A Success Story: The Etafeni Trust
“Fit for Life, Fit for Work” Programme

“Integrating Economic Empowerment Skills into Sexual and Reproductive Health Programming for Young People”

June 2011
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1. **Context**

1.1 **Background: Documenting Success Stories in Sexual and Reproductive Health Responses**

In the southern African region a significant amount of work is being done by community based organizations and their partners in supporting communities with knowledge and skills to reduce sexual and reproductive health (SRH) vulnerabilities. Many of these interventions are changing lives and infusing a heightened sense of empowerment and coping capacities amongst the beneficiaries they reach. Much of this work, however, remains poorly documented and poorly disseminated.

By documenting interventions that have been demonstrated to have a positive impact - strategically sharing successes and approaches (the ‘how’ and ‘what’) used to gain success – other organizations can learn, adapt and replicate the successful interventions and benefit communities in their constituencies. A documented success story increases the body of available knowledge for reference on what works and how it works. It provides a basis for funding agents and programme managers to inform resource allocation and mobilization. Documenting a success story and sharing it widely also provides inspiration and motivation for those involved in making the intervention a success, and raises the visibility of their commendable efforts.

A success story can be described as:

> “a story illustrating a positive change, by sharing the “who, what, where, why, when, and how” of an individual, household, or community in a story that represents the case of different individuals, households, or communities targeted by the programme”.

The Etafeni Trust was identified for documentation as a success story, based on evidence gained within several platforms on interventions addressing SRH vulnerability of young women in the past two years. Amongst its multi-purpose community interventions, the Etafeni Trust launched its “Fit for Life, Fit for Work” programme in 2007 (replicated from a similar programme in India) which has since grown rapidly and shown positive impact on the lives of those it reached. Eight times a year, groups of twenty young adults (60% young women) spend four weeks - all day, every day - looking at themselves, their life stories, their goals, their values. There is a lot of work done around sexuality - and space is offered for the young people to articulate, perhaps for the first time, what it is they want for themselves - not what culture, peer pressure or the consumer society determines. After the participants graduate from the "Fit for Life" course, they move into work skills training: English, computer skills, driving lessons and many other work-related courses. They are then helped to find work, and for the past three years, Etafeni has achieved an 80% success rate in placing graduates in either paid employment, stipended internships or tertiary studies with a bursary.¹ The programme has been replicated in various other centres in South Africa and this is one testimony to its workability.

This document outlines the ‘**how and what**’ that makes the Etafeni Trust programme a success story.

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¹ [http://www.etafenitrust.org/FitForLife](http://www.etafenitrust.org/FitForLife)
1.2 Reducing Vulnerability to Poor Sexual and Reproductive Health: Economic Empowerment as a Strategy

Women’s economic dependence on men and unequal access and control over resources, continues to increase their chances of engaging in unsafe sexual behaviour. This includes transactional sex, coerced sex, accepting their partner’s multiple concurrent sexual partnerships and tolerating violence, thus increasing their risk of HIV infection.

In the past decade, significant evidence has been generated supporting economic stability and empowerment of young women as a strategic entry point to safeguard their sexual and reproductive health and rights. Many women in partnerships often accept risky behavior from their partners because of the need for economic security. Studies in Vietnam, Brazil and South Africa have revealed that where women have independent sources of income and employment they are able to insist on safe sex practices with their partners. Women in South Africa have been quoted as saying “Poverty makes prostitutes of us”, illustrating the impact of economic insecurity on SRH choices and decision-making abilities of women in the region. Findings from another study in Nigeria highlight the significance that education of women and their access to economic resources have on women’s empowerment in terms of their reproductive behavior.

In 2004, a nine-month-long programme called SHAZ! (Shaping the Health of Adolescents in Zimbabwe) provided 16 - 19 year old economically disadvantaged, out-of-school girls with an integrated microcredit, HIV education and behavior change intervention. Outcomes measured post-intervention revealed increased HIV knowledge, increased equity in relationships, and increased condom use and safe sex practices.

In 2006, a report from IPPF, UNFPA and YoungPositives interrogated programming for economic empowerment linked with SRH for young women, and highlighted how economic empowerment of young women empowers them not only for their practical gender needs (cognizant that gender dynamics are core to SRH and rights), but goes beyond to meet their long-term strategic gender needs. In this vein, the report further shares that given the urgency of addressing prevention for young women, diverse and innovative ways should be explored in programming – including economic empowerment approaches, revisiting interventions and approaches that have shown promise – and learning from what works. Such programmes need to be documented and shared for replication by peers in similar socio-economic and cultural settings.

Although economic empowerment of women and girls requires them to have access to vocational training; effective programmes offering these skills also teach them assertiveness and recognition of gender norms. These collectively enable women to negotiate safer sex and adopt behaviour and social positions that maintain their SRH in the long run.

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2 Gillespie and Kadiyala (2005) [http://www.whatworksforwomen.org/chapters/21/sections/63](http://www.whatworksforwomen.org/chapters/21/sections/63)
5 What Works for Women and Girls (2010) [www.whatworksforwomen.org](http://www.whatworksforwomen.org)
The long term impact of economic empowerment on transformation of gender power relationships, essential to reducing vulnerabilities and risk related to SRH outcomes, is dependent on the extent to which the interventions designed are meeting the needs and circumstances (socio-economic contexts) of the women targeted.

It is further imperative to remain mindful that empowerment of young women to be economically independent is only “half the battle won”, as long as their partners still exercise control over these resources, particularly amongst married women. This speaks to the need to balance empowerment of young women economically, with empowerment of young men on gender and SRH issues, towards a behavioural shift that exudes respect, partnership and responsibility, rather than dominance and control.

While there is a recognized need to strengthen indicators that measure the link between reduced risk of HIV infection and economic empowerment of women and girls, evidence continues to reveal that increase in access to information, skills, services and income access correlates with women’s increased abilities to protect themselves from violence and poor SRH.

Within this milieu, the Etafeni “Fit for Life, Fit for Work” model stands as an example of an attempting to close economic security gaps for young women (and their peer males) in a community with adverse SRH, a high incidence of violence and high HIV infection rates. Documenting it as a success story may facilitate scale-up of the programme and thus provide access to better sexual and reproductive health for young women - within neighbouring communities and similar contexts across the southern African region.
2. Methodology and Documentation Approach

2.1 Documenting Developmental Success Stories – The SAfAIDS Model

SAfAIDS has been documenting best/good practices and success stories in development work, particularly HIV, gender, culture and SRH related programmes and policies across the SADC region for over five years. During this period SAfAIDS has established standard criteria for identification, methodology and approaches for documentation. It has shared good practices and success stories. These have proven valuable in supporting programmes in scale-up. They have also provided advocacy for resource mobilization and shown commitment towards replication of documented working practices in the areas of HIV, gender, culture and SRH.

The systematic approach used for documenting the Etafeni Trust *Fit for Life, Fit for Work* programme as a success story, has been drawn from experiences of SAfAIDS, as well as other organizations (such as USAID/Africare and DfID):

*a* Defining the Success Story
The success story has been defined within this construct: “a story illustrating a positive change in the life or lives of individual/s by using an appreciative eye of inquiry, by sharing the “who, what, where, why, when, and how” of an individual, household, or community in a story that represents the case of different individuals, households, or communities targeted by the programme”.

*b* Documenting the Success Story
After identifying the programme or intervention to be documented, and in preparation for field work to collect data around the success story, the following steps have been considered:

**Step 1: Defining the Generalized “Success”, also known as the programme “Impact”**
Focus is placed on the generalized impact or success, portraying what the success has been for a substantial number of beneficiaries, rather than being about one individual. It is important not to develop a success story out of an experience that was felt by only one or two beneficiaries. This involves identifying ways that beneficiaries are successfully responding to, or reducing, their risks, and describing the specific programme approach/es to which these behaviour changes can be attributed.

**Step 2: Outlining the Descriptive Details of the Impact. Who participated in the achievement of the results?**
The story seeks to record where the intervention took place, and during what time period, referring to what need is being met by the intervention, and what behaviour change (to reduce a certain vulnerability or risk) is intended by the introduction of the intervention. The target audience (intended beneficiaries), and stakeholders (including different community groups and bodies) involved in the intervention, from inception onwards, have been described, including their respective roles. The link between their involvement and the positive impact is shared as observed, and the description of positive impact seeks to reflect two important elements of the success story: integration and universal participation.

**Step 3: Answer 8 Key Impact Question**
Data collection tools were designed. Data collected was analyzed and collated. The write-up, presents information answering the following overarching questions:

- **What did they** (stakeholders, for instance, programme designers, implementers, beneficiaries, community at large, other supporting structures) **do?** What were the approaches used?
- **How did they do it?** Were innovative approaches employed, with the specific target audience, to meet the specific need? Was a rights-based approach considered? Was there multi-sectoral involvement? Can others easily do it as well (adapt and replicate)?
- **How long did it take?** Were the processes tedious, or effective within relatively short periods? Would it be possible to scale-up the intervention easily?
- **What were the opportunities identified during programme roll-out and how were they directly/indirectly related to the positive impact?**
- **What did it cost?** Were cost-effective strategies employed and how?
- **What were the results?** Were the objectives of the programme met (even beyond expectations)? What were main positive changes that can be attributed to what was done (strategies and approaches) during the programme?
- **Are the results long-lasting?** Were the approaches sustainable, or are there plans to ensure sustained results for the beneficiaries?
- **What were the challenges faced**, how were these overcome, and how did they affect positive impact?

**Step 4: Illustrate the Story of at least one that Represents the Project Impact on Many**
As the success story was prepared using information collected in response to the above eight *Impact Questions*, experiences of one of the beneficiaries is shared to illustrate what happened, including anecdotes.

**Step 5: Collect Captivating Quotations and Photos to Represent the Story**
Photographs, already available, to illustrate the success story as it evolved from inception, were collected. These complemented those taken by the field team during the data collection period. Formal consent for taking photos (ethical consideration) was sought, and quotations were recorded to animate the document, and offer a ‘human face’ to the described impact.

**Step 6: Use of the Completed Success Story**
The following are suggested uses for the success story document:
- Provide a tool for learning, adaptation and replication by others as it systematically portrays the ‘how and what’ of the success story
- Add to body of available knowledge for reference on what works and how it works
- Provide an evidence-based tool for informing funding decisions (influence resource allocation and mobilization by donor community)
- Pose as a tool for advocacy and scale-up similar interventions
- Raise visibility of good work and provide inspiration and motivation for those involved in the success story
The success story dissemination plan shall be developed in consultation with the Etafeni Trust and make use of various platforms for dissemination, for instance, sharing via online platforms (websites, blogs); target distribution of the story in hardcopy; airing via audiovisual media; being published in newsletters and similar mass periodicals; or shared orally at meetings, conferences and so forth.

**c] Measuring Success**
Validating and measuring ‘success’ described in the documented story, in a methodical manner, that is standardized, the following considerations were made:

**Criteria:**
- Involve the target audience
- Clearly identifiable before and after effect (change)
- Expanded public and private dialogue
- Increased leadership and agenda-setting by vulnerable/disadvantaged
- Increased linking/networking between groups with similar interests/vulnerabilities, who might otherwise have not been in contact
- Improved capacity of beneficiaries in responding to and reducing their risk/vulnerabilities

**Methodologies:**
Several methodologies were used to collate and triangulate information towards documenting a success story, these are described in Section 2.2.

**d] Capturing Success Stories for Sharing, Learning and Uptake**
Multiple methods can be used to capture and document success stories to enable increased learning and uptake by other organisations working within a similar area. These include:
- Conducting Digital Story Telling
- Shooting a documentary
- Developing a written booklet of success, which includes narrative text and photographs to provide visual evidence of success
- Developing Success-Story Sheets and posting them onto online platforms such as blogs, websites

This documentation was done in the form of a booklet (the scope of this document) and we shall explore complementing it with one or more of the above capturing methods in consultation with the Etafeni Trust.

The process of documentation entailed the following key steps:
- **Identification** of the Etafeni Fit for Life, Fit for Work programme as a significant success story, during a Ford Foundation hosted meeting in September 2009
- **Groundwork – in the form of desk review** - done to ascertain initial identification of success story, such as credibility of the organization; ample implementation time to reflect impact
- **Establishment of documentation team** of experienced documenters, who also had good knowledge on HIV, SRH, youth empowerment and development issues in Africa
- **Development of methodology matrix and tools for data collection** : in this case the categories of interviews and participants in focus group discussions (FGDs)
  - Current students
  - Students completed and in formal employment
  - Graduates who had pursued entrepreneurial endeavours
  - Parents/guardians of the graduates
  - Programme implementers: staff, management and technical advisors
- **Coordination with Etafeni**: share purpose and intended methodology, agree on dates for data collection and logistics
- **Analyse data qualitatively and collate draft report**

### 2.2 Methodology for Documentation and Dissemination

**Methods, Tools and Sources:**

The following methods and tools were employed during the documentation:

- **Focus groups discussions (FGDs), using FGD guides, with**
  - Young women/Young men
  - Young women and men together (all the above inclusive of young PLHIV)
  - Parents/guardians and teachers of young beneficiaries
  - Programme implementers from the Etafeni Trust

- **Key interviews, using structured closed and open questions, interview guides, with:**
  - Selected beneficiaries
  - Selected relatives of beneficiaries
  - Director, managers and key staff at the Etafeni Trust
  - Community leaders (traditional leaders, councillors, headmasters, etc)

- **Literature review, using a categorical checklist, of:**
  - Etafeni documents including any
    - Programme guiding documents eg work plans, strategies, monitoring plans, policies
    - Programme reports, evaluations and assessments
    - Documentation of testimonies from beneficiaries
    - Photographs showing programme activities
  - Web-based databases and resources, on similar SRH related interventions in the country and region

- **Observation, using a checklist, and capturing with a digital camera**

See Annex 1 for samples of the data collection tools used during the documentation.

**Data Collection and Analysis:**

Data was collected on site, and the methodology allowed for fluidity in terms of exploratory questioning and sourcing of information for validation. Field work took place at the Etafeni Day Care Centre, Nyanga, Cape Town, between 25th and 29th October 2011. Analysis and collation of the first draft report was done manually, using checklists, as information collected was qualitative in nature.

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9. See methodology Matrix in Annex X for details on numbers of FGDs and interviews held during data collection, and profile of participants
Review of Documented Story:
The success story draft was shared with the Etafeni Trust for review and approval, before final production and dissemination for scale-up in the region.

Sharing and Scale-up Mapping:
The success story shall be shared via online platforms (websites, blogs); hard copies will be distributed to targeted recipients; it will be published in newsletters and similar periodicals; and shared orally at meetings, conferences and relevant events. A mapping meeting to strategize scale-up, advocacy and fund-raising related to the success story was arranged.
3. The Etafeni Trust

3.1 Environmental Overview

The home of the Etafeni Trust is Nyanga, a township in Cape Town, South Africa. It is one of the oldest townships in Cape Town, established as a result of the migrant labour system in the early 1950s. Nyanga is one of the poorest and most dangerous parts of Cape Town. Many dwellings are shacks made out of zinc, cardboard and wood but recent government initiatives have provided a significant number of brick houses. Many families in the township live below the breadline, and community members cite crime, gangs, drugs, alcohol abuse, violence, sexual violence against women and children, unemployment and HIV as being major challenges faced by the Nyanga community. Formal unemployment is high.

3.2 Birth of the Etafeni Trust

“Etafeni brought light into my life in a way I never expected.”
- 28 year old female beneficiary

Etafeni was established in response to the needs of the Nyanga community, initially to provide a safe and progressive day-care centre for children vulnerable to, or affected by, by HIV, and those from families where illness and death of parents was related to the HIV epidemic. However, over the years its service expanded to meet the needs of the community in an integrated and holistic manner. This was as a result of the recognition of the critical need to provide services that include direct HIV prevention interventions, in order to lower the rapidly increasing HIV incidence rates in the community, especially among young women aged 18 to 30 (over 50% new infections are in this age group).

The Trust, in partnership with the local community and with the initial assistance of the Department of Labour, has built a multi-purpose day care centre in Nyanga which takes into account the needs of vulnerable children, the needs of those who care for them and the needs of the community who will, of necessity, be their safety net. Growing out of an understanding of the attachment needs of children, the Etafeni Trust provides a non-institutional alternative to what is all too often a disrupted childhood, coupled with traumatic losses of an HIV-affected child. The physical structures and services on site are a metaphor, as it were, for what is hoped to be reflected by all the role players at Etafeni: the gradual growth of trust, of love and softness, of creativity and of enjoyment of self and others - and the promotion of safe and healthy individuals and families in the community.

The Trust’s 2010-2011 Strategic Plan outlines 10 key programme service areas being offered to the Nyanga community, as a result of a strategic shift to suit the needs of the community. These shifts have embraced the vision of the Trust in creating a space for growth and development, for care and nurturing of children and their caregivers – and the wider community affected by HIV and adverse social challenges.
3.3 Key Programming Service Areas at Etafeni

Etafeni offers multiple services to the community it serves, these include:

a) Preschool – Early Childhood Development (ECD)
Early childhood development lays a solid foundation for children and creates a safe learning environment for growth and development. The preschool provides ECD, as well as care and support to children affected by HIV, from the ages of 6 months to 6 years. Caregivers and/or parents are required to bring the child’s birth certificate, clinic card and a referral letter from local health facility or doctor prior to registration.

b) After School Care Programme
The After School Care Programme caters for children from Grade 1 to Grade 12. Children come to the centre to have lunch, get assistance with their homework and other educational projects, including going to the library to do research and read. English lessons, computer literacy classes and sporting activities are also part of the programme activities. If necessary, the children have school uniforms washed in the laundry. A teacher and assistant run the afterschool care programme at Etafeni.

c) Social Work Services/Foster Parent Training
In partnership with the Department of Social Development, Etafeni recruits, screens and trains potential foster parents. The Social Worker is responsible for running the programme. The area which the programme covers is Nyanga, Gugulethu, Crossroads and Philippi. The programme also provides social work services to women, children and vulnerable youth. These services include facilitating social grants, counselling and relevant referrals.

d) Home Community Based Care (HCBC) Programme:
This programme aims to care for and support orphaned and vulnerable children (OVC) and adult clients who are living with HIV. Below is an outline of how that mandate will be carried out by the community care workers, who are described as the “foot soldiers” of the organization. They make sure there is a visible presence of people who go from door to door in the community to identify and assess families in need.

e) HIV Counselling Programme:
In this programme, Etafeni has partnered with the Provincial Department of Health in rendering counselling services in the health facilities. Etafeni currently employs 31 HIV Counsellors to do health education, pre and post-test counselling, and run support groups from more than ten health care facilities in the Klipfontein District. They are supervised on a weekly basis by two Coordinators and a Clinical Social Worker and refer clients and children of clients to other Etafeni programmes, i.e. Preschool and Income Generation.
f) Mobile Flexi Hour Voluntary Counselling and Testing and TB Screening:
This programme is a partnership between Etafeni and Desmond Tutu TB Centre/University of Stellenbosch. Desmond Tutu TB Centre employs a professional nurse and enrolled nurse, Etafeni employs 4 Lay Counsellors to work in this programme. The team makes itself available in local schools, factories and informal settlements. It markets itself through community structures, via NGOs, CBOs, in community newspapers and on community radio stations, but is based on site at the Etafeni Centre. At the centre, clients are offered free drop-in confidential counselling and testing, referral to treatment and other programmes for clients who test positive.

g) Income Generation Programme:
Women living with HIV are referred into this programme by the Etafeni counsellors and community caregivers. The women are trained in beadwork, smocking, patchwork and sewing, and the crafts produced are sold locally and internationally, and through individual orders, giving them a steady income. The programme aims to contribute to restoring women living with HIV to health, and to empower them economically. With the help of a marketing consultant this group attracts clients like Woolworths. These contracts provide income to the beneficiaries, whilst looking for long term employment or entrepreneurial opportunities.

h) Food Garden:
The Etafeni Day Care Centre employs two community members who provide fresh vegetables from the centre’s vegetable garden for the preschool and after school care programme, as well as for HIV+ women in the income generation programme. Technical support and training for the gardeners and other community members is provided by Abalimi Bezekhaya.

i) Nutrition Programme:
Funding from the Department of Health has enabled the Trust to employ a dietician, to support this service area. This service programme focuses on malnourished children from the ages of 0 – 5 years, with a professional experienced dietician training the centre’s cooks and planning menus. Expanding the service to the community, the dietician trains Community Care Workers to identify malnourished children, works with the child’s caregiver to restore the child to health and links them with local health facilities within a standard referral and support system. She also helps HIV+ adults establish their own home food gardens.

j) “Fit for Life, Fit for Work” Training Programme: This element is the scope of this document.
Figure 1: The organogram above illustrates the comprehensive skills base within The Etafeni Trust staff complement.
4. The Etafeni “Fit for Life, Fit for Work” Programme

4.1 Programme start-up and learning from the Indian programme

The Etafeni Fit for Life, Fit for Work (FLFW) programme was started in 2007, as a replication of a similar programme in India. The Indian programme was started about 20 years ago as a result of a study undertaken by the initiator in his home town of Madras/Chehnnai. He wanted to discover ways of making an impact on the high unemployment rates among young men and women in the community. The study which sought to understand the needs of employers, found that the employers were not particularly interested in highly educated or trained employees. They were more concerned about hiring young people with a good work ethic and positive attitude to life and work, who could grow with additional training provided on the job. The Indian programme was thus conceived with the aim of providing life skills for young people and assisting them to find employment and lift themselves out of the poverty that characterised many of their lives and those of their families. This programme was a precursor of the Etafeni Fit for Life, Fit for Work model as implemented in Nyanga, Cape Town.

During the process of starting up the programme in 2007, staff members from Etafeni had the opportunity of visiting the Indian programme on an exchange visit in order to learn from an established programme, and to gain important insights that would assist with the replication of the programme in a different – African - context.

The Etafeni programme also has one major difference to the Indian programme. Sexual and reproductive health information was included as a core component in the curriculum, to help young people to overcome the causes of poor SRH which can impede their development. This was informed by the epidemiological statistics that were prevalent in the community at the time (Nyanga had over 50% HIV prevalence in the 18-30 age group, the age group targeted by the programme).

4.2 “Fit For Life, Fit For Work” Programme Overview
Since 2007, The Etafeni *Fit for Life, Fit for Work* programme has supported young unemployed school-leavers in Nyanga, Cape Town to adopt a ‘fit for life’ approach to their future. The programme is four-weeks of initial life skills and SRH training offered to young men and women between the ages of 18 and 30 years from Nyanga. The training programme admits 20 young men and women who have matriculated; who have a clean credit rating and no criminal record to participate in the programme. Sixty percent of trainees in each group are young women. Trainees enter into a contract with the organization, committing to adhere to the rules, which include no swearing or smoking or substance abuse within the grounds, to respect each other and the trainers at all times and to complete their training.

Although interest in participating in the programme was initially low, after the inaugural group of trainees graduated in 2007 and were successfully placed in employment or tertiary institutions, the organisation found itself with long waiting lists of people wanting to participate. The recruitment process for the programme is mainly by word of mouth. People participating in other programmes at Etafeni also share information. In July 2010 however, after realising that the quality of potential trainees was not at the preferred standard, staff at Etafeni took steps to improve on quality and streamline applications by advertising the training programme in the community newspaper, against set criteria.

The training offered to young people was initially based on the Indian manual but the curriculum has now been revised, making it more appropriate for the Southern African context. The Etafeni training programme aims to get young people to reflect on, for a period of four weeks, what they need in a job and what is holding them back from achieving these goals.

Each year eight or nine groups of 20 learners (with matric as an entry requirement) are run through a 4-week life skills training programme. The programme aims to empower participants to make healthy life and sexual choices, thereby enhancing their self-confidence and furthering their ability to seek and obtain work. Overall, the aim of the programme is to place learners in productive employment at the end of each training cycle or assist them with further education and training opportunities that will lead them towards employment. The programme has been very successful in its application so far, demonstrating on average an overall placement rate of 80%. This placement rate includes short and mid-term placements in entry level jobs.

However, the programme still struggles to establish a strong and continuous link with industry (potential employers), and thus is limited in creating long-term employment opportunities for the graduated learners. New ways of operating the programme, conducting the training and establishing industry links are being considered in order to close this significant gap on a sustainable basis. Furthermore, funders have prompted scale-up of the programme to offer school-leavers across the country the same opportunities of the Etafeni “Fit for Life, Fit for Work” programme.

The programme has been replicated in three other sites in South Africa (Hillbrow, Tzaneen and Vygrond) with some modifications and some differences in the application of the model. To date 120 graduates have passed through the programme each year for the past four years, generating a total of 480 learners trained. Sixty percent of the graduates are female, which is a positive impact of the programme.
“Youth are trained and groomed to be mature and who can look after themselves, and it was not like this before – we could be doing anything bad in the street if not for Fit for Life. I can now get a job and be proud of it, and also now I can also think of doing further schooling”

– Young woman graduate, 23 yrs old

The programme targets young people from 18 to 30 for work skills and SRH training. Some of the training focuses on:

- Computer skills – there is a practical application as trainees themselves learn to write their own CVs
- Driving lessons
- English conversation and interviewing skills
- Opportunity to reflect on dreams, long-short, and medium term goals – and to build confidence that will translate into a young person who can be successfully placed
- Placement with a workplace or educational institution
- Follow up support for graduates who would not have been placed – they have support group meetings and access to the computers to work on their CVs

The project has an 80% success rate in placing graduates of its training programme into vocational training colleges, university (one graduate), tertiary institutions (many graduates in courses in training colleges), workplaces (many graduates at the airport, retail outlets, restaurants, hospitality industry, educare facilities, NGOs, government departments, etc) and some graduates become employers themselves as entrepreneurs (one catering enterprise, one motor mechanics enterprise, one roof repair and one shoe-making enterprise reported). There are some requirements for entrance into the programme (the young people must have a matric certificate, clean credit rating, no criminal record, and agree to abide by certain rules for the duration of the course). Applicants go through a selection process, where they are interviewed and fill in a questionnaire. They enter into a contract with Etafeni, committing to the programme for four weeks.

4.3 Values of the “Fit for Life, Fit for Work” programme

To enable engagement with the programme by participants, and execution of the programme by implementers, on a day to day basis, a set of core values have been established for the programme, and are closely linked to the spirit of whole organization of Etafeni. These values are imparted to those who go through the training. They are outlined in Figure 2 below
**Figure 2: Values of the Fit for Life, Fit for Work Programme**

<table>
<thead>
<tr>
<th>Values</th>
<th>As described and visible in the FLFW Programme</th>
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<tbody>
<tr>
<td><strong>Open communication</strong>&lt;br&gt;Unxibelelwano olucacileyo</td>
<td>• Trust that what you say can be received well&lt;br&gt;• Create an environment that allows for open communication</td>
</tr>
<tr>
<td><strong>Transparency</strong>&lt;br&gt;Ukungafihlisi</td>
<td>• Everyone knows what you are doing and why&lt;br&gt;• You share your intentions, plans and activities with other team members – all of which are for the good of the programme&lt;br&gt;• There is honesty in your practice</td>
</tr>
<tr>
<td><strong>Integrity</strong>&lt;br&gt;Ukunyaniseka/Ukuthembeka</td>
<td>• There is consistency between your heart, your words and your actions&lt;br&gt;• Reliability</td>
</tr>
<tr>
<td><strong>A positive work ethic</strong>&lt;br&gt;Ukusebenza ngomdla</td>
<td>• Hold a positive and healthy relationship towards work (vs. ‘this is just a job and I could be doing anything to make money’)</td>
</tr>
<tr>
<td><strong>Lead by example</strong>&lt;br&gt;Ukuba ngumzekelo</td>
<td>• Learners watch us everyday – so we have to “walk the talk” and lead by example&lt;br&gt;• Learners see us as leaders and so we have to be positive role-models (eg. we ask them to come at 8.30 am so we should be there beforehand to open the door for them)</td>
</tr>
<tr>
<td><strong>Preparedness and professionalism</strong>&lt;br&gt;Ukulungiselela kunye nokwenza umsebenzi ophucukileyo</td>
<td>• Plan beforehand so you are ready for a meeting or a training session&lt;br&gt;• Things are properly produced - and on time</td>
</tr>
<tr>
<td><strong>Punctuality</strong>&lt;br&gt;Ukufika ngexesha</td>
<td>• Arrive on time for events, meetings etc.</td>
</tr>
<tr>
<td><strong>A quality service</strong>&lt;br&gt;Umsebenzi okwizinga eliphezulu</td>
<td>• When we deliver our services to our beneficiaries it must be a good quality</td>
</tr>
<tr>
<td><strong>A safe environment</strong>&lt;br&gt;Indawo ekhuselekileyo</td>
<td>• When appropriate, hold things in confidence&lt;br&gt;• Have respect for others</td>
</tr>
<tr>
<td><strong>Enthusiastic</strong>&lt;br&gt;Ukuba nomdla</td>
<td>• A positive spirit and energy that others can see&lt;br&gt;• You are happy about what you are doing and want to inspire others (eg. the learners)</td>
</tr>
<tr>
<td><strong>Embrace diversity</strong>&lt;br&gt;Ukwamkela utshintsho</td>
<td>• Have an openness to and acceptance of others (and other cultures, and religions etc.)&lt;br&gt;• Social inclusion</td>
</tr>
</tbody>
</table>
5. **Etafeni Fit for Life, Fit for Work Model: “Make the Story Yours”**

One of the benefits of documenting the Etafeni “Fit for Life, Fit for Work” intervention, and sharing it widely, is that it can inspire other organizations and institutions to replicate and adapt it – either in full or in part – to respond to similar challenges in the communities they are serving. Across most southern African countries, and many countries outside the Africa continent, the issues that the Etafeni intervention addresses are also prevalent. Below is a step by step description of the processes that would generically be followed, to effect an intervention such as the “Fit for Life, Fit for Work” programme, if readers wish to do so. The processes are described in a **Six Phased Model for Replication**:  

1. **1st phase:** *Identifying the Needs* (Mapping and Situational Analysis); the Trust had been operating working with children, etc, and through interactions with the community determined the need for this sort of programme over the years  

2. **2nd phase:** *Learning through Exchange Visits* (Exposure to the original programme in India through visits and information sharing); Etafeni learned from the Indian programme  

3. **3rd phase:** *Adapting and Setting-up* (establishing the programme, suited to one’s environment); Etafeni secured funding and started to adapt their curriculum to integrate SRH, as this was identified as a need and they trained implementers  

4. **4th phase:** *Implementation* (actioning and meeting needs of target); training began and a couple of groups of graduates completed the course and were placed  

5. **5th phase:** *Learning from Reflection* (operational learning that takes place after implementing for a period, to determine how well intervention is working, how to improve); after a period of (6 months to 1 year) of implementing, Etafeni realized that they could improve the programme, and also learnt during reflection that the programme was meeting needs of young people  

6. **6th phase:** *Replication and expansion* (here the intervention should be expanding in nearby centres, and working towards scale-up); gradually three sites replicated the programme, and adapted it to meet needs of the type of communities they were serving  

The 5th phase feeds into the 2nd phase, to create a cycle (see diagram below) where there is continuous analysis of the situation in the community, adjusting the intervention activities to meet the needs of the community as they evolve.  

At the core of these phases; and on-going, needs to be:  
- **Regular monitoring and evaluation** of processes and outcomes;  
- **Visibility raising and marketing** the programme to those who need it  
- **Sustainability forecasting** including fund-raising; innovative adaptation of the programme approach to meet evolving dynamics in the community being served, relevant to SRH and economic empowerment  

The impact being (a) increased levels of economic empowerment, (b) reduced vulnerability to poor SRH, and (c) improved sexual and reproductive health, for young people in the community reached by the intervention.
Cycle of Replication of the “Fit for Life, Fit for Work”
A Six - Phased Approach

PHASE 1: IDENTIFYING THE NEEDS
- Appreciative enquiry of the environment and community
- Identification of community needs
- Mapping the prevalent social ills, to which one intervention could address multiple challenges

PHASE 2: LEARNING THROUGH EXCHANGE VISITS
- Identify a relevant programme from which learning can take place
- Organize and go on learning exchange visit for on-site learning
- Identify key structural, human resource and financial needs to establish programme

PHASE 3: ADAPTATION AND SETTING-UP
- Hold consultative meeting with community (leaders, beneficiaries, donors) to ensure participatory approach to set-up
- Adapt and develop curriculum and integrate SRH and other focus areas, as per needs of community
- Focus programme components on vulnerability of young women, backed by evidence base of their compromised societal status and vulnerabilities in your community
- Secure start-up funding, build human capacity
- Set criteria for participant selection
- Develop a monitoring, tracking and reporting system

PHASE 4: IMPLEMENTATION
- Advertise and select candidates
- Hold trainings
- Host graduation event and make it community/visibility raising event
- Sustain post-graduation data-base
- Develop and sustain partnerships

PHASE 5: LEARNING FROM REFLECTION
- Marketing approach could change
- Established collaborations with employers to enable graduate integration into world of work
- Value add of the programme spread like ‘wild fire’ - reinforcing the critical gap/need being closed/met by intervention

PHASE 6: REPLICATION AND EXPANSION
- Valoyi Trust in Tzaneen, rural
- Hillbrow in Johannesburg, urban
- Vrygrond in Cape Town, urban

THE IMPACT
- Increased levels of economic empowerment
- Reduced vulnerability related to SRH
- Improved sexual and reproductive health

SCALE-UP

Monitoring
Visibility-raising
Sustainability-forecasting
What to do if you want to start a “Fit for Life, Fit for Work” Programme in your Community

Phase 1: Start by Mapping the Situation in your Community and answer the following questions:
- What are the prevailing social ills in the community eg gender-based violence, unsafe abortions, unplanned pregnancies, crime committed by young men?
- What are the community needs in terms of promoting sexual and reproductive health?
- Who is at greater risk, and most vulnerable, and to what?
- What is needed to increase knowledge, informed decision-making and safe choices, and increase access to services?
- What services are not available?
- What are the links between the prevailing social ills and SRH or the health and development aim you intend to achieve?

Phase 2: Now identify who you can learn from, and go on an Exchange Visit, and answer the following questions during your on-site learning:
- Did that organization start the programme?
- Did they have any challenges and how did they overcome them?
- How much did it cost to start the programme and keep it running?
- What creative ways did they fund-raise to ensure sustainability of the programme?
- How did they engage the community around them and ensure ownership and buy-in?
- How did they know that their intervention was changing lives? This will help with developing a monitoring, evaluation and tracking mechanism to measure change.

Those who go on the exchange visit should be the implementers of the programme and those who can make decisions about money and structural issues such as staff employment, etc. Etafeni can host an exchange visit for this purpose.

Phase 3: After the exchange visit, adapt what you have learnt and set-up structures to enable implementation:
- Hold a consultative meeting with the community, engaging community leaders and the target audience, and share the intention for the programme intervention – ensure participatory engagement during its design and set-up.
- Identify who can be drawn in within partnerships, as Etafeni did with government departments working with youth, labour, health, etc.
- Secure funding for day to day expenses, and base your lobbying to the donor on the needs and commitment ascertained in the above step.
- Set up criteria for entry for the programme, and include considerations for special groups eg young women or other disadvantaged groups as per the needs identified in your community.
- Ensure that the space for training is ample and in a clean, friendly and spacious place, conducive to learning and sharing.
- Ensure that adequate, well-trained, good facilitators, are available for the set training calendar.
- Set dates for a ‘training-calendar’, which will suit the community.
- Adapt the curriculum
  o to suit the needs of your community and be creative and innovative in integrating issues beyond just economic empowerment, and SRH. Explore other areas of economic empowerment, which best suit your community needs, it may, for instance, not be an advantage to have a driver’s license in your community, it may be better to have IT skills or accounting skills
  o to speak to issues beyond formal employment, but also ‘how to survive on your own’ – looking at entrepreneurial pursuits and non-formal employment. In the advent of the graduate being unable to secure a job post-training immediately, they will then not become demoralized and can pursue other innovative avenues of making a decent living

Phase 4: Once the basics are set-up you can begin to implement, by:
- Sending out a call for applicants, after designing an advert which shares the criteria and qualifications needed from the applying candidates
- Set dates for the training, and ensure they fall within time periods that are best suited for community members, for instance, not over long holidays or farming/harvest periods as your potential candidates may be engaged
- Host the trainings using an approved curriculum
- Host a formal graduation, making it a big community event and inviting parents/guardians, community leaders, service providers, donors, service providers (health, agriculture, youth), government representatives. Utilize this platform as a marketing event and also to showcase the good work being done by the intervention. Make it a fun day.
- Offer post-graduation support in various manners
  o Link with employment agencies
  o Offer suitable positions in the organization as interns or volunteers
  o Guide with moral and group support

Phase 5: This is a critical phase, as it entails reflecting on the initial implementation and learning from those experiences (also called operational learning), various things can be learnt – as was the case with Etafeni:
- Review marketing approaches, is the intended audience being reached? What works effectively? Is word of mouth enough?
- How much visibility is the programme receiving to attract donors and partners for expansion?
- Is there need for a formal relationship with employers, agencies etc? This was a lesson learnt by Etafeni, who went ahead to revise their approach in engaging employers and their agencies, to ensure that graduates had opportunity for employment post-training
- How effective is the M&E system, is it showing change?

The 6th Phase is that of replication, at this stage other organisations and bodies would have taken significant steps to replicate the programme in their own contexts, and this would lead to eventual scale-up.

The extensive testimonies shared by both the programme graduates and their families, and feedback from employers of graduates from the Fit for
Life, Fit for Work programme – bear witness to the success of the intervention and its relevance, effectiveness and gap-closing attributes to meet the needs of young women and men in the Nyanga community.

“I was exposed to a bad lifestyle from very young, before entering this programme. I had been in trouble with police, I was stealing and taking drugs. I then could not take care of my child, and my mother was always crying and sad because I wanted money for drugs and smoking all the time. She was always sad. I even used to have unsafe sex as young as when I was 12 years and many of my friends were also at risk like me. Now I am so lucky, I can work, I do not drink anymore and take care of my family. I have had to choose new friends and sometimes I try to speak to those old friends to come and join the programme, some they have, some it will take time for them to change – but soon they will know that this programme gives hope. We young people in Nyanga now we have hope for a good life and to stay healthy!”

“And now I am also registered with the University of Western Cape to study social work, I could not dream this when I was on the streets before I joined the Etafeni programme. I have so much hope now for future and now always thinking positive things for my life”

- Male graduate, facilitator and community care worker, 27 years

“My daughter now can take care of herself, even if I am not there she will know to focus with her school and stay safe in the house, not to run with friends who are bad and can get her into trouble. The Etafeni classes are what has helped her and today I do not worry anymore that she will get pregnant or HIV. She is responsible and thinking always about how to help me, and also how to do better for her life, to make a business for herself and not to run for money with a boyfriend only”.

- Mother of 26 year old female graduate
6. Unpacking Success: Transforming Young Lives in Nyanga

“The Fit for Life programme has helped me to know about the practical problems in our community. I have knowledge about the influencing factor of alcohol in unplanned pregnancy and HIV, and now I protect myself and also those who I am with around me.”

- Female graduate, 28 years old

The following outlines in brief why the programme is a success. As organizations intend to adopt and replicate the “Fit for Life, Fit for Work” programme, it is useful to take into consideration the matters described below.

6.1 Underlying factors that influence SRH are addressed

The “Fit for Life, Fit for Work” approach can be likened to the “Onion Theory” of tackling social ills by ‘peeling’ away the surface causal/influencing factors. In this case, we can consider sexual and reproductive health (and attaining it by an individual) is the core of the onion. To reach the core, one has to peel layer after layer from the surface of the onion. The layers can be likened to the causal and contributory factors of poor SRH. The Fit for Life, Fit for Work approach clearly addressed these ‘layers’, by availing economic empowerment through different approaches; building self-esteem and inner strength necessary for decision-making and informed choices, etc. This is the foundation of Etafeni’s “Fit for Life, Fit for Work” programme, as it has been responsive to the key social challenges prevalent in the community it serves. These include:

- Unemployment and poverty alleviation
- Drug and alcohol abuse
- Risks and problems associated with gangs and criminal acts
- Teenage/unwanted pregnancies
- High prevalence of HIV and engagement in transactional and coerced sex
- General violence, domestic and gender-based violence
- Poor goal setting, life skills and work readiness training, among young people and high school drop-out rates

All of the above are contributory factors for poor sexual and reproductive health of young people, especially young women.

When replicating such a programme in your community:

Find out what are the causes of social ills in your community, for instance, if there is high rate of drug abuse or teen pregnancy, could this be

- due to too much idle time on the hands of young people, who cannot afford to go to school, or who have not been able to pursue school past a certain level?
- due to low knowledge levels on protective and risk issues, hence they are unable to access condoms and safe sex practices or related services?

Design a programme that addresses the causal and contributory factor
6.2 Community ownership and buy-in secured

This ownership began at the commencement of the programme, and was reflected through various modes. For example, the building which houses Etafeni (including the ‘Fit for Life. For for Work’ offices) was built by unemployed members of the community, as a way of providing employment (stipends were provided for those who undertook the work), getting construction skills into the community, as well as encouraging ownership of the project and the facilities in the long-run.

Almost 90% of the staff at Etafeni, including those who run the Fit for Life programme, are from the Nyanga community. This has a significant influence in the level of acceptance of the programme in the community; and subsequently a significantly positive influence on the success and sustainability of the programme during its implementation. The centre in itself has created an employment opportunity for the community.

6.3 Addressing multiple causal factors: Integrated and Comprehensive

There is a thorough integration of the Fit for Life, Fit for Work programme into the work and vision of the entire Etafeni Trust, with cross-support between the programmes. An example is some recruits for the programme were identified while within Etafeni’s income-generating programme for HIV+ women, creating a cross-programme amalgamation in the organisation. The programme, since its inception has sought to regularly identify additional factors which influence SRH and economic status outcome of beneficiaries, and explore integration of responses, to ensure holistic impact.

Meanwhile confidence building, self-esteem enhancement and HIV prevention and access related issues have been integrated, across several programme dimensions:
- Income-generation opportunities availed: Young women who are living with HIV, and have been either ostracized or abandoned by their family/community and in dire socio-economic state are offered opportunity to attend the income-generating project, and this is integrated into the Fit For Life, Fit for Work programme. This has supported opportunities for entrepreneurial pursuits by graduates, post-training, in the advent of formal employment not being secured
- Quick access to prevention services availed: Young learners within the programme can access VCT and counselling, TB and diabetes testing and screening from the Etafeni VCT programme
- Internal skills application opportunity availed: The graduates from the programme are engaged in Etafeni activities that involve sharing HIV-related education and information with the children in the After School Care programme
- Internal opportunity for employment: First preference, for recruitment to fill vacancies at Etafeni, are given to programme graduates.
- Tackling HIV: The curriculum of the programme has integrated HIV-related basic knowledge and information, as part of building skills among graduates on safe sex and related negotiation skills, access to treatment and support, and adopting health seeking behaviours for HIV prevention and treatment

“It has helped even those with HIV, because we learnt more about safe sex, and we also now know about taking ARTs, so those who have HIV can now adhere to their treatment and can get counselling so they live happily and do positive living.”
– Woman graduate, 22 years
“We learn different things at once, not just to get jobs and be good employees, but also to be healthy and protect ourselves when we are not at work – with our friends or boyfriends. I now have control over my life, because I can do so many things which I could not do before”
– Woman graduate, 23 years

“With knowing all the different things which Fit for Life teaches us, I can do many things, I can save and plan for future, I can chose to have sex with condom and stay without boyfriend if I want, I can open the hair salon I used to dream about. I can do many things – even drive cars”
– Woman graduate, 26 years

6.4 Simple to copy and adapt: replicability and scale-up

Section 5 above outlines how the “Fit for Life, Fit for Work” programme can be replicated, in a generic step by step fashion. Due to the effectiveness and simple nature of the programme dynamic and application, the demand for replication and scale-up became apparent in other communities in the country. The Fit for Life, Fit for Work programme has been successfully replicated in Hillbrow (Johannesburg), Vrygrond (Cape Town) and in Tzaneen (Limpopo), all in South Africa. They have adopted and revised the training curriculum to suit their particular contexts.

Sample Case: Vrygrond Programme

“This is a model that shouldn’t only be given to youth in disadvantaged communities. It is about life skills. You should hear the feedback from bosses about the quality of our graduates. Our graduates have a great work ethic and understand that a job as a cleaner is a stepping stone to a better job; that a job can provide them with a reference which they won’t get sitting at home. This programme has something for every community; because you can make a change not only one person’s life, but in the lives of their families and communities”
– Vrygrond Centre Manager

“In a community like this you need to have a lot of direction and self-will to achieve. The peer pressure is immense. This programme helps me to manage the peer pressure and protect myself”
– 22 year old woman graduate, Fit For Life, Fit For Work programme, Vrygrond

The Vrygrond programme began in September 2009, and the programme manager learnt about the programme during her placement at Etafeni. This contributed to a smooth replication process. The first group of 12 trained in 2010 and the programme registered a 100% placement rate, which is a notable success, and like the Etafeni Programme, 60% of trainees are girls. Etafeni has allocated about two years to get the programme up and running and to get things into place, before they hand the programme to the Vrygrond Community Development Trust. This mentoring and close support over a long period is a positive approach that enables consolidation of the replication process, and effectiveness of scale-up.

The components of the Fit for Life, Fit for Work programme are simple, practical and easily adaptable, without distorting the objectives and impact intended.
This makes it easy to replicate in communities with similar contexts, which include most communities in the southern African region. The Vrygrond Community Development Trust and the Valoyi Traditional Authority Trust have invited the Etafeni Trust to replicate its model of a community-built multi-purpose centre in poor and AIDS-affected communities in Vrygrond and rural Limpopo. The Vrygrond Centre is now complete and the Nwamitwa Centre is under way.

In terms of scale-up within the Nyanga population, there has not been much exploration on this and the scope of this documentation shall trigger mapping and crafting strategies for this angle of scale-up.

6.5 Relevance and Needs-responsiveness

The programme was born out of an identified need for providing a space for reflection, growth and empowerment for youth in Nyanga, against the torrent of adverse social ills in the community. The programme relevance was attested by beneficiaries, relatives of graduates, community members and programme implementers. Its integrated nature (economic empowerment, HIV and SRH life skills, and personal integrity building) provides a ‘supermarket’ response to the multiple needs of the majority of young people in the community.

“Before Fit for Life we were on the street, many of us have broken families and no money and so we drop out of school and steal and take drugs, now I am not doing any of those. I was doing this things even when small, at 13 years of age. Now even my parents and other young people parents are able to cope with us young people and they are not stressed every time about us.”

– Male graduate, 28 years

“There is a lot of crime here, and STI and HIV for many families. I know so many who are not going to school anymore and are on the streets and they will steal or fight and even can kill each other, and go to prison. The Etafeni programme brings support to those teens and young ones who are in trouble like this in Nyanga. Now they can be proud of themselves and be clean, get jobs and stay out of prison. There is opportunity for us at Etafeni!”

– Male graduate, 25 years

Beyond the actual effectiveness of the programme in engaging a pool of young people, who proceed to return to the community as productive members, it has become evident also through the spread by word of mouth, by graduates and their satisfied parents/guardians, of the positive effects of the programme, across the community and beyond into neighboring communities. This evidence manifests in the massive demand from young people to join the Fit for Life, Fit for Work programme, not just from Nyanga, but also from surrounding communities. This further testifies that what the programme offers and achieves, is directly in response to the community needs of young people.
6.6 Learning through Reflection and focus on Sustainability

To ensure that the programme evolves and develops in a constantly responsive manner, to match dynamics and trends in the community, analysis of the programme and reflections are done by the Trust and programme implementers on a regular basis. In 2008 an external evaluation was done of the current programme operations, its success factors as well as key challenges perceived. Data was collected among three different respondent groups - programme staff, graduated learners and potential employer companies. Evaluations of the Nyanga, Vrygrond and Nwamitwa programmes have been conducted again in May and June 2011.

To ensure that consistent learning and reflection is taking place, that it is participatory and cognizant of community needs and trends as they evolve, the Trust holds consultative meetings with beneficiaries to reflect on what works or not, and to suggest what should happen the following year. A strategic work-plan is produced in consultation with stakeholders, once a year.

What has contributed to the programme’s sustainability?

- **Ownership secured**: Ownership of the programme by the Nyanga community and those who complete the programme is very apparent.

- **Partnerships developed**: The partnerships developed with Departments of Youth, Health and Labour are crucial to enabling sustained programme rollout and these links will consistently inform the programme dynamics to remain abreast with the National direction and directives around SRH, economic empowerment and youth development.

- **Referral system synergies**: The referral systems and partners made in the community relating to HIV and other issues further strengthen the programme, and contribute to success as they link into the broader continuum of care in the community.

- **Multi-skilled staff support to programme**: The complement of skilled staff with different skills-base, supports the different elements of the programme and contributes to its sustainability and effectiveness. Having engaged technical expertise to guide in key programming areas such as review of the curriculum of training; monitoring and evaluation systems building; fund-raising and business network development to consolidate the graduate placement initiatives allow for spaces to reflect and learn on progress made and how to improve programming approaches.

- **Targeted marketing approach**: Initially the lack of systematic advertising of the training programme gradually saw the organisation attracting less suitable candidates. Following
the reflection phase, efforts were redressed to attract the most suitable candidates. Etafeni produced a brochure which was placed as an ad into the community newspaper in July 2009. This improved the quality of potential learners (the questionnaire used to recruit asks where the candidates hear about the programme) for a few months, before the same issues arose again.

- **Consistent fund-raising efforts:** While the programme was initiated with major support from external donor funds, recently the programme is exploring local resource support and is networking with the relevant departments of the South African Government. The latter are providing local support and this is a significant contributing factor to sustainability (local resourcing) of the programme.

  “Government is more willing to support programmes that support their direct mandate and which are shown to respond to the needs of the community. The Fit For Life, Fit For Work programme does that.”

  – Etafeni Project Manager

Another cost-effective approach, related to ensuring funds flow, is drawing a service fee from development of other centres where the programme has been replicated and technical assistance offered during programme start-up. This has happened at the Vrygrond site, which started in September 2009, and the Tzaneen site that was launched in July 2010. The programme will continue to offer technical support and capacity building training at a fee to other organisations, and government departments seeking to roll out similar programmes to Fit for Life, Fit for Work.

Because the larger institution of Etafeni draws on the skills gained and capacities developed among graduates, by offering opportunities of employment to graduates within the Fit for Life, Fit for Work programmes, there is a sustained support to graduates and reciprocal commitment of the latter to the organisation within the capacity of an employee. Over 95% of the staff at Etafeni are from the Nyanga community, which has a significantly positive influence on the success and sustainability of the programme, as well as impacting its acceptability within the community. As a consequence, vandalism is low because the employees, project beneficiaries are from the community.

**Monitoring and evaluation (M&E)** is key to effectiveness and sustainability of any programme. A technical advisor has been supporting the establishment of an M&E system for the programme, and one key success element has been the follow-up of graduates placed, or not, done via telephone periodically and systematically – thus keeping them in the ‘fold’ even post-graduation. During the telephone calls, a standardized qualitative questionnaire is used for a 10 minute discussion with the graduate to collect information on employment status, sexual health questions, impact on sexual behaviour and changes in sexual practice. This questionnaire has been put on a web-platform, as it has proven significantly useful in measuring periodic success and the impact of the programme.

  “Etafeni does continue to follow up with us after we start working. They follow up to find out whether now that I am independent I am doing the right things. If I had been struggling to pay rent, electricity or food, they assess if I am using the money well now that I am earning money. They continue to assist and support even after the training ends. This is special about Etafeni!”

  – Female graduate, 19 years
6.7 Opportunities Identified and Leveraged

The programme has intrinsically mainstreamed approaches that identify opportunities for growth and situations to leverage for attaining the programme objectives.

Some of these achieved to date include:

- **Performing arts** used to communicate sensitive issues more succinctly and strategically, yet not watering down the key messages to be relayed. Leveraging creative modes of communicating sensitive issues has proven useful and effective, and still getting the discussions generated.

- **Strengthening programme approach** during replication of the programme eg in Vrygrond, as opportunity is taken to adapt the training approaches and strengthen the planning of the training in the replication model.

- **Securing accreditation** of the programme. The programme has now received accreditation. Another advantage of grasping this opportunity of accreditation: building long-term relationships with employers and co-operating partners to provide a number of adequately trained and screened graduates to these companies. It is hoped that in time, companies will pay a fee/certain share of the cost of training the recruit by Etafari – allowing the organisation to train more people. This fee is returnable to the employer if Etafari is accredited through SETA.

- **Tapping into the ‘employee-quality’ needs of the World of Work**: was a clear opportunity for consolidating impact of the programme, after the 2009 survey that a consultant to Etafari conducted among a sample of employers in Cape Town, to determine if they would be willing to employ people from Nyanga. Among the findings was the fact that employers in Cape Town did not have a quantity/supply problem and there is no shortage of skilled potential employees. However the employers did have challenges with the quality and professionalism of potential employees. This posed an opportunity for Etafari to consolidate elements of its training to enhance quality and attitudinal strengthening of graduates and link them with the companies from the survey, post-graduation.

- **Tapping existing national mechanisms for employment opportunity** was also recognized, and endorsement of the programme training by the Department of Labour will enable multiple benefits for the graduates, due to the Department’s influence and mandate on placements for graduates. Etafari has already begun the application process for this endorsement, in anticipation of leveraging the Departmental influence on adding Etafari graduates to their database of potential recruits, increasing their chances of being placed.

6.8 Main Impact of Success

In previous sections the diverse elements of success were described, as generic measures of a success story – against the model of phases for implementation of the
programme. Overall the Et AF ENI Fit for Life, Fit for Work programme has illustrated success in: reducing vulnerability and enhancing SRH attainment of sexual and reproductive health; by increasing coping capacities of young people through economic empowerment and knowledge and skills building in a systematic fashion.

**Reduced vulnerabilities and enhanced attainment of SRH**

“My eyes are now opened to those risky and dangerous things out there that I did not know could get me into trouble before, and I thought they were okay to do because all my friends were doing it. I now know I can say no, and if I am beaten, I know what to do. The benefits of Et AF ENI programme for young people in Nyanga are obvious. I am a visible example. I know more now and will not be forced to have sex or if I want I can now go to get HIV test and not be afraid” – Female graduate, 26 years

“It is easier to talk about sex and condoms now that I am here. I do not see my boyfriend during the week because I have explained that I will be busy with my training. Every time I am with my boyfriend we discuss the information I would have gotten during the week. We are these days arguing about the need to go for testing. He insists that he is healthy; I insist that no-one has HIV written on their foreheads” – Female in current training, 19 years

“When we are sitting at the corner checking out girls we say to our friends; if anyone here would have HIV, he should not blame us. Yes, we would support him, but we talk about these things, it’s not like they don’t know. We share this information.” – Male in current training, 25 years

“I know what I want in life. I know who I am and what I can do. The collage of myself which I did during the first week has helped me to have direction for the future.” – Female in current training, 19 years

Graduates, current programme trainees and some parents, shared that there was apparent change in the behaviour and activities practiced by those who completed and those currently the programme. Of particular note was the universal recognition by the male beneficiaries about their altered approach to female peers and positive attitudes and acceptance of principles of gender equality, as compared to their perspectives prior to the Fit for Life, Fit for Work programme. Of note were examples cited by several male graduates and trainees, that they were now aware that hitting a woman, abusing her verbally and denying communication were ‘wrong’ and violation of her rights as a human being. They recognized that mutual respect and responsibility was necessary for them to be happy and healthy as they planned their future, and condom use is smart for them and their female partners, because – as they put it – they had many dreams they wanted to realize in the many years ahead of their lives.

These changes in attitude and perception, and subsequently making safe non-risky choices, and maintaining sexual and reproductive health, were attributed to the curriculum of the programme.

“We were always told – should you control your life or should others do it for you – what do you want – are you giving your life to others – and I do not want that. I want to control my life. Before the Fit for Life trainings I did not realize...
that I was giving my life to others to choose for me. Now I control my life myself” - Female graduate, 23 years

Enhanced coping capacities of young people

“I want to sell human-hair (weaves) and I already begun my business, it is because of Sis Debbie and others here at Etafeni that I now do this. Others can be jealous, but I will not go back to the streets anymore. To help me start, Etafeni gave me chance to also work here and learn behaviours that are good for jobs, dressing properly and speaking good English. Now I am not worried about going for job interview or talking with others. I can take care of myself and even of some others. I send my sister to school, because our family has no money at all. I can take care of many things now”

– Female graduate, community care worker, 25 years

“When I am speaking to Sis Debs, it is like I am speaking to my sister. We share secrets here, and the environment is receptive. Also, we get practical help through Etafeni, they encourage us to apply for bursaries and work. They show us adverts for jobs, assist us with transport money and give practical support”

– Female trainee, 9 years

The Fit for Life, Fit for Work model has enabled young people to exert the multiple skills, and knowledge, gained through the programme in their lives, and enable them to cope with the economic and social challenges they face in the community and within their families. With the opportunity to reflect on their feelings, the majority of graduates testified that they had, to a degree, dealt with their own fears and emotional challenges and this made it easier for them to deal with those around them in the community. It had also increased their resilience to stressful situations at their workplaces. This resilience extends to staying away from alcohol and other drugs, previously used as forms of stress-relief.
Graduates, caregivers and parents, programme implementers and in-training candidates of the Etafeni “Fit for Life, Fit for Work” Programme
7. Core Lessons Learnt

The growth and consolidation of the Etafeni Fit for Life, Fit for Work programme has brought to the fore various lessons that can inform future strategising around and shaping of the programme, which can help other programmes that seek to replicate it.

Lessons learnt during the implementation of the programme include the following:

**Community-based approaches ensure sustained ownership and need-responsive programming**

It is important that the organization is based in the community that it is serving, and to engage community members in consultative processes during inception of new initiatives, and regularly during implementation to ensure that community needs are being met, and ownership is reinforced. Employment of community members also contributes to community support for the programme.

**User-friendly facilities facilitate participation**

Having a space that is large, airy, with space, yet simple and easy to access by community members, enhances chances of acceptance by community members who can benefit from services being offered by the programme.

**Engagement of community leaders is key to sustainability and enhanced ownership**

The involvement of community leaders is key to securing community buy-in for the programme, and its subsequent effectiveness and sustainability. This was a clear lesson gained from analyzing the setting up of the Vrygrond programme.

**Community-based partnerships enhance sustainability and integration opportunities**

It is critical to enter into formal partnerships, cooperating agreements and build strategic alliances with key stakeholders in a community where the intervention is being offered, especially when aimed at behaviour change, as is the purpose of the Fit for Life Fit for Work approach. The Etafeni relationships with the Departments of Health, Social Development, Labour and others, has proven strategic in taking the programme forward and aligning it to the provincial and national agenda for the socio-economic and health status of young people. Partnerships with other civil society partners, reinforces advocacy to promote the programme and its benefits. Meanwhile cooperative agreements with companies and recruiters/potential employers (relevant to the nature of this programme that focuses on building job seeking and securing skills) facilitates graduates being engaged in employment and attachment, avoiding idle time for many.
Integrate self-monitoring and tracking to measure effectiveness of programme

The process of doing self-analysis, engaging with one’s autobiography at the start of the programme and again at the end of the programme, serves as a useful tool and measure for effectiveness of the programme in the immediate term, for both the learner and the programme implementers.

Engagement of technical advisory services is vital to programme growth and sustainability

The contracting of technical experts to strengthen monitoring and evaluation; fund-raising; identifying businesses for deployment of graduates, and the review the training package, has proven useful to consolidate the mechanisms and structural framework of the programme.

Adaptation of programme when replicating it, is valuable to suit dynamics of the target audience

Training is yet to be standardised across all the sites. While the basic concepts remain the same, the execution modalities are, at present, different in the replication sites of the Fit for Life, Fit for Work programme. An example is the Vrygrond site, that has introduced more role play and training and is very participatory. This has been shown to have benefits in boosting trainees’ confidence and enhances their sense of ownership of the programme. It also enhances cross-cultural exchange and mixing between the races (it is a black and coloured community, but black and coloured people don’t really socialise even though they live side by side). The training is often the first opportunity for mixing along racial lines in Vrygrond.
8. Challenges Identified

While the *Fit for Life, Fit for Work* programme has been recognized as a success story worth sharing with, and replicated by peer organizations in similar contexts, like any intervention, challenges emerge during implementation. The recognition of these challenges is vital for learning and counter strategising, as a mode of improving the design, mechanisms and execution of the programme.

The following challenges were identified by the graduates, their families, managers and implementers of the programme.

“*Etafeni is only catering for those who have matriculated. The problem is that there are lots of young people who don’t have the necessary qualifications; some who are older than 30 who would love to come here. Consider this when expanding the programme as it is a beautiful initiative.*”

- Male graduate from first group when programme was launched.

- The economic recession, though globally more prominent, has affected Nyanga and surrounding areas where potential employment opportunities exist for graduates from the programme. This has reduced the number of opportunities of employment. While this challenge remains, Etafeni has made efforts to counter this challenge by prioritizing the building and nurturing of long-standing relationships with different employers to boost employment and retention chances of the programme graduates.

- Although young women in particular talked about having more knowledge about SRH services and issues, and the fact that there are at least three clinics within walking distance of their homes in Nyanga, access to services remains hampered by the attitudes of the health personnel at these health facilities. So even with increased access to health care services for maintaining their sexual and reproductive health, many graduates highlighted their dissatisfaction with the attitudes of the nurses, when the former presented with SRH related problems or queries around sexuality and choices. This has led to a reluctance to access services due to these attitudes.

> “*Due to the high teenage pregnancies, I think the nurses are giving the young girls the injection, for fear that they might forget to take the pill and get pregnant. This is done without explaining the effects and so forth and it against their rights and choices. And you can’t argue with the nurses because they will get you thrown out.*”

> – 33 year old female graduate

> “*Health service providers are judgemental of your illness; for example they can say ‘how can you be pregnant at your age?’*”

> – 29 year old female graduate
- The programme team has been recognized as being lean, and this is due to resource constraints. The team runs 8 courses a year, and this leaves little room to reflect, recover from the programme and adjust for best results. This strained approach to the programme execution has been attributed to efforts to meet the "immense need in the community for this programme". However efforts to counter this have been made by Etafeni, and they have engaged a technical advisor for monitoring and evaluation, a consultant to produce a 'replication manual' and a fundraiser outside the programme to close this structural gap.

- There is, to date, inadequate sharing of existing documents and information from Etafeni with other partners, especially on information of organisations where graduates can potentially be placed and marketing the graduates. This knowledge management challenge has compromised visibility of the programme and the quality of graduates.

- Many graduates highlighted the criteria for in-take selections as being rigid and non-inclusive, especially the exclusion of those who had a criminal record and those who may have not completed matric but had the capacity to benefit from the programme in the long-run. They cited this as a deterrent, if the exclusion remained as such.

"Really it is those young ones who have been arrested before who need a programme like this to give them hope again and give them a second chance, look for me how it has worked and changed my life"

– 27 year old male from first intake of graduates

The following recommendations have been generated, from the programme beneficiaries, implementers and documenters of this success story – upon reflection of the success story dynamics, challenges identified and lessons learnt within the success paradigm of the Fit for Life, Fit for Work programme.

Document, produce and disseminate information on the programme

Produce and distribute a booklet, newsflash/letter or an advert that can be flighted once a month on the activities/services provided by the organization and the successes of the programme and its graduates as they are faring post-graduation. The production of materials will not only increase visibility of the programme beyond Nyanga and South Africa; but will also result in new funding bodies and partners; and serve as a tool for inspiring and learning across graduates, implementers and partners.

Startegise marketing of the programme

Currently the programme is being shared by word of mouth, and use of one advert, and needs a more strategised marketing approached. Consider piggy backing once or two times a year on the street committee meeting to address the community to talk about the Etafeni programme. There is a certain stigma attached to the organisation as ‘that place for people with HIV’, this discourages a lot of impressionable young people from accessing the training because of where it is housed. More community information and mobilisation needs to happen to ensure that there is community understanding about HIV and engagement to address the problems in the community.

Consider revising the criteria for intake – visioning scale-up

Strong sentiments from both graduates and their families and some implementers, highlighted the need to revisit the criteria for selection of participants for the programme, and make less rigid eg exclusion of those with criminal record. The recommendation is that criteria be adjusted to allow for selection of youth who may have criminal records, but within a frame of discretion.

A further recommendation is that scale-up be envisioned in the revision of intake and number of trainings being conducted each year. The more youth coming out of the programme, the wider the base of empowered young people in the community and nearby communities. The need for the intervention being provided by the programme is apparent – and as Etafeni already has trainers and a conducive space to conduct them, consideration to increase to at least 3 training courses a year with over 20 per group of graduates is strongly suggested. Recognising the SETA barriers to this, calls for exploration for other formal accreditation channels at national level, to enable the expansion proposed here, and so direly needed by communities in the country.

Expand and systematize regular community consultation

There is a definite need being addressed by the programme in the Nyanga community, however a more systematic and regularized system for community engagement – to inform design and evolving of the programme – needs to be established promptly. Many of the community members and parents interviewed did not have in-depth knowledge and understanding of the programme, although they did express that both the organisation, Etafeni, and the programme were acceptable in the community and seemed to be making a positive difference in the lives of the youth.
References


http://en.wikipedia.org/wiki/Nyanga,_Cape_Town

http://www.etafenitrust.org/FitForLife


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Etafeni (undated) Fit for Life, Fit for Work Learner Agreement For Further Studies and Finding Employment

Etafeni (undated) Fit for Life, Fit for Work Training Manual

Etafeni 2010 Etafeni Day Care Centre Trust Annual Report 2009/2010

Etafeni (undated) Etafeni Assessment Instrument and Report – Apply Self Management Through the Concept of Positive Self Esteem and Resilience


Etafeni (undated) Fit for Life, Fit for Work Follow-up Form


Spiegel, E (undated) Supplement to the Fit for Life, Fit for Work Programme: A Practical Guide and Workbook


Annexes

Annex 1: Sample Data Collection Tools

Focus Group Discussion Guide for Programme Implementers/Programme Managers

Approximate time: 1 hour
Suggested # of participants: 7-10

Introduction
Introduce yourself/ves. Share reason for holding the FGD: “We would like to get a better understanding of how the Etafeni project (give referring name known by beneficiaries) has influenced the lives of young people by helping you with skills and knowledge to reduce your risk and vulnerability; in your community”.

Get verbal consent and assure participants that information shared shall be treated as confidential, unless they state otherwise. Continue to ask the following questions.

Programme Overview: inception, implementation, finance, M&E, reach, beneficiaries
a) How did the “Fit for Life, Fit for Work” programme start? Why was it started? How were priorities identified? How did culture, socio-economic status, gender dynamics, risk factors, and other environmental factors influence programme start-up? What needs did it intend to meet?

b) Briefly describe what the “Fit for Life, Fit for Work” programme is about, including its purpose, objectives, target beneficiaries etc and its structure of work

c) What documents do you refer to guide the implementation of the programme, eg workplan, etc (request sample copies)? How are your activities, processes documented?

d) Who was involved during programme development? Community? Development partners?

e) Who is now involved in the implementation of the programme? How are they involved?

f) How do beneficiaries access services of the programme? Outreach plan? Extent of reach?

g) What systems are in place to ensure effective programme functioning (financial and auditing, human capacity, equipment, staff development and skills transfer etc)?

h) What happens with the M&E data collected? How does it inform the programme and any recognized successes?

Integration
i) How do you market the programme/incite involvement by different stakeholders?

j) How does the programme integrate with other programmes? Is it multi-dimensional in approach? Describe

k) What measures has the Etafeni Trust taken to nurture partnerships with local, national or regional partners/institutions, including private sector and civil society organizations?
Rights-based approach
l) How has the programme ensured inclusion of specific vulnerable groups, such as PLHIV, LGBTI, SWs, orphaned youth, etc?
m) How are programme services and benefits equitably availed eg those with greatest need access services?

Cost-effective measures
n) How are resources distributed towards/within the programme?
o) How is service-cost measured eg tracking inputs versus outputs and cost/beneficiary? Has there been any success that can be attributed to your approach in this area?
p) What cost-saving and cost-reduction measures have you effected during the life of the programme? How have the beneficiaries been involved in this?

Challenges and opportunities
q) What are some of the main challenges you have faced in the programme? How have you overcome these?
r) What are opportunities you identified as the programme rolled-out (which you had not anticipated at the beginning), and how did you make use of them to enhance success of the programme/impact?
s) How have the beneficiaries been involved in addressed challenges and in leveraging opportunities? Did you consult them?

Dimensions of Success
t) What would you say is unique about this programme? Why?
u) What key lessons have been learnt from implementing the programme? How have these been used to inform the programme as it evolves? Give examples
v) What positive impact have you measured during the life of the programme? Describe and show evidence
w) What main successes can you identify in relation to
   - How the programme is being implemented, are there any strategies you have identified as working better than others to bring faster more effective and quality results
   - How the lives of beneficiaries has changed for the better
   - How the community has been positively affected by the programme

Sustainability and scale-up
x) What measures have been put into place to mobilize local resources towards sustainability of the programme? Both technical and financial support, and income generating innovations?
y) What plans are in place to maintain successes gained?
z) What plans are in place to scale-up the programme and stimulate replication by others in the province or country, or beyond?
Focus Group Discussion for Parents/Guardians/Teachers

Approximate time: 1 – 2 hours
Suggested # of participants: 7 - 10

Introduction
Introduce yourself/ves. Share reason for holding the FGD: “We would like to get a better understanding of how the Etafeni project (give referring name known by beneficiaries) has influenced the lives of young people by helping you with skills and knowledge to reduce your risk and vulnerability; in your community”.

Describe in simple terms (and local language) the meaning of the terms: ‘risk’ and ‘vulnerability’. Get verbal consent and assure participants that information shared shall be treated as confidential, unless they state otherwise. Continue to ask the following questions.

1. What is your understanding of the Etafeni “Fit for Life, Fit for Work” project? What is new or different, that this project brings to your community?

2. What problem/s or need/s is the project addressing in your community?

3. Who has been/is involved in this project (describe from the start of the project) from the community? And how are they/have they been involved?

4. How are you involved in this project? Who is benefitting from the project? How?

5. What are the strategies (ways and approaches) that the project uses to reach young people (women specifically, and men specifically) in your community?

6. Do these strategies also encourage meaningful involvement of youth living with HIV, especially young women living with HIV? Describe how

7. What problem/s – if any – does the project address? Describe examples and how

8. How are young women and men involved in this project? Describe activities eg planning, and regularity of involvement etc. Does the project encourage their involvement, or do they actively ask?

9. Have there been any challenges relating to the project? If yes, what were they? How were they solved/what are plans to overcome them?

10. How has this project affected the lives of young women/men – what have been the benefits? Eg has the project affected their
   a) Ability to make healthy and safe informed choices?
   b) Understanding of HIV, related risks and how to protect themselves and their partner/s from HIV transmission?
   c) Understanding of rights related to SRH and exercising them?
   d) Interactions with peers, yourselves and others in the community? Respecting others?
   e) View (perception) of themselves? Self-esteem, self-respect


12. What would you say are the successes of the project? Describe them. Why are they successes?

13. How would you support continued sustainability of these successes, as a parent, guardian, teacher etc?

14. Is there anything more you would like to share about the project?

15. What else would you like to see happening for young women and men in your community eg to help them access their rights; know more their sexual and reproductive health; gain skills to help them reduce their risk and vulnerability to HIV and gender violence and poor SRH, etc
Focus Group Discussion (FGD) Guide for Beneficiaries: 3 - 4 groups (Young Women, Young Men, Young Women and Men combined, including Young PLHIV)

Approximate time: 1 – ½ hours
Suggested # of participants: 7-10

**Introduction**
Introduce yourself/ves. Share reason for holding the FGD: “We would like to get a better understanding of how the Etafeni programme (give referring name known by beneficiaries) has influenced your lives by helping you with skills and knowledge to reduce your risk and vulnerability; and the lives of those around you in the community”.

Describe in simple terms (and local language) the meaning of the terms: ‘risk’ and ‘vulnerability’.

Get verbal consent and assure participants that information shared shall be treated as confidential, unless they state otherwise. Continue to ask the following questions.

**Description and relevance:**
16. What is your understanding of the Etafeni “Fit for Life, Fit for Work” programme?
17. What is new or different, that this programme brings to your community (and you)?
18. What problem/s or need/s is the programme addressing in your community?
19. Who has been/is involved in this programme (describe from the start of the programme) from the community? And how are they/have they been involved?
20. Who is benefiting from the programme? How?
21. What are the strategies (ways and approaches) that the programme uses to reach young people (women specifically, and men specifically) in your community?
22. Do these strategies also encourage meaningful involvement of youth living with HIV, especially young women living with HIV? Describe how

**Personal involvement:**
23. What problem/s – if any - in your life, did the programme address? Describe how.
24. How are you involved in this programme? Describe activities eg planning, and regularity of involvement etc. Does the programme encourage your involvement, or do you ask to be involved?
25. Have you/are you sharing the benefits of the programme with your family, peers (other female and male youth in your community), workmates, others? Give examples – and share what has been the result of sharing these benefits with others?
26. Have you faced any challenges since getting involved with the programme? What were they? How were they solved/are you planning to overcome them?

**Impact/evidence of change:**
27. How has this programme affected your life? What have been the benefits?

Describe how it has affected your
a) Ability to make informed choices,
b) Your understanding of HIV, related risks and how to protect yourself or your partner/s from HIV transmission,
c) Your understanding of your SRH rights, exercising them, and respecting rights of others
d) Interactions with your peers, and others in the community,
e) View (perception) of yourself.
28. What packages, information and tools have you gained/received from the programme, to assist you in reducing your risk and vulnerability, and improve your health? How regularly do you refer to these in your daily life?


**Elements of Success:**

30. What would you say are the successes of the programme? Why are they successes?

31. What do you think are your rights? What are your thoughts around sexual and reproductive health and rights (SRHR)?

32. How has the programme affected your rights, specifically your SRHR? Since being part of the programme, has anything changed in you knowing, accessing, etc your rights? Has your sexual and reproductive health changed, improved?

33. How has the programme assisted you to better understand issues round HIV and related risks? How has the programme assisted you to make informed decisions and choices in your life to reduce risks and any vulnerability you may have had before – relating to HIV? Or other issues?

34. Are there any support/peer or similar groups – that enable continuous support between and among youth maintain healthy lifestyles? If yes, describe how they started, their purpose and how useful they have been. If no, are there plans to have such a structure in place?

35. Are there any youth friendly health service providers in your town/ city (name them)? Are you accessing them more now since involvement with the programme? How about your peers, how has the programme influenced their access of the youth friendly health services?

**General:**

36. Is there anything more you would like to share about the programme?

37. What else would you like to see happening for young women and men in your community eg to help them access their rights; know more their sexual and reproductive health; gain skills to help them reduce their risk and vulnerability to HIV and gender violence and poor SRH, etc
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To find out more please contact Etafeni:
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