Bumb'INGOMSO Annual Progress Report January–December 2022

DG Murray Trust Project Executing Agency

Reduce HIV incidence among adolescent girls and young women aged 15–29









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ACRONYMS AND ABBREVIATIONS

ADM Amathole District Municipality

AIDS acquired immunodeficiency syndrome

ART antiretroviral therapy

ARV antiretroviral

BCC behaviour change and communication

BCMM Buffalo City Metropolitan Municipality

BI Bumb'INGOMSO

BLN Bumb'INGOMSO leadership network

CRM Client Relations Management

DCS Department of Correctional Services

DSD Department of Social Development

GBV gender-based violence

GBVF gender-based violence and femicide

HAST HIV and AIDS/STI/TB

HCT HIV counselling and testing

HIV human immunodeficiency virus

HRG high-risk group

IEC information, education and counselling

NDoH National Department of Health

NGO non-governmental organisation

PCD parent-child dialogue

PEP post-exposure prophylaxis

PrEP pre-exposure prophylaxis

PSS psychosocial support

SAPS South African Police Service

SETA Sector Education and Training Authority

SGB school governing body

SMS short message service

SRH sexual and reproductive health

SRHR sexual and reproductive health and rights

STI sexually transmitted infections

TB tuberculosis

TVET technical and vocational education and training

YFS youth-friendly services

ANNUAL DASHBOARD – 2022

PERFORMANCE RATING

Little headway	Fair progress	On track
50% or below of the target achieved	51–90% of the target achieved	>90% of the target achieved

Interventions	Programme activities	Rating	Rating Annual – 2022 Explanation		Explanation	
			Target	Actual	% of target reached	
Behaviour change and communication reaching young	# recruited into the BI network in Buffalo City Metropolitan Municipality (BCMM)		-	524	-	524 new members were recruited into the network within BCMM during this year.
women aged 15–29	# recruited in Amathole District Municipality (ADM)		2 450	864	35%	864 new members were recruited and enrolled into the network within ADM.
	# taking part in the motivational and leadership sessions facilitated by a mentor		1 500	5 220	>100%	The team reached and engaged 5 220 young women through the Bumb'INGOMSO leadership network (BLN) meetings hosted throughout the year. Of the participants, 52% were from ADM.
	# of network members actively taking part in the Bumb'INGOMSO (BI) network programme (BI clubs and other workshops)		20 000	13 342	67%	13 342 young women participated in the face-to- face sessions during this year, of which 26% participated in club sessions and 74% participated in workshops conducted for BLN members using the club guide as a facilitation tool.

Interventions	Programme activities	Rating		Annual – 2022		Explanation
			Target	Actual	% of target reached	
	# reached through mass media campaigns		75 000	171 485	>100%	The team distributed 24 260 Yakha magazines, 40% of which were distributed in ADM. Through the outdoor digital screens, a sustained average number of 147 225 young women were exposed to BI messages. ADM accounts for 34% of this number.
	# who received information, education and counselling (IEC) materials and/or messages		25 000	118 963	>100%	A total of 752 279 bulk SMSs were sent out, reaching an average of 12 250 young women. A further 99 734 (cumulative reach) Facebook interactions were recorded, while 6 979 IEC materials were distributed to programme participants.
	# supported through the call centre		12 500	7 427	59%	The call centre recorded 5 795 individual telephonic engagements and a further 1 632 social media interactions during this year.
Health intervention in BCMM reaching young women aged 15–29	# accessing youth-friendly services		76 754	142 491	>100%	Improved testing rates were observed in the last quarter of 2022 following monitoring of the BI team responsible for HIV counselling and testing at
	# tested for HIV		38 377	46 906	>100%	health facilities.
15 25	% identified as HIV-positive		4%	2%		

Interventions	Programme activities	Rating		Annual – 2022		Explanation
			Target	Actual	% of target reached	
	% of HIV-positive young women initiated on anti- retroviral therapy (ART)		95%	98%		
Health intervention in ADM reaching young women aged	# accessing youth-friendly health services		60 804	53 255	88%	There was a drop in the HIV testing rate during the fourth quarter due to reduced BI staff as some community healthcare workers who were
15–29	# of HIV tests conducted		30 402	25 584	84%	supporting ADM resigned.
	% identified as HIV-positive		4%	2%		
	% of HIV-positive young women initiated on ART		95%	99%		
Addressing gender- based violence	# of adolescent girls and young women trained on sexual and reproductive health rights (SRHR), GBV linkage to HIV and AIDS, and advocacy		1 000	819	82%	Workshops that were planned for the first quarter of 2022 were cancelled due to boycotts at colleges.
	# of trained young people participating in GBV-prevention activities in their communities		150	636	>100%	An increase in the number of GBVF incidences triggered several campaigns in different communities, which were led by community influencers.

Interventions	Programme activities	Rating		Annual – 2022		Explanation
			Target	Actual	% of target reached	
Expanding access to economic	# who completed work-seeker support		1 000	575	58%	Economic opportunities had a slow start in 2022, as the BI Core team had to take over the
opportunities for young people	# assisted to access work- related opportunities (bursaries, learnerships and internships)		200	No activity	0%	implementation of the programme.
Psychosocial support for first-	# who attended positive talk seminars		1 000	1 013	>100%	
year students	# who received one-to-one counselling		450	424	94%	
Female sex workers	# tested for HIV		100% eligible	-		In 2022 there were 19 newly identified sex workers, all of which had a known HIV-positive status.
	# identified as HIV-positive		8%	-		- Statusi
	% of HIV-positive sex workers initiated on ART		100%	-		
	% on ART virologicall suppressed		90%	91%		The five virally unsuppressed sex workers were supported and encouraged to adhere to the treatment.
Programme in BCMM for men	Male headcount (25–50 years old)		41 683	13 357	32%	As BI reduces the number of staff available to conduct direct service delivery, HIV testing rate

Interventions	Programme activities	Rating		Annual – 2022		Explanation
			Target	Actual	% of target reached	
aged 25–50	% identified as HIV-positive		8%	3%		has regressed.
	% of HIV-positive men initiated on ART		90%	87%		
Programme in ADM for men aged 25–50	# tested for HIV		16 043	7 161	45%	An increase in the number of men accessing health services was observed in ADM facilities in the last quarter of 2022, however the target was
	% identified as HIV-positive		8%	3%		not achieved.
	% of HIV-positive men initiated on ART		90%	97%		
IKHWELOLethu intervention reaching adolescents aged	# taken through the educational programme on shaping equal gender norms		12 000	13 262	>100%	A total of 9 357 and 3 905 adolescents were engaged in facilitated discussions in BCMM and ADM schools, respectively.
10–14	# who participated in debates		2 000	10 863	>100%	Debating is the most popular platform, resulting in high number of learners opting for it.
	# who participated in performing arts		5 000	7 383	>100%	This year the programme focused on writing and reciting poetry, using learners' home languages.

Interventions	Programme activities	Rating	Annual – 2022		022	Explanation
			Target	Actual	% of target reached	
	# who participated in paceball		5 000	6 681	>100%	Paceball has been well received by many schools and learners. However, production of paceball equipment has become a challenge. Hence the team is looking for an alternative sport with similar benefits to paceball to add to 2023 league competitions.

EXECUTIVE SUMMARY

Bumb'INGOMSO has continued to reach most of its targets in 2022. The team deliberated and agreed on its targets during a two-day strategic planning session in May, which included all partners and was a great way to set the agenda for the year, in line with the contracts we signed with our implementing partners. In 2022, of the estimated 120 000 young women aged 15–29 in the Buffalo City Metropolitan Municipality (BCMM), we managed to reach 80% with messaging via electronic screens, 7% through once-off community dialogues and leadership network meetings, and 13% in sustained face-to-face engagements in our clubs and workshops.

Collaborations between partners has always been a big focus, and this year we have seen many areas of improvement in this regard. This year's revision of the BI club guide, led by BI CORE, has seen all partners contributing to the final product and developing one BI training team, which is responsible for training implementers for all partners. This has ensured that the messages we communicate to young women are consistent. The collaboration between partners has also been evident at TVET colleges, the Lingomso Youth Centre and in activities that have been facilitated by our partners at community level.

This reporting period was marked with several critical milestones for the fight against GBVF in the country, following the president signing three amendments to the GBVF bills into law. These bills give power to victims and survivors of GBVF-related crimes. In response, BI has trained members of the South African Police Service (SAPS) in BCMM police stations in these laws and how they impact police work. The GBV intervention played an important role in organising and coordinating the Provincial GBVF Summit, which was hosted by the Premier of the Eastern Cape, and the National GBVF Summit, which was hosted by the President of South Africa.

Economic participation for young people in BCMM and Amathole District Municipality (ADM) remains a big challenge, especially following the loss of jobs during the Covid-19 national lockdown, from which the economy has not recovered. All our interventions try to link young people to earning opportunities. The BCC intervention, through the National Youth Service, funded by the President's Jobs Fund opportunity, managed to connect 1 092 out-of-school youth with a stipend-paying programme which ran for six months. In August 2022 the PSS intervention led a significant programme of action, which brought together TVET colleges, the Department of Labour, Sector Education and Training Authorities (SETAs), BI

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partners and young people. The focus was on women empowerment and included work-seeker support,

capacity building for startup businesses and exhibitions of their products and services.

The year was marred by the tragic deaths of 21 young people at the Enyobeni tavern in Scenery Park, in

BCMM, probably due to drinking toxic alcoholic substances. BI joined other stakeholders in the

community to provide a comprehensive response and address the challenges faced by young people.

Substance abuse is becoming a challenge, and the need for BI to investigate issues of alcohol and

substance use by young people in BCMM and ADM is becoming hard to ignore. Thus, BI is looking into

piloting an alcohol harm-reduction project with the guidance of DGMT, which has been investigating

innovative ways of addressing this challenge in other parts of South Africa.

It has been an exciting year and rewarding to see the highlights achieved through our partners, as shown

in the Project Highlights for 2022 below. The Annual dashboard for 2022 above also illustrates the

progress of BI's programme activities and which areas need improvement.

This year also marks a change in leadership of Bumb'INGOMSO and it is an honour to have been

appointed as the new project director. This signals the commitment of DGMT, the former project director

and the entire Bumb'INGOMSO partner team to strengthen women's leadership. I am so pleased that Tau

Matseliso will continue to be part of the leadership, in the role of Chief Operating Officer.

Despite the social and economic challenges we face, we believe that Bumb'INGOMSO is shaping the lives

and behaviours of many young people in the two districts in which it works. We are committed to even

greater synergy and impact in 2023 by sustaining our current work and expanding our range of activities.

The Bumb'INGOMSO Call Centre has been upgraded to provide greater engagement with young people,

IKHWELOLethu continues to reach more schools in Buffalo City and Amathole and the connection with the

KeReady campaign's mobile outreach provides exciting opportunity to demonstrate an effective package

of health services for young people.

Nokuthula Futwa

Bumb'INGOMSO project director

Bumb'INGOMSO Project Annual Report 2022

OVERVIEW OF THE BUMB'INGOMSO PROJECT

Bumb'INGOMSO aims to reduce the incidence of HIV by ensuring that vulnerable groups, especially adolescent girls and young women, make increasing use of appropriate multi-sectoral services and support measures (including counselling and testing) that lead to positive changes in knowledge, attitudes and practices. BI's model is centred on young women as leaders and innovators able to respond to the challenges they face, who know themselves better than anyone else and need to mould their own future. Our goal is to halve the incidence of HIV among young women aged 15–29 within five years in the Buffalo City Metropolitan Municipality (BCMM) working through six key objectives, advanced by BI's six key interventions.

BUMB'INGOMSO PHASE II PROJECT GOALS AND OBJECTIVES



Figure 1: BI goals and objectives

PROJECT HIGHLIGHTS FOR 2022

FIRST EVER BI YOUTH SUMMIT

- •The BI Youth Summit brought together 120 adolescent girls and young women from the Buffalo City Metro Municipality and Amathole District Municipality.
- •The girls and women deliberated and provided feedback about BI and other youth programmes.

LINGOMSO YOUTH CENTRE

- •The Lingomso Youth Centre has highlighted the strenth of BI's integrated programming.
- •5 614 young people recieved HAST information and services.
- •532 young people received psychosocial support.
- •575 young people accessed the economic hub for work-seeker support.

CONSOLIDATED BI CLUB PROCESSES

- •The BI club guide was revised by a BI team of trainers.
- Working together on the revisions and training mentors and implementers has brought a renewed sense of ownership and connectivity among the BI team working in different interventions.

BI CALL CENTRE OPTIMISATION

•The call centre went through a process to optimise its functionality and ensure that it plays a central role in BI.

BI DEBATE LEAGUE

- •The first BI debating leagues were launched.
- •198 high-school and 101 primary-school learners participated in debating competitions at metro level in BCMM and ADM.

THE YEAR IN NUMBERS

- \bullet 51 540 young women aged 15–29 have been registered in the BI network to date.
- •BI has 105 mentors across BCMM and ADM.

PARTICIPATION IN THE NATIONAL CHILDREN'S SUMMIT ON THE NSP ON GBVF

•Four learners from a BI-implementing school participated in the National Children's Summit that preceded the President's Summit on GBVF. Organisers were impressed by the level of knowledge, articulation and self-confidence displayed by the learners.

Table 1: 2022 implementation highlights

OBJECTIVE 1: CREATE A POSITIVE CHANGE IN RISKY BEHAVIOUR

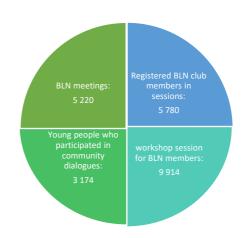
Bumb'INGOMSO's behaviour change and communication (BCC) intervention provides adolescent girls and young women with a range of information and messages on sexual and reproductive health (SRH) and behaviour change to encourage them to reduce risky behaviours and adopt protective behaviours instead. Through being members of the leadership network, these girls and women access a network of peer and mentor support, skills training (through clubs and other workshops), information, knowledge, and links to services and opportunities. Furthermore, BCC motivates, encourages and challenges them to adopt health-seeking behaviour, and to connect to opportunities that will help reduce their vulnerability.

All this work is supported by a call centre, which provides a platform for the young people to get relevant advice from trained agents and counsellors on a variety of issues, such as SRHR, careers, economic opportunities and youth-friendly health services.

ACTIVITIES IN 2022

BI continued to build its leadership network in BCMM and ADM by recruiting 3 259 young women aged 15–29 into the network during 2022. Of these 1 388 were recruited through the BCC intervention, 1 113 through the health intervention, 252 through the GBV intervention and 506 through the psychosocial support (PSS) intervention. To date, 51 540 young women aged 15–29 have registered in the BLN across BCMM and ADM. The BCC, health and GBV interventions have engaged 24 088 of these young women in facilitated discussions through BLN clubs, BLN meetings, community dialogues and other workshops. The goal is to build agency, ignite hope and increase capacity based on the needs which the participants themselves identify. Figure 2 shows the different platforms used to facilitate discussions for BLN members.

Figure 2: Participation in different formats of facilitated discussions



Bumb'INGOMSO leadership network clubs

Bumb'INGOMSO engages with adolescent girls and young women through structured BLN clubs focused on motivation, sexual and reproductive health, and access to opportunities. Using the club guide, BI mentors facilitate discussions with club members at schools and in the communities. BI mentors (also known as amplifiers) are young women from the same communities who are trained and supported by the BI team. The BI club guide, which we revised in 2022 with input from all partners on their areas of expertise, covers five modules:

- 1. #BeMoreDaring: this covers topics on self-awareness including personal values, a vision and a personal shield.
- 2. #BeMoreVital: this guides participants to assess their behaviours in various aspects of their lives and how it affects their health.
- 3. #BeMoreDefiant: this explores GBVF and the actions that young women can take to protect themselves and other people in the community.
- 4. #BeMorePluggedIn: this explores pathways to learning and earning.
- 5. #BeTheChangeYouWantToSee: this provides young women with different skills, such as advocacy, public speaking, using social media and mapping resources in the community.

In 2022 Bumb'INGOMSO ran 401 separate clubs, with 5 780 young women registered and participating in club activities across three BI interventions, the BCC (295 clubs), GBV (56 clubs) and health (50 clubs). It is encouraging to note that 71% of school club members participated in four or more sessions during the year.

Also encouraging was observing club members developing plans and implementing activities to address challenges they identified in their communities, with minimal support from BI. Their projects ranged from organising resources for the needy in their communities and tackling environmental issues, to standing up for the rights of others or organising services for young people and community members, including health services. A few of the projects that were undertaken in 2022 are outlined below.

- 1. Club members in Keiskammahoek organised the biggest Mandela Day drive for the cluster, covering five locations in the local area. Over 350 young people benefitted from the services provided during the drive, including health services which brought Covid-19 vaccinations to the communities.
- 2. The St Mathews club collected clothes and sanitary towels for a children's home in their community.
- 3. For Mandela Day in Ndevana, one of the poorer areas in BCMM, club members collected and donated clothes to three families who they identified within their community.

- 4. Duncan Village BI clubs organised a march to draw attention to GBVF issues and child abuse in their community.
- 5. The Ubuntu club in Stutterheim embarked on yet another clean-up campaign in their school.
- 6. Aluncedo club, which ran a soup kitchen, farming and multipurpose centre in Khayelitsha, was supported by BI to register as a non-profit organisation, and is now funded by the Department of Social Development (DSD) to run a soup kitchen for community members in need.
- 7. St Mary, a newly formed club from Newlands, has started planting vegetables in gardening plots to fight poverty and get themselves active.

It has been observed that club participation is poor among out-of-school youth: only 32% of club members participated in four or more sessions during the year. This can be attributed to the fact that they are looking for income-generating opportunities. They therefore prefer event-style activities, in which they do not have to commit to long-term engagements. In response, BLN conducts day-long meetings that bring together young people from different schools and communities.

Bumb'INGOMSO leadership network meetings

During 2022, 5 220 AGYW participated in BLN meetings across BCMM and ADM. The topics discussed were aligned to the programme's focus areas and gave the participants an opportunity to voice their opinions and feelings in a protected, safe environment. The team used various approaches, such as facilitated discussions, performing arts and games to engage young people. BLN meetings also connected its members to opportunities by inviting different stakeholders to provide information and knowledge from various fields and career avenues. We covered the following topics during 2022:

- Introduction to the BI programme for new members
- GBVF prevention and education
- Prevention of bullying and drug/substance abuse
- Health awareness and services provision
- Inter-club network sessions
- World Aids Day commemoration.

Community dialogues

Bumb'INGOMSO organised and facilitated several community dialogues during 2022. The BCC, health and GBV interventions each facilitated dialogues focussing on different topics. The health intervention used community dialogues to engage network members on various health

Number who participated in community dialogues in 2022

Young people: 3 174

Parents: 34 Men: 812

topics, exchange ideas and ensure that myths and misinformation are addressed in a non-judgemental setting. The BCC intervention organised parent—child dialogues (PCDs) to facilitate engagements between parents and their children, including one in a rural area which brought together mothers and their teenage daughters. (Some of the concerns raised by in these sessions are highlighted in Figure 3.) The dialogues organised by the GBV intervention focussed on SRHR, while the men's dialogues targeted harmful gender norms and encouraged men to live a more positive lifestyle (see Objective 5 on high-risk groups for more detail).

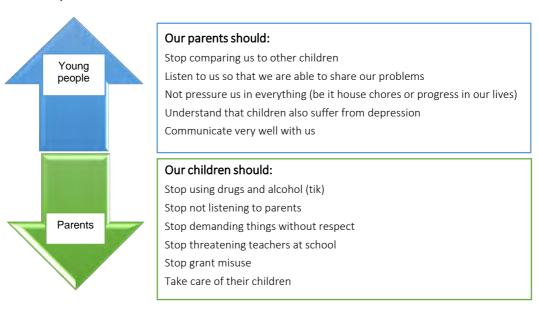


Figure 3: Concerns raised during a PCD

Debating leagues for young people

Debating was introduced in the IKHWELOLethu programme in 2019 and quickly gained popularity across BI interventions working in schools. In 2022 the BCC intervention introduced debating in BCMM and ADM, covering 54 high schools and 1 454 learners. The programme is organised through debating leagues and

provides participants from all the clusters with an opportunity to gain skills, knowledge, build their confidence and gain experience in public speaking and research. In total, 290 learners from 60 schools (40 high schools and 20 primary schools) participated in the final leg of the debating competitions held in each district (BCMM and ADM). It is worth mentioning that one of the learners who was introduced to debating by a BI mentor made it through the local competitions and went on to win third place at a provincial debating competition. She went on to represent the Eastern Cape in the national debating competition, which was a proud moment for the school and the small community. The department officials and parents appreciated the fact that the BI programme brought debating and public speaking back into the school's environment. BI is planning to strengthen the coaching provided to mentors and educators in partnership with the South African Schools Debating Board, who have provided training, mentoring and resources to the BI team of mentors and coordinators.

Sustaining the response mechanism: the BI call centre

The call centre continues to be a central piece of BI's work, providing vital support and motivation to the AGYW in the network and any others who call. In 2022 the call centre recorded 5 795 telephonic engagements with young people through direct calls (in and outgoing). The intervention recorded a further 452 and 1 180 individual interactions through Facebook and WhatsApp respectively. In addition, the team counselled 539 young people in the course of 2022. The most common counselling needs were related to:

- anxiety due to grief, GBVF, etc.;
- bullying, stress, anger, suicide and depression;
- substance abuse;
- relationship problems with parents, friends and partners;
- traumatic events such as violence and death of loved ones;
- abuse, including physical, sexual, emotional, social media;
- HIV-risk education and prevention, including PrEP (pre-exposure prophylaxis) and PEP (post-exposure prophylaxis), reactions to a diagnosis and information about starting ART; and
- family planning and unwanted pregnancies.

BI embarked on a complete overhaul of the call centre in the second quarter of 2022 to enable it to respond efficiently and comprehensively to the needs of the programme participants and partners. The project should be completed during the first quarter of 2023. This was identified as a crucial process for BI

and DGMT has contributed financial resources for expert consultants that guided the process. Optimising the call centre has pushed BI to initiate two other crucial processes, namely installing the Client Relations Management (CRM) system and updating the BI website, both of which should be finalised by the end of March 2023.

In 2022 the call centre expanded to operate from the Lingomso Youth Centre in Mdantsane. As part of that, the BCC intervention placed a counsellor in the centre in the last quarter of the year. Eighteen young people have since received ongoing face-to-face counselling to address issues of rape and sexual abuse, child abuse and neglect, school dropout and problematic social behaviour. Other issues are referred to the local DSD social workers and other support organisations around BCMM.

Call centre referrals

From the calls received, 549 young people were referred to other services. Figure 4 shows the institutions that the referrals were made to. Almost three out of every five people referred by the team needed support in the following areas of social security: orphans and vulnerable children, the South African Social Security Agency (SASSA), Reaching Adolescents and Children in Households (ReACH), the Department of Social Development (DSD) and the Maintenance Court.

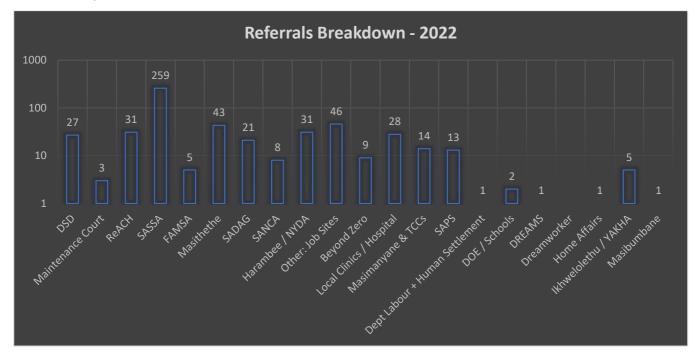


Figure 4: Call centre referrals in 2022

Referrals have also been made to other BI partners, and other family counselling services such as South African Depression and Anxiety Group (SADAG), Masithethe Counselling Services, Families South Africa (FAMSA) and the South African National Council on Alcoholism and Drug Dependency (SANCA).

Bulk messaging by the call centre

Further support to the network members was provided through bulk SMSs. BI sent 752 279 bulk messages out during the year to educate, motivate and encourage our network members. All partners contributed to the bulk messaging content that was distributed during this period, which focussed on the following areas:

- motivation and education;
- mental health support;
- GBVF education and awareness;
- health promotion;
- programme support; and
- economic and education opportunities promotion.

A snap survey conducted by the BCC intervention

In our efforts to get feedback from young people, the BCC intervention conducted a snap survey in 2022 among BLN members, which was instrumental in guiding the intervention. It was used to gauge whether young people who are members of the BLN are undertaking some of the action that are encouraged by the programme, such as testing for HIV. A key question is whether young people know their HIV status. In the survey, mentors polled 3 930 young people (50% females, 37% males and 13% who preferred not to state their gender) by distributing and collecting self-administered questionnaires. In relation to the key programme focus areas of BI, e.g. encouraging people to reduce risky behaviours and practice regular testing, the responses presented the following picture:

Survey question	Female participants	Male participants	Unspecified
Do you know your HIV status?	48% – Yes	31% – Yes	49% – Yes
	47% – No	63% – No	48% – No
	5% – No answer	6% – No answer	3% – No answer
If not, would you like assistance	43% – Yes	37% – Yes	35% – Yes
to access HIV-testing services?	29% – No	44% – No	35% – No
	28% – No answer	19% – No answer	30% – No answer

The results of the survey have highlighted the need for BI to promote HIV testing during all engagements with young people in the programme. SRHR information has been included in the BI club guide, to enhance discussions on this topic, give BI mentors an opportunity to address misinformation and to encourage young people to take action, e.g. HIV testing. The recent addition of a #KeReady mobile clinic to the BI team will enhance access to HIV testing and other health services at various BI activities in 2023.

OBJECTIVE 2: PROMOTE ACCESSIBLE HEALTH SERVICES FOR YOUNG PEOPLE

The objective of the health intervention is to increase the uptake of HIV services, from testing and adherence to treatment. BI works with local health facilities to create youth-friendly health services in the communities to enable adolescents to access SRH services. Young women are also provided with HIV and AIDS/STI/TB (HAST) information and education.

ACTIVITIES IN 2022

Youth-friendly services in public health clinics

The BI team provided on-site support to 41 health facilities in BCMM during 2022 and 22 in ADM using a mentoring habit list – a standardised tool designed by the health intervention to ensure that the facilities are provided with comprehensive support. The list includes:

- assessing the availability of drugs for HIV, tuberculosis (TB), sexually transmitted infections (STIs) and family-planning options;
- reviewing the quality of youth-zone branding (to alert youth to the dedicated youth spaces in YFS clinics);
- reviewing the BI age group that is on ART;
- · conducting viral load monitoring; and
- reviewing PrEP uptake and retention.

In BCMM, 46 906 HIV-tests were conducted at supported facilities, while 25 584 were conducted in ADM. The HIV-positivity rate among 15–29-year-old women in both districts is 2%. It is encouraging to see an

increase in the number of tests conducted among young women, from 67 891 in 2021 to 72 490 in 2022. Initiation of treatment is 98% in BCMM and 99% in ADM, which is above the 95% target set by the National Department of Health (NDoH), in line with the UNAIDS targets. The 22 clients not started on ART in ADM and BCMM were TB symptomatic and were therefore started on TB treatment. The viral load completion rate in BCMM was 94%, with a viral load suppression rate of 96%. In ADM viral load monitoring was 95%, with a suppression rate of 93%. The community healthcare workers based at health facilities continue to track clients who miss their appointments for picking up treatment or viral load tests. Additionally, 25 beneficiaries were referred through the BI call centre to the health intervention and all referred cases were managed effectively.

Pre-exposure prophylaxis initiation and support

The BI team continued to provide technical assistance and mentoring to nurses championing youth-friendly health services. The team imparted the National Department of Health (NDoH) guidelines for implementing PrEP, which we recognise as an empowering method of HIV prevention which women can manage themselves. Because PrEP is not well known, more work is needed to raise awareness and increase demand. During the reporting period, 609 and 126 15–29-year-old women in BCMM and ADM respectively started using PrEP. However, only 265 of these remained on PrEP in BCMM and 126 in ADM by the end of December 2022. This drop in the number remaining on PrEP in BCMM is concerning as these young women are initiated on PrEP following an assessment that shows they are at high risk of HIV-infection.

Outreach health services

Outreach services complement the provision of health services to communities. Various health outreach campaigns were conducted during the year, the most significant being to two TVET colleges — Lovedale College and Buffalo City College. Collaboration with the colleges has ensured that health services are available for students every Tuesday. A total of 969 college students accessed health services during the year, including screening for tuberculosis (TB), sexually transmitted infections (STIs) and HIV, with eleven diagnosed HIV-positive. All young women who tested HIV-positive were referred to a health facility for treatment and ongoing care. Other services offered were Covid-19 screening and management, provision of contraceptives and condoms, and enrolment onto the BI programme.

To ensure that young women have comprehensive HAST, SRH and GBVF knowledge, all BI interventions provide health education and information in various places across BCMM and ADM. During the reporting

period 15 292 young women in ADM and 38 542 in BCMM received HAST and SRH information in supported health facilities and during outreach to communities. The health intervention also led awareness campaigns in preparation for Youth Day, as well activities and community dialogues facilitated by BI community healthcare workers for World AIDS Day commemorations.

Managing teenage pregnancy in schools

The health intervention is also mandated to increase the capacity of 20 schools in BCMM and 18 in ADM to reduce teenage pregnancy. BI supports schools by training the school governing bodies (SGBs) and peer educators, and assisting SBGs to facilitate health-awareness days. Additionally, BI builds strong programmatic connections between youth-friendly clinics and SRH programmes in the 38 schools. During the reporting period, 163 SGB members were trained in five schools in ADM. With the support of the BI team, some of the trained SGB members in ADM facilitated SRH workshops, which were attended by 112 parents, 33 teachers and 18 learners. In BCMM the BI team supported five peer educators to organise and facilitate health education on prevention of teenage pregnancy. They successfully reached 167 learners through this event.

Lingomso Youth Centre

In 2022, 5 614 young people accessed the Lingomso Youth Centre. The centre has provided a space for BI to include adolescent boys and young men in its programming. A collective package of services is offered at Lingomso, including HIV counselling and testing, TB, STI and Covid-19 screening, and psychosocial support. The use of the psychosocial support by boys and young men has increased. In the first three quarters 11 boys accessed psychosocial support, while in the last quarter alone, 14 boys accessed the service. Young people who spent more than two hours at the centre were provided with refreshments (a sandwich and a drink), which has been greatly appreciated as many come from poor homes and depend on the government's social grant. During this reporting period, young people not in employment, education and training accessed work-seeker support at the economic hub located at the centre. Work-seeker support includes registration on Job Starter, SA youth, as well as opening an email address. Lingomso distributed 14 650 copies of IEC material on HIV, STIs, TB and family planning to beneficiaries, alongside 9 460 copies of Yakha Magazine and 6 330 condoms.

There has been a steady number of young people who access the centre during the school holidays, 231 in three weeks (175 girls and 56 boys) during the summer holidays. Young people were encouraged to take part in recreational activities such as music, dancing, drawing, playing soccer and netball, as well as

debating and public speaking. IKHWELOLethu mentors conducted games and discussions related to gender equality and shaping norms for children aged 10–14. In 2023 Lingomso plans to develop holiday programmes to cater for youth in the area.

During 2022, 532 young people (507 females and 25 males) accessed psychosocial support at Lingomso. The social challenges they presented included peer pressure, unemployment, family conflicts, marital issues, grief and GBVF. The social worker at Lingomso continued to work with other key partners in Mdantsane, where the centre is located. She made referrals to the Department of Social Development, SASSA, Department of Home Affairs, Department of Justice, and Department of Basic Education for further investigations and support. The success stories include one household which received a continuous supply of food parcels after being referred to the DSD and two clients who received assistance getting their identification documents after being referred to the DHA.

Some of the goals planned for the Lingomso Youth Centre in 2023 include:

- having a permanent team of IKHWELOLethu mentors based at Lingomso to facilitate activities for the youth;
- running more outreach campaigns at schools and identifying more hotspot areas to market the programme and mobilise the youth;
- promoting BI in areas around the Cecilia Makiwane Hospital, where the centre is located; and
- collaborating with key partners for a multisectoral approach to service provision for young people.

OBJECTIVE 3: RESPOND EFFECTIVELY TO GENDER-BASED VIOLENCE AND FEMICIDE

The purpose of the GBVF intervention is to prevent GBVF and strengthen response mechanisms in BCMM. This is done through capacitating professional nurses, doctors and SAPS to improve the management of reported sexual violence in health, policing and judicial systems. The intervention also educates communities about GBVF to increase awareness and strengthen advocacy programmes. Additionally adolescent girls and young women are trained in self-advocacy, SRH, GBVF and its links to HIV infection in order to increase their personal power and choices. The BI project, led by the GBV intervention, focuses on preventing and responding to GBV in BCMM with the following key objectives:

1. Improve the management of reported sexual violence in health, policing and judicial systems.

- 2. Improve community responses to GBVF incidents.
- 3. Increase the levels of personal power and choice by AGYW.

ACTIVITIES IN 2022

Improve the management of reported sexual violence

In January 2022, the President of South Africa assented laws that strengthen the fight against GBVF. These amendments have been introduced to place the victim or survivor at the centre of the government's response in affording respect and dignity. The President assented to:

- the Criminal and Related Matters Amendment Act 12 of 2021;
- the Criminal Law (Sexual Offences and Related Matters) Amendment Act 13 of 2021; and
- the Domestic Violence Amendment Act 14 of 2021.

In response, the GBV intervention organised virtual trainings for BI partners, chapter nine institutions in the Eastern Cape and women's organisations around the province. This was followed by training of 50 SAPS members in BCMM in collaboration with the Department of Community Safety (formerly called the Department of Safety and Liaison). The purpose of the training was to inform the participants about the changes in the laws and the implications of these changes for the victims of GBVF.

Improve community responses to GBVF incidents

BI conducted training for 819 young women and 29 young men from several communities, Buffalo City College and Walter Sisulu University. The training focussed on the following four modules:

- 1. Self-leadership: developing agency to make decisions based on understanding of oneself.
- 2. SRHR: focusing on their bodies, menstrual issues linked to rights, mental health, termination of pregnancy and options available.
- 3. GBVF and its link to HIV and AIDS: types of GBV, how to report it, the availability of services, referrals, HIV and AIDS, STIs, understanding power relations.
- 4. Advocacy: identifying critical issues requiring advocacy through community campaigns.

The desired outcome of the training is for young people to know what services are available to victims of violence and rape and address these issues within their communities. In Walter Sisulu University, 50 of the trainees became GBVF ambassadors. They will be positioned as the first-line support for students on

campus and in the residences. At the community level, trainees have utilised social media, community radio stations and conducted door-to-door campaigns to raise awareness on femicide following the killing of a young woman by her partner in their community. In response, community members donated funds to transport young people to protest outside the magistrate's court to oppose bail for the perpetrator. Furthermore, the GBV intervention conducted a three-day GBVF training workshop for 55 young women to become community influencers – young people trained to lead BI activities related to GBVF. The purpose of the training was to equip them with skills to address challenges they identify during their community engagements and impart them with knowledge of how to make effective referrals for services.

The GBV intervention also organised a two-and-a-half day training workshop for 25 BI staff members on feminism, conducted by Ugandan feminist Maria Alesi. This training gave participants new insights into feminism, the drivers of GBVF and how societies are structured to perpetuate patriarchy. The training also provided each participant with an opportunity to explore their own thinking and sense of self and self-care. Most participants reported a marked improvement in their conceptual understanding of GBVF.

Increase the levels of personal power and choice for young people

The GBVF intervention conducted SRHR training sessions in 10 high schools, reaching 446 girls and 200 boys. The training deepened the team's understanding of the challenges girls experience to break stereotypes, judgements and discrimination about SRHR. BI also conducted numerous awareness-raising campaigns, some led by community influencers, in which they reached 183 young women in the communities of Duncan Village, Amalinda Forest, Ndevana and Mdantsane NU18. Community influencers were also trained to use social media to draw attention and raise awareness on GBVF in their communities. During the national GBVF 100-day challenge, BI led door-to-door educational campaigns in Ndevana and Mzamomhle. The community influencers also engaged local police stations to highlight the challenge of GBVF in their communities and the lack of support citizens receive from police when they report incidents. During the 16 days of activism against gender-based violence, the GBV intervention organised a chalk-it-up campaign, in which 391 young women participated. The event shone a spotlight on the challenges many women face in their households. The aim of the event was to mobilise communities, raise consciousness and promote our shared responsibility in the effort to stop the violence against women and children.

OBJECTIVE 4: ENABLE ACCESS TO ECONOMIC OPPORTUNITIES

One way in which BI addresses access to economic opportunities is by supporting young women in tertiary institutions to get their qualifications. First year can be a challenging time for young students, some of whom move from rural areas to towns for the first time. BI helps students assimilate into the new environment and provides ongoing support to address other challenges that could lead to dropout. This is done through psychosocial support to first-year students in BCMM's two TVET colleges, namely Buffalo City College and Lovedale College. The psychosocial support activities include positive talk seminars, peer support, one-to-one counselling, academic support, and tracking of students' performance in the two TVET colleges. With the introduction of a content creator, students are engaged over virtual platforms such as WhatsApp, Facebook and YouTube, where motivational content is shared.

BI also links young women to economic opportunities by providing access to information, work-seeker support and income-generating activities, including job placement. This intervention supports young women to build their profiles and join platforms such as Job Starter and SA Youth.

ACTIVITIES IN 2022

Psychosocial support at TVET colleges

Bumb'INGOMSO kicked off the 2022 academic year with student orientation and recruitments in all six Lovedale and Buffalo City College campuses. BI uses student orientation as an opportunity to recruit young women into the BI network, in particular to receive psychosocial support through the PSS intervention. A total of 506 new students were recruited from the 996 female students registered at these colleges for the National Certificate (Vocational) programme in 2022. BI registered the full cohort into the BLN and captured them on the CRM system so that we could track them throughout the year. The newly registered members were assessed for areas of vulnerabilities, including whether they had previously done an HIV test, whether they were willing to take part in awareness programmes offered by BI and to see if they were interested in BI membership. Armed with this information, BI set about implementing activities to promote awareness of BI, advocate for financial support through National Student FAS and college discretionary funds, and collaborate with partners to increase knowledge and access to information and services, such as HIV testing services and GBV counselling.

One-to-one counselling and advocacy

To reduce the dropout of students from the TVET colleges, BI implemented activities to improve student assimilation into the college environment, instil coping mechanisms, refine problem-solving skills and reduce financial vulnerabilities. Individualised support was provided to students at the PSS offices who presented personal challenges.

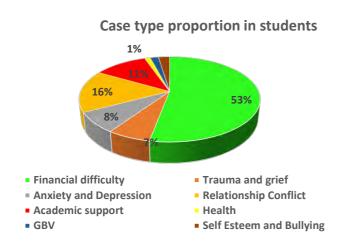


Figure 5: Identified student challenges

Figure 8 shows common student challenges, with financial difficulties being the most prevalent one identified (53% of cases), followed by relationship conflict (16%), academic difficulties (11%), anxiety and depression (8%), and trauma and grief (7%). By the end of the 2022 academic year, 89% of the financial-difficulty cases were resolved. BI was able to work with colleges and other stakeholders, such as the DSD and FAMSA, to refer students who needed additional support. Additionally, BI mentored 210 members of the cohort. These mentoring sessions enabled counsellors to assess the wellbeing and level of assimilation of the students and impart guidance and advice to students. BI was also invited to offer academic support to level 3 and 4 students in the Alice campus (Lovedale College) who were not attending classes and falling behind in their studies. Students actively participated in support sessions organised by BI, which included topics such as goal setting study methods, tests and exam preparations. The support was effective in bringing these students back to college, so BI recommended that the academic programme manager start a peer-tutoring programme. This was endorsed by the campus management and subsequently implemented by the college on the Alice campus.

Tracking students' performance

Bumb'INGOMSO tracked the 506 cohort of students registered with BI using phone calls, WhatsApp as well as the colleges' Coltech system. The effort to reduce dropout rates at first-year succeeded as only 24 students out of the 506 dropped out (compared to 29 who dropped out in the previous year). Due to college deregistration, the size of the BI cohort was reduced to 465 students by the end of the first quarter, but no students dropped out in the fourth quarter. Some reasons cited for deregistration include relocations and enrolling in other institutions. Of the final cohort, 77% progressed to level 3 (or second year) while 23% will be repeating level 2 in 2023.

Additional workshops conducted for TVET college students

To increase the uptake of preventive and curative health services, BI worked through the health intervention to promote HIV, STI and TB awareness and prevention among students at the TVET colleges. The team reached 3 453 students (2 870 women, 583 men) with information and distributed 4 200 condoms. Additionally, students took up biomedical services offered by the health intervention. More students (a total of 792) took up family planning in Buffalo City College compared to Lovedale College (383), which could be attributed to the fact that Buffalo City has a health centre in its main campus that is well-known and easily accessed by students. HIV counselling and testing was done for 969 students, of which 11 tested positive for HIV and were referred to the nearest health facility for ongoing care and treatment.

The GBV intervention conducted four GBVF workshops, with 165 students participating. The workshops included one on capacity building for 50 peer mentors at Buffalo City and 80 students in Lovedale. Participants expressed high satisfaction with the GBVF workshops and knowledge that they received. The majority felt that such workshops needed to be offered on a more regular basis and called for a wider inclusion of male students. Another workshop, on sexual harassment in the workplace, targeted exiting students who are preparing for internship opportunities.

In November BI was invited to a gathering in Queenstown of the South African TVET Student Association, which was an induction of Student Support Service managers and Student Representative Council representatives of TVET colleges across the Eastern Cape. BI was asked to provide capacity building and inform the gathering about the BI service package. The response was very positive, with interest in BI being expanded to other colleges as a significant intervention. Future meetings are planned with the Department of Higher Education and Training to explore possible areas of collaboration.

Promoting economic opportunities

BI aims to increase access to economic opportunities for young women aged 20–29 years in BCMM and reduce the percentage not in education, employment, or training. Following the approval of a proposal in March for BI Core to implement the economic opportunities component, the team recruited a programme lead and set up a suitable economic hub at the Lingomso Youth Centre in Mdantsane. Workseeker support workshops started in earnest in the last quarter of 2022, which saw 575 young women in the BI network participating in 16 workshops.

In response to the huge challenge of unemployment that confronts students and results in financial vulnerabilities, BI collaborated with colleges to stage a campaign in August 2022 on economic empowerment for women as part of the women's month celebrations. The campaign was a huge success and enjoyed the support of over 40 stakeholders, including BI partners, the SETAs and the Department of Labour. A 'Give yourself a job' workshop was conducted at one TVET college and benefitted 24 students who were already embarking on different hustling ventures. This was conducted as part of the Women's Economic Empowerment Campaign that BI led and implemented in collaboration with the colleges. This workshop was well received and the participants gave positive feedback.

BI was able to link 1 092 young women to a stipend-paying programme that ran for six months through the government's National Youth Service initiative. Through this opportunity BI was able to respond to the needs of the out-of-school youth with some form of income to reduce their vulnerability resulting from their financial dependence on others. These young women have been placed in health facilities, schools and communities to assist various activities, including mobilising other youth on HIV testing and Covid-19 screening. The placements are not without challenges, and issues such as access to confidential data are still being ironed out.

OBJECTIVE 5: FOCUS ON HIGH-RISK GROUPS

The high-risk group (HRG) intervention is also implemented by the health intervention and focuses on three HRGs, namely female sex workers aged 15–29, men aged 25–50, and incarcerated men. The aim of the HRG intervention is to increase uptake of HIV services and decrease transmission rates of HIV to young women aged 15–29 years in BCMM and ADM. These groups are also provided with HAST and SRH information.

ACTIVITIES IN 2022

Sex worker outreach

Outreach to hotspot areas is essential for reaching sex workers. In 2022, the HRG intervention reached 450 sex workers – including 19 newly identified sex workers. They were provided with information and education on HAST, SRH, PrEP, substance abuse, puberty, menopause and termination of pregnancy. The newly identified sex workers were already on ART, so no HIV testing was conducted. The team monitored sex workers already on ART to ensure that they had a suppressed viral load. During 2022, 58 sex workers were tested for viral load in the last quarter and 53 were confirmed to be virally suppressed, equating to a 91% suppression rate. All 450 sex workers were screened for STIs and TB, and all were asymptomatic for TB. However, 11 sex workers presented with a vaginal discharge and were referred to a sex-worker-friendly health facility for further management.

Services for 25–50-year-old men

The team ensured that there was constant on-site support and mentoring of the HAST programme to champion nurses in all 20 facilities implementing male-friendly services. Support included reviewing HIV testing services, STI, TB and ART guidelines to ensure that champion nurses provide patient management according to the NDoH standards. In BCMM, an HIV-testing rate of 32% was achieved during 2022 while in ADM an HIV-testing rate of 45% was achieved. Three per cent of men were diagnosed with HIV in BCMM and 3% in ADM. In BCMM 96% of men were started on ART treatment, while in ADM an ART initiation rate of 97% was achieved. The viral load completion of the targeted group was at 87% in BCMM and 95% in ADM. Viral load suppression was at 96% in BCMM and 92% in ADM at the end of the reporting period.

Mobile truck services play a significant role in providing health services to men residing in remote areas or men who are reluctant to go directly to health facilities. During the reporting period, the mobile truck provided health services for 4 889 men, 1 653 in ADM and 3 236 in BCMM. From that group, 71% were tested for HIV, of which 0.45% were diagnosed HIV-positive and referred to the relevant health facilities for ART initiation and continued care. Additional screening in the truck included: 3 485 tests for non-communicable diseases, 3 182 for substance abuse, 2 195 for testicular cancer and 3 485 for STIs. There were 110 men who were diagnosed with STIs, 156 men with non-communicable diseases and 88 who presented with TB symptoms; all were referred to the nearest health facility for further management. In addition, 11 514 copies of IEC material and 94 738 male condoms were distributed through the mobile

truck. BI conducted education and information campaigns in 2022 which specifically targeted men -39 campaigns in BCMM and 15 in ADM - and were able to reach 3 442 men in total.

In the course of 2022, 527 men participated in 18 community dialogues in BCMM, while in ADM eight community dialogues were conducted, reaching 285 men. Topics of discussion included GBVF, power in relationships, mental health, anxiety disorders, PrEP and PEP, and diabetes mellitus. On World AIDS Day the dialogue focussed on the importance of HIV testing, support for people living with HIV and promotion of a healthy lifestyle.



Figure 6: Participants in a men's dialogue

Services for incarcerated men

The HRG team provided support in the Department of Correctional Services (DCS) centres in the form of HIV testing to male inmates once a week. Workshops were conducted for nursing staff sensitising them about men who have sex with men, provided information on PrEP, viral load monitoring and clinical record review. The team tested 1 713 inmates for HIV during the year, of which 3% were diagnosed HIV-positive and subsequently 98% started ART. One inmate could not be started on ART until his TB symptoms were properly managed. Inmate viral load was monitored regularly, and the viral load completion rate was 98%. Six inmates due for viral load testing did not returning to prison after their court cases. The viral load suppression rate was 88%; the 44 inmates with unsuppressed viral load were offered adherence counselling and introduced to the DOT (Directly Observed Treatment) system, a structured daily provision of ARVs to inmates not adhering to treatment by DCS clinicians.

OBJECTIVE 6: SHAPE EQUAL GENDER NORMS AMONG ADOLESCENTS AGED 10–14

The IKHWELOLethu project focuses on shaping equal gender norms during early adolescence for boys and girls in BCMM and ADM. The project addresses the entrenched patriarchy in the Eastern Cape, which results in women having low levels of personal power and limited choices while experiencing high levels of gender-based violence. IKHWELOLethu uses four strategies to engage young people:

- 1. Facilitated discussions with adolescents aged 10–14 using customised, age-appropriate content
- 2. Debating to promote healthy verbal interactions
- 3. Paceball to promote healthy physical interaction between boys and girls
- 4. Performing arts to provide a platform for adolescents to express themselves.

ACTIVITIES IN 2022

In 2022, IKHWELOLethu was implemented in 78 schools and registered 13 262 adolescents: 9 357 in 52 schools in BCMM and 3 905 in 26 schools in ADM. Out of the 13 262 learners mentored through the programme, 5 472 were male, 5 580 female and 2 258 unspecified.

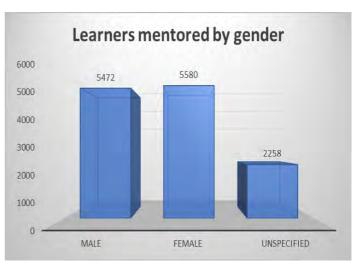
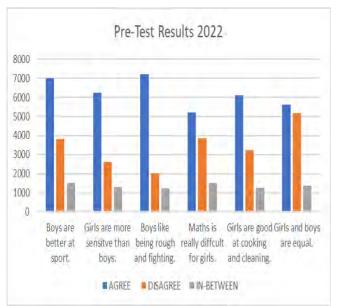


Figure 7: Mentored learners by gender

In 2022, the easing of Covid-19 restrictions allowed BI to coach and engage learners in all three platforms of the programme: 10 917 in public speaking and debating, 7 383 in performing arts and 6 715 in paceball. All those registered in the programme were led by trained mentors in facilitated discussions, guided by a well-designed manual on shaping equal gender norms. The mentors use youth-friendly activities to ignite discussion on existing gender norms and stereotypes. In their introductory session, the adolescents' views on certain gender stereotypes were assessed and they were asked to indicate whether they agreed with statements read to them. The mentor encouraged volunteers to share why they agreed or not and noted

the responses, which were compared with responses at the end of the year when the same exercise was conducted. Figures 11 and 12 show the results of the two tests. Many of the youth initially agreed with popular stereotypes about girls and boys. Encouragingly, a shift in views is observed by the end-of-year assessment, which was conducted in the final session.



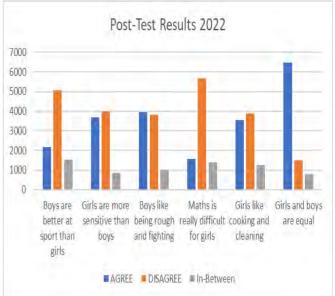


Figure 8: IKHWELOLethu pre-test results

Figure 9: IKHWELOLethu post-test results

Promoting healthy verbal interaction

During 2022, 10 917 learners participated in IKHWELOLethu's public speaking and debating programme across 78 schools in ADM and BCMM. Debating promotes healthy verbal interaction between boys and girls and has gained popularity in many primary schools across both supported districts. Many school principals have commented on the marked improvement they have observed in learners who have participated in the programme. Many schools have also embraced the chance to participate in debating league competitions. The inclusion of public speaking in IKHWELOLethu's debating coaching has enabled more individuals to participate, thereby gaining skills in research and oration.

Promoting healthy physical interaction

IKHWELOLethu fosters normal physical interaction between boys and girls through paceball. This sport was chosen because it is easy to learn, and boys and girls can participate equally. A total of 6 715 learners participated in paceball during 2022.

Promoting expression and shaping identity

Performing arts give adolescents a platform to grapple with and define their identity. IKHWELOLethu used poetry and trained all mentors in the basics of coaching young people to write and recite poetry. By the end of the year, 7 383 learners participated in this aspect of performing arts. Mentors taught learners free-writing as an introduction to poetry, encouraging them to write about topics in a language they felt comfortable using. Learners mainly wrote poems about GBVF and about their parents. Learners showcased their creations during the performing-art league competitions. IKHWELOLethu is planning to host a festival for the programme's performing artists in 2023 to encourage them and give them a public space to share their creativity.

Bumb'INGOMSO league competitions

Leagues are the competitive component of IKHWELOLethu and promote excitement among its participants by offering them incentives for their participation and achievements. Learners are split into teams on the three platforms: public speaking and debating, paceball and performing arts. Mentors introduce all three platforms to the learners before they decide which one most interests them. They compete at three levels in their chosen programme: school level, cluster level and metro level. The leagues run as an extra-mural activity (alongside other school activities). While all learners join in the school league competitions, fewer can compete at the

metro level.

Figure 10: Qolorha by sea teacher coaching learners during a debate competition





11: Masixole Primary School learners and mentors celebrating winning the BCMM debating competition

Feedback on IKHWELOLethu

During the end-of-year graduations run by BI, learners showcased the work done in the three platforms throughout the year. These intimate ceremonies were emotional for learners, parents and teachers. Parents were glad to see the improvement in their children's overall wellbeing and their improvement in academics. Teachers and parents requested that the programme continue as it was playing a huge role in their schools and the lives of their learners.

BI held a roundtable discussion on IKHWELOLethu's programmes with the IKHWELOLethu project director, BI director of programmes, 5 school principals, 10 teachers and 10 parents at a BCMM metro event in October 2022. The team received very positive feedback on the way that learners had been groomed through the programme and felt encouraged to aspire to be more.

BUMB'INGOMSO COMMUNICATION

The year 2022 was one of collaboration and growth for the Bumb'INGOMSO communications steering committee. The BI team hit the ground running by helping to conceptualise and run the first BI young women and girls' summit, which was a huge success. The team also led BI's participation in the #KeReady2Flex challenge by supporting the national and local campaign responsible for encouraging young people to vaccinate for Covid-19. Overall, the team has ensured that BI is the trusted voice in the target area for HIV-prevention and SRHR education. BI is well-known for connecting young women to economic opportunities and creating content that builds resilience, a sense of togetherness and imminent possibility for the young people from BCMM and ADM.

DGMT's Amplify|Mobilise|Change (AMC) programme continues to support our communications team with online communications tools; in 2022 the team joined its national community of practice action lab, which helped mentor the BI communication manager and guide the BI team in strategic communication. The BLN has grown through stronger and more participant-focused content creation and by exploring new platforms for engaging our audiences. The BI brand was also prominent at provincial activities such as the Department of Health march against illegal abortions and the provincial and district World AIDS Day celebrations. At the end of 2022, the communications steering committee hosted reflective sessions, which focused on making BI come alive, building excitement for young people to join and helping build the BLN. We revised our communication strategy to focus on a clear annual plan for taking the work to even greater heights. We identified themes for each quarter, which will guide communication across all

interventions to ensure that all BLN members have a similar experience of BI messages, customised to their age and needs, and that these are consistent across all interventions.

RADIO SLOTS

Radio is a powerful platform for BI to be part of the lives of its participants and their families. In 2022, there were 103 radio slots and nine interviews shared between the GBV, PSS, BCC and health interventions, which reached more than 6 million listeners.

TELEVISION INTERVIEWS

The GBV intervention secured two interviews with SABC Kids News and Newzroom Afrika.

ELECTRONIC OUTDOOR SCREENS

In 2022 the BCC intervention reached 147 000 adolescent girls and young women through nine outdoor digital screens spread across some parts of BCMM, ADM and OR Tambo District Municipality. This tool is instrumental in keeping in touch with project participants, advertising BI's services and communicating key messages to young people. The electronic content created for these screens focuses on directing young people to the BI call centre, and information about HIV/AIDS, SRHR, GBVF, bullying, teenage pregnancy and Covid-19.

SOCIAL MEDIA

WhatsApp

The health intervention used WhatsApp as a platform for its club sessions, with 146 men participating in engagements focused on men's health, GBVF, lifestyle diseases and HIV/AIDS. BI reached 916 young women through WhatsApp group interactions as well. WhatsApp has been instrumental in sharing information on contraceptives, SRHR, PEP and PrEP, and mental health issues. The PSS intervention utilises this platform to advance mentorship, counselling activities and monitor cohort participants. PSS reached 428 students over the course of the year via their 18 WhatsApp groups.

Facebook

The BI Facebook page has now reached the 15,000 followers' mark. By the end of 2022, the page had 15 692 followers, up from 11 248 followers the previous year, an increase of 4 444 new followers in the year. The IKHWELOLethu Facebook page attracted 2 815 followers in 2022, up from 2 425.

The BI Facebook page is one of our biggest tools for engagement with our audience. The BI interventions use it to showcase their work and celebrate the young people who are part of the programme. It is used for awareness campaigns on various issues, such as SRHR, mental health and information about where

young people can go for assistance. This page is also used as a marketing tool for the call centre. It is very popular for sharing internal and external vacancies and other income-generating opportunities for the youth. Live video coverage of BI events/activities published on the site gives members first-hand experiences and an opportunity to take part in online engagements. Our followers are 81.3% women and 18.7% men. More than half of our audience comes from BCMM but we are followed by young people from other parts of South Africa, and a few from South Korea, Botswana, Lesotho and Nigeria.

YAKHA MAGAZINE

One Yakha youth magazine issue was published in 2022 with a focus on "Giving Voice" – advice for budding entrepreneurs and young changemakers, a feature on the boy child, and identifying tools which young people can use to help shape their lives and future. A total of 60 046 physical copies of the magazine were distributed in the year with major distribution points being schools, health facilities, community centres, university/college residences and local shops.

In addition to the physical copies, BI distributes Yakha Magazine via the WhatsApp Magazine platform. One WhatsApp PDF version of the magazine was created for this platform in 2022. Young people can request a copy of the magazine via WhatsApp, which also helps to track who reads it and where they are situated. In 2022, 2 866 young people received the magazine via WhatsApp, with 585 new readers sending requests to receive a copy. The Yakha editorial team ran an online survey through WhatsApp with five questions on what readers enjoyed about the magazine and what they want to see in the next edition. Readers responded that they enjoyed items on fashion, health and sex education, the GBVF article, and the look and feel of the magazine, which they described as the voice of the youth. They requested more stories about empowering the boy child, personal branding, features on talented youth, sport and jobs. Reaching new readers online and getting feedback from them has helped make the magazine more relevant and establish it as an important voice for the youth.

BUMB'INGOMSO COLLABORATIONS AND REFERRALS

Bumb'INGOMSO collaborates with various government departments, NGOs and development agencies to ensure that young people in the programme can be effectively referred to services across BCMM and ADM. Other collaborations pull together stakeholders to address particular aspects affecting young people within the two districts. Below is a summary of the collaborations BI partners embarked on during the reporting period.

Partner	Area of collaboration
The Eastern Cape Liquor	Geographic information system (GIS) mapping of the establishments which
Board	have been awarded liquor licences in BCMM has been finalised. It is
	envisaged that campaigns, which will also involve SAPS, will take place
	during the third and fourth quarters of 2023.
Sex Workers Education	SWEAT is a partner in BCMM whose focus is the support of sex workers for
and Advocacy Taskforce	facilitating discussions and sharing information with sex workers. The
	health intervention works closely with them in conducting outreach and
	providing services for sex workers.

LESSONS LEARNT

In implementing Bumb'INGOMSO's programmes in 2022, we learnt that:

- Schools in rural ADM were more accessible and receptive to programme implementation than urban schools in BCMM, due largely to key stakeholders such as SBG members and parents in these schools easily availing themselves.
- ADM health facilities showed more appreciation of the support BI provides compared to those in BCMM. This may be attributed to differences in staff/patient ratio and population size of facilities as BCMM is overburdened.
- Placement of a social worker permanently at the Lingomso Youth Centre attracted more beneficiaries to access services.

CASH FLOW OF FUNDS

NOTES ON THE STATEMENT OF COSTS

Bumb'INGOMSO's total budget for 2022 was R34 534 000 for interventions and R8 763 000 for BI CORE. The expenditure for interventions and BI CORE was R26 954 000 and R7 621 000 respectively. The budget was utilised as planned and indicated in the contracts with each intervention partner. The interventions are still due to be paid 10% of the annual 2022 budget once the annual report is submitted. It has been observed that savings will be realised across the interventions due to contracts being signed late in 2022. As a result, our partners continued to implement their programmes, but at a reduced scale and spending. In some of the interventions replacement of personnel who resigned has been slow, which has also resulted in reduced expenditure in those line items.

	2 Year Budget	Annual Budget (FY2022)	Quarter 4(FY2022) Actual # Expenditure		Year to date expenditur e (FY 2022) Project cost to date ∞		te ∞	Start to date variance	% of Budget		
			Total	KFW	DGMT		Total	KFW	DGMT		
Project Activities				Local	currency in .	1,000 (ZAR)					
Behavior Change and Communication	23,621	11,154	2,776	2,468	308	9,615	10,015	9,245	770	13,606	42%
Improvement of Health Care Services	18,942	9,045	1,674	1,488	186	6,367	7,886	7,279	607	11,056	42%
Combat Gender base violence	8,899	4,486	1,114	990	124	3,915	4,182	3,860	322	4,717	47%
Educational training & work - link	4,438	2,243	482	428	54	1,932	2,356	2,175	181	2,082	53%
Prevention for other key population	15,500	7,606	1,406	1,250	156	5,125	7,059	6,516	543	8,441	46%
Total Interventions	71,400	34,534	7,452	6,624	828	26,954	31,498	29,075	2,423	39,902	44%
Ikhwelolethu	10,579	5,295	1,436	1,276.46	160	5,093	5,093	4,527	566	5,486	48%
Monitoring & Evaluation (including surveys)	1,500	750	461	409.78	51	1,075	1,075	956	119	425	72 %
Communication	2,000	1,000	546	485.34	61	687	687	611	76	1,313	34%
Economic Opportunity Intervention	2,157	1,079	360	319.71	40	613	613	-	545		28%
Total M& E and Communications	16,236	8,124	2,803	2,491	311	7,468	7,468	6,093	1,306	7,224	46%
Personnel	9,100	4,500	1,851	1,645	206	5,412	5,412	4,811	601	3,688	59%
Travel and accommodation	-	-	8	7	1	47	47	42	5	- 47	#DIV/0!
Contracted supplier services	-	-	16	14	2	115	115	-	102		#DIV/0!
Knowledge sharing	-	-	-	-	-	-	-	-	-	-	#DIV/0!
Staff training (own staff)	-	-	-	-	-	32	32	28	4	- 32	#DIV/0!
Equipment	145	71	-	-	-	49	49	44	5	96	34%
Administration (direct costs)	1,558	664	167	148	19	726	726	645	81	832	47%
Administration (indirect overheads)	132	59	26	23	3	96	96	85	11	36	73 %
Total National Operations and Management	10,935	5,294	2,068	1,838	230	6,477	6,477	5,655	809	4,573	<i>59</i> %
Differential - BI5 approved budget and											
Contract signed							-	-	-		
Total to date	98,571	47,952	12,323	11,375	948	40,898	45,442	41,947	3,496	51,699	46%

PERFORMANCE MONITORING FRAMEWORK FOR 2022

Intervention	Indicator	Project target	Cumulative achieved	2022 target	2022 actual	Comments on performance
BI leadership network	# recruited into the BLN	45 000	51 540	-	-	No annual target was set for recruitment into the network as project target has been reached.
Behaviour change and communication	# of 15–29-year-olds exposed to BI through mass media	100 000	584 627	75 000	161 890	This number is made up of Outdoor Advertising in BCMM and ADM and YAKHA Magazine distribution across BCMM.
	# of young women participating on residential campuses	11 000	11 000	-	-	DISCONTINUED
	# of members registered into the leadership network in BCMM	26 000	26 983	-	542	No target was set as project target has been reached.
	# of members registered into the leadership network in ADM	5 000	4 192	2 550	864	
	# of YAKHA magazines distributed to young people in ADM	10 000	25 336	2 500	9 595	
	# of network members actively participating in the BI network motivational and leadership programme (clubs and BLN	35 000	55 284	20 000	18 562	

Intervention	Indicator	Project target	Cumulative achieved	2022 target	2022 actual	Comments on performance
	meetings)					
	# of young people using the BI call centre	39 200	47, 152	12 500	7 427	
Health intervention in	# of young women aged 15–29 accessing youth-friendly health services	1071 220	1 107 215	76754	142 491	
	# of HIV tests conducted with young women	335 574	340 782	38 377	46 906	
	% of youth diagnosed with HIV	4% of tested	3%	4%	2%	
	# of HIV-positive youth initiated on ART	95% of HIV diagnosed	85%	95%	98%	
	% of youth with viral load done	95% of due	81%	95%	94%	
	% of young women aged 15–29 on ART with suppressed viral load	95% of done	93%	95%	96%	
	% diagnosed with STIs treated	100%	100%	100%	100%	
	% of youth diagnosed with TB started on treatment	100%	100%	100%	100%	

Intervention	Indicator	Project target	Cumulative achieved	2022 target	2022 actual	Comments on performance
Health intervention in	# of young women aged 15-29 years accessing youth-friendly health services	246 008	145 868	60 804	53 255	
	# of HIV tests conducted with young women	91 904	63 607	30 402	25 584	
	% of youth diagnosed with HIV	4%	2%	4%	2%	
	# of HIV-positive youth initiated on ART	95%	98%	95%	99%	
Gender-based violence	# young women trained on developing agency, SRH rights, GBVF with linkage to HIV and AIDS and advocacy	10 000	11 786	2 000	819	
	# of trained young women participating in GBV-prevention activities in their communities	2 000	3 735	100	636	
	# of victims of sexual or physical violence reporting cases of GBVF at SAPS	23 900	13 526	9 700	8 242	
	# of survivors of GBV receiving services at victim support centres (placed at 2 courts and 4 police stations)	10 000	11 278	3 250	4 612	

Intervention	Indicator	Project target	Cumulative achieved	2022 target	2022 actual	Comments on performance
IKHWELOLethu gender norms shaping project in BCMM	# of adolescents aged 10–14 who were engaged in facilitated discussions guided by mentors	25 000	27 477	9 000	9 357	
	# of adolescents who participated in performing arts	10 800	6 638	5 000	4 284	
	# of adolescents who participated in debates	4 650	8 665	2 000	7 013	
	# of adolescents who participate in paceball	10 800	6 586	5 000	4 344	
	# of teachers supporting implementation of projects	450	155	30	52	One teacher supports the implementation of the project in each school.
	# of parents supporting implementation of projects	1 500	309	500	0	Parent-child dialogues have been moved to 2023
IKHWELOLethu gender norms shaping project in ADM	# of adolescents aged 10–14 years who were engaged in facilitated discussions guided by mentors	10 000	7 138	3 000	3 905	
	# of adolescents who participated in performing arts	3 600	4 470	2 500	3 099	
	# of adolescents who	1 550	4 978	500	3 850	

	participated in debates					
	# of adolescents who participated in paceball	3 600	3 634	2 500	2 337	
	# of teachers supporting implementation of project	150	48	20	26	
	# of parents supporting implementation of project	500	0	250	0	
Intervention	Indicator	Project target	Cumulative achieved	2022 target	2022 actual	Comments on performance
Psychosocial Support	# of students in TVET Colleges recruited into the programme	900	2 218	450	506	
	# of students reached through positive talk seminars	2 000	3 417	1 000	1 013	
	# of students that received one-to-one counselling	900	1 507	450	424	
	# of students who participated in emotional intelligence workshops	900	1 248	450	809	
High-risk groups	# of female commercial sex workers identified in BCMM	1 450	838	50	19	
1) Sex workers	% of sex workers tested for HIV	100%	100%	100%	0	
	% of sex workers tested	8%	14%	8%	0	

	positive for HIV (new)					
	% of those sex workers who tested HIV positive are initiated on ART	100%	100%	100%	0	
Men's	Male headcount	319 195	152 302	83 366	23 348	
programme (men	# tested for HIV	163 229	66 736	41 683	13 357	_
aged 25-50)	% tested positive for HIV	8%	5%	8%	3%	
	70 tested positive for this	070	370	G/0	370	
	% initiated on ART	60%	73%	60%	96%	
	% on ART with viral load done	60%	75%	60%	87%	
	% on ART with suppressed viral load	60%	92%	60%	96%	
	% of STI diagnosed started on treatment	100%	100%	100%	100%	_
	% of TB diagnosed started on treatment	100%	100%	100%	100%	_
District	Male inmates headcount	23 065	41 951	5 000	11 217	A total of 11 217 inmates were provided
Correctional	# of male prisoners tested for	95% inmates	9 396	1 380	1 713	health services within the hospital section.
Services	HIV	reached by BI				·
	% of male prisoners tested positive for HIV	3%	3%	3%	3%	
	programme (men aged 25–50) District Correctional	% of those sex workers who tested HIV positive are initiated on ART	% of those sex workers who tested HIV positive are initiated on ART	% of those sex workers who tested HIV positive are initiated on ART 100%	% of those sex workers who tested HIV positive are initiated on ART 100%	% of those sex workers who tested HIV positive are initiated on ART 100% 100% 100% 0

% of male prisoners initiated on ART	95%	98%	95%	98%	The thirteen unsuppressed were started in
% of male prisoners on ART with viral load done	95%		adherence classes.		
% of male prisoners on ART with suppressed viral load	95%	87%	95%	88%	