymdbn@786.co.za |
| Allan | Moolman | | Project Empower | (031) 3103565 | (031) 3103566 | allan@projectempower.co.za |
| Thami | Mzileni | Secretary - KZN Province | COSAS | (072) 395-1336 | (031) 305-1847 | ziziyebo@yahoo.com |
| Simphiwe | Ncayiyana | Finance & Projects Officer | SRC – UDW Campus | 083 735-5672 | (031) 260-7761 | |
| Thami | Ngwenya | Programme Manager- Research, Policy Analysis & Parliamentary Affairs | Centre for Public Participation | (031) 2619001 | (031) 2619059 | thami.ngwenya@cpp.org.za |
| Muntu | Nhlengethwa | Schools Facilitator | Youth for Christ | (031) 3031058 | (031) 3123404 | muntu@youth.co.za |
| Mrs. | Samu | | Youth Centre (Inanda) | (031) 510-2919 | (031) 5101101 | h981832@dohhokzn1.gov.za |

| | | | | | | |
|--------------------|-----------------|--------------------------|--------------------------------------------------------|----------------------------------|----------------|----------------------|
| Yasmeen | Sayed | | Muslim Youth Movement | (031) 3062011 | (031) 3062013 | mymdbn@786.co.za |
| Nooda | Sithole | Student Services Officer | SRC – UDW Campus | (031) 2607263/ (072) 575-1791 | (031) 260-7761 | |
| Iman | Zulu | | Muslim Youth Movement | (031) 3062011 | (031) 3062013 | mymdbn@786.co.za |
| Nompumelelo | Mhlongo | | Inkatha Youth Brigade | (031) 3651325/ (031) 9089299 | (031) 3010279 | ifp@iafrica.com |
| Jean-Pierre | Kalala | Life Skills Manager | Love Life /Planned Parenthood Association of SA | (031) 3045918 | (031) 3047195 | jolikalala@yahoo.fr |
| Simon | Kabisayi | | Love Life /Planned Parenthood Association of SA | (031) 3045918 | (031) 3047195 | |
| NG | Mkhize | Miss | Westville Youth Centre | (031) 2660577 | (031) 2660605 | |
| Zinhle H. | Mtshali | Miss | Westville Youth Centre | (031) 2660577 | (031) 2660605 | |
| Sibongile | Mkhize | | HIVAN | (031) 2685815/6 | (031) 2098883 | mkhizes@hivan.org.za |
| Anam | Nyembezi | | HIVAN | (031) 2685815/6 | (031) 2098883 | anamn@hivan.org.za |
| Hema | Somai | Researcher | HIVAN | (031) 2685815/6 | (031) 2098883 | hema1@hivan.org.za |
| Sayed | Zakia | | MYM | (031) 2691097 | | |
| Mandla | Ndaba | SLDO | UKZN | (031) 2607804 | (031) 2607073 | ndabap@ukzn.ac.za |

Youth Organisations' Responses to HIV/AIDS

Presentation for Youth
Workshop

Prepared by

Nkosinathi Ngcobo

Health Economics & HIV/AIDS
Research Division

Presentation Outline

- Introduction
- Research questions
- Aims of the study
- Research Methods
- Methodological Limitations
- Findings
- Conclusions

Background

- 2004 UNAIDS Report rates AIDS as number one killer of young people in world
- 15 – 24 yr olds account for ½ of all new HIV infections worldwide
- +/- 6000 contract the virus every day
- HIV/AIDS as a developmental challenge in the age of globalization

Source:: UNAIDS Report 2004

Key Research Questions

- Is there a discernable approach underlying the different interventions?
- What are these youth organisations doing to combat the spread of the pandemic?
- How effective are these youth organisation's interventions?
- Are there any links with provincial & National structures?
- What roles should youth org. play within the broader intervention framework and strategies?

Aims of the study

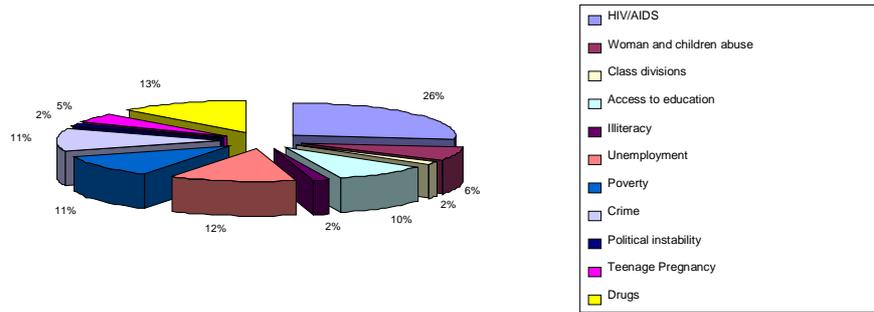
- Identify the strengths and weaknesses of the youth organizations on HIV/AIDS strategies
- Assess the link that exists between youth organisations and developmental initiatives by KZN govt.
- Assist KZN youth orgs to develop coherent interventionist strategy to deal with HIV/AIDS
- Enable orgs to have hands on approach to HIV/AIDS initiatives
- Provide guidelines for youth organisations throughout South Africa.

Research Methods

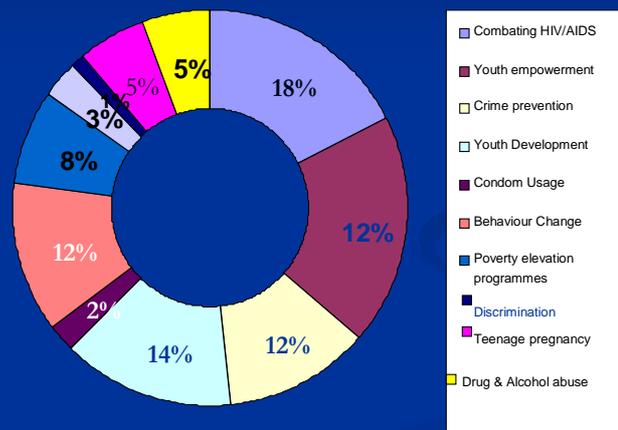
- Adopted exploratory & qualitative methods
- Aimed at assessing effectiveness of youth responses HIV/AIDS
- 35 youth organisations sampled and consulted
- Interviews & discussions to gather data
- This workshop as another tool to gather data
- Literature on HIV/AIDS

Findings

Main Challenges Facing the Youth



Purpose of programmes



Results

- Most orgs have programmes, however, not adequate
- HIV/AIDS seem not to be top priority, only 26% noted it as a concern
- Effectiveness of programmes; 96% (effective) & 4% do not have.
- Lack of coherent interventions

Appendix 8

YOUTH WORKSHOP

27 JULY 2004

REVIEW

| | | | |
|-----------------------------------------------------------------------------------------------------------------|----------------|-------------------|----------------|
| 1. Were you satisfied with the communications and logistics for the course? | Not satisfied | Fairly satisfied | Very satisfied |
| | | 44% | 56% |
| 2. How detailed were the workshop objectives? | Not satisfied | Fairly satisfied | Very satisfied |
| | | 44% | 56% |
| 3. How detailed were the resource materials provided on the workshop package? 3 | Not detailed | Fairly detailed | Very detailed |
| | | 11% | 89% |
| 4. Do you have a clear understanding of the results pathway- inputs, outputs, outcomes and impacts? | Not clear | Fairly clear | Very clear |
| | 11% | 61% | 28% |
| 5. Do you have some insight into the role of youth in HIV/AIDS awareness initiatives within the context of KZN? | Little insight | Some insight | Good insight |
| | 6% | 50% | 44% |
| 6. Do you have a clear understanding of social-economic development and HIV/AIDS? | Not clear | Fairly clear | Very clear |
| | 5% | 39% | 56% |
| 7. Do you feel equipped with the practical skills to develop sound responses against the HIV/AIDS impact? | Not equipped | Somewhat equipped | Well equipped |
| | 5% | 28% | 67% |
| 8. Do you feel equipped with the information and examples to develop a program activity on youth and HIV/AIDS? | Not equipped | Somewhat equipped | Well equipped |
| | 5% | 39% | 56% |

| 9. What things did you like most about the course? |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Debates |
| 2. Discussions and group presentations added to the information gained in the workshop and gave each participant an opportunity to play a role in input of ideas. |
| 3 Food |
| 4. Everything |
| 5. Empowering ideas on changes needed in the community |
| 6. Bringing different organizations together gave participants the opportunity to hear others' opinions and share ideas and expertise. |
| 7. Nobody was completely ignorant about problems faced by organizations working towards AIDS awareness. Majority of participants knew what needs to be done about these problems and most were eager to work towards charting the way forward. |
| 8. Gaining knowledge on the challenges faced by other organizations and learning from them. |
| 9. Highly informative. |
| 10. Problems, weaknesses and strengths were dealt with constructively. |
| 11. Brain –storming during the group session |
| 12. Identification of problems and challenges facing youth in South Africa |
| 13. The interaction between facilitators and participants. |
| 14. Some of the things learnt from other organizations could be utilized in our own. |
| 15. Good facilitators and time- keeping |
| 16. The workshop was well-organised |
| 17. Some issues were raised again and again indicating that the problem is real and strong intervention is needed. |
| |

| 10. What things did you like least about the course? |
|----------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Level of female participation and contribution |
| 2. Nothing. It was satisfactory and I hope to be involved in any future workshops. |
| 3. It was not quiet clear what the way forward should be and there was a lack of new ideas on dealing with the problems faced by organizations. |
| 4. The workshop focused on literate urban people. Little is being done in rural and informal settlements. |
| 5. Perhaps, during discussions, participants could sit in a circle thereby making eye contact and allowing the discussion to progress more easily. |
| 6. Discussion of political issues- the main objective should have been HIV/AIDS. |
| 7. Networking system- there were no introductions of participants and we had to depend on the attendance register. |
| 8. Participants should have been given an opportunity to comment <i>immediately after</i> each group presentation. |
| 9. Insufficient time to explore all issues. |

10. The presentation and organization. In trying to be “perfectionists”, some things were omitted.

11. What suggestions do you have for future research on HIV/AIDS and youth?

1. More workshops and more time dedicated to them to allow maximum participation by delegates.

2. School visits. It seems current youth advertisement is insufficient.

3. Communities, which are actual victims and targets of change, must take first priority in all discussions, plans and future workshops.

4. Funding should be used appropriately and expansively for the full benefit of the specific need.

5. In the future, research should also involve ward councilors, development forums and youth commissions.

6. Speak to the youth- your “target market”. Ask them what they want and what interests them and then implement that.

7. Be practical and turn research into action.

8. Explore the ability of organizations to network and co-ordinate their activities.

9. Consider whether a forum of like-minded groups would share information, documentation, research, training, etc.

10. Investigate impact/ effectiveness of programs.

11. Share research findings with other organizations.

12. We need to improve on creativity so that we can be able to catch the attention of the youth.

13. There is a need for sustainable programs on HIV/AIDS

13. Change the approach in running HIV/AIDS programs to be more tailored to the needs of the youth and be more appealing to them.

14. More research.

15. Outreach. We need to go out there and do something.

16. It is important to understand the diversity of people and accommodate their differences. It then becomes easier to reach out to them.

17. Researchers should visit prisons, particularly Westville Youth Centre, so that youth workers at WYC can link their youth with them when they are preparing for disengagement.