



67 Bathurst Street  
PO Box 712 Grahamstown 6139  
Tel: (046) 622 8831 Fax: (046) 622 8832

Website: [www.raphaelcentre.co.za](http://www.raphaelcentre.co.za)  
027-238-NPO PBO 930 016 816  
B-BBEE Level Four Contributor

## Project: Khanya

Health interventions, assertiveness skills and purposeful living for Youth and Adolescents

### Project Composition:

- ✘ Persona-Doll story telling workshop: issues around and alternatives for intergenerational and transactional relationships / 'sugar-daddies' (as an 'eye-opener' for consequences and alternative informed choices);
- ✘ Introduction to asset-based / strength-based and communal thinking (knowledge and awareness about own resources and personal strengths as an important tool to for self-confidence and assertiveness)
- ✘ 4 day training course in Asset-based Community-driven Development & project follow-up with school youth
- ✘ Health Screening (eye care, blood pressure, blood sugar, mental health screen, TB screening, HIV testing & counselling as well as for HIV-positive diagnosed youth ongoing Follow-up counselling & life-coaching

### Partners :

- ✘ Department of Education
  - ✘ Primary Health Care Facilities
  - ✘ HIV positive youth support network (by Settlers Day Clinic and Raphael Centre)
  - ✘ Local High Schools in Makana, especially in Grahamstown/ Makana
-



67 Bathurst Street  
PO Box 712 Grahamstown 6139  
Tel: (046) 622 8831 Fax: (046) 622 8832

Website: [www.raphaelcentre.co.za](http://www.raphaelcentre.co.za)  
027-238-NPO PBO 930 016 816  
B-BBEE Level Four Contributor



---

## The Title: Khanya

Khanya can be the name for a boy or a girl and means in isiXhosa: “Be bright”. It is used to refer to many positive things, such as *future, shining like a diamond, or being brave*.

## Background

The Makana Municipal District is home to 120 000 residents, of whom up to 80% are unemployed. The overwhelming majority of them are adolescents.

Poor (overall) health also reflects this poverty. The Sarah Baartman District, of which Grahamstown is part, has the earliest sexual debut of girls (12 years of age) in this province. In 2015, the HIV prevalence amongst prenatal women was 29.9%. Today, teenagers and adolescents are the overwhelming generation of people living with HIV in South Africa. This age group (between 15 and 24 years) has the fastest growing HIV infection rate in this country. Statistics show that girls are up to eight times more likely to contract HIV than boys ([www.righttocare.org](http://www.righttocare.org)). On World Aids Day 2016, at the TV-news (at that time the) Deputy President Ramaphosa was calling for urgent action – saying that 2000 teenage girls and young women are infected with HIV every week ([www.enca.com](http://www.enca.com)). We know that one of crucial drivers of the epidemic is transactional sex, especially teenagers and young women with older men (‘sugar daddies’).

They will need treatment to remain healthy and physically well. The limited research that exists in Southern Africa suggests that only 20% of adolescents maintain optimal adherence to antiretroviral treatment (Nachega, 2009).

## Approach

We have found that to focus on HIV infection alone does little to change communities. People, especially when they are very young, do little to prevent HIV – even though they know or have heard about all HIV infection and how to avoid/ or manage that. It is the behaviour change that is so crucial. Our community programme provides the impetus for behavioural change. It has been found that hope and resilience are the two most important factors for HIV prevention in HIV positive and negative individuals. Therefore, to address health impact issues of our local youth both of our teams have combined their expertise and work power as ‘Khanya’.

‘Khanya’ is an innovative model combining strength-based approach with health promotion. With strength-based approach we refer to a development model called ‘Asset-based Community-driven Development’ (ABCD). It uncovers individual and community strengths and builds from here. It has proven to foster confidence of people, inspires and unlocks opportunities (from other than just financial assets). Assets are found to be catalysts for civic movements, have emancipatory value by providing us with capacity to act. They form resources for livelihood and coping with life-setbacks. Also, they provide a sense of identity and meaningful engagement with the world (Sherraden 1991, Carter and Barret 2006, Moser 2008).

The Raphael Centre advocate for an ABCD-approach in the field of youth development as it has proven to have more sustainable impact on well-being than only ‘income’ (ibid.). An essential part of personal growth is resilience. And, important ingredients of resilience are an awareness of own resources social assets (for support, love and belonging), self-knowledge and appreciation of own strengths (human assets), knowing which parts of them to further grow and having the confidence to grow. The latter plays an important role in developing aspirations.

## Activities

Introduction to asset-based/ strength-based and communal thinking:

- ✘ Main characteristics of asset-based community-driven development & personal growth;
- ✘ Students who are interested in our full course of 3.5 days can register here;
- ✘ 3.5 days course with High School youth during holidays, including asset-inventories, visioning and planning (basic project management skills).

Persona-Doll story telling workshop: issues around and alternatives for intergenerational and transactional relationships:

- ✘ Interactive story-telling and solution finding as a way to sensitize, raise awareness but also to gain confidence and support around issues, such as 'sugar daddies' and teenage pregnancy;
- ✘ Group work by learners to figure out solutions of how to prevent such issues or how to fix them;
- ✘ HIV: 'scanning' what youth knows about HIV and fixing distorted ideas about it. Finally, the youth is invited to undergo testing with us.

Health testing services or youth including mental health, eye-screening and HIV testing: at our main office in town or at Joza Youth Hub:

- ✘ Youth who tested positive automatically enters our HIV-positive follow-up interventions;
- ✘ Psychological counselling and life coaching for diagnosed youth. This is to make sure that HIV positive tested teenagers and adolescents are psycho-emotionally taken care off.

## Aims

Immediate Deliverables	Impact
✘ Awareness about own resources (capabilities, social support)	✘ Self-confidence
✘ Re-Focus on own aspirations	✘ Independency and responsibility
✘ Understanding about the root causes behind engaging with 'sugar daddies' or 'sugar mamas'	✘ Youth making informed health choices
✘ Critical understanding about consequences of engaging with 'sugar daddies' and 'sugar mamas' (e.g. re-creation of early dependencies, vicious circle of dependency from early age)	✘ Rates of teenage pregnancy have dropped at local schools
✘ awareness about healthy options for dealing with limited resources at home and quest for belonging	
✘ Clear understanding of myths and realities around STI's	✘ Increased peer-support (versus gossip and social exclusion) and increased emotional safety for affected teenagers
✘ Empathy for class mates/ school mates who live with HIV and/ or are young mothers	
✘ Knowing health status	
✘ Affected/ infected youth is physically and emotionally taken care of by local expert network	✘ Increased treatment adherence of HIV-positive teenagers and youth