

Swiss Agency for Development and Cooperation
(SDC)

Evaluation of the Southern African AIDS Trust
Youth Driven Prevention – Integrated Youth in
Community Responses to HIV/AIDS

Submitted by Singizi cc
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SINGIZI CONSULTING
LEARNING & DEVELOPMENT : CONCEPTS THAT WORK

TABLE OF CONTENTS

Table of Contents	2
Section A: Introduction and Methodology	10
1 Introduction	10
2 Methodology.....	11
2.1 Document Review.....	11
2.2 Fieldwork Activities	11
Section B: Overview of the Programme Theory.....	18
3 Contextualising the Youth Prevention Focus within SAT's Overall Approach.....	18
4 Understanding SAT's approach to implementing the youth focus	19
Section C: Overarching findings	22
5 extent to which programmes are being realised	22
Section D: Reviewing Effectiveness	25
6 Extent to which SAT has Effectively implemented its strategy.....	25
6.1 Description of Key Activities Undertaken by SAT in Support of the Strategy	25
6.2 Reflecting on the Efficacy with which the Strategy has been Implemented.....	29
7 A Focus on Gender	33
7.1 SAT Respondents.....	34
7.2 CBO Partners.....	35
7.3 In summary	36
Section E: Extent to Which the Strategy is Resulting in Progress Towards the achievement of outcomes	37
8 Progress on Outcomes to Date.....	37
8.1 Improved and Contextualised Evidence-Based Prevention Strategies Address the Key Drivers of the Epidemic for Adolescents and Youth	37
8.2 Increased Acceptance of Young People Living with HIV and AIDS in Communities.....	44
8.3 Improved Support Mechanisms for HIV Positive Adolescents and Youth and for their Households.....	45
8.4 Increased Involvement of Community Organisations in Addressing Youth in their HIV Prevention Programmes	46
8.5 Increased Involvement of Adolescents and Youth in HIV and AIDS Prevention and Response in their Communities.....	50
Section F: Learning and Continual development	55
9 Monitoring and Evaluation.....	55
9.1 SAT Respondents.....	55
9.2 CBO Partners.....	57
10 Sharing Knowledge and Information for Advocacy and Policy Dialogue	59
10.1 At level of Community and Country	59
10.2 At a Regional Level.....	61
10.3 Synergy with the Regional Approach Adopted by SDC	65
Section F: Recommendations and conclusion.....	67
11 Recommendations.....	67
12 Conclusion.....	68

Executive Summary

Introduction and Background

The Swiss Agency for Development and Cooperation (SDC) brought Singizi cc on board in June 2010 in order to conduct an evaluation of the Southern African AIDS Trust's (SAT's) integration of youth-driven prevention in its community response to HIV/AIDS.

The SDC has been supporting SAT's "*Youth Driven Prevention – Integrating Youth in Community Responses to HIV and AIDS*" since March 2009, and the first phase of the support to the initiative is to come to a close in September 2010.

The key purposes of this evaluation were as follows:

- To understand the achievements of the initiative to date;
- To understand emerging strengths and weaknesses of the initiative in the context of SAT's overall integrated response to HIV/AIDS;
- To understand the potential value add of the youth prevention focus in SAT's response to HIV/AIDS;
- To reflect on the value add of this work for the SDC's regional work on HIV prevention amongst youth.

In accordance with the terms of reference for the evaluation, Singizi has also focused on issues of effectiveness and relevance in terms of the initiative to date, and has also reviewed the extent to which the youth focus has fed into policy dialogue and advocacy processes at a regional and country level, as well as the extent to which models of best practice are captured, harnessed and shared at different levels.

It should be noted that at the point of the evaluation process, the youth focus supported by the SDC had only been in effect for just over a year. Therefore, the evaluation process had not sought to assess achievements against outcomes, as it is understood that the goals of the youth prevention focus will only be potentially met in the longer-term. Rather, the evaluation has focused on achievements to date, and the extent to which SAT's approach to the integration of youth prevention is beginning to show shifts and changes in accessing and drawing youth on board in terms of prevention processes.

Contextualising the Youth Prevention Focus within SAT's Overall Approach

According to SAT's Strategic Framework for 2008-2013, the organisation's overall strategic goal is to "increase community HIV and AIDS competence in southern Africa in order for communities to reduce HIV incidences, improve access and adherence to treatment, provide adequate care and support as well as to mitigate the impact of the epidemic".

The SAT strategic plan highlights the importance of this work. SAT notes (in accordance with UNAIDS data on HIV and AIDS) that Southern Africa remains the epicenter of the global HIV pandemic, with 39% (14.9 million) of the 38.6 million adults and children who live with HIV living in the region. SAT notes further that eight SADC Member States have adult HIV prevalence exceeding 15%, and that the Southern African Development Community (SADC) region is home to 41% of children orphaned by AIDS.

SAT argues, though, that while these statistics provide an indication of the crisis, this should not be read in a manner that loses sight of the reality that different countries, regions within countries, and communities and groupings experience the epidemic in multiple and varied ways, and respond accordingly.

SAT emphasise that these respective conditions, experiences and solutions call for contextualised data analysis, community support and resourcing, which address the key drivers of the epidemic in the region, including multiple, concurrent partnerships by men and women, with low consistent condom use in the context of low levels of male circumcision. They further indicate that these drivers occur in the context of high viral STIs, lack of male involvement, age-disparate sex, as well as gender and sexual violence. Underlying these epidemic drivers are social and structural factors, such as high population mobility, cultural factors and gender inequalities. SAT states that what exacerbates the epidemics are also factors such as a general lack of openness around HIV and AIDS, and widespread stigma and denial.

Given this analysis, SAT argues that “it is increasingly clear that in responding to HIV and AIDS – just as in supporting development – leadership, sustainability and solutions lie ultimately within the affected communities themselves”.

Given this understanding of these imperatives, the SAT Strategic Framework states that they intend to achieve the following through their activities:

- Competence: strengthening and supporting community HIV and AIDS competence through partnerships with emerging community-based organisations and network and advocacy partners;
- Knowledge: creation, management and sharing knowledge on the epidemic and on HIV and AIDS community competence through action research and sharing of new learnings on the epidemic and the response with SAT partners
- Influence: increasing the influence of community experiences on the response and policies on HIV and AIDS through advocacy in collaboration with SAT strategic partners and through support to network and advocacy organisations
- Values: strengthening SAT and partners as value-led learning organisations basing programmes and operations on a rights-based approach including mainstreaming of gender, human/child rights, SRHR, and a meaningful involvement of people living with HIV and AIDS.

The Strategic Framework indicates that the modalities for realising these strategic objectives include the following:

- Sub-grating
- School Without Walls
- Action research
- Strategic partnerships
- Communications and publications; and
- Advocacy for policy influence.

According to the Strategic Framework, the above modalities are, in turn, encompassed and supported by a Monitoring and Evaluation Strategy which, amongst other activities, utilises

the SOCAT and SATCOMP tools to measure organisational capacity and HIV and AIDS community competence respectively.

The Aims of the Youth Prevention Focus

The SAT Logic Model for the Youth Prevention Focus states that the specific goal of the youth prevention focus is to “decrease the incidence of HIV infection among adolescents and youth, and an improved quality of life among adolescents and youth living with HIV and AIDS”.

The key programme objectives are:

1. To empower youth to constructively participate as change agents in community and HIV and AIDS initiatives
2. To enable communities and community organisations to integrate youth into their thinking and actions on HIV prevention, care and support
3. To contribute to a contextualised knowledge and evidence base on youth and HIV and AIDS issues in communities.

The anticipated outcomes of the programme are:

1. Increased involvement of adolescents and youth in HIV and AIDS prevention and response in their communities
2. Improved and contextualised evidence-based prevention strategies address the key drivers of the epidemic for adolescents and youth
3. Increased acceptance of young people living with HIV and AIDS in communities
4. Improved support mechanisms for HIV positive adolescents and youth and for their households
5. Increased involvement of community organisations in addressing youth in their HIV prevention programmes.

The anticipated impact is:

- Decreased HIV incidence among youth
- Infected and affected youth are integrated as constructive members of their communities
- Increased HIV and AIDS competence among youth and adolescents.

Overarching Findings

The evaluation team has found that while SAT’s increased youth prevention focus - with SDC’s support – only began just over a year ago they have made considerable progress towards achieving the outcomes for the youth-prevention focus. It is the view of the evaluation team that this rapid progress is largely as a result of the way in which SAT has integrated the youth focus into a model and programme approach that appears to be effective at (i) building and growing capacity at a community level and (ii) harnessing knowledge and information from the community, and drawing this into country and regional policy dialogues and debates. As such, there is a strong flow of information from SAT down to country, down to community, and an equally strong flow of information back from the community to the country, regional and even international domains. This dual carriageway, coupled with intensive capacity support at a community level, appears to have resulted in a model that is effective and innovative.

This overall finding is based on a review of the manner in which SAT has implemented its strategy and the extent to which it was found that the different outcome are being achieved.

In summary, the evaluation has found the following in terms of the extent to which SAT has carried out its activities as planned and the effectiveness of SAT's strategy:

The evaluation has found that SAT has undertaken the activities as planned to support the youth prevention focus. There was only one issue of concern that was raised and this pertains to the administrative delays in the flow of funds. This includes supporting CBOs through grants (though it is noted that these amounts were less than initially anticipated and that in a few cases there appears to have been delays in the grant process) and capacity building processes including the provision of organisational development support and mentoring, the implementation of the SWW activities on the key drivers and youth, facilitating processes to cascade this information to countries and local communities, developing publications, initiating research, etcetera.

In terms of the effective implementation of the modalities outlined above, this report indicates that there is evidence that CBO partners believe that the information, training, support and materials provided to them by SAT are relevant, and are providing them with access to knowledge that is of import. Further, responses from CBOs indicate that they feel they have been assisted with the development of an understanding of the specific issues confronting youth, and the potential implications that this could have on programme planning, design and implementation. Of import is that CBOs have highlighted the way in which they have considered these issues taking into account the need to involve young girls and women in their programmes and the imperative that all young people engage with gender issues in the context of HIV (for example how violence against women and pressure on girls to get married young impact on the drivers of HIV).

Critically, the evaluation has found that there is evidence that the CBOs have been able to translate this knowledge and information in a manner that has led to considerable progress in terms of meeting the outcomes that have been agreed upon for the youth-prevention focus. This is especially the case to date with the outcomes that talk more directly to youth programming in some way (i.e. a) *improved and contextualised evidence based prevention strategies address the key drivers of the epidemic; b) increased involvement of community organisations in addressing youth in their HIV prevention programmes and c) increased involvement of adolescents and youth in HIV and AIDS prevention and responses in their communities*).

There is substantial qualitative evidence to suggest that outcome pertaining to *improved and contextualised evidence based prevention strategies address the key drivers of the epidemic* is being. The evaluation found that CBOs are indicating that because they now understand the drivers, and have access to evidence pertaining to youth programming, they are able to review their programmes and make changes to these programmes in a manner that takes this evidence into account.

Of import is that many organisations indicated that a key shift that they have made since 2009 is that a prevention focus had been added and mainstreamed into programmes for different target groups of youth. They also indicate other areas in which they are now strongly intervening through creative programming as a result of the evidence pertaining to the drivers. This includes a focus on MCP as well as on inter-generational sex.

In terms of *increased involvement of community organisations in addressing youth in their HIV prevention programmes*, the evidence suggests that more than half of the partner organisations have increased their youth focus and have designed quite specific activities around youth prevention. The report indicates further that many of the remaining organisations, while not significantly increasing their youth programming, have made changes to their existing programmes based on their increased understanding of youth issues.

It was though indicated that given the constraints in funding experienced by SAT, there may be a need to consider how to further (as it is noted that there has already been some success in this area both in terms of organisational development which enables CBOs to apply for funds as well as with regard to actual funding grants received by some of the partners) leverage additional funds to support these activities.

It is also noted that there is a need to sustain the support that CBOs are receiving to translate their increased understanding of youth issues to changes in behaviour.

In terms of *increased involvement of adolescents and youth in HIV and AIDS prevention and responses in their communities*, this evaluation found that there is evidence of an increasing number of youth organisations being supported by SAT and, alongside this, it was found that CBOs with a broader focus are increasingly involving youth in their programme design and implementation. Preliminary data being collected by the evaluation team also suggests that youth reach (albeit quite differently defined and tabulated across countries) appears to be considerable though it is not possible to make statements pertaining to increased reach as there was not a baseline in place.

The outcomes that talk to broader shifts in the community (i.e. *increased acceptance of young people living with HIV and AIDS in communities*) can only be effectively evaluated once there has been an opportunity for the youth-prevention focus to mature and grow. Nonetheless, the report has presented some preliminary data that gives a sense of the potential of the programme to impact at this level.

Finally, in terms of the outcome *improved support mechanisms for HIV positive adolescents and youth for their households*, it is noted that processes are now underway to review this area, and what strategies need to be put in place to support the achievement of this outcome.

This evaluation report also found that with respect to learning and continual development SAT has introduced a robust M&E system. It was also found that information emerging from M&E processes is effectively used as a learning tool. However, one of the shortcomings of this evaluation is that the indicators which apply to the youth focus have only recently been introduced and this has meant that the team has not been able to access routine monitoring data and statistics pertaining to youth. The report has noted that the indicators pertaining to youth have now been integrated into the overall system, and that reporting on these should commence in the next quarter. Nonetheless, it has been a concern for the evaluation team that only rudimentary figures on youth reach could be used in this evaluation process.

It is anticipated that the implementation of the new youth-related indicators will go a long way to addressing issues pertaining to data at this level. This is an important requirement for strategic and programmatic tracking and decisions pertaining to the youth-prevention focus, but there is also a need to ensure that reporting to donors and related compliance issues can be addressed by this system.

Finally, this report presents substantial evidence from partners and organisations that SAT works with relating to the organisation's ability to harness information from a community level, and to take this into debates, discussions, campaigns and related in key forums at a country, regional and national level. This area is clearly considered a considerable area of strength for the organisation.

Recommendations

The key recommendations emerging from this review are as follows:

1. That SAT continues to implement the youth focus as part of its comprehensive programming and that, in particular, this covers: (i) the work that SAT is doing to provide certain direct grants to both community and youth organisations for specific youth programming (ii) SATs on-going capacity building work to enable the organisations to develop their systems, planning and programming capacities (iii) SATs facilitation of activities that promote evidence based programming such as the SWW, the development of publications that capture case studies which support learning in the region as well as its on-going research, and (iv) SATs advocacy work both nationally and regionally.
2. That SAT continually reflects on the extent to which the strategy is sufficiently ensuring that partners are engaging with the youth focus. The strength of the approach adopted by SAT is that it is not prescriptive, but offers knowledge and evidence which countries and CBOs can apply based on their particular contexts. However, there is a danger that some partners may not sufficiently apply the learning, and there will therefore be a need to carefully review the extent to which CBOs are implementing youth-directed programmes, as this is critical if young people are to be reached at the anticipated scale.
3. It will be important to establish the extent to which CBOs are able to effectively work with youth in the planning and implementation of these programmes. This is considered particularly important in the context of the mixed views that were offered by young people interviewed for this review, and the extent to which they feel that they have been properly involved in these processes.
4. There is also a need for SAT to continuously monitor the extent to which their programme approach will be affected by funding changes in a context of an integrated approach to HIV and AIDS. Ways in which to ensure that organisations are stable (and in this context any delays in funding flows must be urgently addressed) and are in a position to leverage additional funds may need to be proactively explored and supported.
5. Finally, it is suggest that once the system has been applied a number of processes should be put in place (i) the data that is gathered should become the baseline for the programme (albeit that it is a year into the programme and change should be measured against this baseline (ii) the data collected should be reviewed against the outcomes in the logic model to ensure that there is an alignment between the indicators and the outcomes. That is, is the qualitative and quantitative evidence collected through the M&E system is sufficient to enable SAT to understand whether the outcomes are being achieved? If not, there may need to be a decision taken as to how this additional evidence will be gathered (it is noted that the research processes

initiated by SAT already go some way to addressing the requirements for additional evidence). (iii) Related to this it is suggested that there may be a need to review the logic model and determine whether it continues to capture the programme's intentions, given the learning that has been acquired in this first year. It is the view of the evaluation team that there may be aspects of the model that could be further strengthened.

6. In terms of the above recommendation pertaining to the review of the logic model and the data collected against this, it is also suggested that SAT and the SDC ensure that there is a review of the extent to which gender issues are embraced/made explicit in the logic model so that appropriate disaggregated gender-based data is collected as part of the above.

SECTION A: INTRODUCTION AND METHODOLOGY

1 INTRODUCTION

The Swiss Agency for Development and Cooperation (SDC) brought Singizi cc on board in June 2010 in order to conduct an evaluation of the Southern African AIDS Trust's (SAT's) integration of youth-driven prevention in its community response to HIV/AIDS.

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- To reflect on the value add of this work for the SDC's regional work on HIV prevention amongst youth.

In accordance with the terms of reference for the evaluation, Singizi has also focused on issues of effectiveness and relevance in terms of the initiative to date, and has also reviewed the extent to which the youth focus has fed into policy dialogue and advocacy processes at a regional and country level, as well as the extent to which models of best practice are captured, harnessed and shared at different levels.

It should be noted that at the point of the evaluation process, the youth focus supported by the SDC had only been in effect for just over a year. Therefore, the evaluation process had not sought to assess achievements against outcomes, as it is understood that the goals of the youth prevention focus will only be potentially met in the longer-term. Rather, the evaluation has focused on achievements to date, and the extent to which SAT's approach to the integration of youth prevention is beginning to show shifts and changes in accessing and drawing youth on board in terms of prevention processes.

The evaluation report is structured as follows:

- Section A: This section includes the introduction and background outlined above, as well as the methodological approach adopted.
- Section B: Provides an overview of the programme theory, and aims to contextualise the youth prevention focus in SAT's overall approach.
- Section C: Provides an overview of achievements to date and outlines the overarching findings.
- Section D: Focuses on reviewing the effectiveness to which SAT has implemented its strategy.

- Section E: Provides a review of the extent to which the strategy is resulting in progress towards the achievement of the outcomes
- Section F: Reviews learning and continual development, and includes a review of the M&E system, as well as a review of the extent to which SAT is able to share knowledge and information for advocacy and policy dialogue. This section also explores the extent to which there is synergy across SAT's model and approach and the SDC's regional strategy.
- Section G: Provides the overall recommendations emerging from this review and provides a conclusion

2 METHODOLOGY

The methodology adopted for this evaluation included the following key activities:

2.1 DOCUMENT REVIEW

Singizi reviewed a series of programme-related documents made available from SAT. These have included:

- SAT's Strategic Framework for 2008-2013;
- SAT's Annual Report for the period April 2009-March 2010;
- SAT's Semi-Annual Report for the period April-September 2009;
- SAT's Proposal to HEARD for SAT's action research on the youth prevention initiative;
- SAT' proposal to the SDC for the Youth Driven Prevention initiative;
- Progress reports to the SDC on the Youth Driven Prevention Initiative;
- The SAT SHARE series publications;
- SAT guideline documents
- SAT case study pamphlets
- Report of the School Without Walls: Youth Driven HIV Prevention, Regional Workshop, August 2008.
- Report on Scaling up Community Competence on HIV Prevention, Regional Meeting, October 2007;
- SAT's presentation on the youth research being conducted with HEARD, April 2010.

Singizi reviewed the above documentation both to develop an understanding of SAT's overall integrated approach, as well as to understand the youth prevention focus as part of this. The team also used the documentary review as a basis for developing the evaluation plan and concomitant research tools and instruments.

2.2 FIELDWORK ACTIVITIES

The fieldwork activities have included the following:

2.2.1 Interviews with SAT Board, Management and Staff

Singizi conducted interviews with a selection of SAT board members, management and regional office staff.

These interviews aimed to collect descriptive information on the SAT programme, and the youth prevention focus, as well as perceptions on progress and challenges to date. The focus of the interviews included:

- Programme descriptions, including an outline of activities to date and reasons for the approach adopted;
- Perceptions of programme efficiency and relevance to date, with a focus on youth prevention within the overall approach adopted;
- Perceptions key successes and challenges to date;
- Perceptions of how the youth prevention focus has been taken up in advocacy and policy dialogue, organisation-level monitoring and evaluation and the development of models of best practice;
- Descriptions and perceptions of programme management and monitoring, including how the programme is managed and monitored, and what the challenges have been in terms of this to date.

In addition to the above, Singizi also interviewed SAT country staff, including the Country Programme Managers and Country Programme Officers from all five countries under review. These aimed to elicit similar information as the regional staff interviews, but with a specific focus on obtaining relevant country-level perceptions and information.

The table below outlines the SAT respondents interviewed, including Board Members:

	Name of Respondent	Position in SAT
1	Miriam Banda	Member of SAT Board
2	Dan Mullins	Member of SAT Board
3	Anita Sandström	Executive Director
4	Hester Musandu	Deputy Executive Director: Programmes
5	Gareth Coats	Regional SWW Coordinator
6	Taugana Dzikati	Monitoring and Evaluation Coordinator
7	Rabelani Daswa	Monitoring and Evaluation Programme Officer
8	Bright Phiri	Communications and Publications Coordinator
9	Allan Mushonga	Communications and Publications Programme Officer
10	Tiwonge Loga	SAT Country Programme Manager (Malawi)
11	Novice Bamusi	SAT Country Programme Officer (Malawi)
12	Lucrecia Wamba	SAT Country Programme Manager (Mozambique)
13	Herminia Xerinda	SAT Country Programme Manager (Mozambique)
14	Borabona Mubondo	SAT Country Programme Manager (Tanzania)
15	Rajab Kondo	SAT Country Programme Officer (Tanzania)
16	Zoonadi Mgwenya	SAT Country Programme Manager (Zambia)
17	Julius Kampamba	SAT Country Programme Officer (Zambia)
18	Roselyn Dete	SAT Country Programme Manager (Zimbabwe)
19	Maximillion Mugabe	SAT Country Programme Officer (Zimbabwe)

2.2.2 Review of CBO Partners Across Countries

At the outset of the evaluation process, Singizi suggested that it would be important to conduct some fieldwork activities that yielded some data for analysis from all of the countries in which SAT is currently operating. This would allow for a cross-cutting analysis of all areas of focus, as well as a review of any potential differences and similarities across countries.

It was originally proposed that Singizi would develop a self-completion questionnaire that would be disseminated to CBOs in each of the five countries under review. However, SAT advised that electronic communication with CBOs was often challenging, and that direct telephonic contact would yield a better return. As a result, Singizi developed a more enhanced and comprehensive tool that included both closed (quantitative) and open-ended qualitative questions posed to CBO partners.

Country Programme Managers were requested to identify a sample of CBOs in each country (based on the criteria of a spread of geographical areas and core areas of work, accessibility by telephone and the ability of the CBO manager to engage in English – or Portuguese in the case of Mozambique). Singizi then randomly sampled three of these selected organisations and conducted telephonic interviews with the CBO partners.

The interviews probed the following:

- Background on the CBO partner, including their core areas of work and target beneficiaries;
- Description of organisation structure;
- Relationship with SAT and support received to date (including detailed perceptions of this support);
- Description and perceptions of youth prevention activities and discussions on the extent to which these had changed in any way as a result of the SAT youth prevention focus;
- Discussion on programme monitoring.

A total of 15 interviews were conducted in this way, and the data was captured in a database for analysis purposes.

The table below outlined the SAT CBO Partners interviewed telephonically:

	Country	Name of CBO	First name of respondent	Surname of respondent	Position in organisation
1	Malawi	Matindi Youth Organisation	Jones	Mwalwanda	Programme Director
2	Malawi	Ladder for Rural Development	Godfrey	Kammunda	Executive Director
3	Malawi	Nayuchi AIDS Network	Chifuniro	Moir	Executive Director
4	Mozambique	Acomuza	Samuel	Paulo	Representative of Coordinator
5	Mozambique	Vicodemo	Rui	Meque	Representative of Coordinator
6	Mozambique	Kindlimuka	Irene	Cossa	Coordinator
7	Tanzania	Faraja	Joyce	Chitenje	Project Coordinator
8	Tanzania	Kicoset	Edward	Kileo	Project Coordinator
9	Tanzania	Wamata	Emanuel	Mawere	Project Coordinator
10	Zambia	Community Intergrated Health Education Programme (COIHEP)	Payne	Mano	Director
11	Zambia	Kabompo AIDS Programme (KAP)	Maureen	Kasonde	Programme Manager
12	Zambia	Loloma Mission Hospital	Danny	Chingimbu	Project Manager

1 3	Zimbabwe	Bethany	Rebecca	Gumbo	Director
1 4	Zimbabwe	Insiza Godhlwayo AIDS Council	Mpumelelo	Moyo	Programme Coordinator
1 5	Zimbabwe	Sikhethimpilo (Catholic faith-based)	Ruth	Nyathi	Project Manager

Of the 15 CBOs were interviewed telephonically as part of the evaluation process – three from each country under review. 11 of the selected organisations were located in rural areas and 4 in urban areas.

All but two of the organisations have been in existence for ten years or more. The two newest organisations were established in 2003 and 2004.

It is interesting to note that the CBOs interviewed had different definitions of youth, even within the same country. All definitions, however, fell between 14 and 35 years, although most had a cut-off of 25 years.

In terms of organisational structure, all of the 15 organisations reported that they had a board in place (with between 3 and 10 members), and 6 of the organisations reported that they had young people represented on this board (one youth representative in five cases, and 2 in one case).

The organisations vary in size, with most reporting between 1 and 4 managers, and between 3 and 15 permanent staff members. However, where they differ more significantly is in terms of their volunteer base. These varied from 16 to over 700 volunteers.

All of the CBO partners interviewed telephonically for the review process indicated that they had a partial youth focus, and also focused on other specific target groups, such as the community at large, vulnerable orphans and children, PLWHAs, and etcetera.

2.2.3 Country Matrices on CBO Partner Reach

In addition to the cross-cutting telephonic interviews, Singizi ascertained that there was a need to obtain a quantitative sense of whether or not CBO partners had increased their youth focus and reach in any way since March 2009. At the time of the fieldwork process, this data was not available at SAT (this is discussed in Section E of this report), and therefore Singizi developed a matrix that was disseminated to all Country Offices for completion.

The matrix requested information on the following:

- Names of CBO partners;
- Descriptions of their core work
- An indication of whether or not the CBO works with youth (i.e. total youth focus, partial youth focus, no youth focus)
- Whether or not there had been any changes (increases or decreases) in the CBOs' youth focus since March 2009; and
- The numbers of youth reached between March 2009 and March 2010.

This data has been summarised, and is contained in the body of this report.

It must be noted, however, that the data submitted by the Country Offices on behalf of CBOs has not been independently verified by the Singizi team in terms of the scope and timeframe for this evaluation. Nonetheless, it provides an indicative sense of scope and reach in the context of this report.

2.2.4 Site Visits to Two Countries

Singizi also conducted site visits to two CBOs each in Mozambique and Zambia. The 4 organisations visited during this process are briefly described below and a list of who was interviewed as part of this process is provided:

AREPACHO in Mozambique aims to reduce poverty and fight HIV and AIDS. The main activities of the organisation include prevention, health care, income generation, care of young people and vocational activities. The CBO is based on Chonguene, a rural area in Mozambique.

The organisation Lado Lado focuses on prevention, health care, income generation, care of OVCs, and vocational activities. The organisation also has a micro-credit programme that loans money to beneficiaries interest free.

The Contract Trust Youth Association is a CBO based in Livingston in Zambia. The CTYA is a youth organisation that works with young people between the ages of 10-24. It has 4 thematic areas of operation which includes: Sexual reproductive health – including HIV and AIDS, Civic education, Environment and Tourism and Youth Economic Empowerment.

The Girl Guides of Zambia is described as a movement for girls and young women which is intended to “lay a foundation for their complete development.” The movement is based in all 9 provinces in Zambia, and it implements a number of ongoing projects in various districts within these provinces. The work funded by SDC (through SAT) is primarily in Lusaka where the organisation works with girls between 5 – 21 years of age, as well as with the adults that support these youth programmes. The HIV and AIDS work varies for the different age cohorts and includes awareness and prevention work within a rights based approach,

The people interviewed as part of this process includes:

- Project partners: these included interviews with (as relevant), programme managers and relevant programme staff and volunteers. These interviews focused on implementation at the partner level, and “zoned in” on issues of implementation, and the extent to which on the ground implementation is contributing to the achievement of the outcomes. These interviews also focused specifically on what programmes are selected, the rationales for this, and how the needs of different target groups are addressed in this way. The interviews also reviewed how the programmes are being managed and monitored, and what systems are in place to use data emerging from monitoring processes.

The table below provides an outline of the management respondents interviewed in the site visit processes in Zambia and Mozambique.

Country	Name of CBO	First name of respondent	Surname of respondent	Position in organisation
Mozambique	AREPACHO	Dorca Francisco	Langa	Coordinator

Mozambique	AREPACHO	Ivete Francisco	Grivete	Programme Officer
Mozambique	Lado Lado	Natercia Rosa	Duvane	Coordinator
Mozambique	Lado Lado	Idalencia Alberto	Chichava	Programme Officer
Zambia	Contact Trust Youth Association	Ronnie	Jera	Programme Manager
Zambia	Contact Trust Association	Sibu	Malambo	Programme Coordinator
Zambia	Girl Guides	Nambula	Kachumi	Executive Director
Zambia	Girl Guides	Linda Chiumya	Kateka	Advocacy Officer

- Youth and community organisations that partners have been working with: CBO partners were requested to assist the Singizi team in scheduling interviews with relevant youth and community organisations. These interviews were meant to focus specifically on perceptions of CBO approach and implementation, and the successes and challenges thereof. However, in a number of cases, this was not arranged, as organisations indicated that it had not been possible to secure their partners within the timeframe. Nonetheless, where it was possible, this was completed and included an interview with the Development Youth Services Zambia as well as with the Livingston Council.
- Programme beneficiaries: CBO partners also assisted the Singizi team to constitute a small number of focus groups with youth who are/have been primary beneficiaries of a youth-related programme. The team holds that sample sizes permissible were relatively small, and data emerging here from cannot necessarily be extrapolated to the target youth population as a whole. However, despite, the focus group discussions (which were conducted with males and females separately - where relevant - in line with the principles of keeping focus groups as homogenous as possible to allow for data comparison) allowed the team to explore differences in perception across male and female youth beneficiaries. It should be noted though that with respect to the Girl Guides in Zambia interviews were only held with girls because of the nature of their target group. Also the focus groups held in Livingston included both programme beneficiaries, as well as individuals that volunteer in the organisation. These views are both captured where relevant.

The interviews and focus group discussions were recorded and transcribed for analysis purposes.

2.2.5 Key Informant Interviews with Meta-Level Partners

Finally, the Singizi team also conducted interviews with other donors, select governments and international agencies (UN, SADC, Regional NGOs). The focus of these interviews were to understand the extent to which SAT is able to generate learning from their experiences with community partners so as to influence policy direction at a national and regional level. The list of informants interviews are indicated below:

	Name of Respondent	Organisation
1	Bathsheba Okwenje	UNAIDS (Eastern and Southern African Region)
2	Bongai Mundeta	VSO (Regional AIDS Initiative of Southern Africa)
3	Tim Barnett	World AIDS Campaign Executive Director
4	Rayhana Rassool	Soul City Regional Project Manager
5	Alphonse Mulumba	SADC Programme Officer for HIV Research and M&E

6	Noreen Hunt	REPSSI Regional Psychosocial Support Initiative Executive Director
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SECTION B: OVERVIEW OF THE PROGRAMME THEORY

3 CONTEXTUALISING THE YOUTH PREVENTION FOCUS WITHIN SAT'S OVERALL APPROACH

According to SAT's Strategic Framework for 2008-2013, the organisation's overall strategic goal is to "increase community HIV and AIDS competence in southern Africa in order for communities to reduce HIV incidences, improve access and adherence to treatment, provide adequate care and support as well as to mitigate the impact of the epidemic".

The SAT strategic plan highlights the importance of this work. SAT notes (in accordance with UNAIDS data on HIV and AIDS) that Southern Africa remains the epicenter of the global HIV pandemic, with 39% (14.9 million) of the 38.6 million adults and children who live with HIV living in the region. SAT notes further that eight SADC Member States have adult HIV prevalence exceeding 15%, and that the Southern African Development Community (SADC) region is home to 41% of children orphaned by AIDS.

SAT argues, though, that while these statistics provide an indication of the crisis, this should not be read in a manner that loses sight of the reality that different countries, regions within countries, and communities and groupings experience the epidemic in multiple and varied ways, and respond accordingly.

SAT emphasise that these respective conditions, experiences and solutions call for contextualised data analysis, community support and resourcing, which address the key drivers of the epidemic in the region, including multiple, concurrent partnerships by men and women, with low consistent condom use in the context of low levels of male circumcision. They further indicate that these drivers occur in the context of high viral STIs, lack of male involvement, age-disparate sex, as well as gender and sexual violence. Underlying these epidemic drivers are social and structural factors, such as high population mobility, cultural factors and gender inequalities. SAT states that what exacerbates the epidemics are also factors such as a general lack of openness around HIV and AIDS, and widespread stigma and denial.

Given this analysis, SAT argues that "it is increasingly clear that in responding to HIV and AIDS – just as in supporting development – leadership, sustainability and solutions lie ultimately within the affected communities themselves". However, SAT suggests that the inherent strengths of communities may be under threat, and interviewees commented on the perceived present weakness of civil society in Africa. SAT states, though, that these "inherent strengths" still "remain the greatest resource in designing and implementing development-aligned HIV and AIDS responses" and that "communities play a central role in proactive and interactive responses to the HIV and AIDS epidemic." They further indicate that "the ability of communities to interact with HIV and AIDS issues, and to mainstream these within their priorities and activities, is of crucial importance to southern Africa's development"¹.

Given this understanding of these imperatives, the SAT Strategic Framework states that they intend to achieve the following through their activities:

¹ SAT Strategic Framework, 2008-2013, March 2008.

- Competence: strengthening and supporting community HIV and AIDS competence through partnerships with emerging community-based organisations and network and advocacy partners;
- Knowledge: creation, management and sharing knowledge on the epidemic and on HIV and AIDS community competence through action research and sharing of new learnings on the epidemic and the response with SAT partners
- Influence: increasing the influence of community experiences on the response and policies on HIV and AIDS through advocacy in collaboration with SAT strategic partners and through support to network and advocacy organisations
- Values: strengthening SAT and partners as value-led learning organisations basing programmes and operations on a rights-based approach including mainstreaming of gender, human/child rights, SRHR, and a meaningful involvement of people living with HIV and AIDS.

The Strategic Framework indicates that the modalities for realising these strategic objectives include the following:

- Sub-grating
- School Without Walls
- Action research
- Strategic partnerships
- Communications and publications; and
- Advocacy for policy influence.

According to the Strategic Framework, the above modalities are, in turn, encompassed and supported by a Monitoring and Evaluation Strategy which, amongst other activities, utilises the SOCAT and SATCOMP tools to measure organisational capacity and HIV and AIDS community competence respectively.

The next section of this report specifically considers the youth prevention focus of SAT's work (as supported by the SDC since March 2009). It outlines the objectives and outcomes for the programme and indicates the programme theory that is informing the activities that SAT is undertaking and enabling. In reading this section it is important to bear in mind that this youth focus is seen as integral component of SAT's comprehensive approach to HIV and AIDS and that this focus predates the support from SDC. However, it is noted that contributions from SDC have enabled the organisation to support both an increase in the focus on this area, as well as the directed activities related to this focus. SAT states that whilst they believe it is important to work with different sectors in the community they argue that this increased focus on youth is critical given the very young populations in Africa and the imperative that "*more youth grow up free of HIV*". The importance of this focus was highlighted by SAT staff and board members, suggesting a consistent understanding of the importance of this move across SAT programmes.

4 UNDERSTANDING SAT'S APPROACH TO IMPLEMENTING THE YOUTH FOCUS

The SAT Logic Model for the Youth Prevention Focus states that the specific goal of the youth prevention focus is to "decrease the incidence of HIV infection among adolescents and youth, and an improved quality of life among adolescents and youth living with HIV and AIDS".

The key programme objectives are:

4. To empower youth to constructively participate as change agents in community and HIV and AIDS initiatives
5. To enable communities and community organisations to integrate youth into their thinking and actions on HIV prevention, care and support
6. To contribute to a contextualised knowledge and evidence base on youth and HIV and AIDS issues in communities.

The anticipated outcomes of the programme are:

6. Increased involvement of adolescents and youth in HIV and AIDS prevention and response in their communities
7. Improved and contextualised evidence-based prevention strategies address the key drivers of the epidemic for adolescents and youth
8. Increased acceptance of young people living with HIV and AIDS in communities
9. Improved support mechanisms for HIV positive adolescents and youth and for their households
10. Increased involvement of community organisations in addressing youth in their HIV prevention programmes.

The anticipated impact is:

- Decreased HIV incidence among youth
- Infected and affected youth are integrated as constructive members of their communities
- Increased HIV and AIDS competence among youth and adolescents.

Interviewees explain that in order to achieve the above, the programme theory adopted by the organisation involves working with their CBO partners to ensure that “CBOs *understand youth issues and understand that their issues should not be generalised, as youth issues are different to that of adults.*” SAT indicates that, coupled with this, their focus includes assisting partner CBOs “*to design youth friendly programmes to ensure youth are targeted through the SAT partners’ community programmes*”.

SAT respondents state that these CBOs will in turn “*ensure that youth understand the issues related to HIV, so that they can play a bigger role in dealing with the key drivers*”. This is seen as critical, as the understanding is that there is a need to “*encourage youth’s active participation in HIV and AIDS programmes, so that they are participants and not only recipients*”.

Interviewees from SAT indicate that once there is understanding, there is a need to “*plan interventions (training, providing information, youth friendly services, access to treatment of STI, access to ARVs and condoms, etc), that empower youth so as to enable behaviour change*”.

Interviewees also placed particular emphasis on the vulnerability of young girls and women, and highlighted the extent to which “*through IGS and powerlessness in terms of the relations between men and women, they are affected by HIV.*”

Interviewees state that the final leg of this strategy is to ensure that government policies take the youth perspective into account. They indicate that this has been lacking up to now, and that adults “*tend to be judgemental, and yet the youth also have their sexual needs and yet issues of sexuality are not addressed. We need to be saying the truth, and if they are having sex, these are the prevention methods and so on and that information must be clear to them.*”

The following sections provides an overarching evaluative view as to whether SAT appears to be on track with respect to meeting the objectives for the programme. The report then considers the extent to which SAT has effectively worked with their CBOs to enable this understanding and revised approach to working with youth. This is then followed by a more detailed assessment of the extent to which these activities have resulted in each of the anticipated outcomes for the programme.

SECTION C: OVERARCHING FINDINGS

5 EXTENT TO WHICH PROGRAMMES ARE BEING REALISED

The evaluation team has found that while SAT's increased youth prevention focus - with SDC's support – only began just over a year ago they have made considerable progress towards achieving the outcomes for the youth-prevention focus. It is the view of the evaluation team that this rapid progress is largely as a result of the way in which SAT has integrated the youth focus into a model and programme approach that appears to be effective at (i) building and growing capacity at a community level and (ii) harnessing knowledge and information from the community, and drawing this into country and regional policy dialogues and debates. As such, there is a strong flow of information from SAT down to country, down to community, and an equally strong flow of information back from the community to the country, regional and even international domains. This dual carriageway, coupled with intensive capacity support at a community level, appears to have resulted in a model that is effective and innovative.

This overall finding is based on a review of the manner in which SAT has implemented its strategy and the extent to which it was found that the different outcome are being achieved.

In summary, the evaluation has found the following in terms of the extent to which SAT has carried out its activities as planned and the effectiveness of SAT's strategy:

The evaluation has found that SAT has undertaken the activities as planned to support the youth prevention focus. There was only one issue of concern that was raised and this pertains to the administrative delays in the flow of funds. This includes supporting CBOs through grants (though it is noted that these amounts were less than initially anticipated and that in a few cases there appears to have been delays in the grant process) and capacity building processes including the provision of organisational development support and mentoring, the implementation of the SWW activities on the key drivers and youth, facilitating processes to cascade this information to countries and local communities, developing publications, initiating research, etcetera.

In terms of the effective implementation of the modalities outlined above, this report indicates that there is evidence that CBO partners believe that the information, training, support and materials provided to them by SAT are relevant, and are providing them with access to knowledge that is of import. Further, responses from CBOs indicate that they feel they have been assisted with the development of an understanding of the specific issues confronting youth, and the potential implications that this could have on programme planning, design and implementation. Of import is that CBOs have highlighted the way in which they have considered these issues taking into account the need to involve young girls and women in their programmes and the imperative that all young people engage with gender issues in the context of HIV (for example how violence against women and pressure on girls to get married young impact on the drivers of HIV).

Critically, the evaluation has found that there is evidence that the CBOs have been able to translate this knowledge and information in a manner that has led to considerable progress in terms of meeting the outcomes that have been agreed upon for the youth-prevention

focus. This is especially the case to date with the outcomes that talk more directly to youth programming in some way (i.e. a) *improved and contextualised evidence based prevention strategies address the key drivers of the epidemic; b) increased involvement of community organisations in addressing youth in their HIV prevention programmes and c) increased involvement of adolescents and youth in HIV and AIDS prevention and responses in their communities*).

There is substantial qualitative evidence to suggest that outcome pertaining to *improved and contextualised evidence based prevention strategies address the key drivers of the epidemic* is being. The evaluation found that CBOs are indicating that because they now understand the drivers, and have access to evidence pertaining to youth programming, they are able to review their programmes and make changes to these programmes in a manner that takes this evidence into account.

Of import is that many organisations indicated that a key shift that they have made since 2009 is that a prevention focus had been added and mainstreamed into programmes for different target groups of youth. They also indicate other areas in which they are now strongly intervening through creative programming as a result of the evidence pertaining to the drivers. This includes a focus on MCP as well as on inter-generational sex.

In terms of *increased involvement of community organisations in addressing youth in their HIV prevention programmes*, the evidence suggests that more than half of the partner organisations have increased their youth focus and have designed quite specific activities around youth prevention. The report indicates further that many of the remaining organisations, while not significantly increasing their youth programming, have made changes to their existing programmes based on their increased understanding of youth issues.

It was though indicated that given the constraints in funding experienced by SAT, there may be a need to consider how to further (as it is noted that there has already been some success in this area both in terms of organisational development which enables CBOs to apply for funds as well as with regard to actual funding grants received by some of the partners) leverage additional funds to support these activities.

It is also noted that there is a need to sustain the support that CBOs are receiving to translate their increased understanding of youth issues to changes in behaviour.

In terms of *increased involvement of adolescents and youth in HIV and AIDS prevention and responses in their communities*, this evaluation found that there is evidence of an increasing number of youth organisations being supported by SAT and, alongside this, it was found that CBOs with a broader focus are increasingly involving youth in their programme design and implementation. Preliminary data being collected by the evaluation team also suggests that youth reach (albeit quite differently defined and tabulated across countries) appears to be considerable though it is not possible to make statements pertaining to increased reach as there was not a baseline in place.

The outcomes that talk to broader shifts in the community (i.e. *increased acceptance of young people living with HIV and AIDS in communities*) can only be effectively evaluated once there has been an opportunity for the youth-prevention focus to mature and grow. Nonetheless, the report has presented some preliminary data that gives a sense of the potential of the programme to impact at this level.

Finally, in terms of the outcome *improved support mechanisms for HIV positive adolescents and youth for their households*, it is noted that processes are now underway to review this area, and what strategies need to be put in place to support the achievement of this outcome.

This evaluation report also found that with respect to learning and continual development SAT has introduced a robust M&E system. It was also found that information emerging from M&E processes is effectively used as a learning tool. However, one of the shortcomings of this evaluation is that the indicators which apply to the youth focus have only recently been introduced and this has meant that the team has not been able to access routine monitoring data and statistics pertaining to youth. The report has noted that the indicators pertaining to youth have now been integrated into the overall system, and that reporting on these should commence in the next quarter. Nonetheless, it has been a concern for the evaluation team that only rudimentary figures on youth reach could be used in this evaluation process.

It is anticipated that the implementation of the new youth-related indicators will go a long way to addressing issues pertaining to data at this level. This is an important requirement for strategic and programmatic tracking and decisions pertaining to the youth-prevention focus, but there is also a need to ensure that reporting to donors and related compliance issues can be addressed by this system.

Finally, this report presents substantial evidence from partners and organisations that SAT works with relating to the organisation's ability to harness information from a community level, and to take this into debates, discussions, campaigns and related in key forums at a country, regional and national level. This area is clearly considered a considerable area of strength for the organisation.

SECTION D: REVIEWING EFFECTIVENESS

6 EXTENT TO WHICH SAT HAS EFFECTIVELY IMPLEMENTED ITS STRATEGY

As indicated, a critical component of the SAT strategy is to work with CBO partners to enhance their understanding of the manner in which youth are specifically effected by HIV and AIDS, and the kinds of interventions that could be implemented. Critically, SAT has placed a strong emphasis on ensuring that their partners grapple with ways of working with youth to ensure that they are participants rather than just beneficiaries.

The extent to which SAT has effectively implemented its strategy is considered below. This relies on the evidence provided by SAT relating to the activities it has implemented as part of this strategy. These findings were also explored with partners, both to confirm the activities and to understand the extent to which partners believe that these have value, and have contributed to their understanding of the way in which to engage with and on youth-related issues. The extent to which this has contributed to SAT's outcomes is then considered.

6.1 DESCRIPTION OF KEY ACTIVITIES UNDERTAKEN BY SAT IN SUPPORT OF THE STRATEGY

The evaluation team found that SAT is implementing various activities as planned to support CBO partners to gain an increased understanding of the intersection between HIV and AIDS and youth. This support has included grant and technical support in governance and management areas, as well as programming support. SAT has also mediated learning in a number of critical areas for CBOs, as well as created spaces for organisations to learn from each other - both through workshops and mentoring processes that take place at regional, national and local levels. Further, it has been found that SAT is sharing the learning gained at a local level, both through publications, as well as in national and regional forums.

The team suggests that the combination of activities highlights that SAT is implementing its strategy of working with CBOs (both community based and youth focused) to provide them with capacity to manage their organisations, and to provide knowledge about the drivers of HIV and AIDS and the manner in which youth relate to these drivers.

The nature of this support is detailed from the perspective of SAT for the remainder of this section.

SAT reports that during the period under review, it has provided **grants and technical support** to 41 CBOs/NGOs focussing on either a single intervention or comprehensive youth programmes. This technical support focuses on governance and management related issues, as well as programming support. The nature of the technical support provided is, in part, determined by the outcomes of the SOCAT and SATCOMP processes, which indicate which aspects of the CBO need to be strengthened. SAT reports that against these tools, it can be seen that overall partners have continued to exhibit growth in organisational and programming capacities.

SAT also reports that under the auspices of the **School Without Walls (SWW) programme**, they hosted two regional workshops in 2008 for partner organisations. The first workshop in January focused on the key drivers of HIV, and the second one in August focused on youth driven HIV prevention and the relevance of the key drivers to young people.

SAT outlined that these workshops were then cascaded down into the five countries where SAT works. In these forums, partners were given the opportunity to contextualise the information, discuss strategies to take the information forward and thereby enhance prevention programmes at community level. It was reported that countries then ran follow up workshops to further enhance the knowledge of SAT's partners, so as to increase and strengthen the scale-up of prevention programmes, their impact and sustainability through a review of programmes being implemented and sharing the lessons and experiences.

SAT interviewees further indicate that there is also a process of **mentoring** provided to CBOs. This is undertaken by other partner CBOs which creates a basis for organisations to learn from each other in a one-to-one environment.

In addition SAT facilitated the development of a **publication** based on these experiences, which shows how partners made use of the evidence relating to male circumcision, multiple concurrent partnership, intergenerational sex and general HIV prevention. The publication was made available to SAT partners, and also other stakeholders (the publication was also distributed at the SADC Prevention meeting in South Africa in June, and recently at a World Bank meeting in Zambia). A Portuguese version has also been developed.

The other area that SAT has highlighted relates to the work that it is doing in ensuring that the **experiences gained in the communities are shared** in national as well as regional forums. Interviewees indicate that the SAT country staff participate in the country NACs, and it was indicated that SAT is a member of a number of critical forums addressing HIV and AIDS in the region, for example SADC.

Examples of the way in which these activities have been implemented

Some examples of the manner in which this strategy has been given expression in the SAT countries is provided below:

In **Zimbabwe** SAT reports that where contracts are being renewed, organisations are supported to integrate youth activities into their plans for the new financial term. The SAT interviewee explained that where the organisation has an existing contract, then the CBO can write to SAT and suggest activities they want to integrate, and request permission to move existing funds to achieve the delivery of the youth activities.

Zimbabwe also indicates that they have implemented follow up workshops for partners on the key drivers and they have also conducted meetings where they explained SAT's youth focus and the indicators that they will be using. An interviewee from the SAT office commented that,

“We impressed upon partners the need to address issues that affect youth in their communities and to ensure that communities are aware of the consequences of not working with young people. The workshops conducted included a Youth HIV Prevention workshop, Key Drivers workshop and a workshop on male circumcision”.

Zimbabwe SAT respondents also indicated that they are planning further workshops on the SAT research that has been conducted with HEARD on the way in which youth relate to the key drivers.

In **Malawi** SAT interviewees state that they provide technical and capacity development support to all CBOs. They state that this *“is a slow process and we work with partners for 3 – 6 years to ensure they are able to address HIV. But it has a multiplying effect because once the growth has been achieved, the partner can sustain itself and SAT can move on and support another partner”*. They indicate that this is very effective, as the approach used by SAT means that as they develop the CBO, they also support the development of the community more widely. They note, though, that the resource limitations of SAT inhibit the extent to which can reach more partners.

With respect to the youth focus, interviewees indicate that CBOs are asked to integrate youth activities into their action plans. They state that the implementation of these plans is then monitored by SAT. As with Zimbabwe, SAT respondents explain that the youth focus can either be built into future proposals, or CBOs can integrate youth activities into their current plans, in which case they would need to request permission to use existing grant money for these activities. Interviewees suggest that this approach is very effective, as it allows interventions to be community-owned, and therefore relevant to their specific context.

Malawi SAT respondents also confirm that they have facilitated country training linked to youth issues and the key drivers. They indicate that they have conducted a national training workshop on stigma and discrimination, behaviour change and gender, and how these topics relate to HIV and AIDS, and youth. Interviewees also state that they plan to conduct a workshop pertaining to the SAT research being conducted with HEARD when the report is complete.

Malawi explains that there is then a further cascade effect as they then replicate what they have learnt through the SWW process at a community level: *“we were talking about prevention and youth and people had mandate to go back to their communities and hold similar discussions, so if you see our reports we now talk specifically about youth. There is a youth component there”*.

Interviewees from SAT Malawi also indicate that study and mentoring visits have been conducted in the country to support the development of knowledge and understanding related to the youth focus.

In **Mozambique** staff members indicate that they have conducted SWW, disseminated publications, conducted study visits and mentorship exchanges in support of partners as they implement programmes for youth. They state that their partners have youth in their organisations and that SAT emphasises the need to involve youth more in their activities.

A summary of the kinds of issues addressed through these interventions in Mozambique is provided below:

- SWW – key drivers, income generation, prevention topics, counselling, home-based care (youth are trained as home based care workers).
- Publications – sexual reproductive health, prevention, counselling, palliative care
- Study visits were aimed to address HCB, how to address community meetings, how volunteers can address issues of ethics and how to collaborate with community organisations (these included youth).
- Mentoring support given was on issues such as how to design strategic plans and mapping of impact areas, governance and advocacy.

In **Tanzania** SAT states that there was a regional workshop on key drivers which involved both SAT community based partners and strategic partners to attend. They indicated that this workshop (SWW) was cascaded in the country through the facilitation of a country level workshop.

The SAT interviewees state that in addition to this, partners in their respective meetings were requested to go back to their organisations and discuss the key drivers in relation to the youth focus. In this context, partners were asked to consider how to integrate the youth focus into their strategic plans. It was indicated that CBOs were then asked to identify the activities they could be implemented with communities to ensure youth participation.

In **Zambia** interviewees indicated that much of their emphasis is on the provision of technical support and capacity building to their CBO partners. They indicate that they have a deliberate strategy of pairing up stronger CBOs with emerging CBOs and state that this has been particularly useful for the youth organisations that they have begun to work with more recently, who require greater levels of mentoring support.

SAT interviewees also indicate that they have sent people to the SWW activity, as well as to the workshop which provided feedback on the SAT youth research being conducted with HEARD. It was indicated that these processes laid the groundwork for discussions pertaining to the key drivers of the epidemic, and how these relate to youth. SAT highlights that the recent Prevention Lessons Sharing event in Zambia has shown that the lessons sharing has led to partners developing clear prevention work plans, and that the knowledge gained has been applied at community programme level in varying degrees.

6.1.1 In summary

As indicated this section has highlighted the myriad of activities that have been undertaken by SAT in support of the strategic objectives for the programme. The following section considers whether these activities are being effectively implemented from both the perspective of SAT interviewees but more critically from the vantage of the CBOs receiving this support.

6.2 REFLECTING ON THE EFFICACY WITH WHICH THE STRATEGY HAS BEEN IMPLEMENTED

The evaluation team has found that CBOs in the sample generally believe that the overall support provided by SAT is very valuable, and enables them to develop and build their organisations over an extended period of time. Interviewees particularly emphasised the importance of the support that they received with respect to enabling organisations to understand their role, and with the development and implementation of policies and systems. CBOs stated that this support, and the concomitant strengthening of their organisations had in turn allowed them to more effectively implement their youth programmes. This view was echoed by board members, who emphasised that the SAT strategy is particularly effective in building organisational strength because of the number of complimentary support activities implemented by SAT.

The only area of concern that was raised by a few of the NGOs that were surveyed was that there have been a number of occasions where there have been delays pertaining to grant disbursements, which they indicate have been managed, but could adversely effect the manner in which the organisations can operate effectively.

With respect to the youth focus, the evaluation team found that SAT reportedly effectively provides CBOs with information, training, support and materials.

Critically, board members stated that SAT is able to translate its strategy to supporting the youth focus, and they offered the view that the youth focus builds on, and enhances, the work SAT that has being doing with CBO partners, including those partners that are entirely youth directed.

All the CBOs indicated that this support provides them with access to knowledge that is relevant, and that enables them to develop an understanding of the specific issues confronting youth (and the potential implications that this could have on programme planning, design and implementation). They emphasise that they have been able to translate this learning for others in the organisation so that it has wider benefit.

Some interviewees also indicate that the strategy of developing publications which support other forms of interventions has particular value, as it ensures that the organisations have reference materials that they can use after the workshops or (other forms of support) are conducted.

Interviewees also commented on the effectiveness with which SAT captures the learning from CBO partners, and enables this to support policy development and advocacy work.

These findings are evidenced in the perspectives of different role players commenting on the extent to which SAT is perceived to be implementing the strategy in an effective manner.

6.2.1 SAT Respondents

Interviewees from the SAT board specifically reflected on the effectiveness of the way in which they believe that SAT is able to provide technical support to CBOs within the grant mechanism. An interviewee observed that,

“They are able to take new CBO through a supportive process and assist them in developing systems that will sustain the organisations”.

Interviewees from the board comment on the support provided by SAT and stated that the support,

“Is a process of taking an emerging CBO, and walking with it, so that SAT can call upon policy makers to share the community experiences of HIV, while building the CBOs capacity so that it can raise issues and request support needed.”

“Ensures that organisations have a consistent understanding of what organisations need to do, how they operate and that their interventions are based on good practice”.

“...enables organisations to share their experiences as part of this learning process”.

Board members also comment on the documents produced by SAT, which interviewees indicate are made widely available so that they can be referred to extensively.

Overall, board members commented that the approach adopted by SAT is particularly valuable as it involves a range of different support methods including SWW, information workshops, publications as well as mentoring *“which enables new CBOs to be supported by the more functional and experienced CBOs”.*

The other SAT area of activity that board members highlighted as being important to enabling SAT to achieve its outcomes pertains to the area of networking and advocacy. Board members suggested that SAT is effectively working with both CBO and advocacy partners to *“create more numbers and voices to advocate for issues that impact on the delivery”.*

6.2.2 CBO Partners

The kinds of comments that were made by CBO respondents are highlighted in the following section.

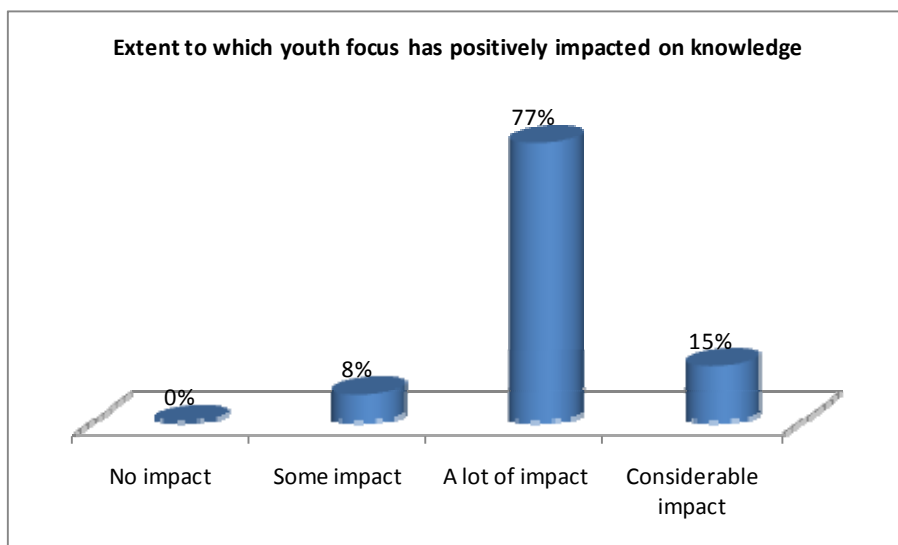
In the Zambian field visits an interviewee from an organisation commented that,

“They did a baseline (using SOCAT) – they saw the gaps exposed some gaps, then we looked at those and put up an improvement plan and we have been working at improving those gaps. One of the many areas we were lacking were management systems – we did not have a policy manual – we did not have finance policy – that was the major weakness that we had – and financial viability – and in terms of programming we did not have a strategic plan which we have now developed - a few weeks ago they came back to see how we have improved.”

The organisation also indicated that they have since put in place an advisory board to support their work. They state that they feel that by strengthening their organisation they are in a position to improve their programming and levels of accountability.

However it is noted that a few of the organisations indicated that there are sometimes delays in grant disbursements. One of the organisations acknowledged that this was in part because they delayed in submitting their report but stated that there were then further delays on the part of SAT.

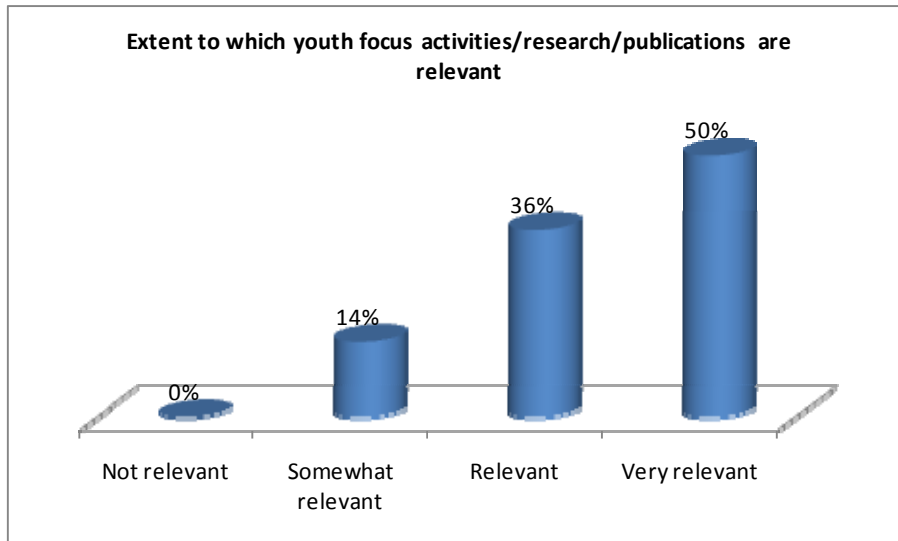
Respondents were asked to rate the extent that the SAT youth prevention focus activities and emphasis (such as SWW) had positively impacted on their knowledge about HIV/AIDS in relation to youth and youth issues.



As evidenced in the figure above, all respondents felt that the youth focus activities (with special reference to the SWW process) had positively impacted on their knowledge of youth prevention issues. Comments included:

- *“It has increased our knowledge on HIV and youth as we were not knowing these before” (Malawi CBO partner)*
- *“After attending the workshop we have acquired knowledge and linked this knowledge to our activities. The youth have also acquired the knowledge we gained in the workshops and they are sharing it with their peers” (Malawi CBO partner)*
- *“I believe that the changing of the approach (towards youth) has to do with increased knowledge” (Mozambique CBO partner)*
- *“We feel somehow that the knowledge of our staff has increased and even the knowledge of the volunteers has increased. There are many new issues (including on the key drivers) that they know as a result of the information on the publications provided by SAT” (Mozambique CBO partner)*
- *“Our knowledge and skills has increased because of the SAT activities. We now use young people to assist with carrying out monitoring and evaluation activities. The publications have increased our knowledge on specific issues relating to HIV and youth and we use the publications in our campaigns to sensitise communities on HIV and youth” (Zambian CBO partner)*
- *“When we came back from the SWW we shared the information with our colleagues in the organisation and we developed a work plan and we are working to implementing what we learnt at the SWW” (Zambian CBO partner)*

Respondents were then asked to indicate the extent to which they felt that the SAT youth focus activities, research and publications were relevant to the needs of youth in their respective communities.



As evidenced in the figure above, the vast majority of respondents indicated that the youth focus activities/research/publications are relevant or very relevant to the needs of youth in their communities. Comments included:

- *The information has helped us move ahead and build confidence of young people. Young people are talking of HIV and being guardians and they are very supportive of our activities. I think this is due to the information received at the workshops and shared with the young people. It is also relevant because we have seen an increase in requests for HIV testing; increased participation in youth clubs; and young people are starting post test clubs on their own (Malawi CBO partner)*
- *The issues of young people in the country, in our work, is the same as that of the key drivers discussed in the SWW (Malawi CBO partner)*
- *We have programmes in our offices and youth have their own needs, the information gained at the SWW has helped us address the needs of youth at community level and therefore the knowledge gained was relevant to the needs of young people. The interventions are meeting the needs of young people in the community and therefore the knowledge gained was relevant to our community (Malawi CBO partner)*
- *Some of the teachers of Zandamela come to our CBO to ask for SAT publications. They say the publications help in many aspects. They say they use the sources of information for some of the lecturers (Mozambique CBO partner)*
- *These are relevant. We see that the publications that we distribute in the communities have a considerable impact. For example, now youths are no longer ashamed of going for a HIV test. They are no longer ashamed about talking about a condom. The number of unplanned pregnancies has decreased considerably'*

(Mozambique CBO partner)

- *The SWW helped us change their mindset of young people (there are many traditional beliefs in our area as it is a rural area) and because the information is relevant it has helped us get youth to see things differently (not in the traditional way they used to) (Zambia CBO partner)*
- *Because the information spoke to of the different needs of the youth and this was similar to the needs of young people in our communities. The information provided just needs slight adjustment to fit the needs of young people in our rural areas (Zimbabwean CBO partner)*

However, one respondent from Mozambique indicated that whilst the content of the publications was relevant, there was a need to review the use of different types of media that might better reach youth. The respondent commented as follows:

“Youth do not like reading. They prefer information on television. SAT should start thinking on how to educate people using media, especially television. Youths like movies. SAT should start thinking how to work on information that they have to produce short films”.

The extent to which this evidence is informing programming is considered in the following section, which reviews whether the activities undertaken by SAT are enabling their anticipated outcomes to be realised.

6.2.3 In summary

This section has emphasised the effectiveness with which SAT has implemented its strategy and the perceived complementarity of the different activities with which they engage and build CBOs over a sustained period of time. It has also begun to point to views pertaining to the value of these activities, though this aspect considered in more depth when evaluating whether or not these activities are contributing towards the achievement of the outcomes identified by SAT for this youth focus (supported by SDC). This is addressed in Section E.

7 A FOCUS ON GENDER

A critical dimension of the strategy is the extent to which in the implementation of the strategy, SAT ensures that gender issues are considered, and that girls and young women are actively encouraged to both play a leadership role in organisations, and to become part of programmes.

The evaluation team has found that organisations are considering gender from different perspectives. The team has found that organisations are actively considering the numbers of girls and young women that are participating in their programmes, and are seeking to find ways of attracting an increasing number of girls and young women into their programmes through offering programmes that are solely for girls and women, or by planning events that will attract this target group.

In addition, the team has found that organisations are also considering the programmes that they are currently implementing, and reviewing the gender issues that need to be dealt with across these programmes - for example, the need to consider the impact of violence against women on the vulnerability of this target group with respect to HIV and AIDS.

These findings are evidenced by the comments made both by SAT and critically by the CBOs themselves.

7.1 SAT RESPONDENTS

SAT country staff indicates that gender is given prominence, though this takes varied forms across the countries.

SAT **Malawi** states that gender is considered to some extent. They indicate that generally this is restricted to ensuring that the numbers of participants are the same for male and female, and *“nothing beyond this”*. However, they state that they have now had a gender training session and have worked with partners to review their proposal to ensure gender integration. They state that this integration requires of partners that they undertake *“a needs assessment and shape their work based on the needs of both girls and boys”*.

SAT **Mozambique** states that gender issues are challenging to address, and they differ in urban and rural areas. They state that gender issues are also complicated by issues pertaining to level of education. Interviewees state that interestingly the organisations have many women involved: *“if you look at the volunteers, you see most are women, so it is a challenge in terms of how to translate into programming. There is theory and then there is programme level and how do you assess opportunities and gaps.”*

In **Tanzania** SAT respondents state that the problem with gender is *“that people fail to differentiate between sex and gender. They claim to be speaking of gender mainstreaming, but are speaking about women’s emancipation and not gender promotion. The programmes often do not take into account the roles that girls have to fulfil in the community – e.g. times of planning intervention that are not suitable for girls”*.

A respondent commented that SAT has a gender resource book which is currently being revised, and the Tanzania perspective on gender will be included in the resource book. It was indicated that *“the resource book guides our gender work with partners”*.

In **Zambia** it was indicated that partners are beginning to address these issues, though they state that generally *“the understanding of gender has been quite scanty in partner organisations, and last year we engaged a gender expert and they did a gender workshop on HIV/AIDS. This was in-country and deliberate. I think now as a result of that there is an increased understanding”*.

Respondents explained that they decided to do this workshop, as some partners had requested this, as most partners recognised that gender understanding is weak, which was seen to be confirmed in the SAT monitoring visits. Respondents indicate that unless CBOs are able to address the power relations, it will make it difficult to truly address some of the drivers of HIV and AIDS.

In **Zimbabwe** it was indicated that CBOs try to ensure male and females have information on gender issues. Partners deliberately recruit both sexes to attend workshops, and some reportedly look at the specific needs of male and female and try to address these. Respondents explained that SAT tries to ensure that gender awareness is prevalent when conducting all SAT activities as *“one cannot talk about HIV without dealing with gender”* and, in this context, they encourage partners to consider how girls and young women are addressed by the programmes, and have access to relevant information.

7.2 CBO PARTNERS

CBO partner respondents were also asked to indicate whether or not their organisations actively take issues of gender into consideration in programming. Comments included:

- *“Gender mainstreaming is high. We consider gender in all our activities. If we are not addressing gender, we not meeting the needs of all youth. When we design the activities, we start by identifying issues and consider gender in relation to these issues. We have a gender based violence outreach programme and woman and girls empowerment (training, leadership development in relation to HIV)” (Malawi CBO partner)*
- *“Gender is considered in implementation - our programmes try to involve men and women in decision making when decisions are made in various activities of the clubs and committees. This was done before SAT, but SAT helped us to more carefully think about gender” (Malawi CBO partner)*
- *“The association is taking into consideration gender issues. We are trying to have a holistic approach on gender. It is the philosophy of the organisation – to meet aspects related to gender development” (Mozambique CBO partner)*
- *“Gender is considered in implementation - our programmes try to involve men and women in decision making when decisions are made in various activities of the clubs and committees. This was done before SAT but SAT helped us to more carefully think about gender” (Malawi CBO partner)*
- *Very much. If we only concentrate on boys there will be no change. That activity of sex means that both partners must be there. Volunteers are sensitising and encouraging boys and girls both to attend our activities” (Tanzania CBO partner)*
- *“We try to make sure that there are 50/50 girls and boys who are drawn to the youth clubs” (Tanzania CBO partner)*
- *“Initially we realised that very few girls participate in our activities because of gender issues so we introduced the girl child empowerment programme and tailored this programme so that young women feel encouraged to participate – it has helped but there are still many challenges – the ratio is still 2 to 1.” (Zambia CBO)*
- *“ We find a way of giving the girls a voice with the guys....Also re recreation activities – we try and organise games etc just for young girls. Also some of the proposed activities where we intend to have young females brought together and bring role models, females that have made it big and bring these females to talk to our youth – re how they made it – what challenges did they go through.”*
- *“Our programmes are mainly for girls and young women: we develop their confidence and abilities so that they are able to play a leadership role for others. This is really important in areas where many young girls are forced to get married or where girls can’t attend meetings because they have tasks at home. So we had to design our programmes so that these girls and young women felt that there was still space for them to attend.” (Zambia, CBO)*

- *“Usually more females than males attend the interventions and we work to encourage boys and girls to attend. The information shared takes into account the needs of both sexes. In our VCT sector we encourage youth to bring their partners as part of the counselling process” (Zambia CBO partner)*
- *“Gender is cross cutting and we ensure that both sexes are involved in the activities. We take into account the needs of both sexes when we plan and this is highlighted by the young men and women we involve in our planning. We have a gender section in our organisation so this integration of gender is not new” (Zambia CBO partner)*
- *“We allow access to girls and boys to all our skills training programmes, whereas before we allowed girls to do certain training and boys to do certain training. Now boys can do hairdressing and girls can do poultry” (Zimbabwe CBO partner)*
- *“We ensure girls and boys get equal opportunities to participate and receive information in our interventions” (Zimbabwe CBO partner)*

It is noted that the extent to which these issues were addressed were emphasised by youth themselves in both CBOs in Zambia. Comments include,

“Like one of the activities we had was peer training – they taught us how to talk to people but also gave us lessons on how to handle boy and girl relations, traditional beliefs, they send us out to talk to people (including HIV)”

“We have developed a lot since we became part of the girl counselling programme – and we can now work with other girls to try and get them involved”.

However one of the youth commented that this is a complex process and that there continues to be male dominance in the programme and in the organisation,

*“Its been a challenge – staff are mainly men, and volunteers mostly men
Its maybe the way we are brought up – we have to do lots of tasks – not easy for people to come.”*

7.3 IN SUMMARY

This section has highlighted that the strategy is being implemented both effectively, and in a manner that takes cognisance of gender issues. The extent to which the strategy is leading to the outcomes, as highlighted in SAT’s logic model, is explored in the following section.

SECTION E: EXTENT TO WHICH THE STRATEGY IS RESULTING IN PROGRESS TOWARDS THE ACHIEVEMENT OF OUTCOMES

8 PROGRESS ON OUTCOMES TO DATE

The previous section has outlined the strategy adopted by SAT, and has indicated the extent to which CBOs believe that this strategy is effectively supporting them to design and implement relevant programmes. This section considers the extent to which the strategy implemented by SAT is achieving the outcomes for this youth focus, as outlined by SAT in its proposal to SDC. This is reviewed from the perspective of SAT, as well as CBO partners.

However, before proceeding with this component of the evaluative review, it is important to reiterate the point made in the introduction to this evaluation: the programme, as supported by the SDC, has only been in the process of implementation since March 2009. Therefore, it is not realistic to imagine that these outcomes could be achieved within this time period. For this reason, the focus is more on whether the programme appears to be on track towards achieving these outcomes, than on evaluating whether the outcomes have been achieved - or not - in a summative manner.

8.1 IMPROVED AND CONTEXTUALISED EVIDENCE-BASED PREVENTION STRATEGIES ADDRESS THE KEY DRIVERS OF THE EPIDEMIC FOR ADOLESCENTS AND YOUTH

The evaluation team has found that SAT is doing significant work to ensure that there is evidence pertaining to the drivers of HIV and AIDS, and the specific issues pertaining to youth. The evaluation team suggests that this reinforces the previous findings about the manner in which SAT is ensuring that this evidence is accessible to their CBO partners.

Critically, the team has found that CBOs themselves are indicating that because they now understand the drivers, and have access to evidence pertaining to youth programming, they are able to review their programmes and make changes to these programmes in a manner that takes this evidence into account.

Of import is that many organisations indicated that a key shift that they have made since 2009 is that a prevention focus has been added and/or mainstreamed into programmes for different target groups of youth. They also indicate other areas in which they are now strongly intervening through creative programming as a result of the evidence pertaining to the drivers. This includes a focus on MCP, as well as on inter-generational sex.

Thus in summary, the evaluation team believes that, despite the limited duration of the youth focus to date, SAT and CBO partners are making significant strides in terms of meeting this outcome.

These findings are given support by the comments offered from the perspective of SAT staff (regional and country) as well as the CBOs themselves.

8.1.1 SAT Respondents

SAT states that the approach that they adopt is to provide evidence to CBOs, rather than to prescribe programmes. They suggest that this ensures that countries are able to explore the drivers within their individual contexts, and then allow CBOs to consider how to apply these in a manner that is relevant to their country context.

SAT states that to support this approach, they are bolstering the evidence that can be made available to CBOs, and have partnered with Health Economics and AIDS Research Division (HEARD), based at the University of KwaZulu-Natal to undertake research to understand the “key drivers” and what this means for youth involvement in HIV-prevention programming. It was explained that the initial phase of the research involved workshops with partners in each of the countries. They state that it was clear from the workshops that the different contexts within which organisations work present different contextual challenges to engaging on HIV-prevention work in relation to the “key drivers”. SAR respondents also indicate that of the three “key drivers” addressed, efforts to promote medical male circumcision are the most prevalent. They further indicated that multiple and concurrent partnerships were presented as being both (1) prevalent in the region and (2) a long-standing social and structural construct, related to both polygamous relationships/marriage and historical labour migration in the region².

SAT observes that CBOs are, in response to this approach and the evidence thus far provided, engaging with the evidence emerging pertaining to the drivers of the epidemic, and are increasingly adapting their programmes to ensure that these are taken into account. SAT expands on this by providing examples of the changes that CBOs have made to address one (or more) of the “key drivers” within HIV-prevention programmes and point to a number of examples that serve to illustrate this. Examples provided include:

- In Tanzania local campaigns were introduced which promote social sanctioning against involvement in intergenerational sexual relationships (IGS) through the negative branding of the sugar-daddy image;
- In Malawi they began to mobilise youth and traditional leaders to set up IGS committees for exposing IGS; and have mainstreamed MCP messages into interventions, SAT country staff indicate that the youth research was very strategic for them and that *“the information provided can be used as a basis for planning and mobilising resources and we have the evidence and we know what is happening”*. Another interviewee indicated that in Malawi, *“partners are adjusting their approach to be more needs driven. Their proposals and activities now include the new information (on youth prevention) that has been gathered”*.
- In Zambia they initiated programmes to get medical personnel and male circumcision services into rural communities through mobile clinics and have formed a consortium to target school girls and those out of school
- In Zimbabwe they launched a Male Circumcision campaign at universities: they state that the campaign was well received and that the health facilities are not able to keep up with requests for male circumcision. SAT respondents commented that at a CBO

² The HEARD research coordinator for the SAT Youth Research interviewed for this process indicated that the research team was currently working on phase 1 publications emanating out of the research process, which will include five country reports, and briefing notes that reflect on cross-cutting themes and issues. It is anticipated that the phase 1 publication will be completed for an SADC meeting on MCP towards the end of August 2010.

level the evidence has enabled them to consider strategies to address certain cultural practices that encourage the spread of HIV *“for example partners are now questioning practices that affect young people such as early marriage or a father-in-law having a relation with daughter-in-law”*. Interviewees stated that the research has also been useful with respect of their work with advocacy partners, where there has been increased focus on issues such as male circumcision and the rights of children and youth.

- In Mozambique they have introduced youth-to-youth interventions, theatre, speeches and debates targeting youth in and out of school and have used commemorative days to advocate for government to get involved and address multiple and concurrent partnerships (MCP). SAT country staff state that, *“knowledge has increased and is constantly improving. For example, when they deal with the key drivers, they know how these specifically relate to young people”*.

SAT has also stated that their initial review of the research has already pointed to areas in which the programme that are being implemented by CBOs need to be adapted so that they speak to “where youth are at” rather than to norms and values that may not resonate with the youth.

SAT also indicates that the majority of organisations expressed a strong interest in gaining (1) more information about the “key drivers”; (2) skills to address and share information/knowledge relating to the “key drivers” within their prevention work; and (3) to increase their work with youth. They state that to address this need, they will be continuing this SAT research programme with HEARD. The research coordinator indicates that it is anticipated that areas which have been highlighted will be addressed in Phase 2 of the research which is reportedly in the preparatory phase.

8.1.2 CBO Partners

This perspective - that organisations are utilising the evidence and are eager to access additional information - was further emphasised by CBOs themselves.

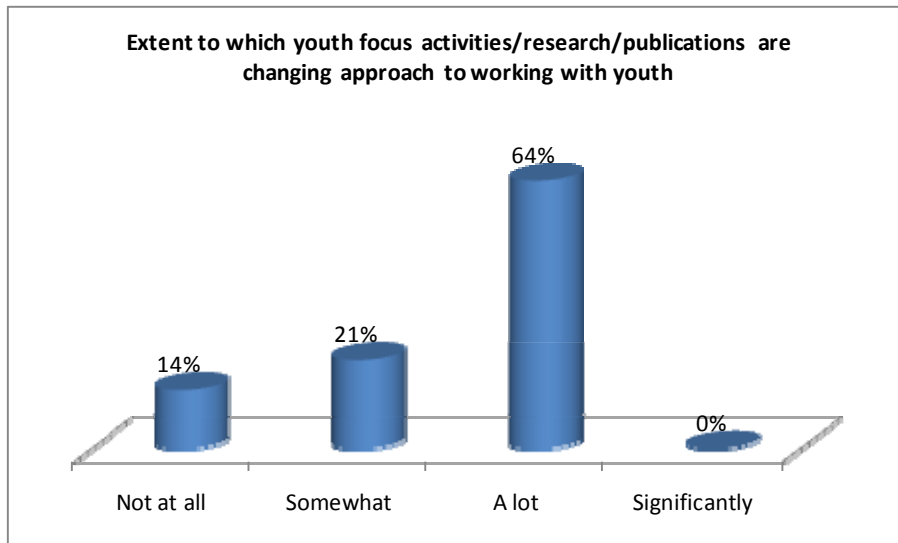
In general, CBOs stated that they were changing their programmes in response to evidence pertaining to the key drivers and the implications for youth. Comments include,

- *“The key drivers we were not aware of and I trained my peer educators to train other youth on key drivers in our attempt to combat HIV”* (Tanzania CBO partner)
- *“There was an HIV and AIDS workshop which came down from regional – issues re key drivers of HIV – that really opened our eyes – we can’t just look at abstaining and condoms – there is more to it, so as we did proposals and plans we included those other issues in our strategic plan. We used the think tank report and national plan to explain where we need to head.”* (Zambian CBO)
- *“We now know about the key drivers and how these are important in the prevention of HIV. We also realised that we could not only focus on abstinence as we are a faith-based organisation and had to focus on prevention”* (Zimbabwe CBO partner)
- *“Because the workshops helped us have evidence based programming - the workshops focused on why youth are most affected and after this we were given*

research on youth prevention and we were given a chance to share what we do. From there I believe we had strong background information to assist with shaping our programmes” (Zimbabwe CBO partner)

- *“Now we know the key drivers and plan the activities against the key drivers. It also helped me better understand young people” (Zimbabwe CBO partner).*

Respondents were asked specifically to indicate whether or not the SAT activities/research/publications had led to any positive changes in CBO’s approach to working with youth.



As evidenced, the majority of respondents indicated that this has impacted on their approach a lot, and smaller percentages indicated that this has changed the approach somewhat or not at all.

Comments from those CBOs that indicated the youth focus had changed their approach included:

- *First we worked with young people and adult together in activities and now we work with young people on their own and they talk freely (Malawi CBO partner)*
- *SAT publications and documents have contributed to a change in the manner that volunteers communicate with communities (including youth) (Mozambique CBO partner)*
- *Our volunteers now feel free to talk about many issues related to HIV prevention focused on youths. We are now open to receive suggestions of what youths would like to see included in some of our programmes. This means that our approach is changing (Mozambique CBO partner)*
- *Before I was not very close to them and they were not close to me and now this is changed. I am trying to build relations with them, most of the young people (Tanzania)*

CBO partner)

- *It has guided us to increase youth participation (through youth groups) on reviews and planning. Youth are now given the chance to develop their leadership (Zambia CBO partner)*
- *When we started we did not know how to deal with youth issues, but after the SWW now we know how to involve youth in our work and our reach has increased (Zambia CBO partner)*

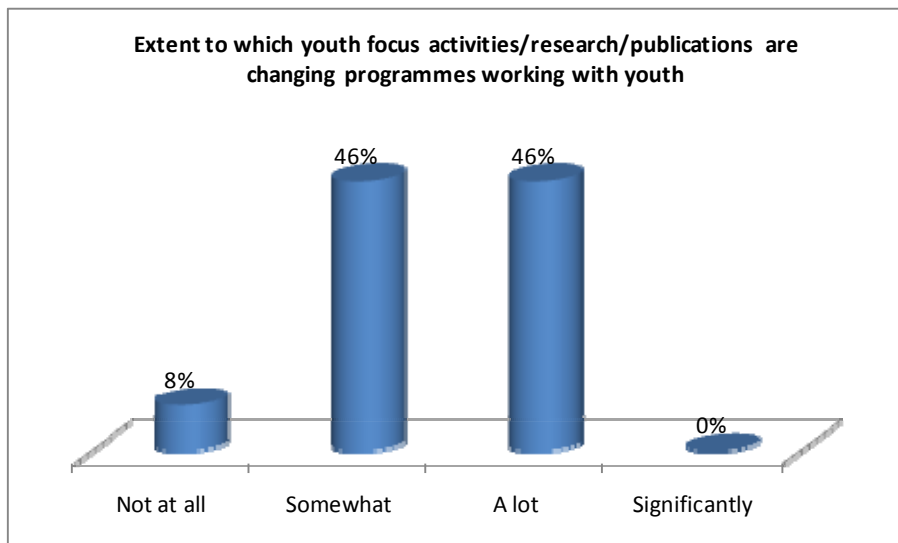
Comments from respondents who indicated “somewhat” included:

- *Yes, it has assisted us to shift the ownership to young people. This is done through the peer education process (Malawi CBO partner)*
- *The only changes were issues of trying to avoid adult interference in Youth Friendly centres. An adult nurse worked in the Youth Friendly centre and young people requested that the nurse not be permanently based at the centre and should be invited when needed. Youth involved in planning - before we roll out a programme now we ask young people what they think of the programme and what it should address (Zimbabwe CBO partner)*

Comments from respondents who indicated “not at all” included:

- *Our approach is to preach abstinence as this is the position of the Catholic church. The key drivers are integrated into our work and guide us when we plan work with young people. In the interventions we do not impose but encourage young people to find answers for themselves - this is how we've always walked (Zimbabwe CBO partner)*
- *We did not change but the knowledge gained helped us add value to intervention as we could share the information gained with young people (Tanzania CBO partner)*

Respondents were then asked to indicate whether or not the SAT youth focus had positively impacted on their programmes for youth.



As evidenced in the figure above, 46% of respondents each indicated that the youth focus had changed programmes for working with youth “a lot” and 46% indicated that the youth focus had “somewhat” changed programmes for working with youth. Only one respondent indicated that this had not changed programming.

Comments from those CBOs that indicated that programmes for youth had changed a lot included:

- *Now we gave certain activities being implemented. They have to do with HIV prevention. Our activists have developed lectures and dramas that show how one can be infected and what can be done if someone is infected. We also have youth working with youth on this (Mozambique CBO partner)*
- *“In the last year we created a group of youths which have been trained to work with other youths. This group is responsible for introducing new educational and prevention approaches. They do lectures, dramas and so on” (Mozambique CBO partner)*
- *We arranged the peer counselling activities focusing on circumcision and the stigmatisation of children who have not been circumcised. We educate community on impact of not using the more scientific way of doing the circumcisions are rife in the community. We started the Youth Friendly centres (Tanzania CBO partner)*
- *We have added the peer education programme and we ensure that the information we receive is integrated into all the activities done with young people (Zambia CBO partner)*
- *We started new programmes - peer assist programme (invite youth and children from schools and discuss the key drivers and problems they experience and how we can help them) was started. We integrate key drivers in our work (Zambia CBO partner)*
- *We have grown and now we have gotten into women empowerment. We also introduced the prevention activities for youth in and out of schools (Zimbabwe CBO partner)*
- *We have extended our approach. The work with SAT has guided us to change our approach from only preaching abstinence as a faith based organisation (as it is not the whole picture when working with youth) to now focusing on prevention and we include male circumcision and condom use (Zimbabwe CBO partner)*
- *“I think that youth are bored if you talk about HIV as a routine meeting – but if you have different activities – we have a tool where young people can interact and ask questions – but we try and use strategies – for example we use music as a way of getting people interested and then we look at how to deepen this – we have a picnic and then in that context we talk about issues and then they are not bored – young people like to talk about sex – so that gets them interested.” (Zambian Interviewee)*

Comments from CBOs that indicated that their programmes had changed “somewhat” included:

- *At first we targeted orphans and general community, after this we saw we are missing youth and started to increase the number of young people we draw into our programmes. Youth friendly activities - take people at the hospital and discuss youth and HIV with them. We share the information on the key drivers in our activities with young and now we are receiving many requests from young people for more information on the drivers and for the programme. The youth are asking many questions about the drivers (Malawi CBO partner)*
- *We have modified not completely changed programmes. At first we were trying to get people to get to the hospitals for testing and at the SWW we became aware of how we could work with the district to have mobile testing services. The SAT knowledge has helped us explore ways in which we can mobilise clinics and take the testing service to the community. Used to have feeding schemes now the community and youth are organising their own nutritious foods through food gardens (Malawi CBO partner)*
- *Increased activities related to MCP's and intergenerational sex as there are very active practices amongst young people (Zimbabwe CBO partner)*
- *The knowledge we gained on the key drivers was taken into account when we planned our programmes. We developed strategies for each of the beneficiary groups depending on how the key drivers affect them (Zimbabwe CBO partner)*

Finally, the CBO that indicated it had not changed programming outlined that they had shared their knowledge and information with already-existing internal programmes, and had not specifically changed these.

Respondents were also asked to indicate whether or not their programmes were able to take the needs of different categories of youth into account.

When asked to specifically outline whether or not they took the needs of different categories of youth into account, responses included:

- *"We have a number of activities for youth. For example, skills development for out of school youth; and vulnerable youth are provided with funds to attend school" (Malawi CBO Partner)*
- *"We work with all youth - youth in school and out of school in separate programmes. For primary school youth we have awareness activities; for secondary school youth we focus on behaviour change; and for out of school youth we focus on prevention through the peer youth clubs and a life skills programme" (Malawi CBO partner)*
- *"We know that youth aren't the same and that they have different needs. For example, we have a programme on children abuse and traffic and domestic violence. The programmes target mostly younger women who can be taken to work as prostitutes in some cities. Mostly these programmes target younger women aged 12 to 18 years. We teach young women how to behave when someone comes to the community and they say they want to help them and give them employment" (Mozambique CBO partner – volunteers)*
- *"We have challenges when working with unemployed youth. Most of the time, we*

give them special attention because they are at a critical age. They have begun with their sexual activity. As a result, our activities try to target unemployed youth” (Mozambique CBO partner – volunteers)

- *“We do a baseline research before we do an intervention so that the peer educators address the needs of each of the groups they are working with” (Tanzania CBO Partner)*
- *“Since 2009 for girls we conduct workshops that build confidence and boost morale of rural girls; and for boys we conduct leadership skills training. And we also take needs of disabled youth in account and we work with a partner organisation in delivery of HIV programmes for the disabled” (Zimbabwe CBO partner)*

These views were reinforced by the young people participating in the focus groups in Mozambique and Zambia who generally indicated that they felt that the programmes of the CBOs (related to prevention, but also to other activities), were relevant to their needs. Comments included:

- *“I think that their programmes have been developed with an understanding of the needs of the young person. I think that the volunteers understand the needs of young people. They are the ones who implement activities at the community level. Volunteers work with us in all programmes. They are kind and they know our needs” (Male youths, Mozambique)*
- *“I think that the volunteers understand the needs of young people. Since they are the implementers of activities, they are well informed about what information youth needs” (Female youths, Mozambique)*
- *“We feel that the organisation addresses the needs of the youth in the organisation. However, they don’t have sufficient funds to adequately support the community” (Female youths, Mozambique)*
- *“The programmes are very interesting and relevant because they keep us aware of the HIV problems. They teach us how to avoid transmission of HIV and other STIs. They teach us how to prevent pregnancies” (Female youths, Mozambique)*
- *“Since they work with us, they know and understand our needs. They lack resources, but they try to do their best for us” (Male youths, Mozambique)*

8.1.3 In summary

This section has highlighted the gains that have been made against this outcome and suggests that there is already considerable evidence that CBOs are implementing improved and contextualised evidence based prevention strategies which address the key drivers of the epidemic.

8.2 INCREASED ACCEPTANCE OF YOUNG PEOPLE LIVING WITH HIV AND AIDS IN COMMUNITIES

There is, as yet, no quantitative data or substantive body of qualitative data that can be reported to support the extent to which this outcome has been achieved to date. Again, it needs to be reiterated that this outcome will require a much longer time investment in order to review the anticipated rewards. It is anticipated that as the M&E system for the youth focus is applied it should be possible to develop an evaluative opinion about the extent to which this outcome is being achieved. Nonetheless, in the course of the evaluation process,

some respondents provided anecdotal perceptions on the extent to which the increased youth focus is contributing to the acceptance of HIV and AIDS on the part of young people. This evidence is outlined here to provide a preliminary sense of whether it appears as if the organisation is on track towards meeting this outcome.

Many SAT country staff respondents indicated that they felt that the increased youth prevention focus to date has resulted in some community-based shifts in youth. One respondent commented that young people have become more aware and *“some of this is due to the activities of our partner organisations. Young people are requesting to be tested and are also asking to be peer educators to assist peers not to get into the same situation (contracting HIV). Young people are no longer as afraid or ashamed as they used to be”*.

In Malawi it was indicated that *“in some instances we have seen behaviour change due to information dissemination. In the past it was not easy to access VCT and due to the sensitisation, young people are increasingly asking for VCT. Youth going for initiation will now carry their own blades to prevent the potential transmission of HIV. Young people are now using condoms more as they can now find condoms at youth friendly services. The usage of condoms has also increased because partners are addressing misconceptions linked to the use of condoms”*.

A respondent from Mozambique indicated that *“there is evidence in that youth have a better understanding of their role in relation to prevention of HIV. Youth are also HBC workers. Youth address human rights issues in relation to HIV and more generally. You hear that youth are going for testing. Youth no longer have to deal with STDs or pregnancy due to increased use of condoms”*.

Some respondents also suggest that these shifts differ by community, and by geographic location. As one respondent commented, *“those who are changing cultural practices are very rural and those where young people are going to be tested are in the urban areas. So change is happening in both even though the nature of the change is different”*.

However, in the main, interviewees stated that it is too soon to say whether the youth focus in enabling changes in terms of accepting HIV and AIDS at a community level.

8.3 IMPROVED SUPPORT MECHANISMS FOR HIV POSITIVE ADOLESCENTS AND YOUTH AND FOR THEIR HOUSEHOLDS

SAT indicates that this is a strong area of focus for the organisation, both with respect to the manner in which they support Community Systems Strengthening at different levels, and through the work that is undertaken with SAT partners to advocate for a rights-based approach. However, they indicate that there is limited knowledge on the needs and services available, including also psycho-social and relationships aspects that are available to young people, and indicate that this impacts on their ability to advocate for more effective systems and rights.

SAT states that for this reason, SAT has, together with the International HIV/AIDS Alliance (Africa Regional Programme), and the Network of African People Living Positively - Southern African Region, embarked on a research process to explore issues linked to ‘needs and services for adolescents living with HIV in Southern Africa’. It is reported that the aim of the study is to (i) explore and document the current psychosocial and SRHR needs of young people and adolescents living with HIV and (ii) to elicit and identify gaps between these

needs and the existing sexual and reproductive health rights and HIV-related initiatives and services currently available to young people. The research questions were designed around the need to improve programmatic work and services focussing on adolescents living with HIV.

SAT reports that it is anticipated that this research will feed well into this outcome area, and SAT suggests that the results will greatly improve the mechanisms that should support the youths to access youth friendly services.

8.4 INCREASED INVOLVEMENT OF COMMUNITY ORGANISATIONS IN ADDRESSING YOUTH IN THEIR HIV PREVENTION PROGRAMMES

This outcome is understood to focus on the extent to which CBO partners have integrated the youth focus in a manner that ensures that their programmes increasingly address youth in their HIV prevention programmes.

The evaluation team has found that more than half of the organisations have increased their youth focus and have designed quite specific activities around youth prevention. Further, many of the remaining organisations, while not significantly increasing their youth programming, have made changes to their existing programmes based on their increased understanding of youth issues.

It is the view of the team though that consideration must be given to the way in which the constraints in funding experienced by SAT could impact adversely on the ability of these CBOs to enhance their youth programming. Ways in which to support these organisations to leverage additional funds to support these activities may therefore need to be considered.

It is also noted that there is considerable evidence that organisations have an increased understanding of youth issues and that there are a number of examples of changes in the behaviour of these organisations which give effect to this increased knowledge. However there is a need for this support to be sustained if SAT wishes that all of its CBOs make the required shifts in behaviour.

The next section provides more detailed evidence in terms of the above.

8.4.1 SAT Respondents

SAT provides a context to reviewing this outcome, as they explain that when they planned the youth focus, they intended to increase funding allocations to partners based on the expected growth of SAT's core funding, as well as facilitate the mainstreaming of the youth focus. They indicate, however, that SAT was affected by the global economic crisis, resulting in a revision of the budgets for the coming years which affected the expected increase of the size of the capacity grants to partners. Despite this limitation, there is evidence to indicate that SAT has nonetheless made additional grants available for a focus on youth programmes and for youth organisations. This section focuses on the extent to which SAT has assisted to strengthen and improve the manner in which CBO partners support HIV-prevention programming focussing on young people.

In order to understand the extent to which CBOs are responding to this outcome, Singizi developed a matrix that required at country office to supply data on the following:

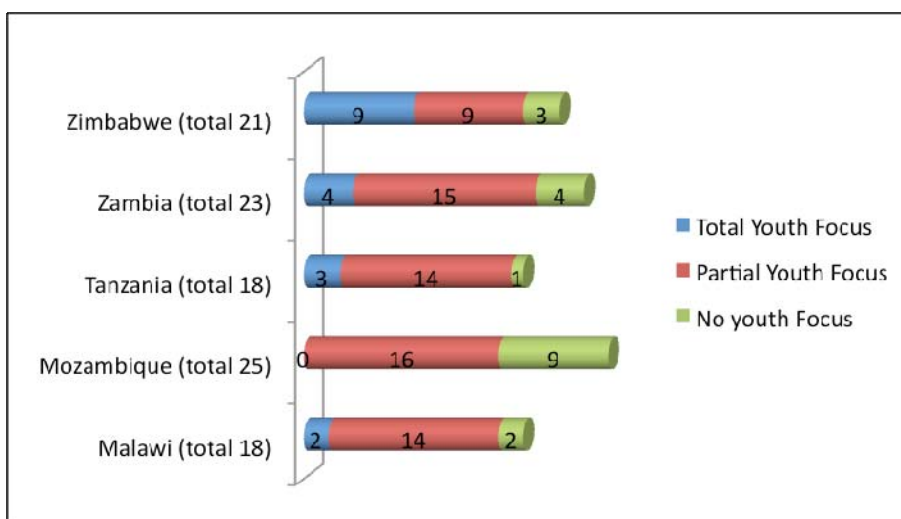
- Names of CBO partners;
- Descriptions of their core work
- An indication of whether or not the CBO works with youth (i.e. total youth focus, partial youth focus, no youth focus)
- Whether or not there had been any changes (increases or decreases) in the CBOs' youth focus since March 2009; and
- The numbers of youth reached between March 2009 and March 2010.

It was anticipated that this would assist the team to understand the extent to which there was increased involvement of CBOs in addressing youth in their prevention programmes.

Completed matrices were returned from all five countries, and the data emerging there from is analysed below. It should be noted that this data aims to provide an indicative sense of the extent to which CBO partners have increased their youth focus (and reach though this is discussed in relation to the outcome below). Since no baseline was conducted, much of the data (such as the numbers of youth reached) cannot be compared to data from previous years. It is noted in this report that SAT has now put monitoring indicators in place with regards to youth and, as such, future reporting on youth data will provide a clearer picture of the extent to which the outcomes are being reached.

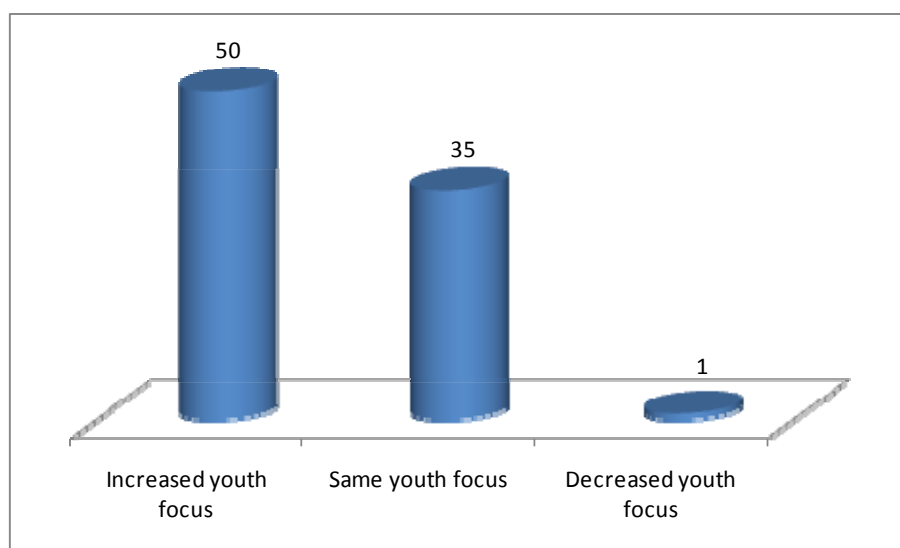
In the description of the SAT CBO partners it emerged that that their primary areas of focus include: HIV/AIDS awareness, HIV/AIDS advocacy and HIV/AIDS-related service provision. These areas of focus translate into a number of programmes such as: prevention programmes, counselling and testing, education-related programmes, home-based care, OVC-related services and psychosocial support services. It is noted that some organisations also include other key areas in their focus, such as gender and human rights, and environmental conservation and rehabilitation. Some of the projects also include food security programmes, income generation programmes and entrepreneurship programmes.

The figure below outlines the total number of CBO partners per country reported, and indicates the numbers of these that have a total youth focus, a partial youth focus or no youth focus, as reported in the matrices.



The figure above indicates that in all countries - apart from Mozambique – there are some CBOs that are totally youth focused. In Zimbabwe, there are an equal number of CBOs that have a total and partial youth focus, but in the remaining countries (apart from Mozambique), there are more CBOs that have a partial youth focus. In all countries, there are a few CBOs that have no youth focus at present. The numbers with no youth focus are higher in Mozambique.

SAT Country representatives were then asked to indicate whether or not there has been an increase, decrease or no change in youth focus and programmes since March 2009. The figure below provides the total overall response across countries, and the figure thereafter provides a breakdown of this per country:



As indicated in the figure above, a total of 86 of the CBOs that have a total or partial youth focus, 50 (58%) have reportedly increased their youth focus activities since March 2009. A further 35 (41%) have reportedly not significantly increased their youth focus activities since March 2009. Only one organisation has reportedly shown a decrease in these activities. In this instance, it was indicated that the CBO had faced “several management challenges” that had impacted on the organisation’s work.

Some examples of specific youth programmes include the broad areas outlined below. This is not comprehensive, but has been included here as an indication of the type of programming taking place.

Malawi	Sporting activities to make sure young people are engaged; HIV awareness; testing services at schools and villages so that in and out of school benefit and so we have a mobile testing service; provide awareness raising materials to ensure young people educated and we use quiz competitions to measure knowledge of young people.
Malawi	Counselling, outreach (prevention), sports tournaments, and vocational skills training.
Malawi	HIV/AIDS advocacy; organising meetings to discuss prevention, meeting with local policy makers trying to change cultural beliefs that encourage spread of HIV
Mozambique	HBC and income generation, such as sewing. Do some work with youth school clubs. These clubs focus on prevention and related activities, and our volunteers give us support to the school clubs.
Mozambique	Counselling around HIV and teenage pregnancy, peer education, life options training, fidelity for

	married youth – in this programme, we are working with religious leaders (although working with religious leaders does not influence the philosophy of the organisation more generally).
Mozambique	Youth help the organisation educate adults, counselling for youth, income generation and skills development activities for youth
Tanzania	Peer education - youth are educated to educate other on HIV at youth friendly centres;
Tanzania	Youth clubs - Prevention for in and out of school youth. We encourage youth to form youth clubs
Zambia	Youth Peer education - drama in school and community where information is shared. Community and life skills issues are addressed through the drama, video or posters of focus groups. Use recreation as well as it is interactive and allows youth to share more easily. Income generation activities for child-headed homes. Behaviour change and communication in school and out of school.
Zambia	Youth friendly corners - peer education for youth in and out of school where the focus is on the key drivers. Also benefit from VCT, male circumcision, HIV sensitisation, sport tournaments.
Zambia	Two categories of youth namely youth in school promoting abstinence (prevention, assertiveness, creating awareness through debate, drama, sport, library); and youth out of school with a focus on fidelity activities (life skills and couple counselling clubs)
Zimbabwe	In school - capacity building workshop on HIV/AIDS; form AIDS Action Clubs have continues activities using drama, poetry and music. Out of school - training workshops for peer educators; specific workshop for targeted youth focusing on the key drivers (select youth in communities and trained on drivers so they can disseminate through the Youth Friendly Corners and the Education through Sport Programme).
Zimbabwe	Training youth in practical skills (carpentry, bricklaying, sewing). Training for Peer Educator who manage the Youth Alive Clubs in the villages for young people in and out of school; and the Youth Friendly Corners together with the Youth Nurse.

SAT country respondents reported that this increased understanding of the ways in which to improve the youth focus of programmes is directly attributable to the SWW on youth and the explanation provided on the key drivers.

This view is emphasised by Malawi country respondents who suggest that because of SAT youth-prevention activities *“there is a greater appreciation for programming for youth, and for some partners, the extent of programming has increased. Instead of just focusing on awareness, they are looking at behaviour change as well as reach”*.

A respondent from Mozambique echoed this view and commented that *“since I started working with the partners in 2005, they have been working with youth, but there was not a specific focus on youth. Now we are focusing on youth and we are seeing a lot of change”*.

The completed matrices also suggest that in some cases, one of the reasons for the increased youth focus activities is that organisations have been able to access other funds for youth prevention and related work in the past year. There were at least five cases where it was indicated that some of the expansion of youth-related work took place as a result of funding from other sources.

Interviewees also suggested that in many of the organisations in which the youth focus activities have not significantly increased, the existing programmes have still been enhanced by the knowledge gained by engaging with the information pertaining to the key drivers.

However, there were a number of challenges reported in this regard, SAT respondents in Tanzania indicated that in the *“absence of additional funding from SAT, many CBOs were unable to implement the youth focus”*. In Tanzania SAT respondents also indicated that while there was evidence that CBO partners were increasingly engaging in youth prevention activities, there are still instances where, *“due to religion or cultural beliefs, some [CBO] coordinators who have the knowledge [on youth and the key drivers] are not fully utilising*

this knowledge when working with young people. There is a need to explore with these coordinators how to use the knowledge without jeopardising the social systems in communities”.

SAT staff generally indicate that they are aware that there is much room for improvement, growth, and further intensification of efforts. Interviewees also suggest that there is a need to increase the resources available to partners and suggest that SAT should continue to enable their partners to integrate this youth focus into their work. Mozambique interviewees emphasised that youth prevention need to remain imbedded in a broader community response to HIV and AIDS. It was indicated that *“partners are the ones who know the communities, and who can provide effective services in the communities.”*

8.4.2 In Summary

This section has emphasised the progress that has been made against this outcome and highlights the vast number of activities that CBOs have introduced to creatively meet the needs of youth. The need to consider ways to leverage additional fundings should be given priority to ensure that the initial advances made against this outcome can be both sustained and grown.

8.5 INCREASED INVOLVEMENT OF ADOLESCENTS AND YOUTH IN HIV AND AIDS PREVENTION AND RESPONSE IN THEIR COMMUNITIES

With respect to this outcome, the evaluation team has noted that there are an increased number of youth organisations involved in prevention and response work in the communities.

The evaluation team has also found that CBOs are working in a manner that supports the increased involvement of youth in programme design and implementation.

Of import is that it was found that in some cases CBO partners have invited a youth representative onto their board and, in other cases, organisations have relied on increased consultation with youth organisations. It was also found that even where organisations are not relying on youth organisations in the design of programmes, they are involving young people at the point of implementation.

However, while this finding is further evidenced by the views offered by some young people (who stated that they are well consulted in the planning of programming for the CBOs), other youth respondents indicated that they felt that they were not sufficiently involved in programming and the delivery of interventions. These diverse views highlight the varied experiences of young people in the planning and design process, and it is the view of the evaluation team that this suggests that while there has been progress in this regard, there is still further work required in this area.

Finally in this section, the evaluation team has considered the numbers of youth that have been reached through the combined activities related to this and the previous outcome. In this regard, the evaluation team was not able to reach a finding, as there has not been a baseline against which to compare progress. Nor has the first round of M&E data been produced and, for this reason, the figures collected can at best be considered indicative.

8.5.1 Increased Support for Youth Organisations

SAT provides a number of examples of the youth organisations that they have either begun to support, or to which they have increased their support, since the youth focus supported by SDC. Some examples of these provided by SAT include:

- In Zambia for example, two youth programmes (GGAZ and HAPN) have increased their budgets by US\$ 5,000 each to scale up their programming. It was also found that the Contact Trust Youth Association is receiving additional support from SAT to implement HIV and AIDS related work.
- In Zimbabwe, Eden's renewal proposal committed more than 60 percent of funds earmarked for programming to activities for in-school and out of school youths and the grant for SAYWHAT, a youth organisation in Zimbabwe, was raised from US\$25,000 in the previous financial year to US\$30,000 to enable the organisation to scale up interventions for youths (including a focus on male circumcision, increasing the reach of the Sexual Reproductive Health Rights Programme (SRHR) to tertiary institutions (a university, teachers' colleges and technical colleges) and organising a sporting gala (a new activity) whose theme was "Breaking the silence on Sexual Reproductive Health matters".
- In Mozambique they comment that many youth are volunteering and participating in HIV programmes, which did not happen before. They indicate that a specific example is young people's involvement in HBC, *"this was something they had no interest in before and now young people are choosing to be trained as HBC workers. Young people are being trained by partners to deal with human rights (in relation to youth and HIV) and child issues. Youth are more aware and more confident to provide HIV services to other youth and their communities at large. Youth are also teaching HIV prevention in schools"*.
- In Malawi It was indicated that whilst some of the partners in Malawi are youth organisations, those that did not have a youth focus have started to link with youth structures in the community, and draw these into their activities. It was indicated that youth were also represented in the Partners Review meetings. It was also indicated that there has been a *"mushrooming of youth organisations due to these activities. New youth focused organisations are being formed as people in communities are inspired by the work our partners are doing and these new organisations are submitting proposals to us"*.

8.5.2 Increased Involvement of Youth in Planning and Implementation of Programmes

This section highlights the extent to which young people are involved in the planning and implementation of programmes.

8.5.2.1 SAT respondents

SAT interviewees indicate that since the youth prevention focus, there have been a number of ways in which CBO partners have sought to increase the involvement of youth in the planning and implementation of youth programmes.

Mozambique country staff respondents indicate that partners are now designing youth programmes, and are incorporating youth as youth coordinators, fieldworkers and/or into the management of the organisation. Interviewees further state that there is an increased focus on the key drivers when designing programmes, and when working with youth.

8.5.2.2 CBO respondents

CBOs were asked about the extent to which young people are playing more of an active role in steering and guiding the programmes and in particular whether CBOs are consulting youth in any way. Comments included:

- *“We consult youth through the youth clubs, youth networks, youth projects and they feed into our processes in this way” (Malawi CBO partner)*
- *“We invite youth organisations and other NGO's to our planning sessions” (Malawi CBO partner)*
- *“Youth participate in both the design and implementation of some of our programmes” (Mozambique CBO partner)*
- *“Youth who participate in programming are youths who approach us and talk about their needs. They come to the organisation and they tell us what they want us to talk about (themes) and then we sit together and plan. After the plan is concluded, we sit with the youths and talk about implementation...they help us. We help them” (Mozambique CBO partner – volunteers)*
- *“When we do planning we involve young people. We have representation on a district AIDS force and we get feedback from the district on our work. We have a referral network meeting where stakeholders come together to see how we can support each others’ work” (Zambia CBO partner)*
- *“We raise awareness of the importance of youth with chiefs, kraal heads, child protection organisations and we get their views on what our youth programmes should address. The programmes are designed by the communities as the programmes are informed by a baseline survey, monitoring and home visits keep us informed as to whether we are meeting community needs, participants are also involved in the annual review where they share their ideas on priorities for young people” (Zimbabwe CBO partner)*
- *“Yes, we work with Junior Council Parliamentarians. Our planning in the annual participatory review meeting is developed with these structures” (Zimbabwe CBO partner)*
- *“Youth ward structures - we bring them together for annual review and planning. The youth ward structures assist with starting the youth clubs” (Zimbabwe CBO partner).*

Other organisations indicate that they do not necessarily consult youth structures in their planning processes, but state that they work with these organisations at the point of implementation. Comments included:

- *“We work with youth organisations at district and community level. We do some activities together with youth organisations; we share our materials with youth*

organisations. Youth structures are not yet in our planning process but we do work with the youth clubs that are part of our interventions and they give input into the planning of programmes” (Malawi CBO partner)

- *“We work in the communities, and sometimes we work with youth trained by other organisations. We work a lot with traditional doctors, as they are very respected in the community. Therefore, we use them to pass our messages on prevention” (Mozambique CBO partner)*
- *“We have an internal youthful facilitator who is in charge of the youth. He assists us with planning and develops tools we can use in programming. A drama group helps us with implementation and the drama group is youth. We work with organizations as we meet with them and they give us ideas on how to implement the interventions” (Zambia CBO partner)*

8.5.2.2 Youth respondents

Young people in the focus groups offered the following perspectives related to the extent to which they were involved.

Comments from a youth organisation in Mozambique were that:

- *“The volunteers ask us the issues we would like to see included in some programmes. They ask you people the themes that young people would like to hear in a meeting with volunteers. They collect our ideas that help them in programming” (Male youths, Mozambique)*
- *“Young people participate in planning. Most of the times we are invited to participate in planning. We give ideas of what we would like to discuss in lectures. I think most of the time, they talk with the communities before they implement a programme” (Female youths, Mozambique).*

In the case of youths from the second Mozambique CBO, youth respondents indicated that they were not involved in planning activities. One respondent commented:

“We think there should be more involvement of youth in the program. There is a difference when you work on prevention at community level and when you work on prevention in a school. When the organisation is working within communities it needs many people working in prevention. At school people are joined together. Home visits programs need many volunteers involved in the program. They need to train more volunteers. 5 peer educators and some volunteers are not sufficient for HIV prevention and many other programs” (Females youth, Mozambique).

Youth from the one CBO in Zambia stated that they were very involved in the planning, design and implementation of the programmes for youth. They indicated that when they determine their plans, they approach staff and consider the way in which it can be implemented, and the extent to which there is a budget available for this work. Comments include

- *“We get support from office but its about us – we come up with issues – we inform the community – this means that we empower ourselves and others”*
- *“We reach people through the radio, we run the programmes and present them and*

then because of this station we get invited to other radio stations they can see the impact.”

In the other CBO in Zambia, there were varied views about the extent to which youth are involved in decision making pertaining to the programme. While some youth felt that they were involved and were consulted about all programming decisions, others stated that there is a need to consider how the members can become more involved rather than only the leadership (who are though still youth). One commented included,

“Not a lot – we decided we wanted to have a picnic but we have to take it through the secretariat. They don’t really consult us – more tell us our roles.”

However, one young person commented that their limited involvement was less a feature of the organisation and more because of the demands placed on the organisation by donors generally (and this did not refer to either SAT or SDC). The interviewee stated that,

“Mostly donors say what you should do. One partner said we could only talk about abstinence and not condoms - so it’s very restricted – Maybe it’s because we are youth that partners tell us what to do.”

These comments highlight the different experiences of young people in the planning and design process and suggest that while there is progress there is still further work required in this area.

8.5.3 Programme Reach

Finally, the matrices (discussed previously) also included a field for the numbers of youths reached in CBO’s activities from March 2009 to March 2010. These figures (outlined in the table below) provide a very preliminary indication of the scale of current CBO partner reach. As there are no baseline figures available, the team is not able to make attributions about these figures. Their purpose here is strictly to provide some overall indication of youth reach.

	Malawi	Mozambique	Tanzania	Zambia	Zimbabwe
Youth Reached	299 403	79 512	10 724	72 730	9 062

As is evidenced from the above, these figures are very disparate across countries. Whilst these figures (and definitions of “reach”) need to be defined, these provide a preliminary sense of youth beneficiaries of CBO partner programmes.

8.5.4 In Summary

This section has noted that there are an increased number of youth organisations involved in prevention and response work in the communities. Further, it was also found that there is evidence that many of the CBO partners are beginning to draw youth into planning and programme implementation, although it is noted that this needs to be further strengthened.

As noted the evaluation team has not been able to comment conclusively on programme reach for youths.

SECTION F: LEARNING AND CONTINUAL DEVELOPMENT

Having reflected on the extent to which SAT is doing the work it has set out to do and reviewed the extent to which it is achieving the desired results, the evaluation team then considered the way in which SAT is ensuring a continuous process of learning and development, based on the experiences that it is having within this programme.

In order to understand this, the evaluation team considered the following: the monitoring and evaluation system that SAT has put in place, the mechanisms that SAT has put in place to ensure the relevance of the work that it and its partners are doing, and finally, the way in which SAT is capturing this learning so as to share good practices emerging with partners and in key decision making forums.

9 MONITORING AND EVALUATION

The evaluation team has, after receiving the support from SDC, found that SAT has developed its M&E system and has defined youth-related indicators (these have been reviewed by the evaluation team) which will address the different outcomes pertaining to this programme. It was also found that SAT has made the deliberate choice of integrating the youth-specific indicators into SAT's whole partnership processes.

It is noted, however, that since the system has not yet been implemented, the evaluation team has not had access to internal monitoring data on youth and the youth prevention focus. This has limited the ability of the team to make conclusive statements about the numbers of youth reached, changes in this, and related. However, it is possible to state that the M&E system appears to be robust, and that it anticipated that the refinement of the indicators to specifically include youth will greatly enhance SAT's understanding of the extent to which the outcomes for the youth-prevention focus are being addressed.

On a positive note it was found that all but one organisations surveyed (which is planning to put internal M&E processes in place) indicated that they have some internal monitoring and evaluation processes in place and that they have systems (some more sophisticated than others) to collect and analyse data and information that will assist them to report, and to improve their services. Further, their comments suggest that they have a clear sense of the purposes of M&E

Finally, many indicate that this is an area in which they have received support from SAT. They also indicate that the feedback that they receive from SAT based on the SAT monitoring process helps them to continually learn and develop.

9.1 SAT RESPONDENTS

SAT indicates that in order to develop the youth indicators a development process was required to ensure that the indicators were appropriate and could elicit both quantitative and qualitative feedback, and that the overall tools of SAT could be adapted to integrate these indicators. They state that this has delayed the implementation of these indicators, but suggest that this will now guarantee continued monitoring of achievement in this area, irrespective of dedicated funding.

SAT explains that development and training on the youth indicators were conducted during the first half of the year, and that as a result, data collection and progress on these indicators are only being undertaken at the point at which this evaluation was being conducted. Because of this, the evaluation team has not been able to use data from the M&E system, as this is not yet available. Instead, it focused on reviewing the credibility of the system, and extent to which it is likely to enable SAT to effectively monitor and evaluate the youth focus.

Respondents indicated that SAT's monitoring processes at a CBO and community level included the application of the SOCAT and SATCOMP tools. Respondents indicated further than monitoring visits (which take place quarterly) are also used to discuss issues and challenges emerging at an organisational and programmatic level. Interviewees indicated that these M&E processes are developmental in nature, and involve and include discussions on how to address emerging issues and concerns. Some respondents also indicated that emerging issues and challenges emerging out of M&E processes were fed into planning for future financial years, as well as into annual partner meeting processes. These allowed for opportunities to reflect on emerging issues, and to seek ways to address these in upcoming implementation and capacity building processes.

As one respondent commented:

“On monitoring data, partners report quarterly to the country office and they send that to the regional office, and we review that data and we review existing trends and we provide feedback on that. M&E is a learning tool. If we see a change in data, we will be interested in that and this will inform our programming. We might then have to do research on a particular area that is emerging. To expand on that: with the five countries, we will be able to see reach in country X it is increasing and not in country Y and you want to try and compare and understand what is happening. In a regional point of view, you want to find out what are the issues that make difference”.

It was indicated that feedback from these reviews, and analyses were also shared and discussed at the annual partner meetings.

However a SAT interviewee stated that there are still challenges with regards to the M&E system. The interviewee stated that linking the prevention interventions that partners are undertaking with behaviour change in the communities presents several challenges. SAT indicates that in recognition of this challenge, they have entered into a long-term capacity development cooperation with the Academy for Educational Development (AED) Global C-Change unit to strengthen the technical input of regional SWW activities in providing training on Social and Behaviour Change Communication. The first of three events took place at the end of this reporting period.

SAT Country respondents stated that in addition to the SAT M&E requirements, many CBOs are also required to report into other country-level structures, and/or other donors.

These combined factors all emphasise the importance of CBOs developing effective data collection and reporting systems and respondents indicate that SAT supports CBOs in terms of their overall internal monitoring processes. As one respondent commented: *“SAT teaches partners how to monitor. For example, when monitoring volunteers, partners meet with community leaders to get their feedback on the quality of the work done by volunteers. This helps partners ascertain whether volunteers are really doing the work they say they are doing with communities”.*

9.2 CBO PARTNERS

In the telephonic interviews, CBOs were asked to indicate whether or not they internally monitored their own programmes and activities, and what monitoring processes involved and/or involved. Comments included:

- *“We have an M&E framework that guides us. M&E learning process - record keeping, meeting with beneficiaries and volunteers; review meeting; site visits; and consultations with young people to ensure we are meeting the needs of the community”* (Malawi CBO partner)
- *“We have a monitoring plan which guides us. Weekly visits, monthly visits help us compile quarterly reports. We also invite stakeholders to annual reviews where reports are discussed. We collect data on number of people attended, male/female, and testimonies of people who participated”* (Malawi CBO partner)
- *“Monitoring is done by the supervisors, We have regular visits where we monitor the level of implementation of programmes and activities. We have regular meeting where we do the evaluation of the week and discuss the way forward”* (Mozambique CBO partner)
- *“We created a specific committee for the monitoring process. The monitoring process is supervised by the representatives of the organisation. We have developed tools to be used in monitoring. We use monitoring processes to verify whether we are in a right or wrong way [sic] and what we need to do in order to achieve our objectives and goals”* (Mozambique CBO partner)
- *“We do monthly meetings with youth; volunteers give us information on the work they do. The data we look for is if there are any changes due to our work, the information is used to share with other partners so they can learn from our work”* (Tanzania CBO partner)
- *“We have note books that the peer educators have to complete (number reached); the club leaders keep records of meetings. Monthly meetings are conducted to collect information and we keep records of people attending our activities (Male, female, numbers who attend). How many people we are reaching, type of information shared, we want to receive information on challenges so that we can see how we can help them. All the information we receive helps us to improve our approach and helps us to see how we can better support the youth clubs”* (Tanzania CBO partner)
- *“We have a plan for M&E. As the programme manager, I do monthly visits to the different catchment areas; and the programme officers also monitor on a weekly basis and report on a weekly basis. Data: we look at how well the programme was implemented, attendance registers, we also ask young people what changes they would like to see. This helps us with ongoing planning and adapting of the interventions”* (Zambia CBO partner)
- *“Monthly monitoring activities and the data (looks at targets and impact) we look for helps us plan or create new interventions. We have set qualitative and quantitative indicator and the data collected is in relation to these indicators”* (Zambia CBO partner)
- *“Through home visits, monthly review meeting with community, reports from communities (youth leaders, volunteers). We also hold gender specific focus groups to get their input into the development of our programmes. Data from the communities is disaggregated by number of males/females and impact on each; and whether it meets their needs. This then helps us shape our programmes so that we are meeting the needs of both male and female participants”* (Zimbabwe CBO partner)

- *Internal M&E tools - attendance registers, reports on activities that happened for the month, explain gender issues that might have arisen. Monitoring visits to communities. Meeting with stakeholders, beneficiaries and volunteers within each ward - ward monthly meeting. Annual participatory review. Data - we look at nature of participants (gender, age); number of people who accessed service; input from users on the benefits of the intervention they attended and what changes they would suggest. The data is used in ongoing planning and improvement of our work (feedback from workshop is used to improve the next workshop) (Zimbabwe CBO partner).*

CBO respondents were also asked to indicate whether or not SAT conducts any monitoring activities, and whether or not these assisted the organisation to improve its work in any way. Comments included:

- *“SAT's feedback helps us see gaps and help us think about how gaps can be filled. They also give feedback on the reports we submit and they immediately address issues/gaps we raise or might have been missing in our reports. They give us advise on where to improve and how to adjust so we meet our objectives” (Malawi CBO partner)*
- *“The monitoring assists us with checking to see if we are in line with what we planned” (Malawi CBO partner)*
- *“SAT monitoring is independent and it helps us improve our strategy. SAT gives us guidance, improves our insight into our work and engages us on how we can improve our work” (Malawi CBO partner)*
- *“At the end [of a monitoring visit] they [SAT] suggest solutions for the main challenges. The solutions help us to improve performance of our activities” (Mozambique CBO partner)*
- *“The SAT monitoring helps us identify the problems, and they give us suggestions to solve them in the future” (Mozambique CBO partner)*
- *“When the Country officer does visits he helps us by telling us what to improve. He shares with us what others are doing and we explore how we can improve our approaches” (Tanzania CBO partner)*
- *“They go through each stage of the work we have planned and each time after the visit report is circulated to help us reflect on our capacity needs and how these can be addressed. SAT feedback has especially helped us with documentation and more careful financial management. Further, their support visits have also assisted us with improving our resource mobilisation” (Zambia CBO partner)*
- *“SAT monitoring helps us to assess if recipients are satisfied with our work and how we can improve delivery to the community. The visits help us look at whether we are spending the funds as required and how we can do this more effectively. If our reports or the visits have issues that need to be addressed SAT does so immediately and gives us feedback on how to address these issues” (Zimbabwe CBO partner)*
- *“SOCAT - once a year, monitoring visit once a year, submit monthly financial reports, quarterly reports and this helps us think about how we do our work and what we are not doing to achieve what is in our work plan. It also helps us to make sure we are meeting the needs of young people who participate in our interventions” (Zimbabwe CBO partner).*

These comments reinforce the view that the rigour of SAT's M&E system, and the M&E process assist CBOs to reflect on and enhance their capacity, as well as their programmes.

10 SHARING KNOWLEDGE AND INFORMATION FOR ADVOCACY AND POLICY DIALOGUE

It has been found that one of the fundamental elements of SAT's overall approach pertains to the effective sharing of knowledge and information on issues pertaining to responses to HIV and AIDS. This evaluation report has already made specific reference to some of the key modalities for the sharing of knowledge and information, including SWW, action research, and the sharing of publications and communications materials (such as the SAT SHARE Series, SAT guidelines and training manuals, SAT learning pamphlets and other materials).

Further, section D has already reflected on the extent to which CBO partners feel that modalities such as SWW, research and SAT's publications have impacted on their knowledge, approach and programming in terms of the youth prevention focus. This section provides a brief review of other observations emerging in terms of the sharing of knowledge and information, and the extent to which this is effectively used to engage in advocacy and policy dialogue at a national and regional level.

SAT's Annual Report (April 2009-March 2010) indicates that some of the activities (the full list is not provided here) that have taken place in terms of this strategic area of the organisation's work include:

- 50 by 15 movement (halving the number of new infections by 2015 and virtual elimination of mother-to-child infections): The annual report notes that "SAT has been spearheading a regional steering group (including representatives from regional and international NGOs and UNAIDS) for the 50 by 15 movements. In this year, the focus on leadership for evidence-based prevention during the year has been on cooperation between civil society and parliamentarians. After two meetings co-arranged by SADC Parliamentary Forum, UNAIDS, SAT and other organisations, cooperation between these constituencies has been established and will be taken forward by SADC PF and World AIDS Campaign".
- SEARCH (Southern and East African Research on HIV and AIDS in Cities). "SAT has been actively involved in the thematic meetings laying the ground for this network and envisages that it will contribute to sharpening SAT's work in urban areas".
- RIATT (Regional Interagency Task Team for Children): "SAT has been actively involved in this and is taking a lead in the working group on resource tracking".
- RAANGO: "in 2007, SAT called a meeting with regional organisations to discuss cooperation in advocacy efforts and cooperation with SADC. This turned out to be the birth of an informal network of African regional HIV and AIDS NGOs. SAT has continued to coordinate the RAANGO, which aims to avoid duplications and create synergies among regional initiatives.

The next sections broadly outline perceptions of SAT's influence through the above and other areas.

10.1 AT LEVEL OF COMMUNITY AND COUNTRY

As outlined elsewhere in this evaluation, SAT indicates that SWW workshops on the key drivers and youth prevention have been hosted at a regional level, and that these workshops have then been cascaded down to the country level where partners are then able to

contextualise the information, discuss strategies to take the information forward and enhance prevention programmes at a community level.

Respondents comment that at the level of CBO partners and their respective communities, the sharing of information is a valuable process that enhances understanding and integration of the information. It is indicated that these processes have also allowed partners to be exposed to and share information that is harnessed in their programming and networking and advocacy activities. Respondents indicate further that this knowledge and information is used by SAT country offices and CBOs to engage with other organisations at a community level, as well as to engage with country-level structures.

As one respondent commented, *“SAT’s approach has allowed CBOs to be exposed to lessons from other organisations which they would not have had if SAT has a narrow focus. The SAT approach allows organisations to engage with organisations within and outside of the country”*

SAT’s Annual Report (April 2009 – March 2010) points to a number of areas in which SAT and SAT’s partners have engaged at a policy, planning and advocacy level, including participating in national, regional and international events, participation in RAANGO and etcetera. Some examples outlined include Zimbabwe SAT participating and contributing to World AIDS Day and being a member of the IEC committee; Zambia SAT partners participating in several fora and partners actively engaging in advocacy activities. The section that follows outlines from of these engagements in more detail from interviews conducted with the SAT country programme managers and officers.

Respondents from SAT **Malawi** indicate that *“we have many CBOs doing youth prevention work who are raising issues, and this means SAT has a list of community issues which can be used to inform policy at a national level. Our advocacy partners at national level are already use information in their processes”*. It was indicated that SAT and CBO partners work through the Malawian National AIDS Council, and that they *“call us to attend their forums to input into their discussions. Many discussions are about how SAT can provide capacity to government institutions. We have also been working with ministries of gender and child development”*. It was also indicated that that SAT in Malawi works with the Ministry of Health, and *“coordinates with the ministry on policy development”*. It was suggested that these engagements assisted SAT to ensure that interventions at a community level are *“in line with what government is doing”*.

A SAT Malawi respondent suggested that *“our strength is the community and our documentation of the work we do with communities, and these speak volumes and can influence policies at regional and national level. It is a process – the influence has happened at community level and we feel that we have inputted into policy formulation such as the National AIDS Policy. Partners are influencing policy at a community and district level”*.

SAT respondents in **Mozambique** indicated that they also work extensively with national structures such as the National AIDS Council and the Ministry of Health, and that they recently participated in the revision of the country’s strategic plan for HIV/AIDS for 2010-2014. It was indicated that SAT is invited to meetings and forums linked to these as a civil society representative.

It was indicated that the country has also recently put a youth parliament in place, and that SAT had conducted workshops with the youth parliament and the National Youth Council on HIV and AIDS and prevention. It was indicated that representatives of these structures had

also attended SAT workshops and had been sent SAT publications for review. One respondent suggested that there was a need to engage with these structures more: *“from SAT’s side, we need to engage with them more. We want to increase our expertise on HIV youth programming and you [youth structures] are led by youth and you have a lot to teach us. It is something that should happen more under the current youth focus”*.

A SAT respondent reported that in these engagements, they had been able to “discuss the reduction of costs associated with male circumcision”, and reported that at a concrete level, *“day hospitals have been allocated specifically for people living with HIV, and partners have advocated to government that this is discriminating and government has changed this allowing people with HIV to access services at any health centre”*.

Respondents in **Tanzania** indicated that they also work with government structures and *“consult government, especially on controversial issues such as men having sex with men and prostitution”*. It was indicated that the National AIDS Programme Manager was one of their committee members, and that this individual *“informs and guides us”*.

It was indicated, however, that the Tanzanian government had good plans in place with regards to HIV and AIDS, but that the challenge was that *“people [in government] are not serious about delivering. There is no funding allocated [to specific areas of work in HIV and AIDS]”*.

In **Zambia**, it was reported that SAT engages with the National AIDS Council and is currently involved in the development of the new strategic plan for HIV and AIDS. It was indicated that this *“presents a window of opportunity for us to influence what is happening in terms of thinking around the key drivers and youth”*.

It was also indicated that some partners sit on district and local HIV and AIDS structures and attempted to influence policy at that level. In addition, it was noted that some partners conduct advocacy work in their own right, and it was indicated as an example that one partner was organising debates on male circumcision on national radio and television.

In **Zimbabwe**, respondents also indicate that they are engaged with the National AIDS Council and that in these engagements, *“government advises us and we give reports on our activities. They ask us to support gaps in the delivery of the national strategy – in areas where government or other organisations cannot deliver”*. It was indicated that SAT also attends provincial cluster meetings to understand HIV in the province, and how SAT can contribute to the provincial strategy”.

It was also indicated that at district level, partners are members of the Action Aids Committees.

10.2 AT A REGIONAL LEVEL

The evaluation also sought to explore the extent to which SAT Regional is able to harness and use information gathered at a community level in order to influence policy dialogue and engage in advocacy activities at a regional level. Respondents (including SAT board members and respondents from external organisations) were asked to reflect on the extent to which they believe SAT is achieving its objectives in this regard. This section speaks to SAT’s work at a regional level more broadly. However, where respondents specifically spoke to their work in terms of youth and HIV and AIDS prevention, this is included.

The evaluation team has found that respondents are very positive about SAT's role in the region in terms of advocacy and its engagement in policy debates and processes around HIV and AIDS. Respondents are complimentary about SAT's ability to draw on information and lessons emerging at a community level, and to bring this knowledge to bear in a number of regional fora and structures, which respondents report to finding both important and illuminating.

The team also notes that SAT's work with HEARD on youth prevention and the key drivers will be taken to forums such as SADC, and future evaluations will be able to focus more specifically on SAT's contributions to these youth-related discussions once these processes have been taken forward.

10.2.1 SAT Respondents

Board members interviewed for this process generally felt that SAT was ensuring that lessons learnt at a community level were captured, shared and used to influence regional policy dialogues and debates. As one respondent commented, *"SAT is putting effort into making sure that lessons from these organisations are shared widely so that other people can learn from them"*. Another Board respondent, however, felt that there was a need for SAT to reflect on how strengthen these processes in the context of the youth focus: *"we need to ensure that the focus of SAT is not only working with CBOs and that the outreach they do is used to leverage the experience SAT has on the group to influence how other organisations and policy makers think. We need to reflect on how we can use the youth information coming out from SAT's work with HEARD to feed into SAT's advocacy work"*.

Board members also spoke to the linkages between SAT's policy and advocacy work and donor support. One respondent indicated that if SAT was to successfully continue to have a voice at a regional level, there was a need to ensure that *"donors need to have a common understanding of what SAT does, and how each of the donors can provide support that will be mutually supportive of other donors' priorities"*.

Another Board respondent suggested that SAT had thus far managed to survive the international financial crisis, but indicated that *"we should not be complacent as we are not out of the woods. We were able to fund raise despite the international financial crisis. The various fora still need to be developed to build country capacity to harness resources"*. The respondent indicated that funding for the country offices was also a challenges, and that increased funding would positively impact on the work of these offices, and assist them to *"expand the scope or impact of SAT's work"*.

10.2.2 International and National Advocacy Partners

External respondents from organisations such as UNAIDS, VSO, the World AIDS Campaign, Soul City and SADC were very complimentary about SAT's ability to draw on information from the community level in order to support its regional work.

Several respondents spoke to SAT's involvement in and contributions to the 50 by 15 movement. Comments included:

"From what I have experienced of SAT in the 50 by 15 campaign they create platforms for information sharing at community level and bring this engagement to a national level as well as a regional level. At a regional level the countries are brought together for lessons exchange. With the 50 by 15 campaign they were instrumental in bringing

together key players responsible for policy on HIV and getting them informed – bringing them together with civil society so that it created avenues for dialogue. SAT is very politically astute, very politically aware of how to get the voice of the community up to a policy platform. SAT has the experience of getting communities rallied around and getting their voices through to various policy levels. SAT is very effective to get the community voice to the level where policy is decided and they do this well” (UNAIDS)

The respondent indicated that SAT has also been successful in drawing youth issues and the youth voice into the 50 by 15 engagements:

“SAT has brought together community organisations with youth programmes/interests from their countries and getting the youth voice – getting youth to articulate obstacles, stating the benefits of including youth in HIV prevention and getting youth to state challenges they experience as youth people. It is very effective and the youth issues raised were fed into the 50 by 15 campaign by SAT. The exchange between countries is very effective”.

Another respondent also commented on the 50 by 15 movement, and indicated that he felt that SAT was a key driving force behind the campaign:

“SAT has been the single administrative drive behind the campaign because she [Executive Director] has great relations with funders. She is based in Johannesburg, and it has become much easier to achieve things through the relationships and she has been pivotal figure in advancing the movement, organising the encounters between MPs and Civil Society. Through SATs work in the region they have been able to get discussions going at a national level and work the concept through” (World AIDS Campaign).

The respondent added that:

“There are a number of things that makes SAT effective. They work in the region and are not SA dominated; they have great relations with partners and funders and are good at sustaining these relationships; they have high quality of staff from what I have seen; and they have an approach of making things happen – they are willing to share resources and share ideas; and have a good understanding of what partnerships are about”.

A respondent from Soul City also used the 50 by 15 campaign as an example of the strength of SAT's regional policy-related work, and how it draws from SAT's experience in working at the community level:

“I think SAT does excellent work in the region, especially their work focusing on communities. I will speak more of their advocacy role as this is the primary interaction I have with SAT. They take quite a lead in terms of setting the agenda and advocating around particular agendas. An example is the initiative that was started, 50 by 15, in which SAT is taking a leading role and working hard to garner support for integrated approach to HIV. In this advocacy role they lead and are always exploring new areas and avenues. They like sharing and discussing, exploring how different people view different issues linked to HIV. They do not keep information to themselves”. (Soul City)

Some respondents also spoke specifically to SAT's role in RAANGO, and the importance of this forum at a regional and international level. As one respondent commented,

"We also work together at an advocacy level at RANGO – here we take HIV issues to an international level and SAT takes a leading role at RANGO. From a RANGO point of view SAT plays a crucial role in tracking and conducting evaluation studies" (REPSSI).

Respondents also indicated that SAT is able to successfully draw on its knowledge of the community and use this in its engagements at a regional level. Comments included:

"SAT is doing this very well, they are able to harness their community level and use this in their advocacy work. On HIV prevention they have managed to get information from communities on what they think is working and SAT has documented this and SAT has brought this documentation to regional meetings. I use this documentation a lot to inform our work with VSO partners and I use it in our work at regional office and in the countries in which we are working" (VSO)

"SAT is able to technically assess what is happening at community level and is able to mould their response into a technical response at a national level. They can transform their community lessons into a macro argument and articulate this at forums. They can take community experiences and find a common response across the region and use this at an advocacy level, they are very adept at doing this" (Soul City)

"I have a lot of respect for SAT as a regional institution. SAT does not operate from a purely academic understanding and their work is informed by community experiences and therefore their interventions translate to real skills and knowledge development at community level. We always ask ourselves as regional organisations - what value are we adding at country level and I see community enhancement and strengthening as a key component, which SAT is very good at" (REPSSI)

"HIV is about community involvement and if we really want to address HIV prevention, care and impact mitigation, then community participation is crucial. This is an important aspect of how SAT does its work. At the level of member countries I am not sure how they interact. What I can say is that they are every linked to the national agencies and coordinate with HIV institutions at a country level. In forums we have been informed of what they are doing and they have disseminated good work/research on MCP. This really interested SADC as we know this as a key driver of HIV and the research helped us better engage with MCPs and how it affects communities" (SADC)

The SADC interviewee also commented that:

"SAT has also been active in developing SADC's HIV strategic plan for 2010 – 2015. They not only shared their experiences on a community level but also their experiences of HIV prevention at a regional level in the development of the SADC plan. They contributed a lot especially on the objective of prevention and social mobilisation and making sure that all issues pertaining to communities are addressed in the strategic plan" (SADC)

Finally, some respondents noted SAT's increased focus on youth in their work (and aspects of this are alluded to in some of the quotations above), and indicated the importance of continued concentration in this area. As one respondent commented,

“Over the last few meeting SAT has increasingly moved towards youth and youth sexuality in relation to HIV/AIDS. I have shared books with them that we have done on youth and youth sexuality to see if SAT would be willing to adapt it or further explore it. SAT was willing to explore this with us. The fact that they are shifting towards youth and HIV is excellent and necessary in the region. South Africa was fortunate in the early days to have LoveLife, and they may not have been the pinnacle of what we needed at the time, but we can see the effects of what they were doing on the HIV statistics now. If we can do similar initiatives in the region around young people and for SAT to be taking the initiative around youth and HIV is excellent. As Soul City we would value any kind of partnership around youth as a target audience” (Soul City)

10.3 SYNERGY WITH THE REGIONAL APPROACH ADOPTED BY SDC

The evaluation team also had the opportunity to engage with the SDC strategy. It has noted that SDC makes a number of arguments in favour of a regional strategy. Of relevance is the emphasis placed on the Regional Programme Southern Africa (RPSA) achieving the following:

- **Scaling up** successful experiences and lessons learned from programmes in RSA, Mozambique, Tanzania and other regional initiatives (research partnerships, Natural Resources Unit Projects and REPSSI).
- Enable SDC to play the role of a regional **catalyst and promoter, based on its comparative advantages** (flexible and lean procedures, efficient networking based on presence and experience, working with partnerships, openness to innovation), in strengthening regional public and private partners.
- Build on **existing regional solidarity** to promote joint regional problem solving for selected transnational issues (HIV/AIDS, governance, NRM) through existing **civil society networks** as well as through regional governmental organisations.
- Contribute to the **harmonisation** of policies among the countries of the region.

It is the view of the evaluation team that the SAT initiative has the potential to contribute to the above mentioned priorities and, in doing so, to contribute to the SDC objective which is to: *“Support regional efforts to combat the HIV/AIDS pandemic by strengthening regional NGOs and governmental networks for prevention and care, improving policies and coordination, with a special focus on youth and vulnerable groups”* in a manner that focuses on *“gender mainstreaming, strengthening capacities with partners, and encouraging collection of gender-segregated data”*.

Critically, the approach adopted by SAT is able to move to scale by working with existing organisations across the region. The evaluation has found that the manner in which SAT works with these partners both allows partners to determine programmes that are appropriate for their needs and context, whilst supporting the process of harnessing good practices and sharing these with other partners as well as in national and regional forums.

This ensures, as indicated in the SDC strategy, that countries feel a sense of ownership over the programme, whilst the work can serve as a catalyst for improved practices.

Further, the strategies adopted by SAT with respect to the School Without Walls and the mentoring programme both serve to create networks at different levels.

In addition, SAT is able to advocate for policies that take community level issues into account at a national level, and then ensure that these policy changes and advancements are shared at a regional level. This approach, together with the strong relationship that SAT appears to have with regional structures, such as SADC, as well as with international institutions such as UN structures, means that they are in a good position to lobby for these policies and support regional harmonisation.

SECTION F: RECOMMENDATIONS AND CONCLUSION

This evaluation has explored the strategy adopted by SAT in meeting its outcomes and has considered both the efficacy with which SAT is implementing this strategy and the extent to which this is leading to the anticipated outcomes.

The evaluation has noted that while it is anticipated that an evaluation against the achievement of the outcomes can only be realistically undertaken once the programme has been implemented for a longer duration, there are certain outcomes in which significant progress can be seen. This is viewed as a considerable achievement, given the limited duration of the programme, and suggests that while there are areas that may need to be either strengthened or closely monitored going forward, in essence, the programme is on an appropriate and effective trajectory. These recommendations are therefore raised within this context.

11 RECOMMENDATIONS

As highlighted above, this evaluation process has found that SAT's youth prevention focus process is making significant strides towards meeting the outcomes in a manner that is relevant to the region and is contextualised to the different country contexts.

As articulated, it is the team's view that so much has been achieved in the one-year timeframe as a result of the strengths of SAT's overall approach and model. In particular, the level of knowledge provided to CBOs within the region and the space created for CBOs to share experiences and learning has greatly contributed to the way in which organisations are working with youth and, in turn, to the design and implementation of the programmes. The only area of notable weakness that the evaluation team has found pertains to the fact that the indicators for the youth are only now being applied, which has meant that reporting in terms of reach has not yet been instituted.

The key recommendations emerging from this review are as follows:

1. That SAT continues to implement the youth focus as part of its comprehensive programming and that, in particular, this covers: (i) the work that SAT is doing to provide certain direct grants to both community and youth organisations for specific youth programming (ii) SATs on-going capacity building work to enable the organisations to develop their systems, planning and programming capacities (iii) SATs facilitation of activities that promote evidence based programming such as the SWW, the development of publications that capture case studies which support learning in the region as well as its on-going research, and (iv) SATs advocacy work both nationally and regionally.
2. That SAT continually reflects on the extent to which the strategy is sufficiently ensuring that partners are engaging with the youth focus. The strength of the approach adopted by SAT is that it is not prescriptive, but offers knowledge and evidence which countries and CBOs can apply based on their particular contexts. However, there is a danger that some partners may not sufficiently apply the learning, and there will therefore be a need to carefully review the extent to which CBOs are implementing youth-directed programmes, as this is critical if young people are to be reached at the anticipated scale.
3. It will be important to establish the extent to which CBOs are able to effectively work

with youth in the planning and implementation of these programmes. This is considered particularly important in the context of the mixed views that were offered by young people interviewed for this review, and the extent to which they feel that they have been properly involved in these processes.

4. There is also a need for SAT to continuously monitor the extent to which their programme approach will be affected by funding changes in a context of an integrated approach to HIV and AIDS. Ways in which to ensure that organisations are stable (and in this context any delays in funding flows must be urgently addressed) and are in a position to leverage additional funds may need to be proactively explored and supported.
5. Finally, it is suggested that once the system has been applied a number of processes should be put in place (i) the data that is gathered should become the baseline for the programme (albeit that it is a year into the programme and change should be measured against this baseline (ii) the data collected should be reviewed against the outcomes in the logic model to ensure that there is an alignment between the indicators and the outcomes. That is, is the qualitative and quantitative evidence collected through the M&E system is sufficient to enable SAT to understand whether the outcomes are being achieved? If not, there may need to be a decision taken as to how this additional evidence will be gathered (it is noted that the research processes initiated by SAT already go some way to addressing the requirements for additional evidence). (iii) Related to this it is suggested that there may be a need to review the logic model and determine whether it continues to capture the programme's intentions, given the learning that has been acquired in this first year. It is the view of the evaluation team that there may be aspects of the model that could be further strengthened.
6. In terms of the above recommendation pertaining to the review of the logic model and the data collected against this, it is also suggested that SAT and the SDC ensure that there is a review of the extent to which gender issues are embraced/made explicit in the logic model so that appropriate disaggregated gender-based data is collected as part of the above.

12 CONCLUSION

In conclusion, this evaluation has found that the youth focus supported by SDC and implemented by SAT is creating a platform of knowledge about the identified HIV and AIDS drivers, and the way these apply to youth in each of the countries within the region. Critically, it is also creating knowledge about how this can translate into effective programming. The programme also offers the opportunity to continue to learn about the way in which youth relate to a number of issues and, in this way, has the potential to support improved programming for youth across a number of developmental areas. Critically the evaluation has also showed that this approach to mainstreaming youth has the potential to enable large numbers of young people to be reached.

Given this, and the priorities for regional work spelt out by SDC, it is suggested that it may be useful for SDC to consider how it can use this knowledge, and the model that has been applied, to support its ongoing work in HIV in the region. This with respect to informing both the community-level work it may support, as well as with regards to the forums in which it participates, where knowledge gained from the project can enhance SDC's advocacy work.